

Anglicare WA - Submission to the Mental Health Commission

Young People Priorities
Framework
November 2020

Context of Submission



- Anglicare WA (AWA) deliver services to vulnerable young people who experience mental health challenges. Many of these young people are homeless or at risk of homelessness, engage in problematic alcohol and other drug use and experience a range of structural and personal disadvantage.
- This submission is designed to reflect AWA's experience of providing support to young people in accommodation and outreach service settings.
- AWA service level and senior staff have attended two of the Mental Health Commission's consultations facilitated in October.
- AWA currently deliver accommodation services to approximately 240 young people who are homeless or at risk of homelessness at any given time. Many of these young people have a mental health diagnosis or experience challenges with their mental health.

Further Context



- The young people supported by AWA services, often in collaboration with hospitals and other community service organisations, have diagnoses at the time of referral or experience challenges with their mental health and require targeted support.
- Young people connected with our services experience depression, anxiety, chronic suicidality, psychosis, have Borderline Personality Disorder and Emotionally Unstable Personality Disorder diagnoses and regularly self-harm. Many of the young people have a complex trauma history and use alcohol and other drugs to self-medicate. Some young people have multiple Emergency Department presentations due to their mental health.
- Some of the more vulnerable young people connected to our services also have significant physical health issues, sometimes as a result of their alcohol and other drug use. This significantly impacts their well-being and increases the number of hospital presentations however the physical symptoms often remain undiagnosed or untreated due to mental health crises and issues relating to their problematic alcohol and other drug use and homelessness.

Availability and Accessibility



- 50% of Foyer Oxford residents have a mental health diagnosis but only half of those are connected to a community-based mental health service at the time of referral. Is this due to the availability and accessibility of services?
- Barriers to young people linking in with general practitioners need to be addressed as they are often the first point of call for people requiring support with their mental health.
- Youthlink and Youth Reach South, which provide invaluable support to young people requiring support with their mental health, are postcode dependent and require a specialist referral.

Experience and Support



Young people report that discharge plans from hospitals often include referrals to community –based mental health services that they have accessed before and have had negative experiences of. At the time of discharge, young people communicate this to the hospital, but alternatives are not provided. The referral is not followed through with, which inevitably leads to more Emergency Department presentations in the future. AWA services will often then support young people to identify the mental health service they would like to engage with and support the referral process. This experience for the young people and service feels like the hospitals are not invested in creating sustainable change in the young person's mental health and young people feel not listened to, disempowered and are less likely to voluntarily access hospital support for future crises.



- Of the young people supported by AWA's youth services, 2017-2018, 60% had a diagnosis at the time of referral and a further 20% had mental health symptoms and situational responses, without a formal diagnosis.
- An ongoing and significant issue is assisting young people who are homeless to access services that will address their alcohol and other drug use and mental health issues concurrently. Upon referral, alcohol and other drug services state they are not able to accept young people for support until their mental health is stabilised and mental health services respond they are not able to accept young people to address their mental health challenges until their alcohol and other drug issues are better managed. No positive outcomes are possible for young people when services will not agree to coordinate their support and response.

Young Men



- Throughout our services, the unmet needs of young men are evident, which can impact negatively on their mental health. This is further exacerbated by their unwillingness and inability to seek support.
- An early intervention focus, particularly in the school setting, would work towards supporting young men to affirm their identity and increase their help-seeking behaviours.
- It can be difficult for young men to establish their identity and locate themselves within society. Young men can perceive they are not doing well enough which can contribute to problematic alcohol and other drug use and suicide.

What We Know Works



- Adoption across the sector of a single Safety Plan used by young people and all their service providers, including hospitals.
- Collaboration between service providers in unified support of vulnerable young people. When the hospitals and mental health service providers are also sharing information with the community service organisations this assists recovery for young people.
- Low barrier, outreach after hours support for young people.