COUNCIL OF SINGLE MOTHERS AND THEIR CHILDREN VICTORIA INC

Reforms to Human Services

A response to the Productivity Commission Issues Paper December 2016

Dear Commissioners

The Council of Single Mothers and their Children Victoria (CSMC) is a member based community organisation that has worked for 47 years to improve the lives of single mother families in Victoria and through collaboration with the National Council of Single Mothers and their Children, across Australia.

Women become single mothers for many reasons including domestic violence, marital breakdown, the death of a husband or partner or an unexpected or a planned pregnancy. While the media would have us believe the majority are lazy, drug using teenage mothers, the reality is very different with the majority of current single mothers having given birth in what they thought was a stable relationship. Evidence from a range of sources [HILDA, Save the Children State of Mothers 2016 etc.] demonstrate that it is the poverty and low economic status of single mothers that creates the disadvantage for them and their children, not the fact they are parenting alone. Evidence also clearly demonstrates that significant numbers of fathers are not paying reasonable child support; most employers do not offer flexible work options; and quality childcare is unaffordable often even for two parent families. Thus, single mothers are struggle between many rocks and hard places to raise their children well despite much social opprobrium and moral judgement.

CSMC believes it is important to Australia's future to ensure that all children, regardless of their parent's circumstances, have a fair start in life. Evidence from every country in the world demonstrates that the conditions under which women are able to raise their children are critical to the life outcomes for each child and thus, to the social and economic outcomes for the country.

The 2016 Boyer lectures highlighted the work of Sir Michael Marmot and the relationship of social health determinants to the continuing well-being of the country. While Australia still rates well in global scales, Marmot points to growing inequalities that will affect the health of

citizens and thereby, our economy. He contends that remedies include "greater equity of power, money and resources".[i] Recent research from the OECD supports an emerging consensus that "addressing high and growing inequality is critical to promote strong and sustained growth".[ii] CSMC notes this work because most human services deal in the social determinants of health and whatever their circumstances, almost every single mother regularly interacts with some of the human services currently under consideration by the Commission. With equal regularity, single mothers find intelligent, respectful provision of information and support to put that information into effect a rare commodity. More common are experiences of disrespect and assumptions about them, their parenting and their capabilities.

CSMC is keen to see human services reformed. We are concerned however that the basis of this reform appears to be limited to assumptions about the value of user choice, competition and contestability. Our capacity to comment on all the areas raised in the Issues Paper is limited and thus, in the following submission, we comment on the values we believe need to underpin all human services, make some over-arching comments and where we can, address questions raised.

Regards

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10 February 2017

Reforms to Human Services - Overarching Comments

Jann is an energetic woman in her late thirties, mother to three boys. Her former husband beat her for years and hospitalized her several times despite police interventions and court orders. She left him 4 years ago when he first hit their eldest son. She desperately wants to work but due to damage to her face from the beatings and the impacts of years of poverty on her teeth, she is so self-conscious she finds it hard to be in public and increasingly finds potential employers unable to look at her. She needs major dental work but public dental services have to date, been unable to co-ordinate the specialist work she needs with subsidised travel and accommodation and respite care for her boys.

CSMC notes the ACOSS press release of 5 December 2016[iii], which articulates concerns we share, particularly the need to base reforms to human services in a broader analysis of current barriers to improving access and service quality for people. Such an analysis might better articulate the key questions to ask which in CSMC's view are:

- How can reforms to human services better achieve an Australia whose people are all able to achieve health and well-being?
- How can we achieve a holistic network of services across health, education, transport, employment, housing that maximize effectiveness and minimise duplication and waste?
- How can we ensure quality, affordable services that improve people's lives and equitable access to these for people regardless of means or geographic location?

We note the Commission's objectives of human services provision (pg. 3) and **strongly agree with the conclusion that services can provide and promote social capital.**

The phrase that "competition, contestability and user choice are **tools** (our emphasis) to achieve … improving outcomes by putting users at the heart of service delivery" (pg. 2) is an important qualifier that is unfortunately, overcome by a focus on the tools rather than the challenge of how to put users at the heart of service delivery. Nevertheless, we welcome the broad summary of the Commission's task "to develop reform options that would improve the effectiveness of human services and help ensure all Australians can access timely, affordable and high quality services" (pg.4) and we consider the questions we pose above are compatible with this intention.

CSMC's experience does not accord with the apparent contention in the paper that competition and user choice in identified service areas will improve them. Our members experience of job networks highlight the limited benefits and many negative consequences for single mothers required to engage with a job provider and we use these to highlight our concerns that job networks present a disturbing example of the potential impacts greater competition and contestability in human services will have on single mothers. We contend the privatised job provider system is neither sufficiently proactive nor individualised to make

a positive difference to the job seeking efforts of many single mothers.

Single mother stories tell us it is more a numbers game for providers than a serious policy intervention directed to and measured against the broad social impacts the government has indicated it desires. The option of 'user choice' is in our view, almost completely negated by uniform approaches taken by many providers. Given transport costs and time factors, single mothers who hear of a better provider are frequently unable to exercise any choice to transfer. We also query the ethical behaviour of some providers in this competitive and contested environment and believe government stewardship and oversight is lacking.

Margery *has, over ten years, received the Parenting Payment Single and then the Carers Payment when she looked after her elderly parents in addition to sole parenting. With the death of one parent and the entry of the other into a nursing home, Margery is now on Newstart and working with a job provider to meet her 'mutual obligation' requirements. Margery lacks confidence in her ability to return to the workforce without substantial retraining. Her job provider has no funds available for either training or additional aids such as new glasses. Margery is a qualified librarian and volunteers at a hospital providing information to patients and visitors. Her work is valued but does not provide computer and database skills. As a single parent without independent transport, Margery has limited ability to take a full time job or shift work.*

Margery is an ethical person, and unhappy with suggestions from job providers that she:

- *Apply for jobs she knows she will not get to buy time until she is 55.*
- *Lie about previous education levels in order to be eligible for government supported certificate level courses the costs of which she would be required to repay if the truth emerged.*
- *Apply for 20 jobs a month from the phonebook. She sees this as a 'tick and flick' exercise where she arrives with her list of 20 jobs per month and the agency worker ticks it off, having met the quota.*

Margery, like many who contact us, struggles with the patronising attitudes of younger workers in the job agency and the constant churn of workers, to whom she must endlessly repeat her story.

Kate *is a young mother on Newstart. She has a medical exemption detailing the work she cannot safely accept. She has had three job providers in the last two years, dealt with numerous workers, and found only one who was genuinely helpful. Providers asked Kate to do things she knew was not capable of doing and breached the medical exemption. This includes being told to take full-time jobs that her health and medical exemption prevent her (and exempt her) from doing. Kate attended courses and met the system requirements. Never matched to a job, Kate recently found work through her own efforts.*

CSMC contends that without guaranteed government business and support, the great

majority of job providers could not survive in any truly competitive market. We are not encouraged by available evaluations of their performance. [iv]

With 63% of single mothers receiving government benefits as their primary income, CSMC expects the government to provide better stewardship in relation to both outcomes and provider behaviour. We find instead that the government largely defends its provider network and attacks single mothers who are not working.

We trust the Inquiry will consider the lessons of the job provider network and seriously question whether competition, contestability and user choice are the appropriate foundations for reforming human services.

Questions posed in the Issues Paper

Characteristics of human services

We note the reservation that 'a key consideration will be whether reform can be introduced cost effectively' (pg.5). Those who do not want to make real changes often argue this rider. We ask the inquiry in this and following sections, to consider the long term costs, including building social capital and individual capability, in determining whether human service delivery can be genuinely reformed to achieve the best possible outcomes as opposed to restructured to meet the needs of the current government and providers.

We list below additional characteristics for the inquiry to consider.

Service Users

- We encourage a broader involvement of users that includes:
  - Co-design methodologies that engage users in service delivery design and measures for monitoring and evaluation. Evaluations of successful co-design projects show not only effective utilisation of services, but 'life-changing experiences' for participants.[v]
  - Peer employment strategies that systematically enable users to transfer through training and voluntary roles to be fully employed assisting people with like experiences. Developing peer workforces has been used extensively in women's health; HIV/AIDS education, support and research; mental health; and Aboriginal and Torres Strait Islander community services. In Aboriginal Community Controlled Health for example, a long-term view supported by bodies such as the Australian Indigenous Doctors Association and the Medical Deans of Australia and New Zealand, has seen growth in the numbers of Indigenous Doctors from 90 in 2004 with 102 Indigenous medical students to 204 doctors in 2014 and 310 medical students.
- User-oriented information should not be limited to price and quality but should include description of model of service and user reviews that are not mediated by the system. Patient Opinion[vi] for example, is an independent service that both enables user stories and influences service improvement by facilitating the services hearing and responding to user voices.

- User oriented information should also include provider records of accomplishment and failure that are independently sourced as opposed to provider marketing.
- Clear information about how to change providers, any overt and hidden costs, and an onus on service providers to make it easy for users to change without penalty.

Service providers

Our key recommendation here is that the inquiry look at the value of collaboration and cooperation between service providers to:

- Ensure a range of models of delivery
- Provide excellence in achieving quality referrals and outcomes
- Provide innovative solutions to challenges in service delivery particularly in rural and remote areas and where the complex issues faced by people are more than a single service can address
- Contribute to the broader social goals so they have real skin in the game that goes beyond achieving targets and successful tenders.

Stewardship

In addition to the points the paper notes and our longer piece on this below, we recommend:

- Stewardship in human services requires longer term views and transparent future goals
- All government Ministers need to be bound to treat service users respectfully in all interactions including in parliamentary speeches, media presentations, Senate Estimates and other forums. Derogatory comments about citizens and service users only increase vulnerability and usually lead to service providers adopting similar negative attitudes.
- Not only setting clear objectives and outcomes but also making sure these consider evidence and user input, relate to longer term goals, and are enabling rather than punitive in nature.

User choice

Genuine user choice, where there are alternate models of provision and it is easy to choose and move, may promote some or many of the improvements sought. We are not convinced however that this is the case and will argue that deeper involvement of community members and service users is required at all service levels from concept to close.

Many current service users are dealing with multiple stressors including financial, health, parenting, poor housing and so on. In these circumstances, choice can become a burden, not dissimilar to that experienced by elderly people or stressed parents in the supermarket, where a shelf of 20 different versions of the same thing is simply too much. We cite the job provider network as an area where single mothers report choice is not real due to replication of similar models and requirements, or greater costs in time and travel to reach the alternative. Aged

care is another area where despite extensive research of the available options, older single mothers caring for elderly parents report only variations on the theme.

We contend, therefore, that user choice is not the primary consideration. Community and current, past and potential user involvement in service design, implementation, monitoring and evaluation is far more important. Ask old people what they want in aged care and the answers tend to be very different to those from providers. Ask single mothers what kinds of information, referrals, training and support will help them get jobs and the answer will begin with having flexible work options that enable school drop off and pick up and care for sick children. They will then talk about wanting respectful relations with job network providers and investment in social capital that enables them to receive training for the kinds of work that will enable them to sustain their children to adulthood and themselves into old age. When users co-design services with funders and providers, the questions of choice will resolve themselves more readily.

Competition and Contestability

Service improvement

A link on the website of the Department of Social Services (DSS), last updated in June 2014, highlights the value of collaboration including that:

> *Collaboration occurs on a continuum, starting from informal co-operation to coordination and through to integration. Collaboration means that local services are better planned with fewer gaps, there is less duplication, referral systems are stronger, limited resources are shared and complex social problems are approached in a unified way. Although collaboration can be resource intensive to begin with, efficiencies can develop over time.*[vii]

The site goes on to outline ways human services can work collaboratively. These include networking, joint planning, service coordination, referrals, and integration (e.g. through Memorandums of Understanding). Current DSS advice for successful grant funding applications continue the theme of collaboration suggesting:

- *Details of existing links or existing relationships in the target group/s or community.*
- *Capability to involve the target group/s or community in the development and delivery of the activity.*
- *Strategies for development or coordination of local networks of service providers.*
- *Client referral to specialised services (internal or external) where required, to enhance overall client outcomes.*
- *A commitment to collaborate with other organisations where there are shared interests and opportunities, such as reducing sector fragmentation, reducing duplicative efforts and/or improving coordination.*[viii]

We note that the Issues Paper states that:

Competition and contestability are not ends in themselves, and should only be introduced where they are likely to lead to more effective service provision. [ix]

We further note that several participants have indicated that 'previous reforms to introduce competition and contestability in services such as vocational education and training (VET), job services and homelessness services have not always improved the effectiveness of service provision'. We agree they have not and add (discussed further below) that in our view, a failure of government stewardship has contributed to this.

CSMC strongly requests that the Commission consider our evaluation that lived experience has not demonstrated that competition and contestability will improve services for users, particularly those who are socially and economically vulnerable.

CSMC does not encourage reforms based on competition and contestability. We take the view that human services are about building both individual and social well-being and enabling strong foundations for growth through careful planning, investment and maintenance so that Australians can move forward together.

Over time and under the mantra of making Australia competitive and reducing our burdens, our members have, for example, seen Centrelink become more critical and punitive rather than more welcoming and enabling. We are not suggesting in saying this that there should not be rigorous guidelines, or that welfare as an example of a human service should become an easy ride. Rather, that many of its current manifestations frequently have a marked and negative impact on service users, increase their suffering and vulnerability, and thus entrench dependency.[x] Those Centrelink staff working hard to enable and assist users such as the Social Workers who regularly refer single mothers to our service are doing the best they can do in a system that often supports neither them nor their customers.

CSMC recommends premising any reforms, and therefore evaluations, on principles that:

- **Build both individual and social well-being**
- **Enable strong foundations for growth through careful planning, investment, integration and maintenance, and**
- **Ensure that Australians move forward together toward no child living in poverty and opportunities for all to maximize their contribution to the national well-being.**

KPMG comments in respect to reforming human services that: *The path to regulatory reform is not easy and requires achieving and sustaining a significant cultural change across the public sector.* [xi] We add that genuine reform requires significant cultural change in both government and the community sector to meet the principle goals we have suggested. In line with this, we recommend the Commission consider the paper by David Tennant, CEO of the Jesuit Social Services[xii].

Suggested 'reforms to support competition and contestability' including user oriented information miss the mark. Community need and service users must be at the centre of any reform, not an afterthought.

As our concerns about Job Providers highlight, choice is a manufactured rather than real option where the prevailing model is unsatisfactory and consumers are less able to have their ethical and other concerns dealt with than they would as a customer of an ordinary business who could make a complaint to Consumer Affairs.

CSMC prefers to see reforms supporting the principles and goals we have suggested including:

- Mapping needs and service as part of a national and comprehensive analysis of service needs and availability as the basis for calculating a new, evidence-based funding formula for community services.
- Greater involvement by service users and providers in the design of service purposes, implementation, outcome and performance frameworks, monitoring and evaluation.

Government stewardship

While definitions exist, we agree with Phillip Hamilton that stewardship is largely, at this stage, an inkblot interpreted differently by every person who looks at it.[xiii]

CSMC members have experienced over 40 years of negative comments from the media and members of government, including Ministers responsible for the human services concerned, that are so incorrect and such inflammatory accusations and descriptions that they have the effect of vilifying single mothers.

'Governments, in the race to be the 'best economic manager' make decisions from an economic rationalist point of view, and in doing so lose all humanity and compassion. Saying they are "good economic managers" is rhetoric governments of both persuasions bang on about all the time. The real challenge in being a good economic manager is implementing socially responsible policy that is passionate and well managed.'[xiv]

Examples of poor government stewardship include the constant restructuring of public health services imposed from the top, frequently against evidence and often resulting in lowered morale of health care workers[xv]. We also regularly see this in family and community services where a change of government can mean loss of funding on scant grounds with services such as Aboriginal health, legal support, housing and drug and alcohol counselling so threatened they lose workers and organisational knowledge. The 2013 dis-establishment of national health bodies involved a massive waste of resources without a structured and valuable transfer of knowledge.

CSMC contends that good government stewardship involves a bi-partisan longer-term vision, achievable and measurable goals, involvement of community and providers from planning to evaluations, and a commitment to continuity where evaluations and evidence support the value of the human service. Further:

- We contend that genuine engagement of community and users in planning, monitoring and evaluation is a more effective measure of providing 'skin in the game' than user co-payments.
- Peer employment models and participatory research will enable far more effective reporting on social capital and other community benefits as these will facilitate and increase tangible benefits. Remote area Aboriginal services have long pointed to the irony of roles such as Government Business Managers [GBM's][xvi] who are usually non-Indigenous, outsiders to the communities they are supposed to serve and far better paid than any local Indigenous worker. Far from their effectively facilitating government business, women in the Tiwi Islands counted 108 requests for information from various Government departments within a four-week period. (Communication with Red Cross worker 2011). The group of women Elders proposed support for an information officer role within their community to provide the liaison that was refused because the women – in their own time, with no recompense or recognition – were effectively keeping GBM's informed. Australia has had considerable success in building Indigenous health through Aboriginal Community Controlled Health Organisations, and peer employment, support and monitoring strategies were used to great effect in Australia's world leading response to HIV/AIDS. ***Single mothers are a group who would keenly participate in planning, implementing and reviewing services key to the lives of themselves and their children***.
- In relation to participatory evaluations, AusAID funding in the Pacific has invested a great deal over time in developing competence in 'theory of change' and participatory design, monitoring and evaluation through such models as partner-forums and key informants. Whilst these approaches are not without challenges, World Bank research into their value for both donor/investor stakeholders and affected communities[xvii] continues and in our view, could be part of a model of genuinely reforming human services in Australia.
- Citizen juries, used in planning, testing needs, responses and effectiveness are a model employed by such notable health economists as the late Gavin Moody. Along with other participatory methodologies, these would align well with positive proposals in the family and community services section of the Issues Paper including longer-term government contracts with service providers, more time for organisations to develop funding proposals to enable more collaborative approaches and less prescriptive contractual terms.

Social housing

Single mothers often face discrimination in the private rental market and if they are working part-time or are dependent on Centrelink payments, face additional hurdles around affordability. This in turn pushes many toward social housing even when they prefer to be independent. Constant issues we hear from single mother families include:

- Lack of flexibility in transferring within the stock of social housing when they are trying to escape a violent partner/father
- Run down housing stock that they feel is unsuitable for their children

- Availability of housing in areas with fewer jobs, poorer schools, higher social issues, and often a considerable distance from family, friends and health providers.
- Intolerable waiting periods even when violence has been proven and/or they and their children are homeless and/or they or their children have significant health issues
- Feeling judged by workers in the social housing situation for being single, having children and wanting a home that is affordable, safe, and pleasant to live in
- Placement bearing little or no relevance to their needs including meaning they have additional travel to work and health services which puts further strain on them as a family and sole parent.

Single mothers would value enormously the opportunity to be involved in housing location, type, and design options that would consider innovative options including houses capable of accommodating more than one family.

Enabling reforms to facilitate this include:

- Community and user involvement in conception, planning and review as outlined above.
- 'Peer' tenancy support officers, managers and providers as people who have experience of living in social housing and raising children there, and who, with additional training, can demonstrate the skills to encourage and enable self-advocacy. This will see single mothers become increasingly able to advocate on their own behalf and to instigate small communal support mechanisms (such as shared child-care and excursions) that support the well-being of those living in social housing.
- Partnerships of innovative architects, designers, town planners and community leaders to work alongside people needing and/or living in social housing to explore options for the swift provision of a range of housing stock that can be accommodated within communities.[xviii]
- Mapping needs and assets as a core tool in establishing a stock of appropriate social housing that will serve Australian needs well into the future. This kind of long-range approach is an important underpinning even for rapidly increasing available stock and will assist in identifying funding needs not only for social housing but for health and family and community services.
- Ensuring a living wage is available to single mother families and others needing to use social housing. The current Newstart allowance, for example, to which the government moves single mothers when their youngest child is 8 years of age is leading to such financial difficulty that women are unable to eat, families are becoming homeless and children are further disadvantaged through missing and shifting schools.
- In considering providers, we urge the Commission to examine the sometimes-conflicted role the government plays in regulating areas that have community benefit. In relation to superannuation funds, for example, the government has flagged the need to regulate the Board composition of member-based funds despite these regularly outperforming commercial funds. Evidence relating to community housing providers is definitely

promising. Rather than see the limitations of this due to their management of newer housing stock, we encourage the Commission to recommend extensions of the role of community housing providers to include older stock and thus, ensure the evaluations are like for like.

- Finally, we believe clear agreements with providers for socially beneficial outcomes will need to be in place, monitored and if not met, penalised. We refer to our earlier points around the current job provider models that, undoubtedly in our view, are not outcome designed and not measured by government against high standards of customer service and impact. Alongside support for innovative user engaged models and peer employment, monitoring and research, the impact of any reforms in relation to social housing would be thus built upon philosophies of national and social capital rather than competition and contestability.

Conclusions

To ensure well-designed services that meet the current and future needs of Australians, we need an holistic approach to human services that has users at their heart and serves to promote social equity and capital and provide a firm foundation for our society and economy. The work of Sir Michael Marmot in identifying the importance of the social determinants of health is a critical pillar to this thinking. Breaking human services into silos only continues the traditional pattern of developing service structures that suit the needs of the funding bodies and providers rather than maximising national and community benefit and meeting the needs of those they purport to serve.

People and communities thrive when they have the social relationships, resources, and opportunities that build strong well-being, just as buildings need a strong foundation to withstand bad weather. When those materials are not available, there is not a solid foundation for well-being, and people and communities have difficulty weathering life's storms. When well-being is unstable, social stresses like graduating from school during a recession or having an aging parent who needs care can be catastrophic. While people with well-considered support can weather life's storm, people without enough support may struggle to do so.[xix]

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[iv] See for example Davidson, P. and P. Whiteford (2012), "An Overview of Australia's System of Income and Employment Assistance for the Unemployed", *OECD Social, Employment and Migration Working Papers*, No. 129, Pages 100-127 OECD Publishing, Paris. DOI: http://dx.doi.org/10.1787/5k8zk8q40lbw-en

[v] While this is a Wikipedia site, it has a comprehensive list of resources that may be of interest to the inquiry. https://en.wikipedia.org/wiki/Participatory_design

[vi] Patient Opinion: https://www.patientopinion.org.au/

[vii] Australian Government Department of Social Services: https://www.dss.gov.au/sites/default/files/documents/07_2014/factsheet_on_collaboration.pdf

[viii] Ibid: https://www.dss.gov.au/grants/applying-for-grants/support-for-developing-and-submitting-an-application/what-makes-a-good-dss-grant-application

[ix]Productivity Commission: Reforms to Human Services Issues Paper, December 2016 page 7.

[x] See for example an article in The Conversation: Centrelink debt bad for mental health policy

[xi] KPMG: https://home.kpmg.com/au/en/home/insights/2014/06/rethinking-regulation-human-services-sector.html

[xii] David Tennant 2016: **Social Service Futures: Competition Reform of Human Services from a regional perspective.** http://www.powertopersuade.org.au/blog/social-service-futures-competition-reform-of-human-services-from-a-regional-perspective/13/4/2016

[xiii] Phillip Hamilton: **'Stewardship': buzzword, inkblot, or a new way to deliver human services?** Posted 23/09/2016 on Parliament of Australia

[xiv] Quoted by Denise Allen in Independent Australia '**Bashing single parents is bad policy'** 16th October 2012 https://independentaustralia.net/politics/politics-display/bashing-single-parents-is-bad-policy,4608

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[xvi] Closing the Gap for Indigenous Australians – Northern Territory (Five Government Business Managers in 72 of the 73 prescribed communities across the Northern Territory)
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[xvii] See for example:
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Commonground Australia - http://www.communities.org.au/projects/commonground-co-operative
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[xix] Frameworks Institute: on human services
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