Earlier support for stronger families

2026 Victorian Election Platform

Uniting

Introduction.

Across Victoria, families and individuals are being pushed closer to crisis because the systems designed to support them are increasingly unable to respond.

Rising housing costs, financial strain and insecure work are placing sustained strain on households. Simultaneously, community services are under significant pressure and struggling to provide timely assistance.

The consequences are felt across communities and service systems. Families often reach breaking point before support becomes available. Governments face growing demand across homelessness, health, child protection and justice systems, and services experience increased complexity, placing pressure on resources and capacity.

Uniting Vic Tas sees the consequences of delayed support every day through our work with children, young people, families and communities across Victoria.

Uniting is a contemporary expression of the Uniting Church's commitment to social justice and community care.

Through our services and advocacy, we work to reduce the impact of poverty, trauma, and disadvantage, contributing to an inclusive, connected and just future for all Victorians.

With more than 4,000 employees and 1,500 volunteers, Uniting brings both frontline experience and systems-level insight into the challenges facing families.

We believe the next Victorian Government should invest in a service system that is responsive, well-resourced and centred on people's needs — an investment in stronger families, healthier communities and better futures for children and young people.

As part of this investment, Uniting is calling for:

- **Family Wellbeing Connect** to improve outcomes for children and families by ensuring support is accessed earlier, before challenges escalate into crisis.
- **Kinship Care Guarantee** to strengthen support for grandparents, relatives and other kith and kinship carers providing safe and loving homes.
- **Meals for Change** to help young people connect with peers while supporting local businesses.
- **Ruby's Reunification Program** to work with young people and their families before family instability leads to homelessness.
- **Catalyst Rehabilitation Service** to provide community-based recovery pathways for individuals and families affected by substance use.

Together, these proposals create an integrated continuum of support, investing in prevention and early intervention initiatives to more intensive family support, treatment and crisis demand reduction, helping strengthen outcomes across the entire human services system.

Building on sector priorities

The proposals complement broader reforms advocated by community sector peak bodies and other service providers to improve outcomes and build stronger communities.

Community service organisations are trusted local partners, delivering essential supports, responding to emerging needs and helping people navigate increasingly complex challenges.

To continue this work, the sector requires funding that reflects the true cost of service delivery, supports workforce sustainability, enables investment in digital capability and transformation, and provides the certainty needed to plan, innovate and deliver long-term outcomes.

Uniting Vic.Tas.

Across Victoria, Uniting offers a broad range of community services:

- **supporting children, youth and families to thrive:** early childhood education services, integrated family services, care and placement, and early intervention youth services.
- **offering compassionate care for people facing tough times:** homelessness services, financial counselling, mental health and alcohol and other drug services, carer support services, and emergency relief.
- **providing safe, stable and affordable housing:** transitional housing, social housing, affordable housing and retirement villages.

Through our services and advocacy, Uniting works to reduce the impact of poverty, trauma, and disadvantage, contributing to an inclusive, connected and just future for all Victorians.

For Uniting, an inclusive, connected and just future is a future where everyone:

- has access to sufficient financial and material resources
- can confidently and safely support the children and young people in their lives reach developmental milestones
- has safe and positive relationships with family members
- has a safe, stable, suitable and affordable home
- can effectively manage their social and emotional wellbeing with minimal harm from the use of alcohol and drugs
- can actively participate in communities where they feel valued and belong

To achieve these outcomes, we recognise the importance of strengthening the foundations for living, while also supporting those experiencing crisis and trauma.

	Early Learning Childcare, Kindergarten, Inclusion Support.	**Child Youth Families** Integrated family services, care and placement, and early intervention youth services.	**Support & Wellbeing Services** Homelessness, financial counselling, alcohol and other drug and mental health, carer support, and emergency relief.	**Community Housing** Transitional housing, social housing, affordable housing and retirement villages.
Metropolitan Melbourne	●	●	●	●
Barwon Southwest	●			●
Wimmera Central Highlands	●	●	●	●
Goulburn Ovens Murray	●		●	●
Gippsland	●	●	●	●
Loddon Mallee	●			●

2025/26 Victorian Service Reach

5,318 Victorian children on any given day in our early learning centres

515 Victorian children in Outside School Hours Care

2,343 Victorian children with disability on any given day through Kindergarten Inclusion Support

14,504 people, across 4,119 Victorian families in Integrated Family Services

373 Victorian children in Uniting's Out of Home Care on any given day

5,423 people supported to change their alcohol and drug use

8,478 people supported to improve housing security through Homelessness Entry Points

2,021 referrals to Financial Counselling supporting 400 people at any one time

1,456 residents in 979 community housing dwellings across Victoria

4,836 people supported through carer wellbeing services

Family Wellbeing Connect.

Commitment sought

An annual investment of $1.95 million ($7.8 million over four years) to establish Family Wellbeing Connect, a statewide network of Family Wellbeing Connectors embedded across 103 Uniting early learning programs in 62 Victorian communities.

The investment will create a preventative, low-intensity support model that strengthens connections between families and existing community services, while maximising the impact of Victoria's investment in early childhood education and care.

Problem

1 in 5 children in Victoria are considered developmentally vulnerable.[1] Children who start school behind are more likely to remain behind, with vulnerabilities at age four linked to lower NAPLAN results in Years 3, 5 and 7.[2] These children are also less likely to finish school and more likely to experience unemployment and ill-health throughout their lives.[3] Intervening early is life changing.

Many families experiencing financial hardship, family violence, housing stress, mental health challenges, disability-related needs, social isolation or parenting pressures do not access support until circumstances have become acute. By this stage, resolving issues requires significant intervention, with our family services teams spending an average of 81 service hours with each family over a period of 172 days.[4]

While a broad range of government-funded and community services already exist, families often face barriers navigating an increasingly complex service system. Limited knowledge of available supports, referral fatigue, long waiting periods and competing family pressures can prevent families from accessing help when it is most needed. Among our consumers, 51 per cent say that difficulty navigating services was the key barrier to accessing support.[5]

Early learning centres are uniquely positioned to identify emerging needs because they engage regularly with parents and caregivers during their children's critical early years. However, educators are not resourced to provide family support, coaching and service navigation alongside their core educational role.

As a result, opportunities for prevention and early intervention are frequently missed, leading to poorer outcomes for children and increased demand for more intensive and costly crisis, statutory and tertiary services.

Solution

Family Wellbeing Connect places dedicated Family Wellbeing Connectors within trusted early learning settings to provide practical support, coaching, service navigation and coordinated connections to existing community services. Uniting's early learning centres are uniquely positioned to intervene. One quarter of Uniting's early learning centres are situated in communities where childhood developmental vulnerability exceeds the Victorian average. Nine locations (14 per cent) are in communities with vulnerability above 15 per cent, and two locations (3 per cent) are in communities where more than one in five children are developmentally vulnerable.

Family Wellbeing Connectors are skilled practitioners with backgrounds in social work, community services, family support, financial wellbeing, community development, early childhood or related disciplines.

They provide low-intensity, strengths-based support that helps families address challenges

[1] AECD (2024). 'Data Explorer', *Victorian Results.* Accessed 24 July 2026
[2] Australian Early Development Census (2015). 'Factors found to affect children's success at school', Accessed 24 July 2026 https://www.aedc.gov.au/docs/default-source/default-document-library/factors-found-to-affect-children's-success-at-school.pdf?sfvrsn=b394ba24_1
[3] The Front Project (2022). 'Supporting all children to thrive: The importance of equity in early childhood education'. The Front Project.
[4] Integrated Family Services Uniting data
[5] Integrated Family Services Uniting data

early and access the assistance they need. Family Wellbeing Connect aligns strongly with the objectives of Victoria's Early Intervention Investment Framework by identifying and responding to family needs early, before challenges escalate into costly crisis and statutory service interventions.[6]

Importantly, Family Wellbeing Connectors do not replace specialist services such as psychologists, family violence practitioners, housing workers, disability specialists or financial counsellors. Instead, they provide practical assistance, a trusted relationship and early intervention support, helping families connect with specialist services when required.

Connectors would:

- Build trusted relationships with families through a regular presence in early learning centres.
- Identify emerging wellbeing, financial and social support needs of families and children, including family violence, housing stress, mental health challenges and disability-related needs.
- Provide a listening ear and practical guidance during periods of family stress.
- Support families with basic budgeting, household planning and financial wellbeing conversations.
- Assist families to identify and access government payments, concessions and community supports.
- Provide information about local services and support navigation of online resources.
- Assist with forms, applications and service referrals where appropriate.
- Facilitate warm referrals to specialist services when more intensive support is required.
- Coordinate communication where multiple services are involved.
- Follow up to ensure families successfully connect with support and remain engaged.

Informed by AECD and ABS data, the workforce would be distributed using a place-based allocation model informed by community disadvantage, family need and service demand. This would ensure communities experiencing higher levels of hardship receive a greater intensity of support while maintaining a regular presence across all participating services.

Rather than creating new specialist services, Family Wellbeing Connect provides the critical connective infrastructure that helps families find, understand and access the services already available within their communities.

Family Wellbeing Connect aligns with the Victorian Government's investment in Thriving Kids for children with developmental delay or autism. Thriving Kids will bring together Victoria's maternal and child health and early childhood education systems, with developmental and allied health supports. Family Wellbeing Connect complements this investment by extending this early-intervention approach to the broader pressures that affect children's development and family stability.

Outcome

Family Wellbeing Connect will improve outcomes for children and families by ensuring support is accessed earlier, before challenges escalate into crisis.

Expected outcomes include:

- Improved access to financial wellbeing supports and financial counselling services when required.
- Improved access to parenting, mental health, disability, housing and family services.
- Increased understanding of available government payments, concessions and community supports.
- Reduced family stress and social isolation.
- Increased confidence in managing household challenges and family wellbeing.
- Increased service engagement and coordination.
- Improved family stability and wellbeing.
- Stronger school readiness for children to learn, participate and thrive.

At a system level, the model will strengthen collaboration between early learning services and local support systems, improving the effectiveness of investments across education, health and community services.

[6] VAGO (2026). 'Investing in Early Intervention Initiatives'. Accessed 28 July 2026

Investment rationale

Family Wellbeing Connect is a practical, scalable and cost-effective early intervention investment.

Family Wellbeing Connect would maximise the impact of Thriving Kids by addressing the financial, housing, parenting, mental health and social pressures that affect children's capacity to benefit from early learning and developmental supports.

The workforce design has been informed by analysis of 103 Uniting early learning programs, including 91 two, three and four year-old kindergarten programs and 12 outside school hours programs. These programs run across 68 locations in 62 communities.[7] This targeted approach directs resources to the families that need it most, helping deliver the greatest impact while maintaining a statewide prevention and early intervention focus.

The model provides a substantially lower-cost intervention than more intensive integrated service models. It focuses on practical support, coaching, outreach, system navigation, warm referrals and coordinated support. This recognises that many families do not necessarily require intensive intervention. Often, families need a trusted person to listen, help them work through immediate challenges, provide practical guidance and connect them to the right services at the right time. By embedding Family Wellbeing Connectors within trusted early learning settings, the model creates the "glue" between families and services, helping ensure existing government investments are more effectively utilised.[8]

By strengthening access to existing services, increasing engagement with support systems and addressing challenges before they escalate, Family Wellbeing Connect will help reduce pressure on crisis, statutory and tertiary services while improving outcomes for children, families and communities across Victoria.

Long-term impact

The investment would support approximately 4,686 families and more than 5,258 children each year, creating stronger pathways between early learning settings and local support systems.

Over time, Family Wellbeing Connect would contribute to improved family stability, greater financial wellbeing, stronger parental confidence, increased service engagement and better developmental and educational outcomes for children.

By providing practical support and early intervention during the critical early years, the model would maximise the return on Victoria's investment in early childhood education, strengthen family resilience and reduce demand for more intensive government-funded interventions across health, family services, housing and child protection system.

[7] Social Ventures Australia (2024) *Mapping early childhood disadvantage and childcare deserts,* Accessed 24 July 2026 https://www.socialventures.org.au/our-impact/mapping-early-childhood-disadvantage-and-childcare-deserts/

[8] Social Ventures Australia (2025). *Sticking points: why the 'glue' helps Early Childhood Hubs thrive,* Accessed 25 July 2026 https://www.socialventures.org.au/wp-content/uploads/2025/09/Glue-policy-paper.pdf

Victorian Kinship Care Guarantee.

Commitment sought

An annual investment of between $163.5 million and $187.8 million ($654 million - $751.1 million over four years) to create the Victorian Kinship Care Guarantee to ensure children living with kith and kin receive the financial and service support they need, including income security and integrated support from day one.

Problem

Kinship carers often assume care during a family crisis. They are often provided with little notice, minimal financial preparation or access to training. More than nine in ten are women, around 40 per cent live in households with incomes below $40,000, and many use personal savings or income to meet children's needs.[9]

The Victorian Carer Strategy 2025-2035 acknowledges that kinship carers often manage complex relationships with birth parents and extended family, contact arrangements and children's trauma-related needs.[10] Kith and kin carers often support children with complex intergenerational trauma yet have less consistent access to training, allowance reassessment, parenting support, planned and emergency respite, mediation, peer support and practical casework than foster carers. This places significant financial, emotional and administrative pressure on kinship carers and relies too heavily on family obligation and private resources, leading to 40 per cent of kinship carers stating they are unlikely to continue caring.[11]

Kith and kin care now account for 82 per cent of OOHC placements in Victoria.[12] Kinship care provides children with greater placement stability and helps preserve important relationships with siblings, extended family, community, and culture. These connections support children's identity, belonging and recovery during a period of significant disruption.[13] However, funding for kinship care is currently inequitable and unsustainable.

Victorian carers currently receive significantly less financial support compared with carers in other states and territories.

Victoria's base-rate care allowance sits below the base foster and kinship care allowances paid in NSW, Queensland, the ACT, South Australia, the Northern Territory and Western Australia for most childhood age groups.

For example, a Victorian carer supporting an eight-year-old receives $490.16 per fortnight. In comparison:

- a Queensland carer receives $702.94 per fortnight (approx. $212.78 more per fortnight, $5,533 per year), and
- a NSW carer receives $787.00 per fortnight (approximately 296.84 more per fortnight, $7,718 per year).

Victoria's care allowance framework is more complex than other states, with age bands not aligning with key developmental and educational stages and a five-level payment structure that creates inconsistency and administrative burden. Victorian Auditor-General's Office has noted that both the age ranges and funding inequities are an ongoing risk to system sustainability.[14]

[9] DFFH (2021). Kinship Census, Access 28 July 2026 https://www.dffh.vic.gov.au/sites/default/files/documents/202109/Carer-census-infographics..pdf

[10] Department of Families, Fairness and Housing (2025) *Victorian Carer Strategy,* Accessed 28 July 2026 https://www.dffh.vic.gov.au/sites/default/files/documents/202510/victorian-carer-strategy-2025-2035.pdf

[11] Carer Census (2021) DFFH Accessed 18 August 2026 https://www.dffh.vic.gov.au/sites/default/files/documents/202109/Carer-census-infographics..pdf

[12] VAGO (2026) *Is the Department of Families, Fairness and Housing meeting Victorian children's needs in out-of-home care?,* Accessed 28 July 2026 https://www.audit.vic.gov.au/report/out-home-care-services

[13] Winkour, Holtan & Batchelder (2015). 'Systematic Review of Kinship Care Effects on Safety, Permanency, and Well-Being Outcomes', *Research on Social Work Practice,* Accessed 28 July 2026 https://journals.sagepub.com/doi/10.1177/1049731515620843

[14] VAGO (2026) *Is the Department of Families, Fairness and Housing meeting Victorian children's needs in out-of-home care?,* Accessed 28 July 2026 https://www.audit.vic.gov.au/report/out-home-care-services

Significant allowance inequity exists between Victorian kinship and foster care.

Approximately 97 per cent of kinship carers receive the Level One allowance, compared with around 40 per cent of foster carers.[15] As most kinship care placements automatically start at Level One, kinship carers are much less likely to receive higher allowance levels. This can result in a funding gap of up to approximately $37,978 per year, even where children have similar levels of need.[16]

Kinship placements receive less support despite comparable levels of complexity.

All children in out-of-home care and their carers should receive support according to their needs, not according to where they live or whether they are placed with kith and kin or a foster carer. While Victorian carer census data indicates broadly similar reported rates of trauma histories, behavioural issues and learning difficulties across kinship and foster care,[17] lower funding for kinship placement support limits agencies' capacity to undertake proactive assessment, monitor placements and provide intensive support.

Kinship services receive $17,885 per placement compared with $25,181 for general foster care, $37,774 for intensive foster care and $50,362 for complex foster care. This funding gap reduces agencies' ability to maintain manageable caseloads, undertake early risk identification, support complex family relationships and contact arrangements, provide trauma-informed parenting support, facilitate respite, and respond proactively when placements come under pressure. As a result, kinship carers are often expected to manage challenges that would typically attract funded professional support in foster care placements.

Compared with foster carers, kinship carers often have less access to legal information and support services. Research consistently shows that kinship carers experience concerns about legal pathways due to the complexity of court orders and custody arrangements, the costs and length of legal proceedings, uncertainty regarding legal authority and entitlements, and the potential for legal action to increase conflict within families.[18] Despite this, there is little access to legal support for kinship carers.

[15] Carer Census (2021) DFFH Accessed 18 August 2026 https://www.dffh.vic.gov.au/sites/default/files/documents/202109/Carer-census-infographics..pdf

[16] Victorian Ombudsman (2017) *Investigation into the financial support provided to kinship carers,* Accessed 28 July 2026 https://assets.ombudsman.vic.gov.au/assets/Reports/Parliamentary-Reports/1-PDF-Report-Files/Investigation-into-the-financial-support-provided-to-kinship-carers.pdf and Families, Fairness and Housing (2026) *Support for home based carers in Victoria*, Accessed 28 July 2026, https://services.dffh.vic.gov.au/support-carers

[17] Carer Census (2021) DFFH Accessed 18 August 2026 https://www.dffh.vic.gov.au/sites/default/files/documents/202109/Carer-census-infographics..pdf

[18] Boetto, H (2010). 'Kinship care A review of issues'. *Australian Institute of Family Studies,* Accessed 28 July 2026, https://aifs.gov.au/sites/default/files/fm85g_0.pdf

Solution

Victoria can become the best state in Australia to be a kinship carer, by reforming the Kinship Care system to guarantee that every kinship family has access to income security and integrated support from day one.

A Victorian Kinship Care Guarantee that ensures children living with kith and kin receive financial and service support based on their need should include:

1. Increase the foster care and kinship care allowance to fully cover the true costs of caring for a child. This should include reforming Victoria's care allowance framework to better reflect the age and care needs of children and young people and align with NSW.
2. Immediately end automatic Level One care allowance commencement for children in kinship care, consistent with recommendation 20 of the Yoorrook Justice Commission.[19]
3. Prioritise and guarantee access to timely, high-quality assessments including health, disability, cognitive, developmental and educational assessments for children entering care.
4. Ensure that all kinship carers receive wrap-around support including trauma-informed parenting training and support, legal support, peer support, planned and emergency respite, cultural support and mediation to manage familial relationships.
5. Urgently expand access to specialist therapeutic services for children and young people who have experienced maltreatment including physical, sexual or emotional abuse, neglect and exposure to domestic violence.
6. Invest in an Aboriginal model of Kinship care to ensure safe, culturally-connected out-of-home care.[20]
7. Equalise agency funding by providing dedicated per-placement casework funding and flexible brokerage equivalent to general foster care.

Outcome

Children in kinship care will receive financial, therapeutic and practical support according to their assessed needs rather than the type of placement in which they live. Kinship carers will have access to adequate allowances, legal support, respite, parenting assistance, therapeutic services and casework support, reducing financial stress and strengthening their capacity to provide safe, stable and enduring care. Community service organisations and Aboriginal Community Controlled Organisations will be better equipped to identify emerging risks, support family and cultural connections, and intervene early to prevent placement disruption.

Investment rationale

Kinship care is a critical part of Victoria's child and family system, yet funding and support arrangements have not kept pace with the growing role kinship carers play in caring for vulnerable children. A Victorian Kinship Care Guarantee would recognise the real costs and complexity of caring for children who have experienced trauma, abuse and family disruption, while ensuring support is based on children's needs rather than placement type. By strengthening allowances, legal support, therapeutic services and placement support, the reform would improve placement stability, reduce reliance on carers' personal finances and help avoid the significantly higher costs associated with placement breakdown, child protection intervention, homelessness and poor long-term outcomes.

[19] Yoorrook Justice Commission, https://www.yoorrook.org.au/reports-and-recommendations/recommendations

[20] Costings to be confirmed.

Long-term impact

A Victorian Kinship Care Guarantee would create a fairer and more sustainable out-of-home care system in which every child receives the support they need to thrive, regardless of whether they are placed with kith and kin or foster carers. Over time, the reforms would improve placement stability, increase carer retention, strengthen children's connections to family, culture and community, and improve health, wellbeing and educational outcomes. By supporting kinship families earlier and more effectively, Victoria would reduce pressure on child protection, health, housing and justice systems while delivering better long-term outcomes for children, young people and the families who care for them.

Meals for Change.

Commitment sought

An annual investment of $750,000 ($3 million over four years) to sustain and expand Meals for Change as a pilot across Central Highlands, Wimmera and Gippsland for young people aged 15–25 who are experiencing, or are at risk of, social isolation, disengagement, homelessness and other forms of disadvantage.

Problem

Victoria is facing a growing challenge of youth loneliness, social isolation and social disconnection. This has significant consequences for mental health, wellbeing and participation and compounds vulnerability to homelessness, food insecurity and other forms of disadvantage.

More than two in five young Australians feel lonely, making young people the loneliest age group in Australia.[21] More than one in three people living in regional communities' experience loneliness, placing regional young people at particular risk.

Australian research has found that young people who see friends or family less than once a month are three times more likely to experience chronic loneliness, but when young people are experiencing hardship, socialising can become inaccessible.[22] Loneliness is both a cause and consequence of broader vulnerability. Young people facing housing instability, food insecurity, financial hardship, family breakdown, school disengagement, mental health challenges, justice involvement or substance-related harm are at increased risk of becoming disconnected from the relationships, services and opportunities that could support them through these challenges. Research shows that young people experiencing chronic loneliness are more than seven times more likely to experience psychological distress, inhibiting help-seeking behaviours and highlighting the critical role regular social connection plays in preventing disadvantage from becoming entrenched.[23]

Although services exist, many young people delay asking for help until their circumstances have escalated. For example, in the week prior to accessing our homeless services, young people are likely to already be couch surfing, whereas older people are more likely to be in comparatively stable housing.[24]

Traditional service models can be perceived as stigmatising, difficult to access or designed primarily for people already in crisis.[25] As a result, opportunities for prevention and early intervention are often missed.

These challenges are amplified in regional Victoria, where workforce shortages, transport barriers and limited service availability can leave young people isolated and without timely support. For example, people living regionally can wait up to 8 months for specialist mental health support, a delay more than three times longer than the statewide average.[26]

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[21] Lim & Smith (2025). 'More than 2 in 5 young Australians are lonely, our new report shows. This is what could help'. *The Conversation.* Accessed 23 July 2026: https://theconversation.com/more-than-2-in-5-young-australians-are-lonely-our-new-report-shows-this-is-what-could-help-261260

[22] Ending Loneliness Together (2025). *A Call for Connection: Understanding and Addressing Youth Loneliness in Australia*. Accessed 23 July 2026 https://lonelinessawarenessweek.com.au/wp-content/uploads/2025/07/a-call-for-connectionunderstanding-and-addressing-youthloneliness-in-australia.pdf

[23] Lim & Smith (2025). 'More than 40 percent of young Aussies are lonely, as experts call for National Loneliness Strategy'. *University of Sydney.* Accessed 12 August 2026: https://www.sydney.edu.au/news-opinion/news/2025/08/04/more-than-40-percent-of-young-aussies-are-lonely-as-experts-call-for-national-loneliness-strategy.html

[24] Uniting Homeless Entry-Point Service Data

[25] Cooper, Z., Roberts, B. & Landery G., (2025). 'Exploring the perspectives of young adults on mental healthcare and systemic health, education, and social challenges in Australia: a qualitative study'. BMC Health Serv Res. 2025;25(1):1402. Published 2025 Oct 22. doi:10.1186/s12913-025-13580-1

[26] Zhang, Y. and Yang, O. (2025) 'Australians can wait at least 258 days for their first psychiatry appointment, our new study shows', *The Conversation*. Access 23 July 2027: https://theconversation.com/australians-can-wait-at-least-258-days-for-their-first-psychiatry-appointment-our-new-study-shows-248012

Strengthening social connection must therefore be considered a core preventative response, not a secondary outcome.

Consistent with the priorities of Victoria's *Youth Strategy 2022–2027*, there is an opportunity to invest in low-barrier, community-based supports that foster belonging, build trusted relationships and provide pathways to assistance before needs escalate. Such approaches can improve wellbeing, strengthen community participation and reduce demand on more intensive service systems over time.

Solution

Meals for Change is a community-based early intervention program that supports vulnerable young people aged 15–25 who are experiencing, or are at risk of, social isolation, disengagement, homelessness and other forms of disadvantage.

Delivered through partnerships with local cafés and restaurants, the program provides access to affordable, nutritious meals in welcoming community settings. The model addresses food insecurity while creating opportunities for social connection, belonging and early engagement with support services. By engaging young people in café and restaurants, Meals for Change provides a pathway to support that may be more appealing to those who are reluctant to engage with formal services, preventing vulnerability from escalating.

Participants receive a 'Meals for Change Membership' providing access to subsidised meals at participating hospitality venues. Members are encouraged to share meals with a friend, family member or support person, strengthening social networks and reducing isolation. Each café visit creates an opportunity for social connection and community participation in a flexible, real-world setting. The program enables young people, including those who are neurodiverse, to engage in ways that suit their individual needs, supporting more inclusive pathways to connection and belonging.

The program is coordinated by dedicated staff who work closely with participants, referring services and hospitality partners. Through these trusted relationships, young people can be introduced to broader supports, including housing, education, training, employment and wellbeing services. This approach supports earlier identification of emerging needs and enables more timely intervention.

Meals for Change delivers benefits beyond individual participants. Program funding is channelled directly through local cafés and restaurants, supporting small businesses, local employment and regional economic activity. Unlike traditional food relief models, funding remains within the local economy while simultaneously delivering social inclusion outcomes. Participating venues benefit from increased patronage, strengthened community connections and opportunities to contribute to positive social outcomes. This dual-benefit approach strengthens both community wellbeing and local economic resilience.

Outcome

Meals for Change aims to strengthen the protective factors that enable young people to thrive, including food security, social connection, confidence, belonging and engagement with community and support networks.

In the short term, participants will have increased access to affordable, nutritious meals, helping to reduce food insecurity and financial pressure. Program evaluation found improvements in food access reported over time. Participants also identified healthier eating habits and improved food security as significant benefits of participation.

The program will create regular opportunities for positive social interaction, reducing isolation and strengthening connections with friends, family and the broader community. Participants consistently identified the social aspects of the program as highly valuable, frequently describing it as a reason to leave the house, connect with others and participate more actively in community life. Increased confidence, social participation and stronger relationships were among the most reported outcomes.

Through ongoing engagement with program staff, hospitality venues and referral partners, participants will be supported to access broader wellbeing, housing, education, training and employment opportunities. By strengthening recognised protective factors

such as social connectedness, supportive relationships, self-confidence and community participation, the program contributes to improved resilience and wellbeing over time.

Investment rationale

Meals for Change represents a relatively low-cost, preventative investment that delivers social, economic and community benefits.

An investment of $3 million over four years will support program delivery across Central Highlands, Wimmera and Gippsland, enabling more vulnerable young people to access food, social connection and pathways to support.

The program addresses immediate needs while strengthening protective factors associated with improved long-term outcomes for vulnerable young people. Unlike many traditional support models, funding is delivered through local cafés and restaurants, supporting local businesses, employment and regional economic activity while creating opportunities for social connection and early intervention. This dual-impact approach enables government investment to generate both social inclusion outcomes and local economic benefits.

Long-term impact

Over the longer term, Meals for Change aims to improve mental health and wellbeing, strengthen support networks and increase participation in education, training and employment. By fostering belonging, confidence and community connection, the program helps reduce the risk of prolonged isolation, homelessness, social exclusion and other forms of entrenched disadvantage. Through early engagement and strengthened social supports, Meals for Change contributes to better outcomes for vulnerable young people and stronger regional communities.

Ruby’s Reunification Program.

Commitment sought

An annual investment of $1.37 million ($5.48 million over four years) to establish the Ruby's Reunification Program in Ballarat, supporting up to 75 young people and their families each year.

Ruby's is an evidence-informed early intervention model that prevents youth homelessness by addressing family conflict before it escalates into crisis. The program provides therapeutic family support alongside short-term respite accommodation, helping young people remain safely connected to home, school and community.

Problem

Youth homelessness is not simply a housing issue. For many young people, it is driven by relationship breakdown, family violence and a lack of timely therapeutic support. Once disconnected from family, school, community and stable housing, the risks of longer-term disadvantage can escalate quickly.

In 2021, 28,204 young people aged 12 to 24 were experiencing homelessness across Australia, representing 23 per cent of all people experiencing homelessness on Census night.[27]

Among young people aged under 20 who have presented alone to Uniting’s homelessness entry point in Ballarat, family-related issues, including domestic and family violence, relationship or family breakdown, time out from family, and lack of family or community support, accounted for around one-fifth of presentations.

Without timely support, these circumstances can lead to prolonged disconnection from family, education and community. With the right intervention, however, relationships can be repaired, young people can remain connected, and homelessness can be prevented before it becomes entrenched.

Solution

Ruby’s is a targeted early intervention program for young people aged 12 to 17 who are experiencing family conflict or are at risk of homelessness.

The model combines two essential elements:

1. A safe, short-term place to stay. Young people can spend some nights at Ruby’s and some nights at home, where appropriate, creating a circuit breaker from conflict while maintaining family connection.
2. Whole-of-family therapeutic counselling and practical support. Skilled staff work with young people, parents, carers and family members to address conflict, rebuild relationships, strengthen safety and support reunification where it is safe to do so.

Ruby’s is grounded in family therapy, trauma-informed care and strengths-based practice. It also supports young people to remain connected to education, day activities and community life.

Ruby's has operated successfully in South Australia for more than 25 years and has built a strong evidence base demonstrating positive long-term outcomes.

[27] ABS (2023), *Estimating Homelessness: Census,* accessed 22 July 2026 https://www.abs.gov.au/statistics/people/housing/estimating-homelessness-census/latest-release

Outcome

Ruby's delivers earlier support for families, fewer young people entering homelessness and reduced pressure on more intensive service systems.

An independent evaluation of Ruby's in South Australia by the BetterStart Group at the University of Adelaide, found that more than eight in ten young people returned home immediately after engaging with Ruby's.[28] It also found that,

- Almost three-quarters did not experience homelessness or require another homelessness service within two years.
- Participants recorded lower rates of criminal justice involvement.
- Participants experienced fewer alcohol and other drug-related emergency department presentations compared with similar cohorts.

By providing support before family conflict becomes entrenched, Ruby's creates better outcomes for young people while reducing demand on more intensive systems.

Investment rationale

Ruby's is a practical, evidence-based investment in prevention.

Rather than responding after homelessness has occurred, the program intervenes early to address the underlying causes of family breakdown and youth homelessness.

The benefits extend across government portfolios, helping to reduce pressure on:

- Specialist homelessness services
- Crisis accommodation
- Child protection
- Out-of-home care
- Youth justice
- Emergency health services

For young people, the benefits are even more significant: stronger family relationships, improved wellbeing, continued engagement in education and a greater chance of achieving positive long-term outcomes.

An annual investment of $1.37 million ($5.48 million over four years) will deliver lasting social and economic benefits, supporting up to 75 young people and their families every **year** while helping ensure fewer young people enter homelessness and the service systems that often follow.

Long-term impact

Funding Ruby's Ballarat would establish Victoria's first Ruby's Reunification Program and fill a critical gap in the local service system by helping keep young people connected, strengthen families and deliver better outcomes for Ballarat and regional Victoria.

The program will help:

- Prevent homelessness before it occurs.
- Strengthen families and communities.
- Improve outcomes for vulnerable children and young people.
- Reduce demand on costly crisis and statutory services.
- Invest in evidence-based early intervention.

[28] Better Start Group (2026). Accessed 28 July 2026 Better Start Group (2026). *Uniting Communities Ruby's Reunification Program: Long-term outcomes research report.* Accessed 28 July 2026 https://www.flipsnack.com/unitingcommunities/ruby-s-reunification-program-long-term-outcomes-research-report/full-view.html Better Start Group (2026). *Uniting Communities Ruby's Reunification Program: Long-term outcomes research report.* Accessed 28 July 2026 https://www.flipsnack.com/unitingcommunities/ruby-s-reunification-program-long-term-outcomes-research-report/full-view.html

Catalyst Rehabilitation Service.

Commitment sought

An annual investment of $2.8 million ($11.2 million over four years) to fund and establish Uniting's award-winning Catalyst program across four regional Victorian locations – Ballarat, Wimmera, Gippsland and Goulburn – to provide intensive, evidence-based alcohol and other drug (AOD) treatment close to home for people experiencing substance-related harm.

This investment would enable regional Victorians to access a proven community-based rehabilitation model that combines clinical treatment, peer support and practical recovery strategies while allowing participants to remain connected to family, employment, education and community.

Problem

Despite comprising less than one-quarter of Victoria's population, regional communities experience a disproportionately high burden of alcohol and other drug-related harm. Compared with Melbourne, regional Victorians experience 44 per cent higher rates of alcohol and drug-related ambulance attendances, 30 per cent higher rates of emergency department presentations, 75 per cent higher rates of alcohol and drug treatment episodes, and more than six times the rate of serious alcohol and drug-related crashes. Demand for support is also reflected in AOD telephone counselling and referral rates, which are more than three times higher in regional Victoria.[29] However, access to non-residential rehabilitation and structured post-withdrawal treatment remains limited. While 42 per cent of treatment services are located in regional Victoria, many are concentrated in larger inner-regional centres, leaving significant gaps in service availability across outer-regional and rural communities.[30]

Many people who successfully complete withdrawal programs face long waiting periods or must travel considerable distances to access ongoing therapeutic support. In western Victoria, Uniting workers regularly support clients from Ballarat, Horsham and surrounding communities to travel to Melbourne or Geelong for residential rehabilitation. These journeys often occur at a time when people are experiencing heightened anxiety about entering treatment, managing withdrawal symptoms, and leaving behind family, employment and established support networks.

For many people, relocating for treatment is simply not feasible. Caring responsibilities, employment commitments, housing obligations and family circumstances can make residential rehabilitation inaccessible, regardless of an individual's motivation to seek help.

The absence of accessible local treatment options creates a significant gap between withdrawal and longer-term recovery support. Without timely intervention, people experiencing substance dependence are more likely to experience deteriorating physical and mental health, homelessness, family breakdown, justice-system involvement, unemployment and social isolation.

These challenges are particularly acute in regional Victoria, where specialist treatment services are often concentrated in metropolitan centres and workforce shortages can further limit access to care. As a result, many regional Victorians are unable to access the right level of support at the right time, despite being ready and willing to engage in treatment.

[29] Turning Point (2026). *Explore AODStats*, Accessed 24 July 2027, https://www.aodstats.org.au/explore-data/

[30] AIHW (2026). 'Alcohol and other drug treatment services in Australia annual report 2024–25' Accessed 24 July 2026 https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/alcohol-other-drug-treatment-services-australia/contents/state-and-territory-summaries

Solution

Expand the Uniting Catalyst model into Ballarat, Wimmera, Gippsland and Goulburn.

Catalyst is an award-winning, evidence-based, non-residential AOD treatment program that has operated successfully in metropolitan Melbourne for more than 15 years and has supported approximately 3,000 people to make and sustain changes to their substance use.

The model is established, evidence-based and readily scalable, making it well suited to expanding treatment access in regional Victoria where significant service gaps remain.

The program provides five to six weeks of intensive, structured support following withdrawal, delivered through:

- Cognitive Behavioural Therapy (CBT) and Motivational Enhancement Therapy (MET).
- Group-based therapeutic interventions.
- Individual counselling and treatment planning.
- Peer support workers with lived experience.
- Family and social support.
- Relapse prevention and recovery planning.
- Wellbeing activities including mindfulness, nutrition, exercise and art therapy.
- Ongoing alumni and aftercare support.

Catalyst's non-residential model allows participants to maintain family responsibilities, employment and community connections while receiving a level of structured support often only available through residential rehabilitation.

Outcome

Funding Catalyst across four regional Victorian locations would deliver:

- Increased access to specialist AOD treatment for regional communities.
- Reduced waiting times for people seeking post-withdrawal rehabilitation support.
- Improved physical and mental health outcomes.
- Greater employment and education participation.
- Stronger family functioning and parenting capacity.
- Reduced demand on emergency health, homelessness and justice services.
- Enhanced recovery outcomes through local community-based support.

Catalyst has a long track record of delivering positive outcomes for people experiencing alcohol and other drug harms. Participants report improvements in housing stability, family relationships, emotional regulation, confidence, community participation and long-term recovery.

Participants who were parents also experienced increased household stability and improved outcomes for children, including reduced exposure to substance use and improved school engagement.

Investment rationale

Catalyst represents a high-value investment that delivers measurable social and economic benefits.

An annual investment of $2.8 million ($11.2 million over four years) will enable the establishment of the service in four regional locations.

Independent economic analysis found that every dollar invested in Catalyst generates an estimated $3.15 in social and economic value, through improved wellbeing, increased workforce participation and reduced demand on government-funded services.

The model is already proven, operational and scalable. Rather than developing a new service, government investment would expand an established Victorian program with more than 15 years of experience supporting people to achieve and sustain recovery from alcohol and other drug use.

The proposal aligns with Victorian Government priorities relating to:

- Prevention and early intervention.
- Mental health and wellbeing.
- Family violence prevention.
- Regional health equity.
- Community safety.
- Workforce participation and economic inclusion.

Catalyst also addresses a recognised national treatment gap, with hundreds of thousands of Australians estimated to miss out on alcohol and other drug treatment each year. Expanding regional capacity is essential to meeting community demand and reducing long-term public expenditure associated with untreated substance dependence.

By funding Catalyst in Ballarat, Wimmera, Gippsland and Goulburn, government can deliver a practical and evidence-based response that strengthens regional service systems while producing significant return on investment.

Long term impact

A regional Catalyst network would create a sustainable and equitable rehabilitation pathway for regional Victorians experiencing alcohol and other drug harm, ensuring access to intensive treatment regardless of postcode.

Over time, the expansion would:

- Improve health and wellbeing outcomes across regional communities.
- Reduce intergenerational disadvantage associated with substance dependence.
- Increase community participation and workforce engagement.
- Strengthen family stability and child wellbeing.
- Reduce pressure on hospitals, homelessness services, police and courts.
- Build local peer-workforce capability and lived-experience leadership.
- Establish a consistent, evidence-based rehabilitation model across regional Victoria.

Catalyst changes lives because it combines structure, accountability, connection and hope. Participants consistently report rebuilding relationships, securing stable housing, finding employment, reconnecting with their children and developing the tools needed to sustain recovery.

Funding Catalyst across Ballarat, Wimmera, Gippsland and Goulburn would ensure more regional Victorians can access the right support at the right time, creating healthier individuals, stronger families and more resilient communities across Victoria.