Community Conversations:

Aboriginal and Torres Strait Islander Social and Emotional Wellbeing

Mental Health NGO Commissioning

ACT Government

Acknowledgement of Country

The Health and Community Services Directorate acknowledges the Ngunnawal people as traditional custodians of the ACT and recognises any other people or families with connection to the lands of the ACT and region.

We respect the Aboriginal and Torres Strait Islander people, particularly our Aboriginal and Torres Strait Islander staff, and their continuing culture and contribution they make to the Canberra region and the life of our city.

Produced by the Health and Community Services Directorate. Enquiries about this publication should be directed to the Health and Community Services Directorate.

GPO Box 158, Canberra City 2601
act.gov.au
Telephone: Access Canberra – 13 22 81

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What is this document?

There is $1.1 million available annually from 1 July 2027 for the delivery of a specific mental health service for Aboriginal and Torres Strait Islander people, to be delivered by an Aboriginal Community Controlled Organisation as part of the Aboriginal and Torres Strait Islander Social and Emotional Wellbeing stream of Mental Health NGO Commissioning.

This paper provides an explanation of the process to commission this service, the relevant background information and clearly articulates the next steps for our conversations.

This paper has been prepared so that community members, organisations, and government stakeholders all have the same context and information prior to the grant process commencing.

Following conversations based on this paper, a listening report will be developed which will be provided as additional material for the grants process. It should help give context to applicants who are seeking to apply for the grant, as well as inform the decision-making panel on what community has said they want and need.

Community Conversations

Purpose of Community Conversations

The Community Conversations are a place for people to express their input and thoughts on the design of an adult NGO mental health service for Aboriginal and Torres Strait Islander people.

We are looking for any feedback that might help or support the applicants and/or the grant panel to make informed choices about the needs of community, as well as anything that is so strongly agreed it becomes a grant requirement. There are some requirements that must be met for a service to be deemed successful for the available funding, however there is a broad range of feedback that will be provided both to applicants for informing their proposals and the panel to guide their decision making.

What is already decided

- Up to $1.1 million in annual funding is available;
- A contract will be signed to commence in the second half of 2027, with a transition into the establishment and delivery of the service;
- The service will be required to:
    - Have a focus on adults;
    - Provide mental health specific service(s);
    - Maintain a Social and Emotional Wellbeing (SEWB) model; and
    - Be provided by an Aboriginal Community Controlled Organisation (ACCO) or Aboriginal Community Controlled Health Organisation (ACCHO).

Where community can provide insight

We have included several questions as a starting point for conversations. However, we are also happy to receive any other feedback or information to help us define the next steps. These questions largely pertain to:

- Potential service model considerations;
- Workforce needs;
- Governance approach;
- Partnerships with other services, community, and government;
- Outcomes and reporting;
- Benefits of a single or multiple providers.

Following conversations and consultations based on this paper, a Listening Report will be developed which will be provided as additional material for the grants process. It should help give context to applicants who are seeking to apply for the grant, as well as inform the decision-making panel on what community has said they want and need.

Who can participate

We want to hear from anyone who is interested in participating or providing information. This includes individuals, groups, networks, services and organisations (those new to the ACT, those with connection to Community, and those who may already be delivering services), and anyone who would like to represent their community.

How to participate

To give everyone an equal opportunity to have a say on what is needed, or share their thoughts on the approach, there are different ways to be part of the conversation.

- Public forum in-person – details pending
- Public online forum – after business hours – details pending
- Written feedback to this paper, or general input
- Conversations organised with the team, or team presentations at established groups and meetings

To organise a conversation or provide written feedback please email the team at MentalHealthCommissioning@act.gov.au. For details regarding the forums, updates will be released shortly on the Mental Health Commissioning Website available here: Mental Health - Commissioning.

Questions for Conversations

- Should this funding be given to a single provider or would there be benefit in splitting the funding across a few smaller programs? – consider points on pages 6-7
- Which of the 'key considerations for service design' on page 6-7 are the most important to community right now, noting the requirements and available funding?
- Are there any 'key considerations for service design' that haven't been captured in this document?
- Aligned to SEWB, what outcomes are best placed to support mental health? – information on page 5
- Should a service focus on meeting any particular need or should they be general in nature to support as much of the community as possible? – consider points on page 6-7
- How could government best partner with an organisation for the delivery of this type of service?
- Is a flexible model for application for the grant useful for applying ACCOs? Are there other ways we can support the application process or address barriers to applying? – details provided on pages 10-11

What is Commissioning?

The ACT Government funds a range of community organisations to provide mental health support. Over time, community needs change, and commissioning helps ensure funding is directed to services that best meet those needs.

Since many of the mental health NGO services were originally funded by the Health and Community Services Directorate (HCSD), the needs of the Canberra community have changed. To ensure funding for NGOs can continue to support the wellbeing of all Canberrans effectively and efficiently, HCSD has worked in collaboration with the mental health sector, community and people with lived experience to identify commissioning priorities.

The Strategic Investment Plan (SIP) was developed through research, consultation, and an analysis of currently funded services, and acknowledges work occurring outside of the Mental Health NGO Commissioning Process that will influence the sector. Through consultations, a number of grant streams were identified as priorities for funding, which are outlined in detail in the SIP.

The funding streams, totalling $13.8 million (2025-26), are allocated to:

1. Child, Youth, and Families – $2.7 million
2. Adults, Older People, and Complex and Ongoing Needs – $3.5 million
3. Residential Community Supports – $6.2 million
4. Aboriginal and Torres Strait Islander SEWB – $1.1 million
5. Individual Advocacy – $0.2 million

A Sector Development Fund will also be created to support service innovation and sector-wide capacity building to the funded services – $0.2 million.

The Aboriginal and Torres Strait Islander Social and Emotional Wellbeing Commissioning Stream

Aboriginal and Torres Strait Islander communities face increased mental health risks due to intergenerational trauma and the ongoing impacts of colonisation, including social and economic disadvantages, racism, and discrimination. As outlined in the *ACT Aboriginal and Torres Strait Islander Agreement 2019-2028* and the *National Agreement on Closing the Gap*, the ACT Government is committed to ensuring that Aboriginal and Torres Strait Islander people experience equity in health and wellbeing outcomes.

Through the SIP $1.1 million has been allocated from HCSD's NGO commissioning budget to establish dedicated mental health services for Aboriginal and Torres Strait Islander adults. To deliver this funding, a grant process must be conducted to identify a provider.

The successful provider will work closely with HCSD to support the development and delivery of the program. For this reason, the grant requirements will not be prescriptive to allow community to engage with their own innovation to meet the outcomes of service delivery.

There are a number of specifications that will be required for the identified service, as defined in the SIP. These are that the service or services must:

- Have a focus on adults;
- Provide mental health specific service(s);
- Maintain a SEWB model; and
- Be provided by an ACCO or ACCHO.

This funding has been allocated to fund a service or services with a 5-year contract with a possibility to extend for a further 2 years.

This Commissioning process provides an opportunity to engage more closely with community, provide specific funding and work towards meeting the ACT Government's commitments under Closing the Gap[i]. This work will support Priority Reform Two: Building the community-controlled sector, which will help to support a strong and sustainable Aboriginal and Torres Strait Islander community-controlled sector, delivering high quality services to meet the needs of Aboriginal and Torres Strait Islander people in the ACT.

Commissioning for Outcomes

The SIP identifies that commissioning will occur for services across a full spectrum of needs. This spectrum includes a focus on Prevention and Promotion, Early Intervention, Community Connection and Supports and Community Residentials Supports, as highlighted in Figure 1

The Aboriginal and Torres Strait Islander stream which can consist of services across this spectrum, as best determined by the community.

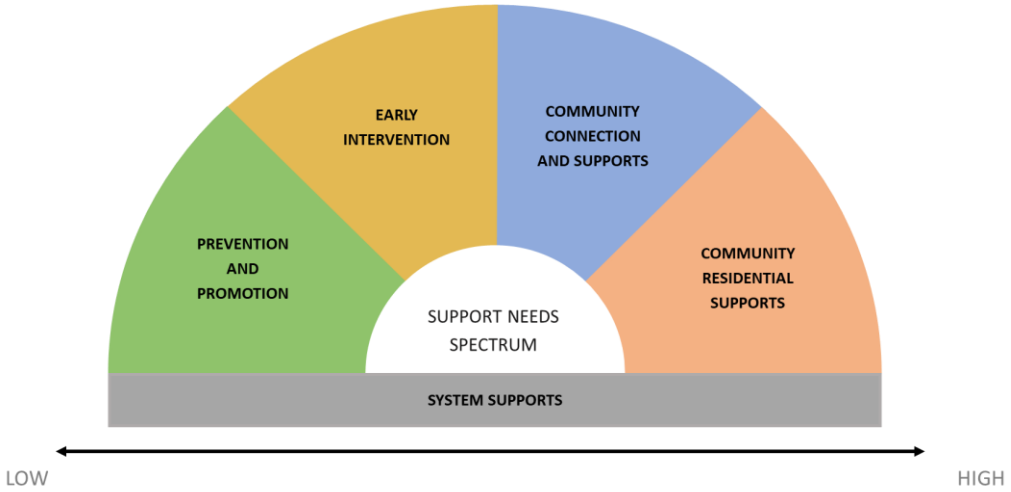

Figure 1: Commissioning Support Needs Spectrum

To ensure that commissioned services meet the needs of the ACT community and contribute towards an outcomes-based integrated, supportive and person-centred service system, the below Commissioning Outcomes Framework in Figure 2 was developed.

This Framework allows services to determine their own activities, measures and indicators, and define how they contribute to outcomes in the Personal Domain for clients and Service Domain for NGOs themselves.

Vision	The big picture, aspirational statement that describes what government wants to achieve for the community.
Domain	Provides a logical structure for grouping related outcomes.
Outcome	Articulates what success looks like and reflects the ambition for the reformed mental health and wellbeing system.
Indicator	The changes that need to happen to achieve a desired outcome. Indicators reflect the key drivers and influences on progress towards an outcome.
Measure	Provides granular specific detail about how to measure an indicator. Measures are the detail about how progress will be tracked.

Figure 2: Commissioning Outcomes Framework Definitions

Details about how Outcomes and Domains will be applied to the broader Mental Health NGO Sector can be found in the SIP[ii].

It is acknowledged that there are Aboriginal and Torres Strait Islander specific measures, indicators and outcomes that will need to be considered through, or developed in, the Aboriginal and Torres Strait Islander grants stream consultation and process. These may either be separate to those identified in the SIP, or complementary, depending on community perspectives.

An example of outcomes to consider are the Core Services and Outcomes Framework, developed by the National Aboriginal Community Controlled Health Organisation (NACCHO)[iii]. NACCHO developed this model to identify what community controlled comprehensive principles care offers and why it matters for advancing health and wellbeing of Aboriginal and Torres Strait Islander peoples. Outcomes will be further detailed in Phase 2 of NACCHO's project and have not yet been released. Discussion with community and successful providers will identify how these align.

Figure 3: Core Services and Outcomes Framework Model – National Aboriginal Community Controlled Health Organisation

Social and Emotional Wellbeing

SEWB is a Framework established under the community endorsed guiding national document of the National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing (2017[iv]).

The SEWB of individuals and communities is underpinned by nine principles, which align with the National Aboriginal Health Strategy (1989) and are the foundation of culturally safe and supported services. A visual of this is available below at Figure 4. These principles are considered as key outcomes for a mental health service to be considered under this service.

While this commissioning stream has a focus on mental health, the broader domains of SEWB will also inform decision making. SEWB will be a critical element for the ACCOs applying for funding to support, to ensure that their services are meeting the holistic needs of their consumers.

Figure 4: Diagram of SEWB Model[v]

Key considerations for service design

To design, fund and implement a mental health service that meets the needs and expectations of the ACT Aboriginal and Torres Strait Islander community, we need to consider the research, evidence and feedback that the community has provided to government previously. These considerations may not be possible within the current grant process due to funding and scope limitations, however consideration of these findings could still help to inform broader conversations regarding the services or models that could be commissioned in this grant process. These considerations include, but are not limited to, the following:

- Put "Aboriginal health in Aboriginal hands"[vi], services should be ACCO led [vii] , [viii].
- Cultural identity should be acknowledged as part of integrated care for improvements in health to occur[ix] and culturally specific support should be given[x], [xi],This includes connection to family, carers, and kin.
- Worker self-care and lived experience are vital to service delivery[xii] to ensure a healthy and considered model, capacity building over the length of a career is essential[xiii] for staff development to ensure safety for both worker and staff.
- A central location based on access and community need ensures a culturally safe and respectful place, that may include a purpose-built premise[xiv]. Outreach and geographically accessible services also support access.
- A single provider would provide a single point of contact for support and be expected to have less of an administrative overhead.
- Providing the funding across multiple providers could support a consortium of organisations to coordinate services, spread knowledge, provide multidisciplinary care and give choice for consumers. Multiple providers would likely result in less funding to be available for 'direct' service delivery for consumers.
- Fund an adult mental health service[xv], looking at social and cultural determinants[xvi].
- Good governance with transparency is fundamental to success[xvii].
- Skills transfer between services and research partnerships brings about meaningful change[xviii], creating continuous quality improvement and growth.
- Evidence based practice includes cultural evidence. The experience of Aboriginal and Torres Strait Islander people is core to understanding and delivering of support[xix].
- Criteria for services are often limiting and reduces choice, or service stability for individuals. Reducing unnecessary eligibility restrictions may support continuity of care and stronger therapeutic relationships.
- Consider what Government can do in a partnership to support the priority reforms and principles of both *ACT Aboriginal and Torres Strait Islander Agreement 2019-2028* and under the *National Agreement on Closing the Gap.*

The Grant Opportunity and Process

The Grant

The Grant Requirements will be released in late 2026 and will be accompanied by a sector briefing for all interested ACCOs to review the grant and ask any questions. The Grant Requirements will outline the aims and timeline of the grant process, requirements for funding, and the criteria that applications will be assessed.

The specific details of the Grant Requirements will be informed by the feedback received during this consultation process, to ensure that community needs and feedback are reflected through the commissioning process. This Community Conversations document and the Listening Report will be provided as an attachment to the Grant Requirements to ensure that ACCOs can see what community is asking for and to inform their applications, as well as to support the grant panel in their decision making.

Who can apply

While the grant will be done through an open grant process, applicants must be an ACCO. It will be a competitive process where a panel will be comparing applications against the needs of the community, and other applications.

ACCOs that apply can be established, developing or new ACCOs. ACCOs do not need to be currently providing services in the ACT, although to be successful, applications will need to demonstrate how they will connect with and support the ACT Aboriginal and Torres Strait Islander community. ACCOs do not need to have previous experience providing mental health specific services, although to be successful they will have to demonstrate how their services will achieve mental health outcomes and a demonstrated connection to the ACT Aboriginal and Torres Strait Islander Community.

Through this process there is opportunity for joint or consortia approaches between ACCOs, or for ACCOs who have a partnership with a mainstream service. Any applications that present a partnership approach will have to demonstrate the leadership and ability to transition to ACCO owned.

ACCOs who may already be providing mental health services within the ACT are welcome to apply, however applications will have to establish new specialised mental health programs or services for the ACCO, rather than funding elements of a current service.

Options for how to apply

HCSD understands that standard funding processes can often create barriers to applications and can impose processes that may not align with Aboriginal Community Controlled ways of working.

As such, we are excited to hear your thoughts on any concepts or ways that we could make this grants process simpler for applying ACCOs to ensure that we can fund the best service for the community.

Following the grants process and panel assessment, a service or services will be identified and contract negotiations will occur.

The contract, and funding, for the new service(s) to begin in the second half of 2027. The selected provider(s) will be able to work with HCSD and community in order to scale up their services and begin providing support on a date agreed to once operations have been commenced. This may look different, but may include a soft opening or partial service delivery while they finalise staffing, or service commencing once they locate a physical space that meets their needs. This could be a staged transition into service to meet community, as well as workforce needs. It is likely that this transition into service will be for up to a year, with services continuing to develop over the life of the contract. The contract(s) will be for 5 years, with a possibility to extend up to a total of 7. For services after this period, a conversation with community will occur to reestablish and consider need.

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