Welcome to the March FACSIAR Lunch and Learn:

Findings and recommendations from the Targeted Earlier Intervention program evaluation

Welcome and Acknowledgment of Country

Dr Jessica Stewart

Executive Director
Strategy, Policy and Commissioning
Family and Community Services
Insights, Analysis & Research
(FACSIAR)

Welcome to the March FACSIAR Lunch and Learn:

Findings and recommendations from the Targeted Earlier Intervention program evaluation

Today's presenters

Anthony Shannon

Director, Early Intervention and Inclusion, DCJ

Kira-Dhan Dr Ken Zulumovski

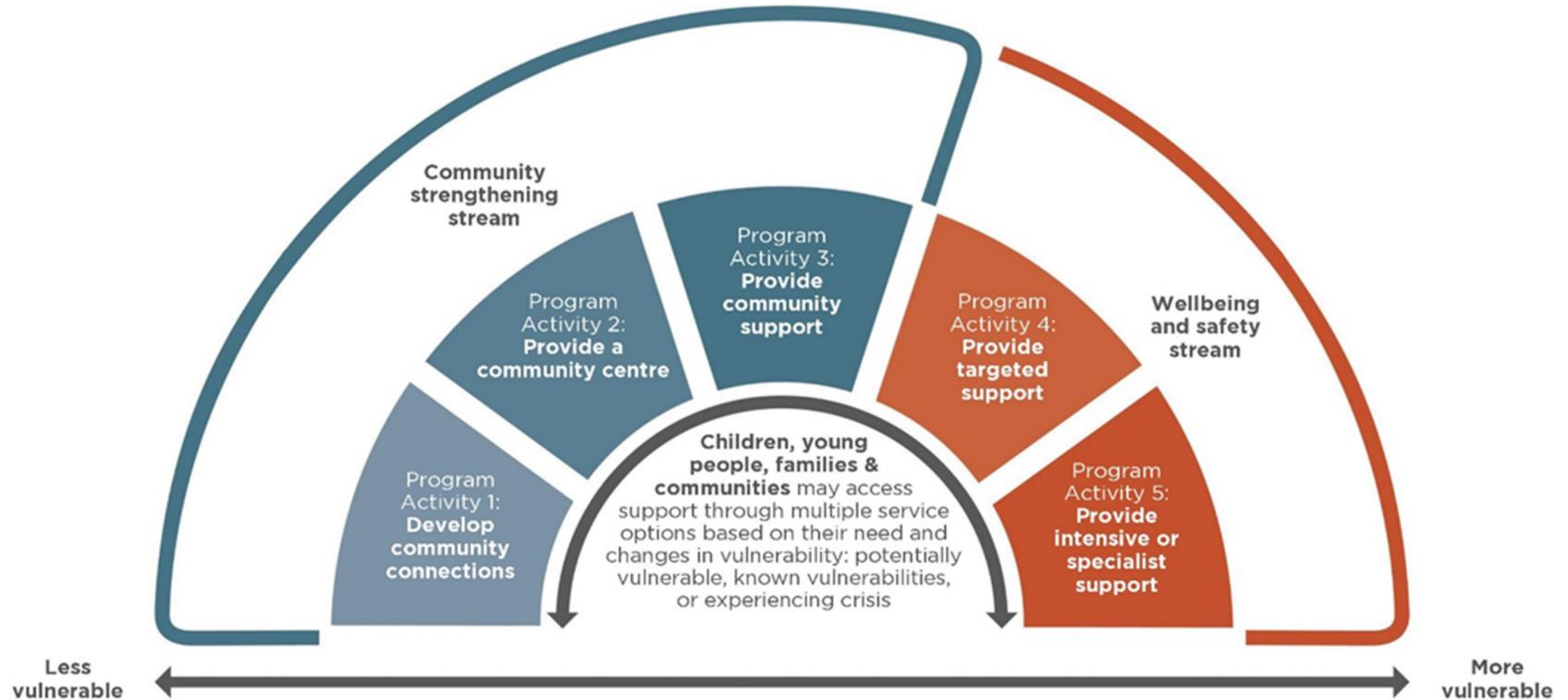Principle, Gamarada Universal Indigenous Resources Pty Ltd

Lou Campbell

Director, Consulting, Social Ventures Australia

Dr Hugh Miller

Principal, Taylor Fry

Targeted Earlier Intervention (TEI) Program

TEI Service Delivery & Reach

- In 2023/24:

  o **468** service providers delivered **502,678** sessions across **1,470** outlets in NSW.

  o **43** Aboriginal Community Controlled Organisations.

  o **176,888** individual clients (**27,245** or **15.4%** identified as Aboriginal and/or Torres Strait Islander)

  o **1,188,299** unidentified group clients (including clients who are supported through one-off occasions of service, group activities and events).

- 2024/25 TEI investment - **$192.3 million**.

- As of December 2024, TEI investment in the Aboriginal Community Controlled sector is 10.37%.

Context and Purpose of the Evaluation

- In December 2022, DCJ commissioned Taylor Fry in partnership with Social Ventures Australia (SVA) and Gamarada Universal Indigenous Resources (GUIR) to undertake a process, outcome and economic evaluation of the TEI Program.

- The purpose of the evaluation was to:

  o assess the overall impact of the TEI program and build the evidence base to inform the evolution of the TEI program and the commissioning process planned for 2025.

  o provide evidence of the efficacy of programs under each stream of TEI to support investment and service delivery alignment decisions.

  o identify areas and strategies for program improvement.

- Evaluation ethics oversight by the Aboriginal Health and Medical Research Council, including an evaluation external Aboriginal Reference Group.

TEI Evaluation

Evaluation team results

—

March 2025

Aboriginal engagement and findings

Kira-Dhan Dr Ken Zulumovski

Background on TEI Program with Aboriginal Children and Families

Aboriginal children, young people, and families are a priority group in the TEI program.

In NSW, Aboriginal children represent 45% of the out-of-home care population despite being only 8% of the total child population.

Historical service usage among Aboriginal clients is higher due to systemic disadvantages and intergenerational trauma.

TEI aims to reduce these numbers by providing culturally appropriate early intervention services.

Service Delivery for Aboriginal Children and Families

TEI services include Aboriginal Community Controlled Organisations (ACCOs) and mainstream service providers.

During our engagement, many ACCO providers emphasized the importance of cultural safety, trust-building, and community-led approaches.

Despite this, funding for ACCOs providing TEI services remains below the NSW Government's target of 30%, currently at 7.7%.

Key TEI Outcomes for Aboriginal Children and Families

Safety Outcomes: Aboriginal children engaged in TEI programs saw improves in child protection outcomes (fewer interactions) – hard to say whether better or worse than overall improvements

Client Satisfaction: Aboriginal clients reported high satisfaction with ACCO-led services, particularly playgroups and culturally informed programs.

Cultural outcomes: Clients in interviews believed that TEI services provided an opportunity for their children to attain cultural connections

Other Outcomes: Aboriginal TEI participants saw increased service use of homelessness and mental health services following TEI support, consistent with the overall findings.

Recommendations

Increase funding and capacity of ACCOs to deliver TEI services

Reflects strong qualitative feedback on the importance of culturally safe practices across providers, and the value of Aboriginal-led service delivery models

Improve data collection to measure cultural outcomes

This includes understanding how cultural outcomes may relate to other outcomes tracked.

guir

Process evaluation & qualitative findings

Lou Campbell, SVA

—

Qualitative methods

Interviews with sector representatives and program staff

- Interviews with peak bodies and DCJ leadership and program staff

Survey of TEI providers

- In-depth online survey delivered to all 472 service providers.
- 371 responses.

Survey of TEI providers (as per left side)

Case study interviews with a sample of staff and clients of five TEI service providers:

- Muloobinba (Hunter)
- Gudjagang Ngara li-dhi (GNL) (Central Coast)
- Intereach (Murrumbidgee)
- Creating Links (South West Sydney)
- Uniting (South West Sydney)

Process evaluation

Outcomes evaluation

Process evaluation findings

Interim Report

- Progress has been made against most TEI reform aims.

- Providers have largely given positive feedback on TEI processes.

- TEI is reaching priority groups.

- Most providers believe TEI is culturally appropriate, but improvements are needed.

- Clarification of the role of TEI in the broader services system.

- Streamlining the structure of TEI.

Final Report – refreshed with updated data

- Additional progress made towards TEI reform aims, including need-based commissioning.

- Additional qualitative analysis reinforces the need for a review of funding allocations.

- Further quantitative research highlights areas of relatively lower reach and funding.

- While funding targets for investment in ACCO's have not been met, DCJ has renewed its commitment to this investment.

- DCJ has also committed to embedding Aboriginal led commissioning principles in TEI.

Process evaluation findings – reach of TEI

- Continued increase in services delivered – 2022-23 numbers 16% and 23% higher for group and individual clients respectively, compared to prior year.

- Significant service delivery to priority groups - over 50% of individual clients accessing Wellbeing and Safety Stream.

- Evidence of working with vulnerable/ complex cohort as gauged by prior service use

- Funding is relatively concentrated in areas with great socioeconomic disadvantage (SEIFA scores).

- South-Western Sydney and Western Sydney had slightly lower sessions/funding than predicted based on SEIFA. These areas (among others) also have relatively higher forecast population growth.

Risk profile of individual clients, 2021-22 and 2022-23 by first program activity
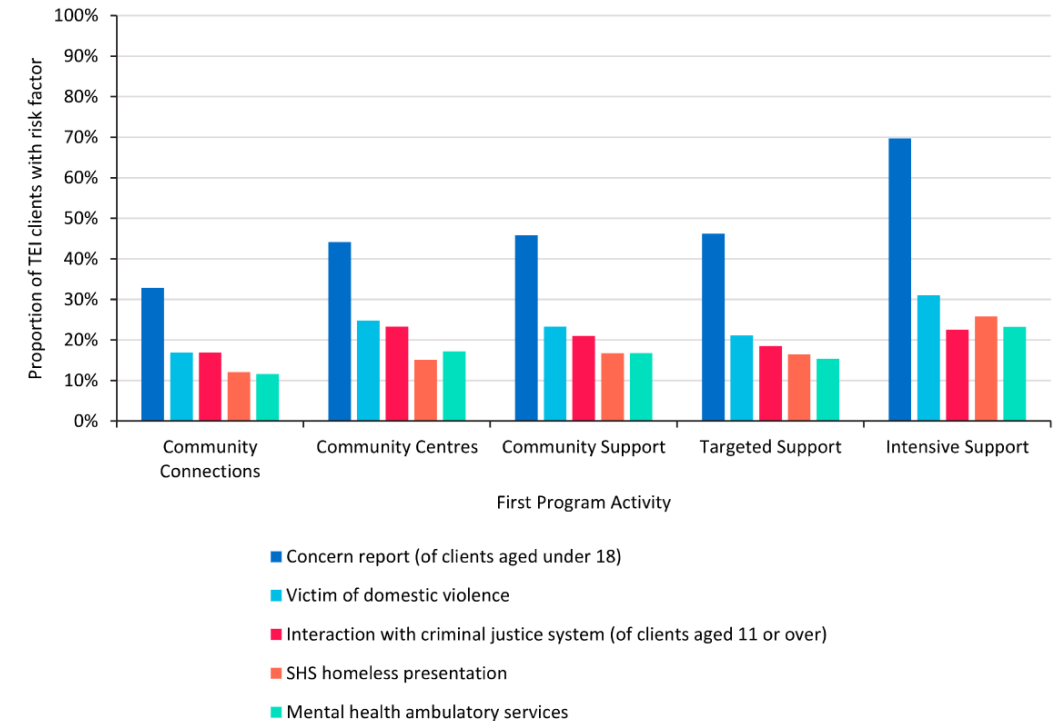
Key themes from qualitative analysis

The qualitative analysis was able to provide insights on a wider range of outcomes, as well as factors that influence outcomes.

- Providers note that TEI influences a wide range of outcomes, particularly sense of belonging in the community, participation in community events, empowerment and self-determination, and the health of children and young people.

- Providers believed that delivering flexible and adaptable services, based on strong relationships and connections with clients and community, is key to achieving outcomes.

- Providers note that external social factors have a significant impact on client outcomes, and these are outside of their control, and that adequate funding is crucial to their ability to achieve outcomes with clients.

- High level of client satisfaction.
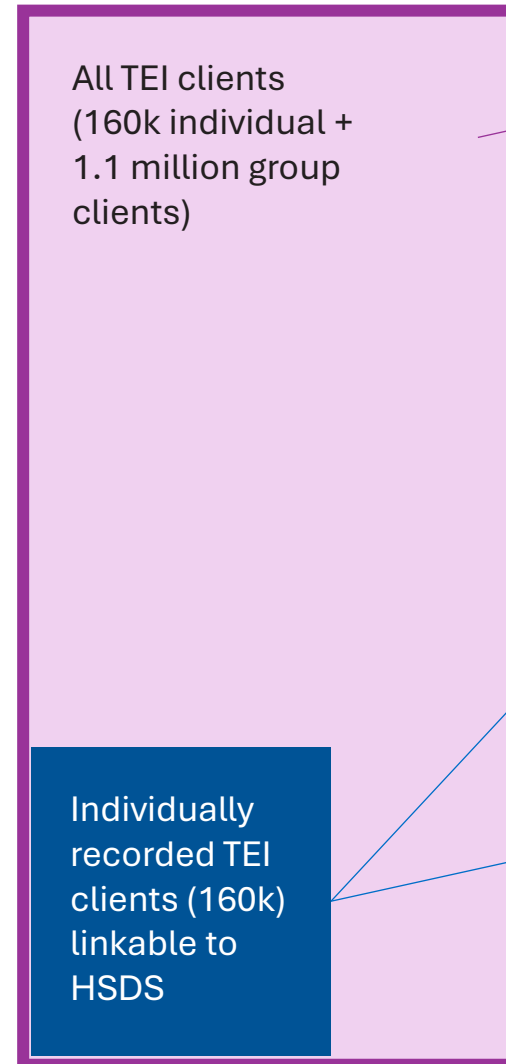
Outcomes and economic evaluation

Hugh Miller, Taylor Fry

—

Approach to testing outcomes

- A multi-layered approach to quantitative analysis, as shown right

- Given the design of TEI, we recognise a broad range of services, cohorts and potential impacts in testing outcomes

- The most precise testing is possible with the data linkage to the **Human Services Data Set**

  - Contains extensive linked NSW service data (Education, Health, Justice, Child & Family, Housing etc)

  - Strong data governance and privacy arrangements.

TEI population (2022-23)

All TEI clients (160k individual + 1.1 million group clients)

Individually recorded TEI clients (160k) linkable to HSDS

Quantitative methods

Aggregate outcome trends by region

Did regions with more TEI funding see a visible improvement in outcomes?

Linked administrative outcomes using the Human Services Data Set (regression & matching)

Do individuals accessing TEI see better outcome trajectories than similar people who do not access TEI?
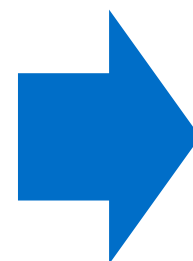
Validation of SCOREs on linked administrative outcomes

Are (Circumstances and Goals) SCOREs and improvement in SCOREs indicative of other outcomes in administrative data?

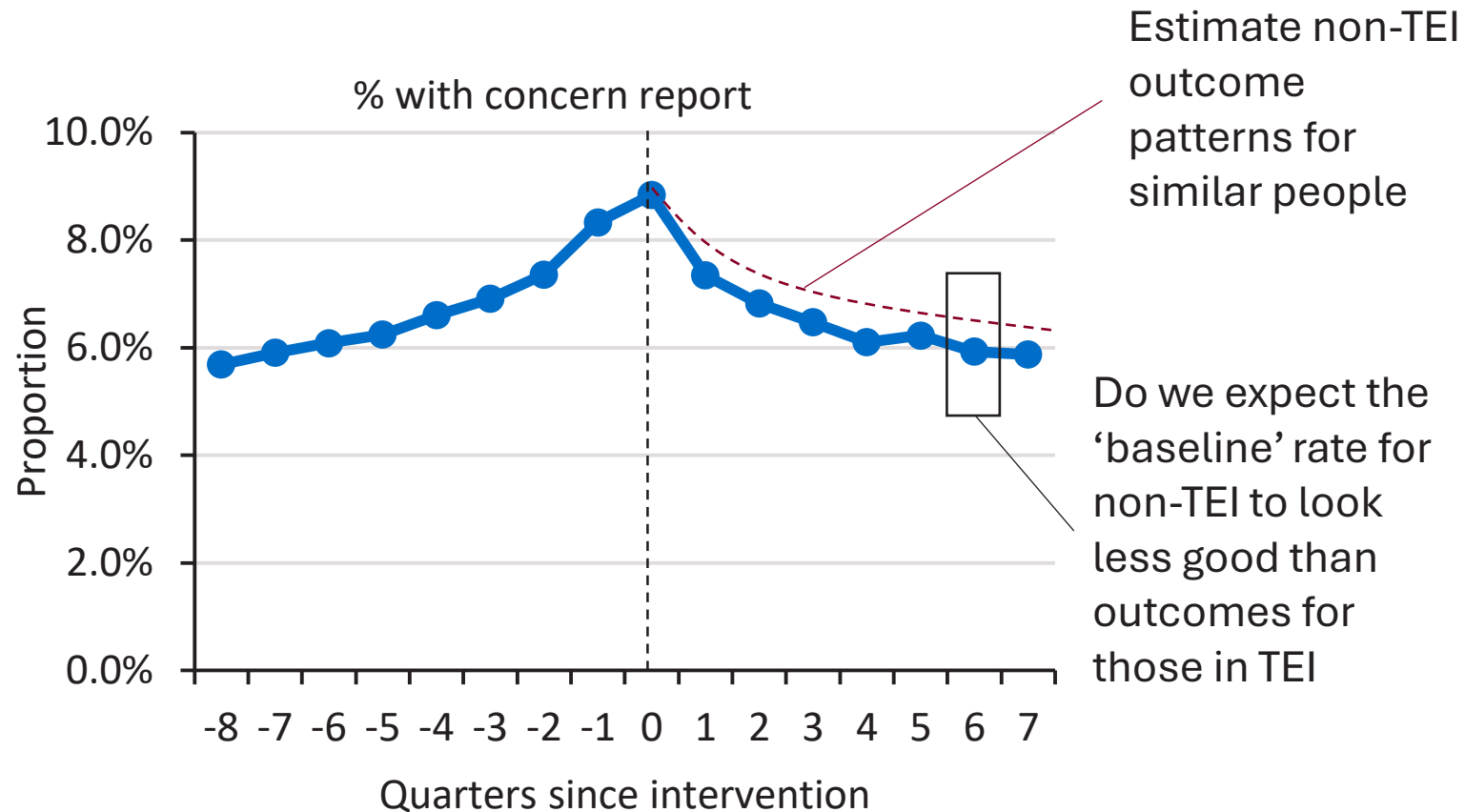# TEI outcomes – implementing for evaluation

Program intent

	Domain	Outcome
	Social and Community	▪ Increased participation in community events ▪ Increased sense of belonging in the community
	Empowerment	▪ Increased self-determination
	Education and Skills	▪ Increased school attendance and achievement
	Economic	▪ Sustained participation in employment
	Safety	▪ Reduced risk of entry into the child protection system
	Health (physical and mental)	▪ Improved health of children and young people ▪ Improved parent health
	Home	▪ Sustained safe and stable housing

What we could measure and assess

Domain	Outcomes	
Primary outcome area		
Safety	▪ Child protection concern reports ▪ Risk of Significant Harm (ROSH) reports	▪ Out of home care (OOHC) episodes
Secondary outcome areas		
Education and skills	▪ School attendance* ▪ School suspension*	▪ NAPLAN results* ▪ Year 12 completion
Safety	▪ Substantiated ROSH report ▪ Court presentations ▪ Domestic violence incidents ▪ Time in custody	▪ Proven offences ▪ Youth cautions ▪ Youth justice conferencing
Health	▪ Mental health support ▪ Hospital admissions for mental health	▪ Hospital admissions for drug and alcohol ▪ Drug and alcohol support
Home	▪ Homelessness support – rough sleeping ▪ Homelessness support - homeless	▪ Homelessness support – at risk

Understanding outcomes

% with concern report

Estimate non-TEI outcome patterns for similar people

Do we expect the 'baseline' rate for non-TEI to look less good than outcomes for those in TEI

- Outcome rates tend not to be static over time, methodology needed to reflect this.

- We control for this be comparing to a broader population (non-TEI)

- Some limitations to the approach, ultimately coming down to how 'fair' the TEI to non-TEI comparison is.

Outcomes - results

Summary of modelled TEI impact on each child protection outcome, at six quarters after TEI entry

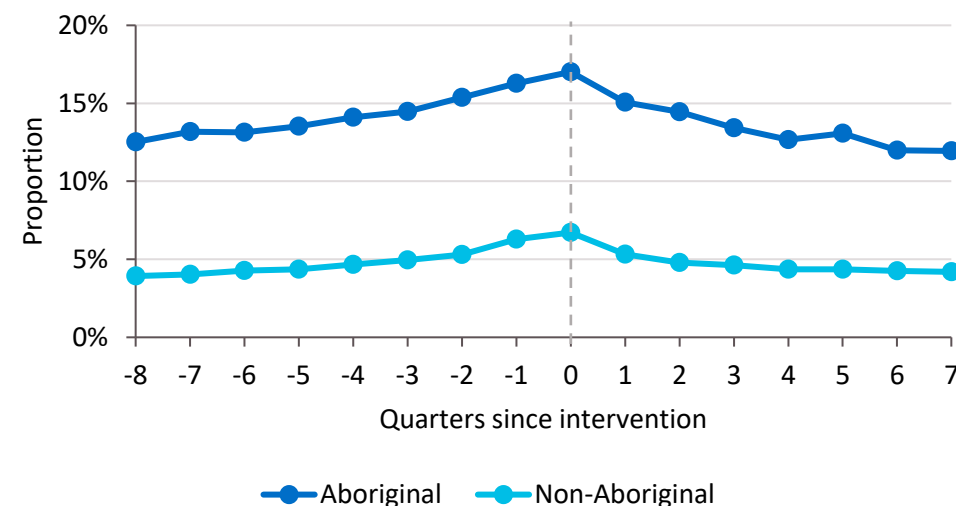| Outcome	Expected rate without TEI support	Actual rate (With TEI support)	Estimated impact (relative)*	p-value (two-sided)
Concern report	10.55%	9.85%	-6.6%	0.01
ROSH	7.85%	7.45%	-5.0%	0.11
OOHC – not in OOHC at entry	0.69%	0.82%	+19.4%	0.18
OOHC – in OOHC at entry	83.67%	79.72%	-4.8%	0.01

*Calculated as Estimated impact (absolute), divided by Expected rate without TEI support, differences may occur due to rounding

- For the linked cohort, we found **evidence of reduced service use for primary outcomes**, notably concern reports and risk of significant harm.
  - Absolute effect is higher for those with previous child protection interactions
  - Larger effects for targeted support counselling and specialist support services
  - Larger effects for clients with large number of sessions
- **Limited evidence of impact for secondary outcomes**
  - Some **increases** in Specialist Homelessness Services and Mental Health service use.
- High levels of client satisfaction
- **Evidence for SCOREs validity** around outcomes for child protection (concern reports & ROSH), Victims of DV, and homelessness risk
  - Both the level and the change in SCOREs is predictive.
- Continued importance in data collection & consistency and measuring longer-term outcomes.

Outcomes – Aboriginal people

- 19% of people aged 0-17 accessing TEI services identified as Aboriginal or Torres Strait Islander. This compares to 8% of the NSW children population, and 45% of the OOHC population.

- Aboriginal children connected to TEI programs have higher rates of interaction with the child protection system, compared to non-Aboriginal children, both before and after accessing.

- Overall, **saw similar (relative) improvements in child protection outcomes**.

- We tested for differential impact of specific Aboriginal services – not statistically significant.

- Unable to test ACCO impact, although strong support for ACCOs in the interview and survey research

Pattern of concern reports over time

Summary of modelled TEI impact on child protection concern reports, at six quarters after TEI entry

| Outcome	Expected rate without TEI support	Actual rate (With TEI support)	Estimated impact (relative)*	p-value (two-sided)
Aboriginal	**19.09%**	**20.22%**	**-5.6%**	**0.07**
Non-Aboriginal	7.25%	7.86%	-7.8%	<0.01

*Calculated as Estimated impact (absolute), divided by Expected rate without TEI support, differences may occur due to rounding

Economic evaluation

- We found **benefits of 66 cents in the dollar** for individual session services, related to the outcomes where we found evidence of improvement:

  - Better quality of life for those avoiding ROSH ($5,300 per event)

  - Longer-term child protection savings from ROSH and OOHC improvements ($10,600 and $376k per event respectively)

  For 2022-23 we estimate $92m in benefits tied to improved outcomes, with most of this accruing to the government (lower child protection costs). This compares to $139m of cost attributable to individual sessions (out of a total cost of $179m for 2022-23).

- There will be **other benefits not recognised** in this analysis

- The analysis represents an important step in being able to properly compare benefits to costs
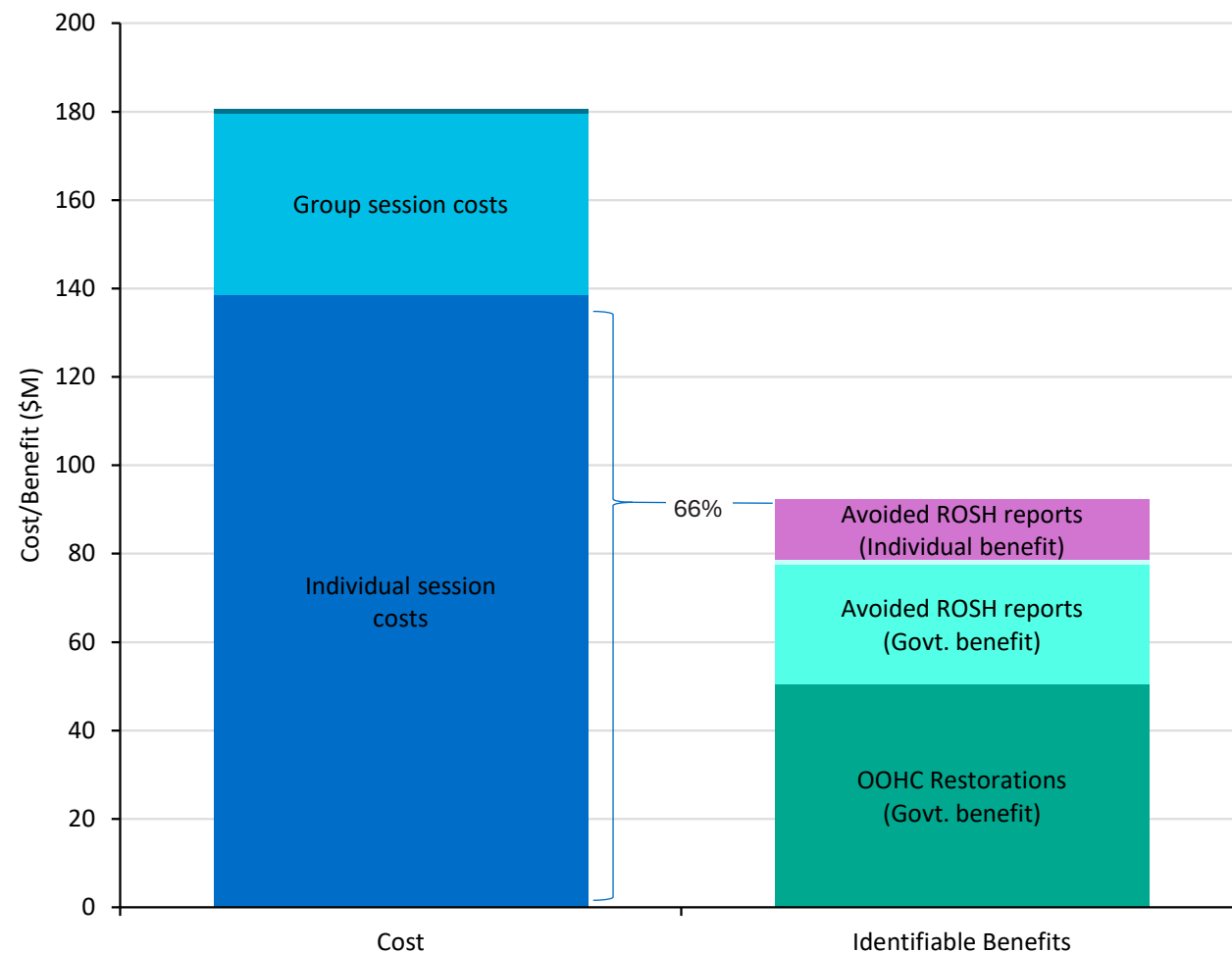
Evaluation Recommendations and Opportunities
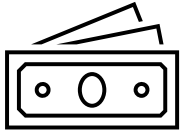
1
Investment into ACCOs

Increase funding and capacity of ACCOs to deliver TEI services - to support the achievement of its investment targets. DCJ will also need to invest in building the capacity of new and emerging ACCOs

2
Investment into high growth areas

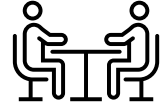Focus on increasing TEI access in high population-growth and remote areas.

3
More frequent contract reviews

Greater opportunity for interim contract and funding reviews during a contract period, and in response to changing circumstances.

4
Increased flexibility

Opportunity for increased flexibility in service provision and provider awareness. Simplification of program design, with fewer service types and greater allowance for providers to deliver a wider range of activities and adapt target cohorts based on local need.

Evaluation Recommendations and Opportunities

NSW GOVERNMENT

5
Support for community engagement & partnership

DCJ should look to provide sufficient facilitation or funding for providers to participate in local forums and to undertake outreach to build partnerships in local communities.

6
Update outcomes measurement approaches

There is an opportunity to update outcomes measurement approaches, in particular, to reflect cultural outcomes and consider principles of Indigenous Data Sovereignty.

7
Define the focus of future evaluations

It would be useful for future evaluations to focus on understanding what service provision factors led to different kinds of outcomes.