



**Pre-budget  
Submission**  
Tasmania  
2020-21

**MISSION  
AUSTRALIA**

# Mission Australia and Mission Australia Housing

## Pre-Budget Submission to Treasury

December 2019

### About Us

Mission Australia (MA) is a national non-denominational Christian organisation, with more than 155 years' experience in delivering community services. We stand together with people in need on their journey to independence. Our evidence-based, client-centred community services are focused on reducing homelessness and strengthening communities across Australia.

In the 2018-19 financial year we supported over 160,000 people through 519 programs and services across Australia. During the same period, we supported over 17,000 Tasmanians through 45 services. We work with families and children, young people and people experiencing homelessness and also provide specialist services for mental health, disability and alcohol and drug issues.

In 2009 Mission Australia established Mission Australia Housing (MAH), a Tier 1 Community Housing Provider. In 2013 we took over the management of a portfolio of 500 social homes for Housing Tasmania in Clarendon Vale and Rokeby.

We know that great communities thrive where there are connections, opportunities and engagement across the economic spectrum. We know that individual service responses are not sufficient to address the challenges of deep and persistent disadvantage. That's why we use a place-based model which manages tenancies; co-ordinates support services; and targets intergenerational disadvantage through education and employment. We use a research and evidence based approach to our work and services, so we can measure our impact and demonstrate program outcomes.

Mission Australia's pre-budget submission focuses on the need for significant progress on homelessness and affordable housing and the need for adequate funding for evidence-based programs that have a positive impact on people's lives and support them on their journey to independence. This includes investment in child safety and youth programs, ensuring adequate mental health and drug and alcohol supports and strengthening communities of entrenched and persistent disadvantage. To this end we have set out our recommendations below in relation to the relevant issues for the people we work with across Tasmania.

## Homelessness and Housing

### Key recommendations

- The Tasmanian government should provide increased funding for homelessness services, to address the growing need for supports across our communities.
- Targets for social housing growth should be set and worked towards to meet the demand demonstrated by the waiting list and the projected demographic changes.
- Better protections for renters are required through legislation which prevents discrimination and unfair evictions.
- Housing First responses should be made available to people who have experienced homelessness which relies on an adequate supply of social and affordable housing.
- Increased support should be provided to young people at risk of homelessness, including support to families, mental health supports, alcohol and drug rehabilitation supports and supported accommodation options.
- Suitable accommodation needs to be provided for older people including construction of at least one homeless aged care facility per year for the growing number of older people at risk of and experiencing homelessness.
- Affordable housing should be integrated into the planning system, including through inclusionary zoning and value capture mechanisms.
- The current Tasmanian Affordable Housing Strategy should be expanded to include the use of well-located State and locally controlled land in a way which materially increases the supply of social and affordable housing.

## Issues to be addressed

### Homelessness rates are unacceptable

- Census data from 2016 shows that over 1,600 Tasmanians were homeless on any given night.<sup>1</sup>
- The State homelessness rate of 32 persons per 10,000 persons enumerated was similar to 2011 census data<sup>2</sup> showing no reduction in homelessness rates.
- During 2017-18, specialist homelessness services (SHS) assisted 6,508 clients in Tasmania.<sup>3</sup> This equated to one in 80 people in Tasmania receiving homelessness assistance, higher than the national rate (1 in 85).
- Of the 6,508 people assisted 53% were homeless on presentation, higher than the national rate (43%).
- On average, 28 requests for assistance went unmet each day in Tasmania.

### There is a chronic shortage of housing for people on low and moderate incomes

- According to the ACOSS *Poverty in Australia 2018* report, 1 in 8 people live below the poverty line (\$433 a week) in Australia. In Tasmania, 7.2% live below the poverty line before housing costs and this proportion goes up to 11.5% after housing costs.<sup>4</sup>
- Greater Hobart continues to be the least affordable capital city in Australia with even average income households now paying 30% of their income or more on rent. Although household incomes in Tasmania are significantly lower than the national average, rents are only marginally lower than mainland averages. The gap between income and rent has been widening over the past three years.<sup>5</sup>
- On the weekend of Anglicare Rental Affordability Snapshot (23-24 March 2019) there were 1,050 properties listed for rent across Tasmania. This is a 60% reduction in listings since 2013. Of this year's listings, just 212 properties (22%) would have been affordable and appropriate for households that rely on income support payments and less than half (465) would have been affordable and appropriate for our households on the minimum wage. No properties anywhere in Tasmania were affordable for a person on youth allowance, only 1%

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<sup>1</sup> Australian Bureau of Statistics, Census reveals a rise in the rate of homelessness in Australia, 2049.0 - Census of Population and Housing: Estimating homelessness, 2016, accessible at:

<http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/2049.02016?OpenDocument>

<sup>2</sup> Ibid

<sup>3</sup> Australian Institute of Health and Welfare, Specialist homelessness services 2017-18: Tasmania, accessible at: <https://www.aihw.gov.au/getmedia/927f2d46-02bc-4da3-96f0-238ff7dce44b/aihw-hou-299-tas.pdf.aspx>

<sup>4</sup> ACOSS and UNSW, Poverty in Australia 2018, p. 65, accessible at: [https://www.acoss.org.au/wp-content/uploads/2018/10/ACOSS\\_Poverty-in-Australia-Report\\_Web-Final.pdf](https://www.acoss.org.au/wp-content/uploads/2018/10/ACOSS_Poverty-in-Australia-Report_Web-Final.pdf)

<sup>5</sup> National Shelter, Community Sector Banking, SGS Economics and Planning and Brotherhood of St Laurence (2019) Rental Affordability Index 2019 Release <https://www.sgsep.com.au/projects/rental-affordability-index>

were affordable for a single mother with a child on Newstart; just 12% were affordable for single people on the aged pension and only 3% were affordable for a person on the disability support pension. <sup>6</sup>

- Homelessness can be ended by providing access to appropriate, affordable and secure housing, along with the support needed to help people stay housed.

#### **Housing underpins economic growth**

- Housing is vital infrastructure and a well operating housing market is a pre-requisite for productivity and social cohesion.
- A workforce that is stably and affordably housed is a pool of people able to save for retirement and invest in the future, including education for their children.
- For people unable to work, their use of government-funded services - such as in the health and justice systems - decreases when they are stably and affordably housed.
- Housing construction and maintenance also boosts productivity through more jobs and increased opportunities for traineeships and/or apprenticeships.

#### **MA and MAH at Ivanhoe (NSW) – A model for urban renewal**

As part of the NSW Government's Communities Plus program, the consortia, which includes Frasers Property and Mission Australia Housing will create at least 950 social housing dwellings and 128 affordable homes among the 3000 new dwellings at Ivanhoe estate, 15 kilometres northwest of the Sydney CBD.

The development will provide residents with easy access to transport, services, jobs, quality amenities and open green spaces to support a vibrant and sustainable community. The development will include a high school, residential aged care, childcare centres, a supermarket, cafes and retail shops.

Mission Australia Housing will provide tenancy and asset management for the social housing residents and will also deliver community development utilising the Mission Australia Strengthening Communities model. Additionally, Mission Australia will coordinate support service for residents to increase their independence.

This model of urban renewal and targeted support for residents has potential to be adapted for developments in Hobart and throughout Tasmania.

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<sup>6</sup> Anglicare Australia, Rental Affordability Snapshot, Tasmania 2019, p.2, accessible at: <https://anglicareras.files.wordpress.com/2019/04/tasmania.pdf>

## Strengthening Communities

### Key recommendations

- There should be a commitment to address entrenched and locational disadvantage at the community level, over the long term.
- Solutions need to be based on strong local participation, be flexible in adapting to changes and lessons learnt and be community owned and driven. They should be based on an understanding of the multiple and complex needs within these communities and provide an integrated service response through community partnerships.
- Housing renewal programs in communities experiencing disadvantage should include a strengthening communities focus, driven by the community, facilitated by community housing providers working alongside community services providers, governments at all levels as well as the private sector and should adopt a strengths-based approach.

### Issues to be addressed

#### **Persistent and entrenched disadvantage must be addressed**

- The Dropping Off the Edge Report (DOTE2015) identified the 3% of communities across Australia that bear the greatest burden of disadvantage and require immediate and sustained commitment from all levels of government.<sup>7</sup>
- In Tasmania just six local government areas accounted for approximately 80% of the highest ranked positions across the 21 indicators of disadvantage. These locations show high rates of criminal convictions; long-term unemployment; juvenile offending; young adults not participating in full time work, education or training disability; and low family income.<sup>8</sup>
- Locational disadvantage is a complex problem requiring systems change and a coordinated place-based collective impact approach. Interventions are required at the community level in addition to macro reforms and individual service responses.
- A place-based model that co-ordinates services and targets intergenerational disadvantage requires long term funding. A minimum of ten years' commitment plus upfront funding is required to plan and engage in programs and make adjustments as necessary.

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<sup>7</sup> Jesuit Social Services and Catholic Social Services Australia (2015) *Dropping Off the Edge2015*, accessible at: [www.dote.org.au](http://www.dote.org.au)

<sup>8</sup> Ibid

- An assets-based approach to community development uses methods such as capacity building, community building, neighbourhood renewal and asset mapping to fortify social capital.

### **MA and MAH at Clarendon Vale and Rokeby**

In 2013 Mission Australia Housing (MAH), under an agreement with Housing Tasmania, took over management of a portfolio of about 500 aged social homes in the neighbourhood of Clarendon Vale and Rokeby in Tasmania.

These suburbs, on the outskirts of Hobart, contain a high percentage of social homes, had a history of low service provision and a lack of opportunity for residents.

Alongside the provision of tenancy and property management, MAH embarked on an integrated program of community development by listening to local residents and supporting them to create their preferred future for their community.

What has emerged is a vibrant and renewed community, taking action and making tangible improvements.

## **Child Safety and Youth Programs**

### **Key recommendations**

- Child safety should be properly resourced across the spectrum with an increased focus on appropriate early intervention responses aimed at avoiding escalation to crisis responses. Nevertheless, appropriate resourcing of crisis responses remains a priority with a focus on ensuring the best outcomes for the child.
- Programs providing effective supports to vulnerable young people including the Targeted Youth Support Service and YouthBeat should be provided with ongoing and adequate funding to support young people with complex needs to transition to independence.
- An approachable, friendly, non-threatening service response is required where young people feel comfortable talking about issues. Young people can be very 'wary' of support services and outreach is particularly important for engagement.
- Consideration should be given to investing in specific programs to address youth disengagement from education based on successful models in other state such as Flexible Learning options in South Australia and the Navigator Program in Victoria.

- Youth-specific detoxification and rehabilitation facilities that take a holistic approach to young people's needs should be invested in to provide a safe, secure and encouraging environment where young people are more likely to succeed long-term.
- Evidence-based universal mental health prevention and intervention programs should be provided for young people in schools; assistance should also be provided to friends and family who may need to provide support to young people when they seek help in relation to their mental health; and peer support networks and peer education initiatives should be invested in.
- The Tasmanian Child and Youth Wellbeing Framework should continue to be implemented and monitored to improve the wellbeing of children and young people across the State.
- The Youth at Risk Strategy should be appropriately funded to engage young people in a holistic way and improve the service system for the most vulnerable young people.
- Outreach based Youth Engagement services (such as YouthBeat) should be appropriately funded to expand to regions outside of Hobart, primarily the North West of the state where there is a lack of support for this cohort.

#### Issues to be addressed

- Child protection and child safety is a pressing state responsibility and young people in out of home care continue to experience worse outcomes than their peers in terms of education, homelessness and contact with the justice system.
- Mental health was the second top issue of concern for Tasmanian young people in our 2019 Youth Survey, with more than one-third of young people from Tasmania (36.2%) identifying it as an important issue.<sup>9</sup> Almost one quarter of young people from Tasmania identified equity and discrimination (24.8%) and over one in five identified alcohol and drugs (20.8%) as important issues in Australia today.
- Many of the top issues of personal concern reported by young people in Tasmania in the *Youth Survey* are also related to their own mental health, including *coping with stress* (40.6%), *mental health* (33.4%), *school or study problems* (30.3%) and *body image* (26.3%).

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<sup>9</sup> Mission Australia, Youth Survey Report 2019, pp 154-172, accessible at: <https://www.missionaustralia.com.au/publications/research/young-people>

- Our recent mental health report showed that close to one in four young Tasmanians met the criteria for experiencing psychological distress – a substantial increase over the past seven years (rising from 17.2% in 2012 to 23.7% in 2018).<sup>10</sup>
- Further, in 2018, nearly four in ten (37.2%) Aboriginal and Torres Strait Islander young people in Tasmania met the criteria for psychological distress, compared to less than one in four (23.1%) non-Indigenous young people.<sup>11</sup>
- Across seven years, Tasmanian females were twice as likely as males to experience psychological distress. The increase in psychological distress has also been far more marked among females (from 21.1% in 2012 to 32.3% in 2018, compared to a rise from 12.7% to 16.2% for males in the same time period).<sup>12</sup>
- Mental illness and substance dependence can occur comorbidly for some young people and youth specific detoxification and rehabilitation services are required to cater holistically to the young person's needs.

## Supporting people experiencing mental illness

### Key recommendations

- Community based mental health services should be expanded throughout Tasmania, with a particular focus on meeting the needs of people with psychosocial disability who are unable to access the National Disability Insurance Scheme (NDIS).
- Peer support programs should be invested in for mental health support, particularly in rural communities.
- Greater efforts are required to divert people experiencing mental illness from coming into contact with the justice system and from experiencing homelessness.
- Mental health services should be co-designed with people with lived experience and carers and be based on evidence and research.

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<sup>10</sup> Mission Australia and Black Dog Institute *Can we talk? Seven year youth mental health report - 2012-2018*, accessible at: <https://www.missionaustralia.com.au/publications/youth-survey/1318-can-we-talk-seven-year-youth-mental-health-report-2012-2018/file>

<sup>11</sup> Mission Australia and Black Dog Institute *Can we talk? Seven year youth mental health report - 2012-2018*, accessible at: <https://www.missionaustralia.com.au/publications/youth-survey/1318-can-we-talk-seven-year-youth-mental-health-report-2012-2018/file>

<sup>12</sup> Mission Australia and Black Dog Institute *Can we talk? Seven year youth mental health report - 2012-2018*, accessible at: <https://www.missionaustralia.com.au/publications/youth-survey/1318-can-we-talk-seven-year-youth-mental-health-report-2012-2018/file>

## Issues to be addressed

- There is growing concern about the transition rates of Commonwealth community mental health program clients into the NDIS, as they are lower than expected.<sup>13</sup> For instance, according to the *Commonwealth Mental Health Programs Monitoring Project*, even by 2019, around one fifth of people had not commenced gathering evidence required or did not intend to test their eligibility for the NDIS.<sup>14</sup>
- In many sites, a number of people have been rejected due to their mental health issues not meeting the 'severe and persistent' criterion as result of not having a formal diagnosis. This is despite the fact they have accessed mental health services for a long period of time.
- The majority of people with mental health issues are unlikely to have accessed structured services in the past to provide evidence on their psychosocial conditions. These people are likely to have issues with providing medical evidence to support their NDIS applications.
- Some rural and remote communities rely on medical and allied health professionals who visit intermittently, who are often on short-term contracts.
- In addition to the challenges of having limited health professionals, the vast distances and scattered populations in rural and remote areas make it difficult for community organisations to deliver mental health services and retain trained and qualified staff.
- A peer support approach is able to produce positive outcomes for people experiencing mental illness as people who have similar experiences can better relate and can consequently offer more authentic empathy and validation.<sup>15</sup>
- Training and work as a peer worker can increase an individual's skill base, which makes them more employable and opens up other opportunities.<sup>16</sup>

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<sup>13</sup> National Mental Health Commission, Monitoring mental health and suicide prevention reform: National Report 2019, accessible at:

<http://www.mentalhealthcommission.gov.au/media/270709/National%20Report%202019.pdf>

<sup>14</sup> N. Hancock, et al, Commonwealth Mental Health Programs Monitoring Project: Tracking transitions of people from PIR, PHaMs and D2DL into the NDIS, The University of Sydney & Community Mental Health Australia, 2019, accessible at: [https://cmha.org.au/wp-content/uploads/2019/10/CMHA-and-University-of-Sydney-NDIS-Transitions-Final-Report\\_September-2019.pdf](https://cmha.org.au/wp-content/uploads/2019/10/CMHA-and-University-of-Sydney-NDIS-Transitions-Final-Report_September-2019.pdf)

<sup>15</sup> J. Repper and T. Carter, A review of the literature on peer support in mental health services in *Journal of Mental Health*, August 2011; 20(4): 392–411.

<sup>16</sup> Health Workforce Australia, Mental Health Peer Workforce Literature Scan, 2014, p. 10.

## Connections Program Broken Hill NSW

Mission Australia, in partnership with Far West Local Health District, have partnered for the previous 2 years to deliver a social inclusion program, Connections, to address loneliness, after hours, in the Far West of the state. The program is delivered after hours to support connection in mainstream community activities for those who are lonely or socially isolated.

Connections aimed to reduce social isolation by supporting people to develop a network within their community; provide an informal, non-clinical after-hours support service for socially isolated people when no other services are open, reduce reliance on after hours' crisis support; provide additional employment opportunities in a remote area and develop a peer workforce in a remote area

Since its inception, over 100 unique individuals have accessed Connections and, while there is some variation from month to month, attendance is trending up. Attendance has increased confidence, hope, connection, friendships and a sense of belonging to their own community for participants.

Emergency Department presentations and inpatient acute days have dramatically reduced for 5 most frequent attendees, at a cost saving of over \$710,000.

8 Peer Support Workers (PSWs) have been employed since Connections opened, one has used the skills gained to move to other employment in Mission Australia.

## Combating the harms of gambling through pokies reform

### Key recommendations

- Remove poker machines from all hotels and clubs.
- Not increase the number of poker machines in the casinos and impose on the machines in the casinos a maximum \$1 bet limit, a system that requires people to set an enforceable limit on their losses and a 4% levy to contribute to community supports. Further for it to be mandatory for the licensee to intervene where customers may be experiencing harm from poker machines.
- Continuation of counselling and other support services for those harmed by gambling.
- Support hotels and clubs that currently have poker machines to transition their business model.

### Issues to be addressed

- More than 80% of Tasmanians surveyed by Anglicare Tasmania thought that having poker machines in hotels and clubs does not benefit the community.<sup>17</sup>
- Research shows that 90% of people who are experiencing harm from gambling have not yet sought help.
- For every Tasmanian harmed by poker machine gambling, another 5-10 family, friends and colleagues are affected.<sup>18</sup>
- Gambling problems are a public health issue that should be treated in the same way as other public health issues with a public policy framework that prioritises prevention of harm across the whole population through effective consumer protection measures.<sup>19</sup>
- Higher gambling frequency is an indicator for developing gambling problems and policy should therefore address both the risk factors that lead people to gamble more frequently and the gambling features that are attractive to people who subsequently develop a gambling problem.
- Public policy on poker machines should recognise that 98% of the adult population either never touch a poker machine or spend less than 12 hours per year at a machine. Public policy should therefore focus on the people who face harm because of their intensified daily or weekly visits to the machines.

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<sup>17</sup> Anglicare Tasmania, Community Views on Poker Machines Research Report, November 2015, accessible at: <https://www.anglicare-tas.org.au/sites/default/files/Community%20Views%20on%20Poker%20Machines.pdf>

<sup>18</sup> Anglicare Tasmania, Why the Pokies need to go, accessible at: <https://www.socialactionresearchcentre.org.au/why-the-pokies-need-to-go/>

<sup>19</sup> See further: Victorian Responsible Gambling Foundation, Using a Public Health Approach in the Prevention of Gambling-Related Harm, July 2015, accessible at: <https://responsiblegambling.vic.gov.au/documents/21/using-a-public-health-approach-in-the-prevention-of-gambling-related-harm.pdf>

## **Mission Australia and Mission Australia Housing in Tasmania**

**Chigwell House:** Provides events, services, information and support for the community from birth to 80 years. Parents Staying Connected, Youth Connections, Integrated Family Support Service, Child and Family Health Nurse, Playgroup, Targeted Youth Support Service and Youth Beat programs all run out of this location and deliver services to families and young people. From Chigwell House we address homelessness and mental health issues. 14 community housing units which are managed by Mission Australia Housing are also located at the site.

**NDIS Local Area Coordination (ECEI) South East and North West TAS:** The Local Area Coordination (LAC) is a core function in the NDIS roll out. The LAC works with people with disability, their family, carers and the community to increase access and inclusion. Participants are supported to connect with mainstream and specialist supports through the development of a collaboratively detailed 'Plan', including specific goals, and aspirations and relevant supports. Outside of individual supports, LACs also work with local communities as a whole to ensure they are welcoming and inclusive for all people, including people with a disability

**NDIS Early Childhood Early Intervention (ECEI) South East and North West TAS:** Aims to provide all children aged 0-6 years with developmental delay or disability the best start in life. ECEI focuses on the individual needs of each child and working with families to link them with mainstream supports **as well as providing specialised early intervention by Allied Health professionals**

**Hope and Recovery Transitional Service (HARTS):** National Psychosocial Transition Service, funded through Primary Health Tas. This service is for existing Personal Helpers and Mentors (PHaMs) clients only, to support their transition/eligibility testing for NDIA services, or to support their transition to Continuity of Support programs.

**Strong Families, Safe Kids Advice and Referral Line:** The Family Support Gateway ceased in December 2018 when the Strong Families Safe Kids Advice and Referral Line commenced. The Strong Families, Safe Kids Advice and Referral Line is a contact point for people seeking information, advice and assistance if they have concerns about a child and their family. The service provides information and advice about service options and other approaches for responding to the needs of children and families. When a child and their family need assistance the service may provide this through referral to another service, or in some circumstances if a child is considered to be at risk, the service may refer the matter to the Child Safety Service for assessment.

**Integrated Family Support Service (IFSS) Rosny Park, Berriedale, Launceston and Devonport:**

Provides early intervention for children and families at risk. The aim of the service is to support families to identify/resolve/address issues in order to prevent any further involvement with Child Safety or the family having a notification to Child Safety.

**Mission Australia Housing – Clarendon Vale and Rokeby:** Tenancy and asset management of social housing and whole of community renewal through community development.

**Clarence Plains Community Chaplain:** Non-denominational Community Chaplain service provided to community members across Clarence Plains. The Chaplain provides assistance to individuals from targeted communities (geographical or program-based) to take hold of a positive future by providing a unique resource who brings compassion, help and hope to communities where MA has an active presence.

**National Disability Coordination Officer (NDCO):** The NDCO assists people with disability to access post-school education and training, and then subsequent employment. They offer information, coordination and referral and work with stakeholders to remove barriers to employment.

**Parents Staying Connected (PSC):** A mentor and peer support program encouraging parents and significant others to become part of a group who engage in training, group work, health and nutrition and play activities with children to enhance parenting confidence.

**Targeted Youth Support Service:** A holistic intervention service offering intensive case management and therapeutic interventions for young people aged between 10 and 18 years, who are identified as having significant and/or multiple risk factors and whom without intensive support are likely to enter the child safety and/or youth justice systems.

**Youth Beat:** Youth Beat operates in Derwent Valley, Clarendon Vale and Rokeby and reaches out to vulnerable young people across Southern Tasmania. We offer a wide range of services and support to young people, including identifying and addressing anti-social behaviour, drug and alcohol misuse, referral and intervention for young people in crisis and assistance with accessing additional services and social support networks. We foster strong relationships with police, community groups and local support services. Youth Beat offers interactive activities based on young people's needs and interests.

**Trinity Hill Learning Co-ordinator:** This is a service for young people aged 16-25 who are on a low income and have been homeless or at risk of homelessness, are eligible for social housing and able to live in independent accommodation at the Trinity Hill affordable housing development in Southern Tasmania. The service focuses on maximising tenant engagement in employment, education and training by supporting tenants with vocational and/or employment goals. The role of the Learning Co-ordinator create links with a wide network of services to address barriers to employment and education.

**Family Support for Grandparents and Relatives Raising Children South East and North West:** This service provides support for grandparents and relatives who have recently (within 12 months) taken on the primary care of a relative child or children. We provide assistance with Centrelink, CSS, support groups and brokerage.

**Disability Employment Services (DES) Burnie, Devonport, Queenstown, Smithton, Launceston and Hobart:** Assists employers to hire staff with an injury, disability or health condition. DES provides employers with ongoing assistance, training and support and access to a range of other support services including wage subsidies and financial assistance to help cover costs such as modifying the workplace or purchasing adaptive technologies or interpreting services. For the job seeker, DES provides Disability Management Services (DMS) for job seekers with disability, an injury or a health condition who need assistance to find a job and occasional support to keep a job; and Employment Support Services, providing assistance to those with permanent disability who need regular, ongoing support to keep a job.

**Communities for Children (C4C) Helping Young Families:** (in partnership with CatholicCare), strengthening the whole-of-family approach, focussing on parenting skills by working alongside parent(s) and their family to achieve what they want. Services include emotional support, information and advice, identifying and addressing needs, advocacy and service coordination.

**FAST (C4C) North West Tasmania:** (in partnership with CatholicCare), this service offers support to families in the Burnie area with children aged 5-12 years that may be finding it challenging to reach their full potential at school. The service aims for families, schools and services to work as a team to provide the best possible future for children.

**Parenting Together:** (in partnership with CatholicCare), providing evidence based parenting workshops to families to help strengthen positive family relationships.

**Lead Support Coordination Service:** Supporting individuals, youth and families with multiple and complex needs, providing coordinated services and support in the SE and NW of Tasmania.

**Family Day Care Tasmania (Mission Australia Children's Services):** Childcare service including Kentish Childcare, working in a child care centre setting, and Educators homes providing childcare for families. Also MACS Place-community playgroups and therapeutic workshops.

**For any further information please contact**

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