

A learning approach for the Child and Family Support System

January 2026



Government of
South Australia

Acknowledgement of Aboriginal peoples of South Australia

We acknowledge and respect Aboriginal people as the first people of this country and recognise the traditional custodians of the lands in South Australia.

We acknowledge that the cultural, spiritual, social, economic, and parenting practices of Aboriginal and Torres Strait Islander people come from traditional lands, waters, skies, and that the cultural and heritage beliefs, languages and lore are still living and of great importance today.

We acknowledge elders past, present and those emerging, which are Aboriginal children. We further acknowledge Aboriginal staff, families and communities working to keep children safe in the protective strengths of culture, with a strong sense of self and identity.

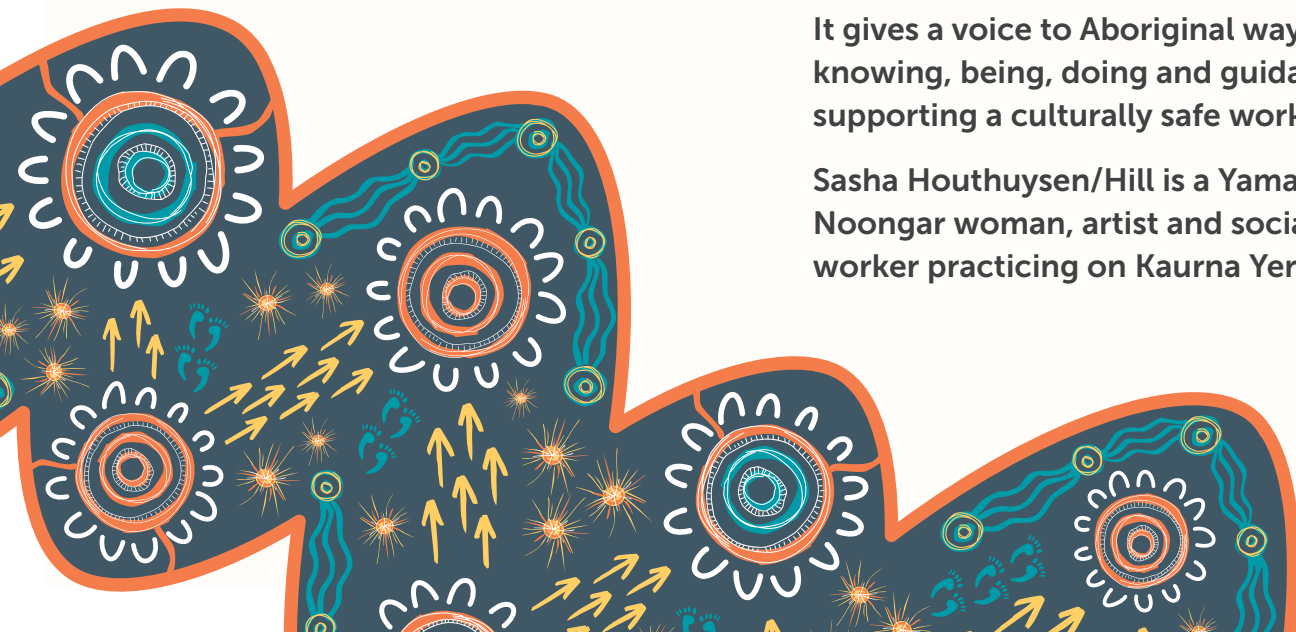
We are committed to voice and truth telling, ensuring that the needs and aspirations of Aboriginal and Torres Strait Islander people are incorporated in the design, development, delivery and evaluation of efforts across the Child and Family Support System.

'Cultural Lenses of Practice'

The Aboriginal Cultural Lenses of Practice artwork was created in 2020 as a visual statement piece by Sasha Houthuysen/Hill in partnership with the Department of Human Services (DHS) Safer Family Services Aboriginal staff and allies.

It gives a voice to Aboriginal ways of knowing, being, doing and guidance in supporting a culturally safe workforce.

Sasha Houthuysen/Hill is a Yamatji/Noongar woman, artist and social worker practicing on Kurna Yerta.









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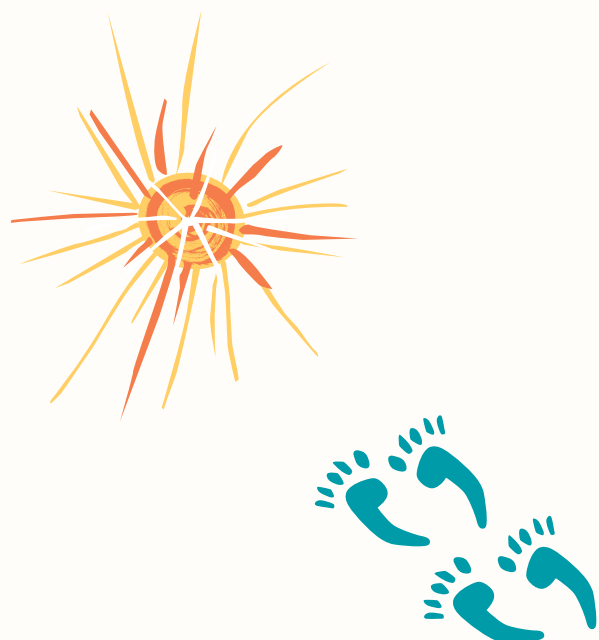
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Introduction

Over the past five years, we have been on a significant journey to design and implement a new system of child and family support services in South Australia.

We have focussed our efforts on responding earlier, to improve outcomes for children and families. To do this, we have sought to understand what children and families need from a targeted service system that is 'fit for purpose'.

Our priorities and approaches have been fundamentally co-designed by the people who use, deliver and engage with child and family support services. This co-design process provided consensus and a strong commitment to collaboratively progress a shared direction for the design and implementation of the new system.



[The Roadmap for reforming the CFSS \(2021–2023\)](#) laid out the approach taken across four priority areas, all underpinned by 'Our Healing Approach' that combines cultural safety and trauma responsiveness.

We have embedded a 'learning system' that supports a holistic and iterative approach to evidence development. This is enabling a better understanding of the needs of families and the outcomes that are being achieved. Our CFSS Learning System brings together data, research, system observation, practitioner experience and builds deeper understandings of the lived and living experience of children and families, and the cultural knowledge and experience of Aboriginal people.

The Child and Family Support System (CFSS) is a combined system of non statutory services and supports delivered by government, non-government organisations (NGOs) and Aboriginal Community-Controlled Organisations (ACCOs). Services and supports are designed to respond to different degrees of complexity and safety concerns of children and families.



New research is showing that CFSS services are helping families stay together.

Each year, CFSS Intensive Family Services (IFS) support around 2,600 children. Our research shows that there is a 93.2% family preservation rate after 24 months.¹

In partnership with our sector, our CFSS workforce and those with lived and living experience, we have built a cohesive, coherent and inclusive system of supports for children and families that is continuously learning, reflecting, adapting and improving.

A learning approach for the CFSS reflects on and celebrates the progress we have made in the first phase of reform and shares what we are learning about the different needs, complexities and characteristics of children and families referred to the CFSS.



**Child
and Family
Support System**

The CFSS reform - at a glance

The development and implementation of a new evidence-driven system of child and family support services has been underpinned by a shared vision to keep all children safe and well at home in their family, community and culture.

Our Priority Areas

The CFSS reform has been focussed on actions under four key priority areas:



Priority 1: Pathways

Ensuring the right support is provided at the right time



Priority 2: Service integrity

Strengthening practice and workforce



Priority 3: Service investments

Commissioning for child safety and wellbeing outcomes



Priority 4: Building evidence

Voices and data for system improvement and service outcomes

Central to these priority areas is 'Our Healing Approach', an overarching commitment for all efforts to be intentionally working together to create a trauma responsive and healing system.

Why we need the CFSS

In designing a new system of services that can provide earlier support for families with complex needs, we have had a paradigm shift away from thinking family support is something that is needed for a small number in our population.

From our research, we know that in South Australia there are approximately 9,000 families (with more than 14,000 children) who are at high risk of repeated and escalating involvement with the statutory child protection system each year.

These findings are supported by national research. The Australian Child Maltreatment Study (ACMS) found that child maltreatment is widespread, with 62.2% of the Australian population experiencing at least one type of maltreatment in childhood.²

Drivers of child maltreatment

The drivers of child maltreatment are well known: parenting capacity is significantly affected by socioeconomic disadvantage and poverty, insecure or unaffordable housing, disability, domestic and family violence, and substance use. We know these causes are complex, multi-dimensional and often interconnected and that we must consider the holistic wellbeing of children and families in our approach.



Domestic and family violence



Drug and alcohol use



Financial stress



Food insecurity



Housing uncertainty



Disability



Mental health challenges

The volume of need is high

62.2% of the Australian population report experiencing at least one type of maltreatment in childhood³

More than **42,000** children in SA are notified to the Department for Child Protection each year⁴

1 in 3 children in SA will be notified by age 10⁵

We can identify and engage early through child protection notifications⁶



1 in 10 children are notified before age 1

80% of these children are re-notified at least once before age 5

40% of these children are re-notified five or more times before age 5

Maltreatment is deeply connected to socioeconomic disadvantage⁷

1 in 20 children born in SA will be subject to a substantiated allegation of child maltreatment

Around 70% of substantiations for child maltreatment come from SA's most disadvantaged areas



Outcomes for Aboriginal children are disproportionately worse⁸

1 in 2 Aboriginal and/or Torres Strait Islander children were notified to the Department for Child Protection in 2020/2021 compared to **1 in 12** non-Aboriginal children

Almost 1 in 10 Aboriginal and/or Torres Strait Islander children experienced at least one out-of-home care placement compared to 1 in 100 of the non-Aboriginal population

Services and supports in the CFSS

Our CFSS has been specifically designed for children and families who are at risk of deepening involvement with the statutory child protection system and who need targeted, specialised support to break cycles of intergenerational disadvantage and patterns of child maltreatment. The system has a priority focus on supporting Aboriginal children and families.

CFSS services and supports are delivered by:

- government by DHS's Safer Family Services (SFS)
- non-government organisations (NGOs)
- Aboriginal Community-Controlled Organisations (ACCOs) and Aboriginal Community-Controlled Health Organisations (ACCHOs).

There are many services and supports within the CFSS that are designed to respond to the different needs of children and families. This includes increasing levels of service intensity for families who need it most.

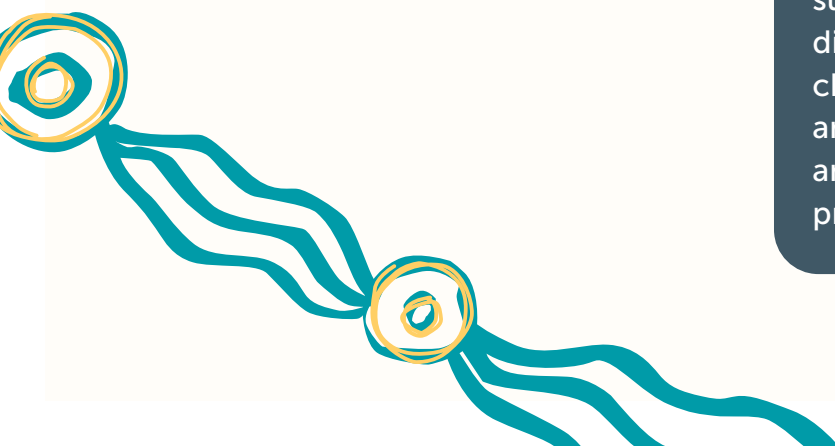
CFSS services and supports include:

- Universal Parenting Support Services – that are available to all families.
- Family Support Services – that provide early help and support for families experiencing vulnerability, where there are low to medium level child safety concerns.
- High Intensity Services – that provide intensive family support for families where there are high to very high-level child and safety concerns.

Families who receive CFSS services are typically experiencing multiple challenges that can impact a child or young person's safety, wellbeing, and development. There are also considerable strengths within these families and the communities that support them, that can be drawn upon to achieve their goals.

CFSS services work alongside other service systems that are contributing to the safety and wellbeing of children and their families. These other service systems include both state and Australian Government funded services. Families may be engaged with many of these service systems simultaneously.

To ensure families receive holistic support that is responsive to their different needs, complexities and characteristics, strong partnerships and collaborations between the CFSS and these 'Sister Systems' are critical to providing a seamless service offering.



The CFSS Learning System

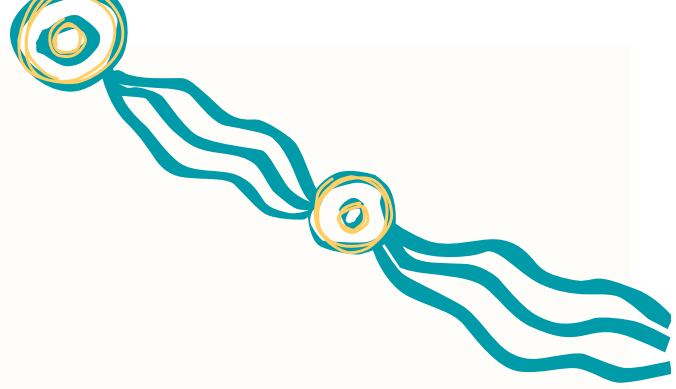
The development of the CFSS is driven by a 'learning system' approach. The CFSS Learning System embeds a holistic approach to research and evidence development. This means we are committed to incorporating population data science, practice-informed evidence, lived experience evidence from children, young people and families, cultural knowledge and leadership, and system observation. Co-design processes that bring together these different knowledge sources have been integral to the development of the CFSS.

We have established a continuous cycle of learning—generating insights, sharing them across the system, and embedding them into both service and system design and delivery.

Questions that are driving our CFSS Learning System include:

- Who are the families that need supports and what supports do they need?
- What is the service experience for the children, young people and families that we work with?
- What outcomes are being achieved across the CFSS?
- What works to support children and their families and why?
- How does the system respond, or need to respond, to families?
- How does CFSS align with and support Sister Systems and sector partners?
- How can we make it easier for families to get the right support at the right time?





CFSS Data asset

Our ability to understand the complex needs and the many pathways and experiences of children and families within the service system has been significantly enhanced by the development of new population data capture tools and operational systems to manage referrals, service placements and service delivery.

Prior to the reforms, the main source of data capture was through unstructured case notes, which largely focused on recording the “harm” perpetrated and imminent risk, as well as activity data such as inputs. There was limited data that could describe changes in safety and wellbeing for families in response to services, with no longitudinal capability and limited data linkage across the system.

To reach a more sophisticated understanding of families and answer the question of what works to support them, DHS has focused on building a data system and supporting processes to measure changes being made in the system itself.

Data is now collected by practitioners about all families referred to the CFSS Pathways Service (see page 28 for information about Pathways). This includes data collection for families regardless of whether they received a service or not. We are now better informed about the needs of families, how well service demand is being met, and the things we need to know to reach more families and have greater impact.

Our data collection follows the family through various contact points with services, to measure families’ experience of services and changes in families’ risk and wellbeing over time.

Our data asset is giving us deeper insight into the short-term and long-term outcomes for children and families. This is helping us to understand the pathways of disadvantage from childhood through to adulthood and used to inform how we design programs to disrupt disadvantage at critical points.

Voices and insights of our CFSS workforce and practice leaders

The voices and insights of our CFSS workforce and practice leaders are critical to help us understand whether our efforts and investments are improving outcomes for the children and families we work with.

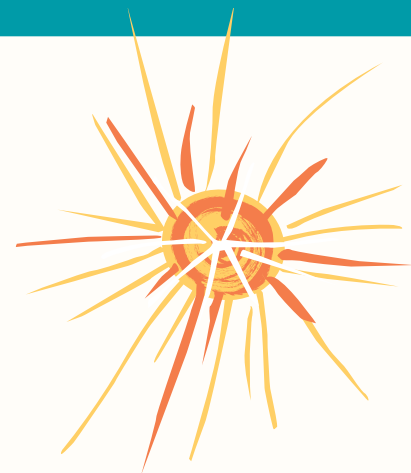
To help achieve this, we have established a CFSS Communities of Practice model to bring together practitioners and leaders from across government, ACCOs and NGOs. Communities of Practice supports a collective approach to building a shared understanding of issues, emerging data and evidence, innovative practice approaches and practice learnings, including learning from those with lived experience.

The CFSS Communities of Practice forums are held throughout the year. The Communities of Practice model has three tiers:

1. Strategic Oversight forum (CEs and leaders from ACCOs and NGOs, DCP, and DHS Executive Directors and Leaders)
2. Practice Oversight forum (middle and upper leadership, and strategic external input from DCP and academic partners)
3. Statewide Practitioner forum (practitioners at all levels, including sub-level Regional Practitioner Forums).

“As the CFSS Communities of Practice continues to grow, it strengthens our CFSS Learning System. Practice wisdom deepens our understanding of family needs and helps us to understand what drives better outcomes. Informed by the insights of the workforce, the CFSS Learning System remains dynamic and responsive.”

CFSS Statewide Practitioner Communities of Practice, 2025





Lived Experience

Our learning system is underpinned by a deep respect for families and their voices.

A Lived Experience Network (LEN) of System Advisors was established in 2020, as a direct outcome of the CFSS co-design process. The establishment of LEN recognises that the voices of families with lived experience must be an integral part of the continuous evidence and learning that shapes the system. The catchcry of our System Advisors - *"nothing about us without us"* - reflects their commitment to strengthening the system to support others like them.

LEN is made up of 15 System Advisors of diverse ages, cultures and backgrounds who have experience of significant family stress and the need for support services to keep their families safe and well. LEN meets fortnightly to provide advice about the ongoing development and implementation of the CFSS.

System Advisors provide first-hand knowledge of the CFSS and the real-world challenges families experience to access the support they need. This includes essential insights into the realities and nuances of complex, systemic issues and where the challenges lie – shining the light on blind spots professionals and policy makers can miss. This leads to more effective and empathic solutions.

Advice provided by LEN takes many forms, including:

- Contributing to the design of CFSS policy and practice, as well as websites, marketing and communications to reach families going through tough times
- Participating in Communities of Practice forums and discussion panels
- Providing advice to service providers, universities and training providers about how practitioners can best work with families
- Providing advice to support the implementation of recommendations of the Royal Commission into Domestic, Family and Sexual Violence
- Sharing the perspectives of their community i.e. Aboriginal and Torres Strait Islander, culturally and linguistically diverse, LGBTIQA+, and families with additional needs.

System Advisors are supported by a DHS Community Engagement Coordinator. The Community Engagement Coordinator has a crucial role in organising meetings, liaising with people and organisations who are seeking advice from LEN, supporting LEN members to communicate their experiences and expertise, and managing recruitment into the network.

Hearing LEN's perspectives challenged me to think hard about how we are accountable to the families we serve and as a large organisation how important it is for us to find timely and tangible ways to act on the lived experience expertise they are offering us.

**Community Engagement Coordinator,
CFSS LEN, 2025**

Reflections, highlights and challenges from a Lived Experience perspective

Written by Jessica Burnage,
System Advisor, CFSS LEN

I am now one year in with LEN and it's amazing to be able to look back and see how much collaboration I've been able to be a part of in that time. Not only in DHS but also with those outside services and providers who are asking for our input. My involvement in LEN has helped me see how much lived experience is valued from a systems point of view.

Being a part of LEN has given me new insight into what it looks like when lived experience meaningfully forms part of a co-design or co-production process. I have seen first-hand that lived experience must fundamentally weave its way through the design process and be valued equally on par with professional expertise. It's important that LEN is actively involved from the initial problem stage through to the final product—rather than being asked to comment only on a pre-developed idea or solution. So that way there is co-ownership. We're freely sharing our advice from the get-go and that feeds into shared-decision making - where every person's voice is holding equal weight.

When I reflect on my childhood experiences, I can see how that led me down the path of homelessness and domestic violence and how things outside of my control impacted me.



LEN has provided me with the opportunity to reflect on those difficult times and sharing my experiences has helped me heal my inner child.

I hope sharing my experiences inspires change so that it doesn't happen to the next generation. It helps me feel like my journey was worth it because now I am able to provide that insight.

My passion is to improve the sector so that people like me don't slip through the cracks and practitioners think a lot more about children's experiences in families facing addictions and domestic violence.

LEN provides me with the opportunity to raise the voice of the child and helps the CFSS better understand the gaps in the system that is designed to support them.

Cultural knowledge and leadership

DHS is committed to supporting the growth of a culturally valid evidence base for the design and evaluation of services for Aboriginal and Torres Strait Islander children and families, and supporting Aboriginal-led research to develop culturally informed assessment and outcomes measurement tools.

Central to this work is the elevation of Aboriginal voices, decision-making, and cultural governance. These elements are recognised as essential to achieving meaningful change and the best outcomes for Aboriginal children and families.



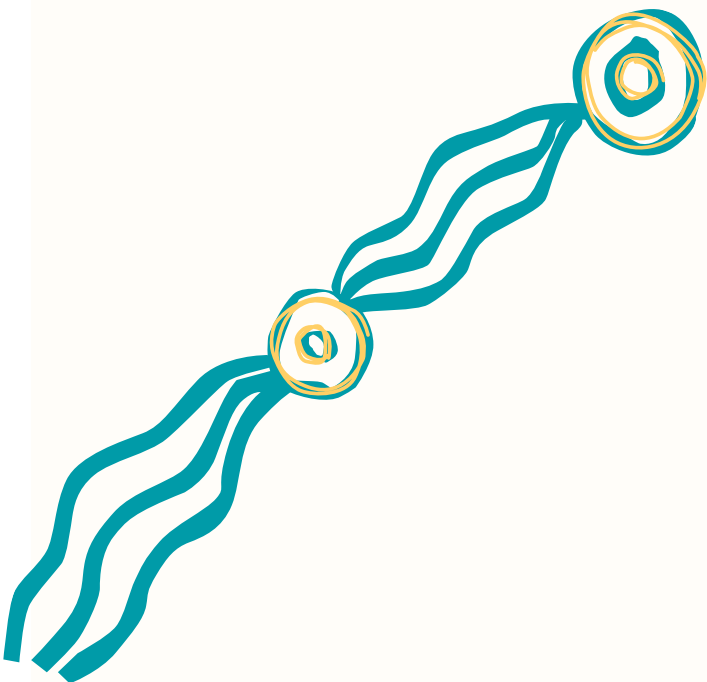
The CFSS is committed to being a positive contributor to bringing balance back, righting the wrongs of injustice and walking together with Aboriginal people.

CFSS Co-planning Workshop, 2024

System observation

Ongoing observation of the CFSS enables DHS to measure and understand the impact and effectiveness of our system in providing suitable supports to children and families. This involves understanding and measuring governance structures, system dynamics, processes, and decision-making mechanisms.

System observation also includes a focus on understanding and measuring the interconnectivity between the CFSS and other government service systems providing early intervention and family support.





Our
achievements
and learnings so far

Our Healing Approach

Our Focus

Embedding a healing approach, where every part of the system works together to respond to trauma, wherever it presents. The aim has been to build a caring, responsive and healing service system that meets the needs of children and families and cares for the practitioners who do this work.

What we've done

- Established the Aboriginal and Torres Strait Islander System Design Criteria and co-design principles to guide our healing approach.
- Co-designed and implemented the Trauma Responsive System Framework to provide guidance for building our capacity to be trauma responsive at all levels of our system.
- Supported the Yaitya Mingkamingka Purruapiinthe (Indigenous Trauma Healing) training program, which was developed by Aboriginal people to build the capacity of the sector's practitioners to work in culturally responsive and trauma responsive ways with Aboriginal people.
- Established the CFSS LEN to ensure lived experience insights are embedded in the ongoing design and promotion of trauma-responsive practice.



Do everything you can to honour the "Aboriginal Way" and work with that not against it. Respect the cultural authority of Elders along with the Aunties and Uncles watching over their families.

Aboriginal Cultural System Advisors, CFSS LEN, 2024



CFSS Priority Populations

Our Focus

Designing new service models and pathways for our priority population groups and continuing to build our evidence and knowledge about what works to support them.

Our research identified four population groups who are likely to experience the most challenges and therefore are at greatest risk of escalation into the statutory child protection system.

These families need access to services of varying intensity, across multiple social service systems, to keep their children safe and their family strong.

We know that prioritising these families, particularly at early stages of the parenthood journey, can maximise the service impact, disrupt intergenerational vulnerability, and capitalise on higher levels of engagement and trust in support systems.



Our four priority populations are:



children born to young parents



infants deemed to be at high risk in their first 1000 days



Aboriginal children whose families are experiencing multiple and complex needs



young people experiencing vulnerability

What we're learning

Our research is continuing to help us understand the success of efforts to design new service models and pathways to meet the needs of these families. It is also improving our understanding about other families our system could do more to support.

Young people experiencing vulnerability



The CFSS needs a special focus on the development of early supports for young people experiencing vulnerability.

More than 17,000 young people (aged 12 years and older) are notified to the Department for Child Protection every year.⁹ 42% of families referred to the CFSS Pathways Service had one or more young people in their family (12 years or older).¹⁰

Most of the referred families with young people had specific wellbeing concerns about a young person recorded at referral¹¹, including:

- Mental health/anxiety - 57%
- Social isolation - 27%
- School attendance - 32%
- Violence and aggressive behaviour - 15%
- Harmful sexual behaviours - 12%
- Alleged criminal behaviour - 7%



Working with young people will help to break the cycles.

CFSS Co-planning Workshop, 2024

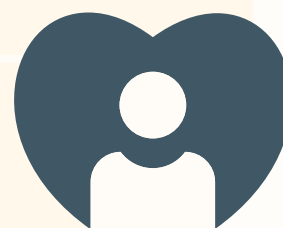
Children born to young parents



Engaging with young parents provides a real opportunity to make generational change.

58% of all children in out-of-home care were born to a mum who had her first child under 20 years of age¹²

67% of these mums had their own child protection experience¹³



Young parents are more likely to engage in help when it's offered¹⁴

More than **1 in 10** referrals received by the CFSS Pathways Service relate to a family with one or more young parent/caregiver (less than 25 years of age)

These families present with similarly high levels of complexity as families with older parents

50% of young parents (less than 20 years) were pregnant when referred to the CFSS

Pregnancy can offer an optimal window for early intervention



60% of referrals for young parents (less than 20 years) were allocated for service provision in the CFSS, compared to 36% for parents older than 25 years

Young parent referrals are prioritised for service allocation¹⁵

89% of young parent referrals that have been allocated by the CFSS Pathways Service engage with service providers

Young parents are **12%** more likely to engage in service provision compared to parents who are 25 years or older

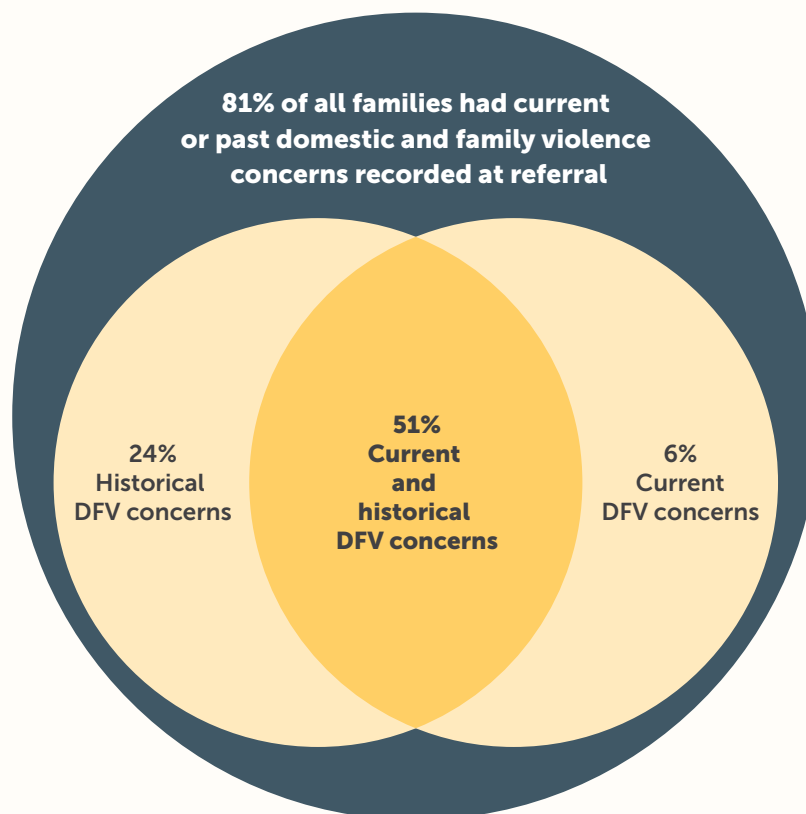
Families experiencing domestic and family violence



The CFSS must form part of a multi-system, best practice response to domestic, family and sexual violence that addresses the experience of victim-survivors, children as victim-survivors, and dads and men who use violence.

Family complexity assessments undertaken by the CFSS Pathways Service are showing that 57% of families have experienced current/active DFV concerns.

Figure 1: CFSS Referrals for IFS 2024/25



We know that CFSS IFS are one of the biggest workforces in SA that work with families when there is 'active' domestic or family violence in the home.

1 in 3 families referred to CFSS IFS with current DFV concerns reported living with alleged perpetrators in the home.¹⁶

The CFSS data and learning approach was highly informative in the Royal Commission into Domestic, Family and Sexual Violence and was recognised in the final report.

Children and parents with disability



The CFSS needs a special focus on supporting children and young people with disability and parents/carers with disability.

Around 1 in 10 families referred to the CFSS Pathways Service in 2023/2024 had current concerns related to a parent or caregiver's disability/chronic condition impacting their parenting capacity.¹⁷

Compared to other referrals, these families are:

- 140% more likely to also have issues related to transport
- 110% more likely to have both caregivers unemployed and thereby experiencing financial disadvantage
- 80% more likely to have concerns about adequate access to antenatal care
- 70% more likely to have a parent / caregiver with their own out-of-home care history
- 65% more likely to have current concerns around social isolation and lack of family supports.¹⁸

“Young people with disabilities require support to develop independent living skills. The complexity of navigating the NDIS is a major barrier, requiring specialised knowledge to access services. Some young people are not receiving this support until coming into contact with child protection or youth justice, CFSS Co-planning Workshop, 2024

”



The most meaningful insights come when we combine data with lived experience and practice wisdom, because that's what tells the real story, and drives real learning.

CFSS Co-planning Workshop, 2024



Priority Area 1: Pathways

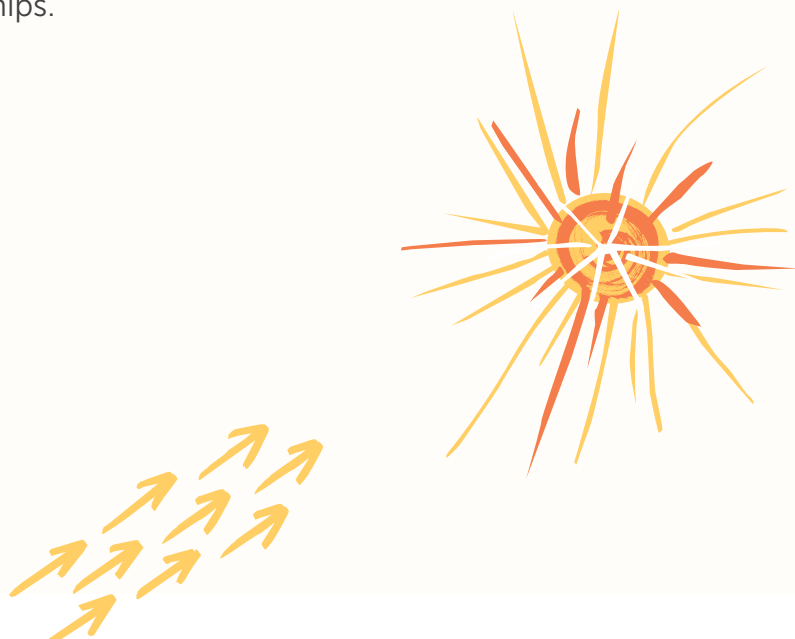
The right help at the right time

Our Focus

Creating a system that encourages people to ask early and ask often, and ensuring children and families have access to services that meet their needs.

What we've done

- Embedded the CFSS Pathways Service to provide a single point of entry for all referrals to IFS.
- Built new data systems to more efficiently and fairly process and track referrals as well as better understand system performance and outcomes for families.
- Commenced a project to develop a new self-referral pathway for Aboriginal families. This responds to the findings of the Commissioner for Aboriginal Children and Young People South Australia's 2024 report, "Holding on to Our Future".
- Created the Adults Supporting Kids (ASK) website to provide early help and information for anyone who has concerns about the safety or wellbeing of a child, young person or family.
- Established Child and Family Safety Networks (CFSNs) to improve state-wide service coordination and partnerships.



What we've heard



Normalise the act of asking for help and develop transparent self-referral processes to shift the power back to families, allowing them to decide what support they need.

CFSS Lived Experience Network, 2024

For Aboriginal families, there is a need to develop referral pathways into Family Group Conferencing to support self-determination.

CFSS Co-planning Workshop, 2024

What we're learning

Service demand and system capacity



There are many more families who need, and would benefit from, a CFSS service than the system currently has capacity to support.

As a centralised referral service, the CFSS Pathways Service enables the coordination and oversight of all referrals to IFS and CFSNs. When a referral is received by the CFSS Pathways Service, the referral is processed by a social worker who clinically assesses the need of the family and determines the most appropriate service response.

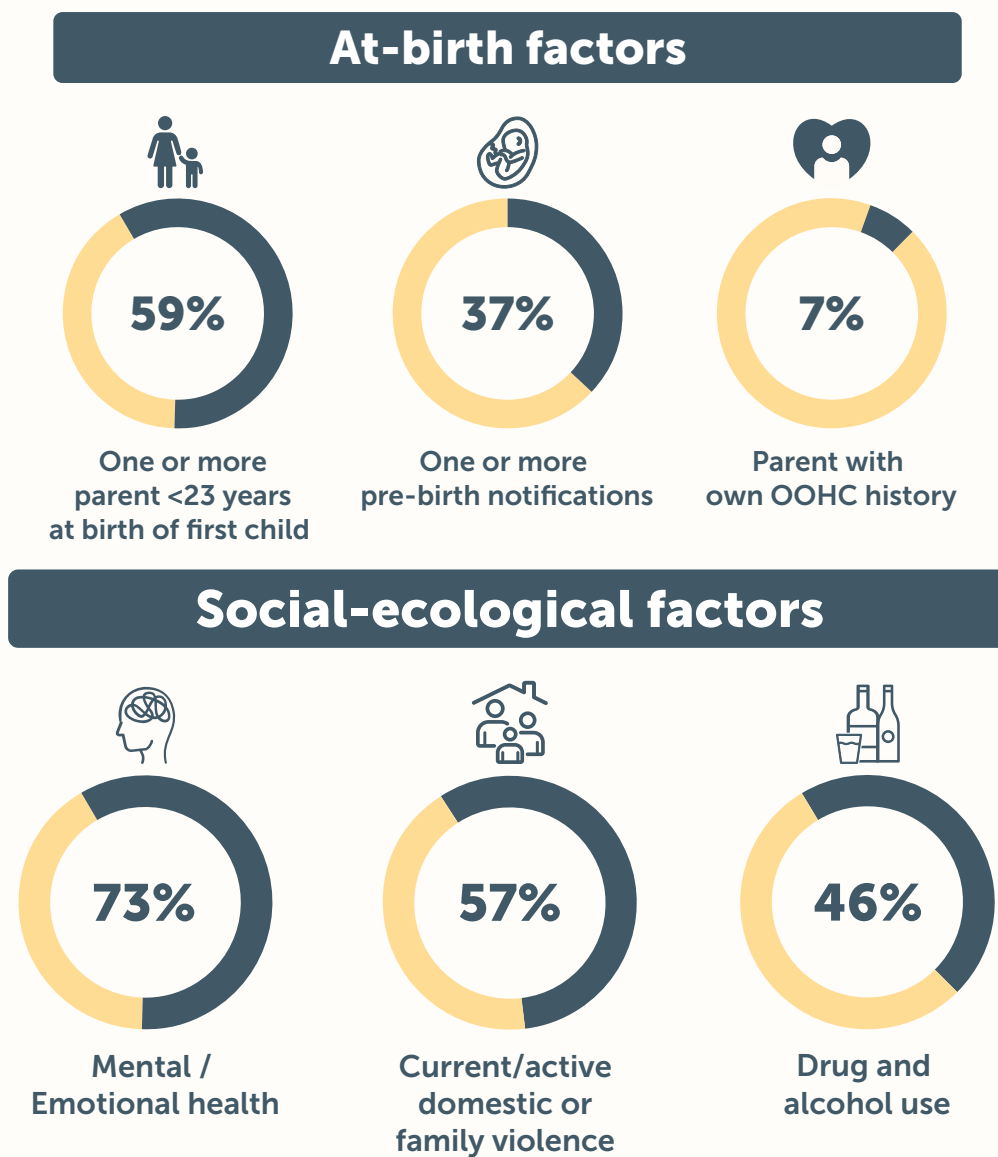
The CFSS Pathways Service is helping us to better understand the population level need for CFSS services. It shows that every year approximately 3,500 referrals are received for an IFS response. 37% of these are able to be allocated based on current services.¹⁹

Complexity of families being referred



Families referred to the CFSS Pathways Service are experiencing multiple and complex challenges that impact family functioning and child safety.

Figure 2: Family complexity at time of referral. Proportion of referrals, 2024/25





Priority Area 2: Service Integrity

Strengthening practice and workforce

Our Focus

Strengthening our practice across the CFSS and equipping our practitioners to be 'complexity specialists,' who can work confidently with multiple complex challenges impacting on child and family safety. Attracting and retaining a strong, more diverse and stable workforce.

What we've done

- Implemented the 'Common Elements' approach across the CFSS to support consistent, evidence-informed and trauma-informed practice in forming positive and productive working relationships with families.
- Established a Communities of Practice for practitioners, supervisors and senior leaders to embed evidence-informed practice, support collaborative learning and reflective discussions to inform practice and CFSS reform.
- Developed a range of practice frameworks and resources. Collaborated with Relationships Australia SA on the development of an e-learning resource to complement the DHS SFS Practice Guide, Centring the Child's Voice that is available to the CFSS sector. Developed a practice resource for CFSS practitioners who engage with dads and men who use domestic and family violence.
- Developed a roadmap for building a lived experience peer workforce throughout the CFSS.
- Collaborated with universities to enhance the recruitment and job readiness of new graduates and create new student pathways into the CFSS. This includes a strong focus on growing and retaining an Aboriginal and Torres Strait Islander child and family support workforce.

What we've heard

Transform the mainstream to be culturally safe, decolonising practice.

CFSS Co-planning Workshop, 2024



What we're learning

Co-morbidity between social-ecological risk factors



To be effective, CFSS services need to be holistic and multi-disciplinary and assist families with a range of support needs.



33% of referrals received by the CFSS Pathways Service had concurrent concerns relating to:

- Alcohol and drug use
- Mental health
- Active domestic and family violence²⁰

Compared to the general SA population, children in families who received an IFS response show markedly higher rates of contact with multiple government systems in the year prior to referral to the CFSS. In particular, these children were:

- **Almost 6 times as likely** as to have a parent with mental health-related emergency department presentation / hospitalisation(s) in the year prior.
- **5 times as likely** to have a parent with a drug/alcohol-related emergency department presentation / hospitalisation in the year prior.
- **Nearly 8 times as likely** to have a parent who accessed homelessness services in the year prior.
- **6 times as likely** to have a parent imprisoned in the year prior.²¹

Supporting family engagement

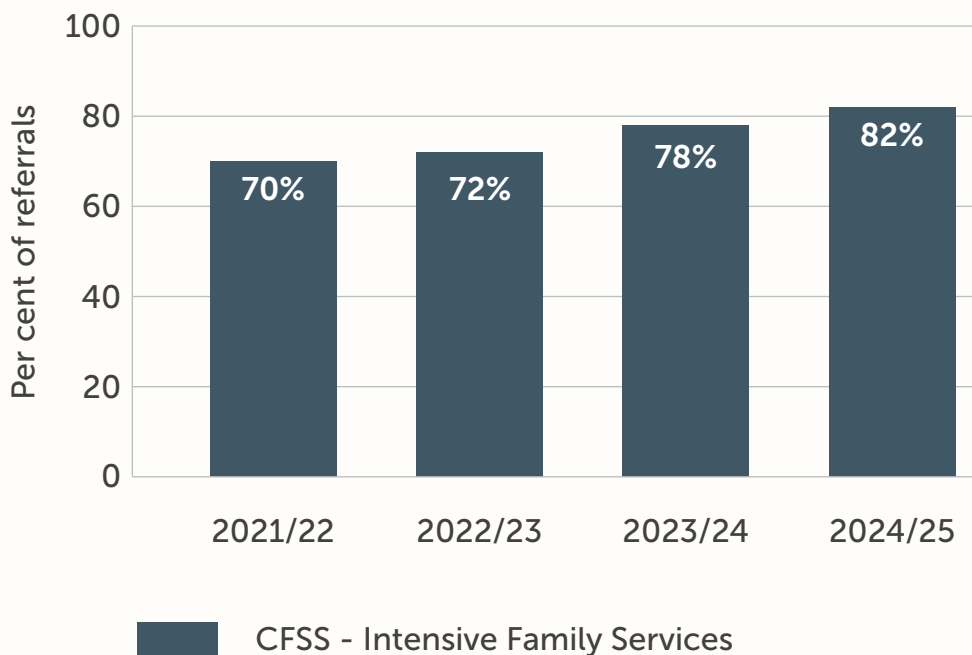


Family complexity is not associated with better or worse engagement outcomes. It is the engagement strategies we use and effective supervision that makes a difference.

Once a referral is allocated to a CFSS IFS practitioner, engagement rates measure whether the practitioner is successful in getting initial agreement from the family to continue to work with them.

Our data shows the overall engagement across all CFSS IFS has increased from 70% in 2021/22 to 82% in 2024/25.²²

Figure 3: Engagement outcomes - Allocated IFS referrals successfully engaged in service provision (percent) by year, 2021/22 to 2024/25



CFSS data is also providing new insight into the engagement approaches used by practitioners and which strategies can lead to increased engagement with different types of families.

Our data is clearly showing that family complexity is not associated with better or worse engagement outcomes. It is the engagement strategies we use and effective supervision that makes a difference.

The use of assertive engagement strategies has been shown to increase the likelihood of successful engagement by up to fifty percent.²³



These assertive engagement strategies include:

- face-to-face contact
- organising goods and services
- partnering with schools.

However, these strategies only explain part of the picture. We are learning that other practice elements, such as clinical and cultural governance, may also play a significant role in shaping engagement outcomes. These areas are less well understood and require further exploration to strengthen the system's ability to support children and families effectively.



Our ongoing learning about engagement approaches is helping to drive consistency in skills and confidence of CFSS practitioners in working effectively with families presenting with higher safety risks and complexity.

Increasing length of service



We have adjusted the length of service provision to better align with the needs of families.

CFSS data from 2023/24 and 2024/25 shows a notable increase in service episodes lasting longer than six months within IFS.

The median length of service has increased from 29.7 weeks (in 2023/2024) to 34.3 weeks (in 2024/2025). This represents a 15% increase.²⁴

This reflects a growing recognition that families experiencing high levels of complexity and risk often require extended support.





Priority Area 3: Service Investments

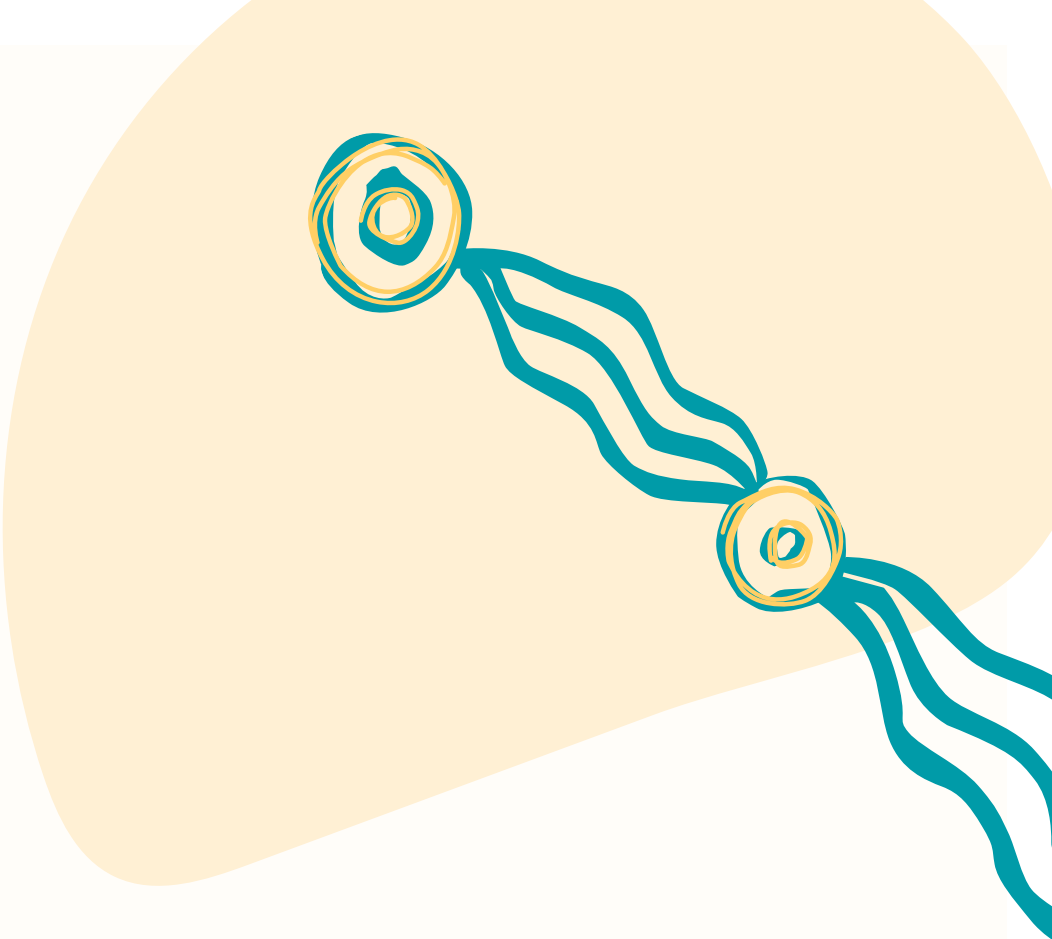
Commissioning for child safety and wellbeing outcomes

Our Focus

Commissioning new services to provide families with the right kind of help when and where they need it. This includes a commitment to building Aboriginal services with Aboriginal people, and supporting greater self-determination and an increasing role for ACCOs in the system.

What we've done

- Designed and commissioned new IFS to work with higher levels of complexity and risk, with a focus on cultural safety and trauma responsive and evidence-informed practice.
- Commissioned lower intensity Family Support Services to assist families with medium to low level risk concerns.
- Designed new service models for areas where there are service gaps in the system.
- Evaluated out-of-home care prevention pilots that have informed post-pilot service adaptations and funding.
- Established a new SFS Inner North metropolitan region to deliver IFS to an additional 250 families per annum.
- Dedicated 30 per cent of all contracted service funding to ACCOs and embedded the Aboriginal and Torres Strait Islander System Design Criteria and Co-design Principles in commissioning and service design.
- Tested a new Cooperative Dialogue Approach to commissioning that seeks to strengthen the role and voice of ACCOs/ACCHOs in the commissioning process.
- Adopted a relational approach to contract management to build trust and walk alongside partners to test new service models.



What we've heard

Greater investment is needed in services that can intervene early in the life of the problem.
CFSS Co-planning Workshop, 2024

Commissioning models should be flexible and tailored to suit local contexts, with different approaches for rural and metropolitan services.
CFSS Co-planning Workshop, 2024

We need to coordinate efforts between State and Commonwealth governments to ensure alignment between community needs and available services.
CFSS Co-planning Workshop, 2024



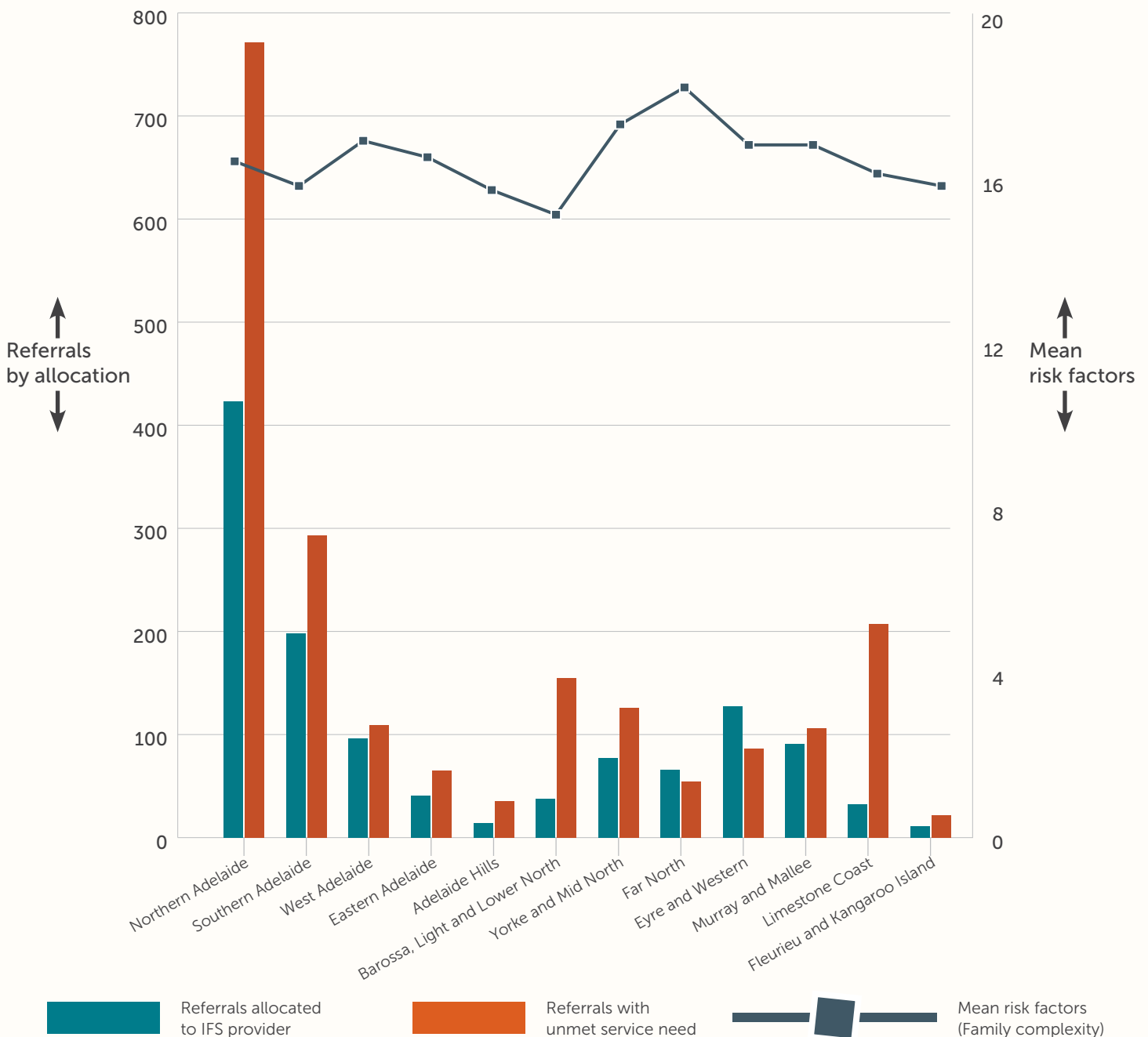
Family complexity and service need across regions



The areas of greatest unmet need for CFSS IFS is most pronounced in the northern and southern suburbs, and some regional areas.

As a result of building the data asset we can now see the level of complexity and need across government regions. This informs our decision-making around service system design and commissioning.

Figure 4: Monitoring service reach across regions - Number of referrals by allocation outcome and region, 2024/2025.





Priority Area 4: Evidence and Accountability Data, Voices and Decision-Making

Our Focus

Embedding a holistic approach to evidence building for the CFSS Learning System and communicating and integrating our evidence into policy and practice.

What we've done

- Developed the CFSS Research Approach 2025–2027 to guide research and evaluation efforts and continue to build system knowledge.
- Built new data infrastructure to provide foundational capability to monitor population level patterns to understand the service demand, emerging trends and system outcomes.
- Developed and implemented new population-level data collection tools to support research, evidence and continuous learning.
- Linked the CFSS data set with key administrative data sets from across SA government agencies (Child Protection, Births Deaths and Marriages, SA Health, Youth Justice and Education).
- Engaged the Adelaide University BetterStart Health and Development Research Group (BetterStart) to evaluate the CFSS reforms.
- Developed the CFSS Outcomes Hierarchy to provide a shared understanding across the sector of the outcomes that services aim to achieve.
- Implemented the CFSS Communities of Practice model to enable the voices and insights of practitioners to form part of the evidence development for CFSS.
- Established LEN to provide an ongoing mechanism for people with lived experience to be involved in the shaping, monitoring and review of the CFSS.



What we've heard

My passion is to see children kept in the care of Aboriginal families and to see the system change in a way that is responsive to Aboriginal families...There must be "deep listening" to people with Lived Experience to find ways to work with families that supports them to make changes that helps children and families stay together.

Aboriginal Cultural System Advisors, CFSS LEN



What we're learning

Service impact – measuring change



CFSS IFS are helping families stay together.

In partnership with BetterStart, data has been used to map outcomes across the CFSS, creating a system that quantifies how effective services are in supporting children and families.

This evaluation is showing that CFSS IFS are achieving a 93.2% preservation rate (i.e. children do not enter out-of-home care) over a 24-month follow-up period.²⁵ This is resulting in an additional 86 children every year not entering out-of-home care (based on a comparison group of high-risk families who do not receive intensive family support).

It has been estimated that this preservation outcome results in a conservative government return on investment of \$1.86 for every \$1 government spends. That is, for every \$1 spent on IFS, the government avoids \$1.86 on future out-of-home care costs over the following 4 years.

The evidence from BetterStart and DHS represents the first stage in a long-term, ongoing evaluation of CFSS IFS. Analyses planned as part of this ongoing evaluation include secondary child and parent outcomes related to safety and wellbeing such as child protection substantiated investigations, and drug and alcohol, injury or mental-health related hospital admissions or emergency department presentations.

86 children
every year not entering
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93.2%
CFSS preservation rate
Defined as children not
entering out-of-home care over
a 24-month follow-up period

Outcomes at service closure



At the end of the CFSS IFS support journey, a high proportion of families engaged with CFSS IFS are reaching a level of safety and wellbeing at home where intensive family support is no longer needed.

Through structured data closure reports we now have greater visibility of service outcomes. Closure reports submitted for referrals accepted during 2022/23, show **66% of engaged referrals** had closure reasons indicating that risk or safety at home or in community had improved to a point where intensive family support was no longer required.²⁶

Family Snapshot data collected by CFSS Practitioners is also helping to measure changes in safety and wellbeing for families who receive CFSS IFS. It captures individual, household and community factors that influence child safety and development. Data collection takes place at service commencement and service closure to measure the extent of change achieved through service delivery.

Family Snapshot data shows that families who have no strengths recorded at service closure are significantly more likely to have involvement with the Department for Child Protection.²⁷



This demonstrates that designing services that build family strengths is critical to disrupt the cycle of intergenerational trauma and improve safety and wellbeing outcomes for children and families.

This is a job that is skilled at working with heart,
a therapeutic role that takes significant practice wisdom.

CFSS Hosted Reflective Discussions, 2023







Our next steps

The next phase will build upon our evidence, experience and achievements so far.

We will have a paramount focus on transformative changes to achieve our commitments under Closing the Gap and to enable the full implementation of the Aboriginal and Torres Strait Islander Child Placement Principle. Through allyship, co-design and cultural accountability, our aim is to create a supportive and collaborative environment that respects and uplifts Aboriginal voices and leadership in decision-making and self-determination.

We will actively seek opportunities to build on and align with the significant work underway in other service systems – our Sister Systems - that is aimed at improving outcomes for children and families.

This will include supporting the implementation of the recommendations of the Royal Commission into Early Childhood Education and Care and the Royal Commission into Domestic, Family and Sexual Violence, as well as the legislative reforms introduced through the new *Children and Young People (Safety and Support) Act 2025*. We will pursue partnerships that strengthen cross system co-working, promote integrated service approaches and enhance shared workforce capabilities.

Together, we are committed to a long-term, collective shift towards systems and services that prioritise early support and enable children and families to thrive.



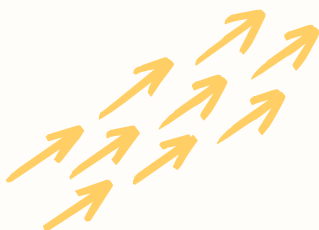
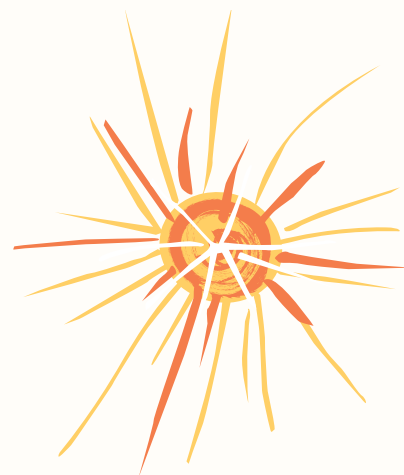
Figures endnotes

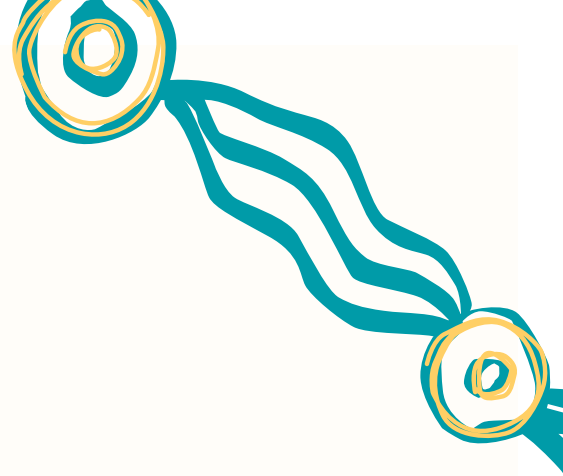
Figure 1: CFSS Data (2025),
Analysed by Early Intervention Research
and Data (EIRD) team, Child and Family
Support (CFS), DHS, South Australian
(SA) Government.

Figure 2: CFSS Data (2025),
Analysed by EIRD, CFS, DHS,
SA Government.

Figure 3: CFSS Data (2025),
Analysed by EIRD, CFS, DHS, SA
Government.

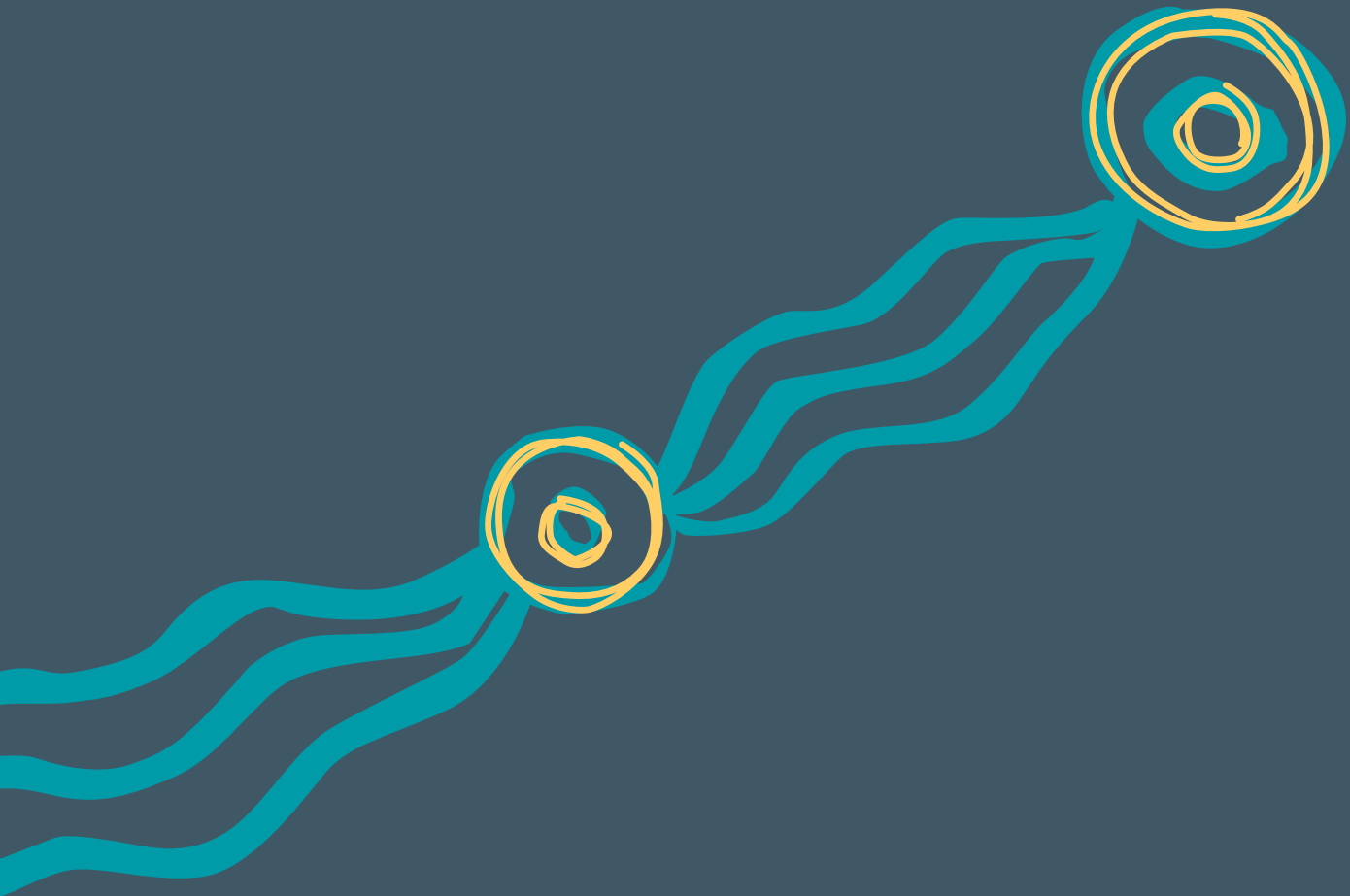
Figure 4: CFSS Data (2025),
Analysed by EIRD, CFS, DHS,
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- 27 Ibid.



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