



Western Australian

Mental Health and Alcohol and Other Drugs Strategy

2026–2031: Summary



Mental Health Commission



Acknowledgement of Country

The Mental Health Commission acknowledges Aboriginal and Torres Strait Islander people as the Traditional Custodians of this Country and its waters. The Commission wishes to pay its respects to Elders past and present and extend this to all Aboriginal people seeing this message.



Recognition of Lived Experience

We recognise the individual and collective expertise of those with living and lived experience of mental health issues and conditions, alcohol and other drugs issues and suicidal crisis, including their families, carers and significant others.

This resource was prepared by:

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Reading and understanding this document

It is recommended this document is read alongside the Mental Health and Alcohol and Other Drugs Strategy 2026-2031 (Strategy). Language and terminology used in this document is defined in the Strategy, including a glossary which can be found in Appendix A to the Strategy.

Disclaimer

The information in this document has been included in good faith and is based on sources believed to be reliable and accurate at the time the document was developed. While every effort has been made to ensure that the information contained within is accurate and up to date, the Mental Health Commission and the State of Western Australia do not accept liability or responsibility for the content of the document or for any consequences arising from its use.

What is the Strategy?

Mental health experiences and alcohol and other drugs use can affect how people feel and live. There has been great progress and strong investment in recent years, and we're on our way, but there is still more to be done.

This document is a summary of the [Western Australian Mental Health and Alcohol and Other Drugs Strategy 2026-2031](#) (Strategy), which looks at what is needed for our mental health and alcohol and other drugs systems to support people, families and communities to achieve their wellbeing goals.

The Strategy is a 'big picture' plan for everyone including government and non-government organisations and the community. Frameworks will also be developed for certain priority areas and population groups that provide more details. For example, we are currently developing a Suicide Prevention Framework to guide efforts in this area.

What does the Strategy aim to do?

The Strategy talks about systems transformation, which means changing our ways of thinking and working to ensure we are designing and delivering the services, programs and supports that people want and need. It includes priorities that range from supporting all people in Western Australia to remain well, through to actions that ensure people can get the right help if, and when, they need it.

For transformation to happen, organisations need to truly commit to putting lived and living experience, culture and diversity at the heart of policies, planning and services. It means making people's wellbeing, dignity and human rights the most important part of everything we do.

? What is lived and living experience?

A person with lived or living experience is someone who has experience with mental health issues, alcohol and other drugs use, distress, or suicidal crisis (includes thoughts, feelings or actions).

It also includes family members, carers and significant others who have supported or keep caring for someone with a lived or living experience, or who have lost someone to suicide.



What is wellbeing?

Wellbeing describes how well someone feels in their life. Everyone has their own level of wellbeing, regardless of whether they experience a mental health issue or use alcohol or other drugs. Each person's experience is unique.

Many things can affect wellbeing. For example:



school and
education



money



relationships



big life events



the places people live,
learn, work, and play.

Wellbeing means different things to different people. For Aboriginal people, wellbeing is holistic and can include connection to:



body and mind



family and community



culture and country








spirituality and
ancestors.

These connections support and strengthen the cultural identity of Aboriginal people and communities, which helps support their social and emotional wellbeing.

How we developed the Strategy

1

Firstly, we created a Discussion Paper to help start conversations with the community. The Discussion Paper was based on:

-  Advice from expert groups.
-  Ideas and information from research, reports and past work.
-  What people have told us through previous consultations.
-  Reviews of current services and programs.
-  Early conversations with key people and organisations.

2

We then asked people to tell us what they thought about some of the issues raised in the Discussion Paper. People could do this through written submissions or by participating in workshops that were held across Western Australia.

We heard from many different voices from communities right across Western Australia. This includes people with lived and living experience, their families, carers and significant others, people with diverse cultural backgrounds, LGBTIQ+SB communities, people living with disabilities and Aboriginal people. We also heard from people working in services, peak bodies and professional associations.

3

We then sent the draft Strategy out for final feedback, to make sure it accurately reflected what people in Western Australia needed and wanted from services, programs and policies.

More information can be found in the [Consultation Summary Report](#).



Figure 1 - Strategy consultation and engagement summary

Aspirations for change

The Aspirations describe what the mental health and alcohol and other drugs systems would look like should transformation be achieved. They outline the ambitions for change across four domains: People, Community, Services and Leadership.

1

People

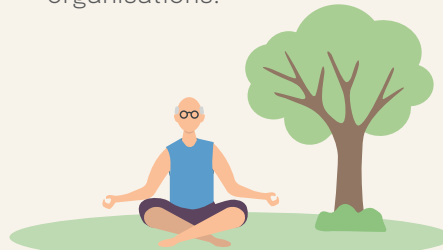
- Everyone's unique experiences, goals, culture, strengths and challenges are respected.
- People and communities are supported to meaningfully participate in decisions that impact their lives and wellbeing.
- People are met with openness and understanding, and without stigma and discrimination.



2

Communities

- Communities support local connection, belonging, participation, cultural safety and wellbeing by developing place-based and community-led solutions that account for the localised context.
- Service planning and development considers the social, environmental, structural, commercial and cultural determinants (determinants of health).
- Relationships are established across government, non-government, and private organisations.



3

Services

- Prioritise supporting people in the community to stay well and thrive.
- Services are safe, accessible, integrated and easy to navigate.
- Trauma-informed and people-centred approaches are embodied within service culture, policy, planning, design, delivery and evaluation.



4

Leadership

- Leadership, governance arrangements and practices ensure quality and accountability and continuously improve policies, initiatives, programs and services at all levels.
- Resources are used to genuinely support systems change.



Strategic Pillars

To help us on our pathway to achieving these Aspirations, the Strategy focuses on five Strategic Pillars.





Strategic Pillar 1

Approaches that promote wellbeing for everybody

Prevention and early intervention initiatives aim to create opportunities for everyone in the community to be well.

This includes activities to reach everyone (for example, the whole population of Western Australia), for specific groups of people (for example, LGBTIQ+SB people), for people at different stages of life (for example, older adults), or those that focus on certain settings (for example, schools, sporting clubs or workplaces).

For alcohol and other drugs, this includes strategies and initiatives that prevent, delay and reduce alcohol and other drugs use and harms.

For mental health, this includes promoting wellbeing for everyone and preventing mental health issues and conditions from developing or getting worse.



Focus Areas

System relation ● Mental Health System ● Alcohol and Other Drugs System

1 Preventing and minimising alcohol and other drugs use and related harms

This section describes initiatives to strengthen protective factors and create healthy environments to prevent and reduce harms caused by alcohol and other drugs use in communities.

Future focus examples include:

- Fetal Alcohol Spectrum Disorder prevention programs and campaigns that aim to increase community awareness that there is no safe amount of time to use alcohol during pregnancy.
- Policies and laws on how alcohol is sold, where it is available and how it is promoted, so that children and young people are protected.
- Local action plans so that communities can address issues that are important and relevant to them.

? What are protective factors?

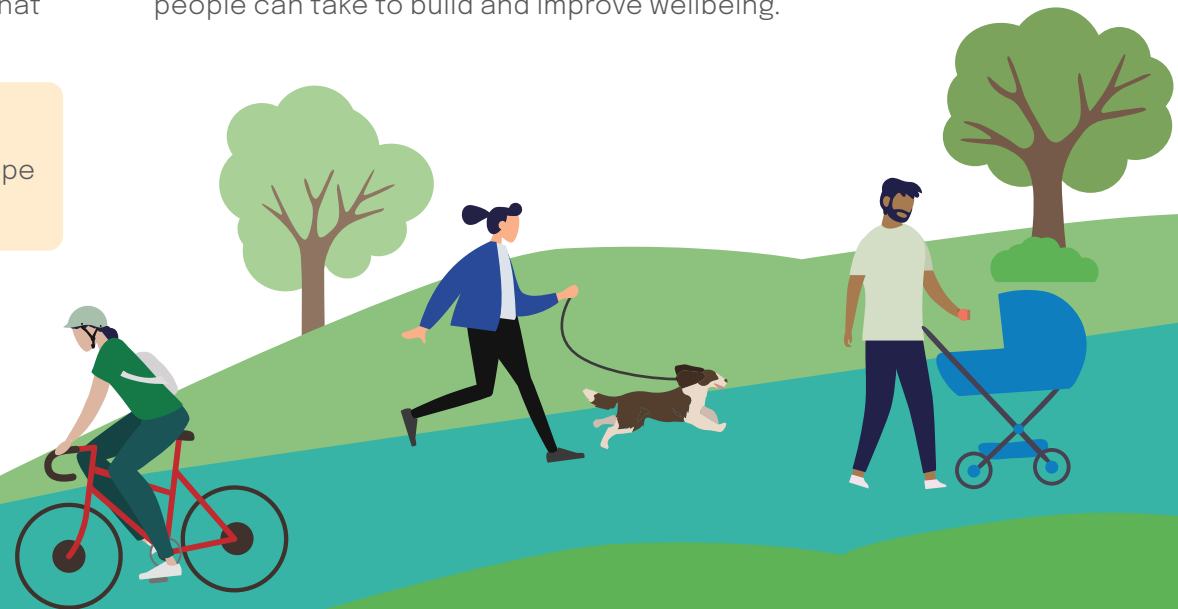
Protective factors are things in someone's life that help them cope with stress, reduce harm from risky behaviours and stay well.

2 Improving and maintaining mental health and wellbeing

This section describes initiatives that create opportunities for people and communities to learn more about ways to help their own wellbeing and that of others.

Future focus examples include:

- Workplace policies and initiatives that aim to promote and support positive mental health for employees and volunteers at work.
- Local government public health planning and practice so communities are supported in their wellbeing.
- Public education campaigns that raise awareness of actions people can take to build and improve wellbeing.





3 Preventing and reducing suicide and reducing suicidal distress

This section describes the types of activities required to prevent and reduce suicide and support people and communities who have lost someone to suicide.

Future focus examples include:

- A Suicide Prevention Framework that outlines what is required for an effective and comprehensive approach to preventing suicide in Western Australia.
- Planning and implementation of suicide prevention activities in regions that are led by the community.
- Aftercare services that provide immediate support for people who have made a suicide attempt or are in crisis.
- Coordinated support for loved ones, community members and others who are impacted by a loss from suicide.

? What is holistic?

Holistic supports and approaches consider all the needs of a person, not just the immediate challenge they are experiencing.

4 Enhancing community-led initiatives that support social and emotional wellbeing

This section is about empowering Aboriginal people and communities to design and deliver mental health and alcohol and other drugs initiatives in their own communities. It focuses on Social and Emotional Wellbeing, which is an Aboriginal way of being. It describes a holistic approach to wellbeing that looks at the person's connection to Country, culture, family, spirituality, and community.

Future focus examples include:

- A strategic approach to combine, guide and strengthen Social and Emotional Wellbeing initiatives in Western Australia that align with the National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing 2024-2033.
- Aboriginal-led services in the community designed to support social and emotional wellbeing.
- Plans and partnerships that are locally developed to support coordinated and collaborative approaches to strengthening social and emotional wellbeing.





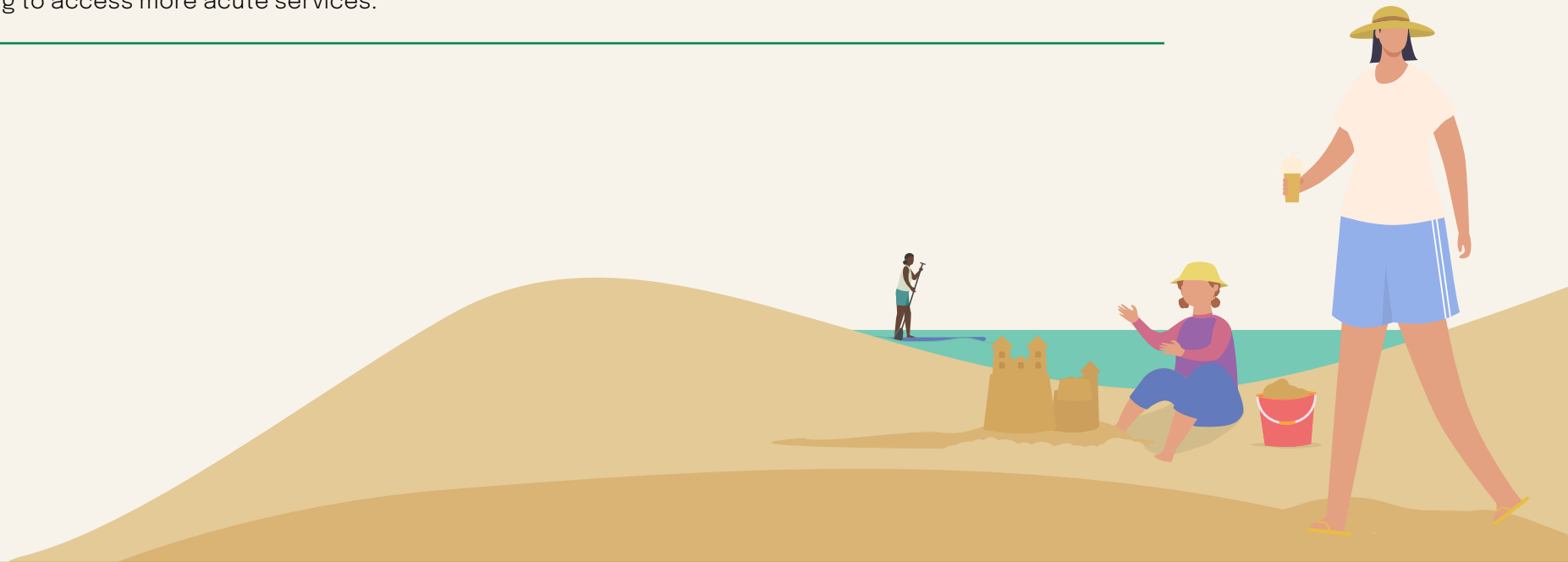
Strategic Pillar 2

Opportunities for people in the community to achieve their own wellbeing goals



Access to supports in the community can help people stay well and connected with those who matter most to them. For some people, this means accessing support to live on their own. It could also mean accessing group support services by peers who have had similar experiences. For other people, it might include having a safe place to go, like a Sobering Up Centre.

For many people, regular, holistic support in their own community will help people maintain their wellbeing goals without needing to access more acute services.



Focus Areas

System relation ● Mental Health System ● Alcohol and Other Drugs System

5 Strengthening individual and group psychosocial supports for those in need

This section is about creating opportunities for people experiencing mental health challenges to stay connected to their friends, family and community. It describes the types of community-based support services that focus on individual recovery journeys.

Future focus examples include:

- Individualised advocacy services that help ensure people receive quality, safe and human rights-focused care and support.
- Supports for people with mental health challenges to manage daily activities and be part of their community. These are people who have significant needs but are not eligible for support through the National Disability Insurance Scheme.

? What is recovery?

Recovery means different things to different people, especially when it comes to mental health and alcohol and other drugs use. It might include achieving goals such as getting back to work or studies, participating in social activities or rebuilding relationships. For people who use alcohol and other drugs, recovery does not always mean stopping use completely.

6 Enhancing access to mental health and alcohol and other drugs supports in community accommodation settings

This section is about providing community-based treatment and recovery programs within safe and stable accommodation. Accessing these services can help some people live independently and can prevent them needing to go to hospital.

Future focus examples include:

- Providing treatment and recovery support along with stable accommodation for young people experiencing homelessness and mental health issues (with or without alcohol and other drugs use issues).
- Coordinated supports for people with severe mental health conditions so they can live well and recover within transitional housing.

? What are peer services?

Peer services are supports provided by people who have had their own lived or living experience with mental health and/or alcohol and other drugs use. These people have been through similar experiences and are trained to use their experience to offer guidance, empathy, and practical help to others.

7 Delivering alcohol and other drugs harm reduction initiatives

This section describes public health and harm reduction strategies that support people and communities to be safer, healthier and more resilient. Harm reduction initiatives focus on reducing harm rather than preventing use.

Future focus examples include:

- Access to services such as needle and syringe exchange programs that provide safe injecting equipment to reduce the risk of infections and blood-borne viruses, as well as education from peers about keeping safe.
- Approaches that support people to stay safe while at music festivals and other events.
- Programs that allow people to access Naloxone, which is a life-saving drug that can reverse the symptoms of opioid overdose.

8 Providing contemporary models for safe places in the community

This section describes the immediate supports for people who need a safe place to stay when they are intoxicated.

Safe places ensure people get the right support they need in the community, so they don't end up in an emergency department or a police lock-up.

Future focus examples include:

- Services designed based on local needs that provide a safe place overnight for people to sober up and receive care, a meal and access to laundry facilities.
- Helping people and families by linking them to further treatment and support.





Strategic Pillar 3

Equitable access to services in the community

Being able to access mental health and alcohol and other drugs treatment close to home can avoid or reduce time in hospital. This helps people get specialist and tailored treatment while staying close to family and loved ones.



Focus Areas

System relation ● Mental Health System ● Alcohol and Other Drugs System

9 Improving immediate access and response to people in crisis

This section describes the importance of instant and appropriate care for anyone in crisis due to mental health issues or alcohol and other drugs use. This also includes support for family members, carers and significant others. Ideally, this means being able to access this support in the community, which can prevent issues from getting worse and result in better outcomes for people without needing to go to an emergency department.

Future focus examples include:

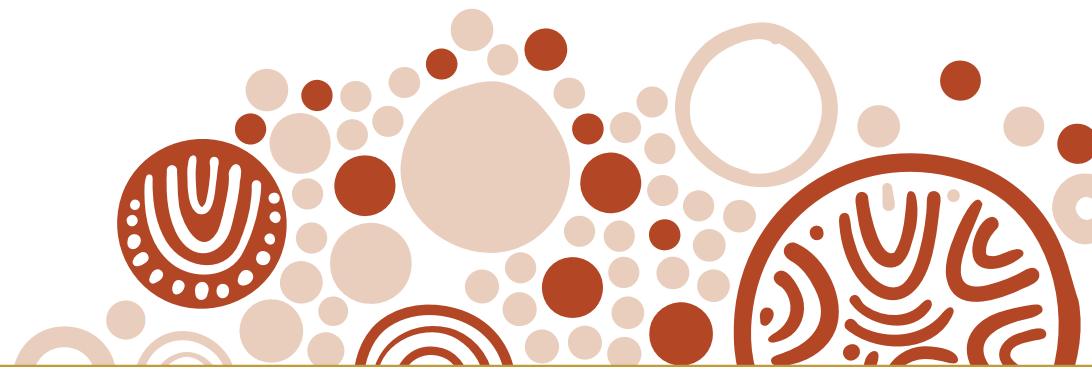
- Safe spaces for people experiencing crisis to avoid going to an emergency department.
- Telephone support lines to provide immediate crisis counselling and connect people to the right support they need.
- Mobile crisis teams that meet people where they are to provide mental health support, and virtual crisis response services in areas where there is no access to in-person support.

10 Mental health services in the community working together to provide responsive, holistic and people-centred support

This section describes the role of public mental health services and primary care providers, such as general practices, in providing holistic, recovery-focused and trauma-informed care. These services are often where people go first, so they can support people with their recovery goals and help prevent issues from becoming worse.

Future focus examples include:

- Services in the community that people can access easily for treatment and support, regardless of what their recovery goals are.
- Training and support to general practitioners so they can provide care to those who might otherwise have trouble accessing other services.
- Coordination so that services are working together to meet the needs of the person, their families, carers or significant others.



11 Supporting alcohol and other drugs treatment in the community to grow and diversify

This section describes what is required so people can access alcohol and other drugs treatment services closer to home, when and if they need it.

Future focus examples include:

- Working in partnership with Aboriginal Community Controlled Organisations to design and deliver culturally secure alcohol and other drugs service for Aboriginal people and communities.
- Supporting services to be flexible and tailored to the needs of the local community and individuals.
- Helping general practices support people with alcohol and other drugs treatment and access to other services they may need.

12 Facilitating access to mental health community bed-based treatment and recovery services

This section describes specialised mental health treatment services in a home-like environment. Providing treatment in the community that best supports someone's health and wellbeing can prevent them from needing to go to hospital. When people do need a hospital stay, these services can support that person to return home after they leave hospital. There are different types of services depending on how long a person may need for their personal recovery.

Future focus examples include:

- Services that provide specialised residential care in the community, such as for people experiencing eating disorders and older adults.
- Ongoing support for people after they leave a residential service to help maintain and enhance personal recovery goals.
- Residential services for people experiencing both mental health and alcohol and other drugs issues.



13 Balancing access to alcohol and other drugs withdrawal, residential rehabilitation treatment, post-residential treatment and supports in the community

This section describes the importance of people having access to a range of services that support them with their alcohol and other drugs treatment journey.

Future focus examples include:

- Access to withdrawal services in areas where there is currently limited access.
- Residential rehabilitation services in regional areas, so people can receive therapeutic support and treatment that is right for them, closer to where they live.
- Rehabilitation treatment options that do not require overnight stays, such as day programs for young people.
- Ongoing support for people after they leave a residential service to help prevent relapse.

? What are withdrawal services?

Sometimes called detox, they provide supervised withdrawal programs and treatment for the drugs a person is dependent on. This is needed before a person can access residential rehabilitation services.

? What are residential rehabilitation services?

These provide structured and intensive alcohol and other drugs rehabilitation programs in a home-like environment. Programs offered include psychological therapy, education, skills development and peer support.

? What are post-residential services?

These provide short to medium-term supported accommodation or outreach services for people leaving residential alcohol and other drugs treatment, to prevent relapse and support people to successfully move home to their community.





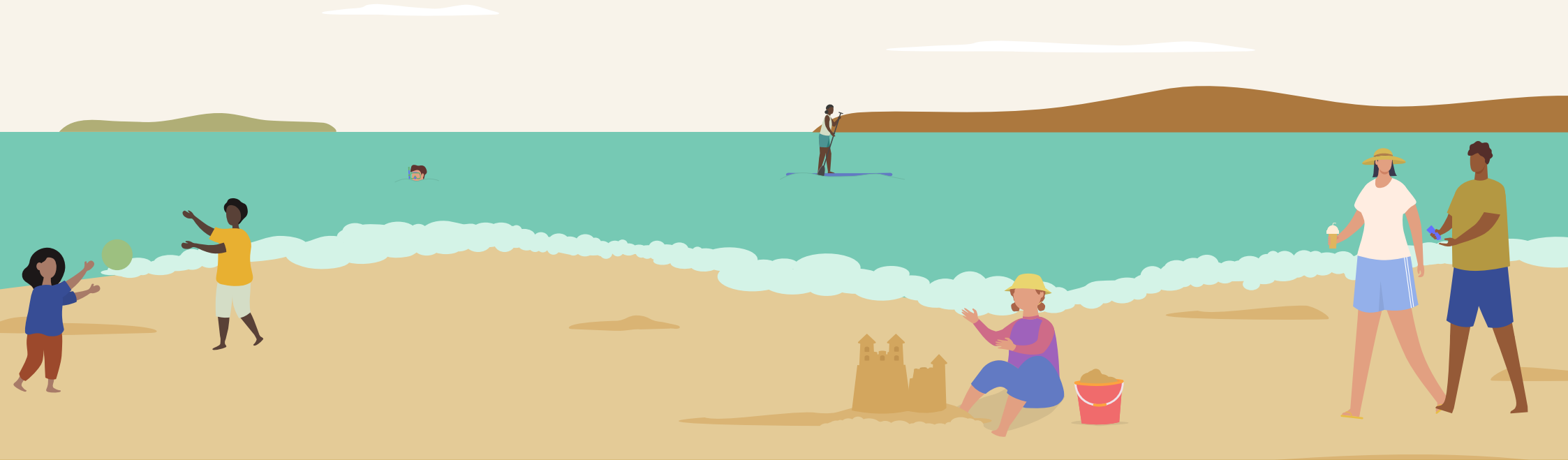
Strategic Pillar 4

Specialised and acute services for those who need them



Specialised and hospital services may be needed for people experiencing serious and complex mental health or alcohol and other drugs issues and requiring more intensive treatment.

This includes services such as crisis care within emergency departments, treatment on hospital wards, outpatient clinics and specialist training and support for clinicians.



Focus Areas

System relation ● Mental Health System ● Alcohol and Other Drugs System

14 Integrating alcohol and other drugs services within hospitals

This section describes what is required to ensure there is access to high-quality, people-centred alcohol and other drugs treatment in hospital-based settings for those who need it.

Future focus examples include:

- Hospital-based medical withdrawal services in complex and serious situations where medical supervision and treatment is required.
- Safe places within or close to hospitals so people experiencing alcohol and other drugs use issues can receive support and stabilisation in a quiet and more appropriate environment than an emergency department.
- Alcohol and other drugs specialists who can provide immediate expert advice and support to other clinicians in hospitals and across the state about the most effective treatment options.

15 Ensuring appropriate mental health services within hospitals

This section describes the importance of people-centred, high-quality, accessible treatment and support for people with ongoing serious mental health conditions.

Future focus examples include:

- Approaches that ensure people move through various parts of a hospital (or from hospital to a community service) as quickly and seamlessly as possible to ensure they get the best possible care.
- Workforces made up of many types of workers such as clinicians, peer workers and Aboriginal Mental Health Workers, to ensure people are supported in a holistic, inclusive and culturally responsive way.

? What is the difference between acute and non-acute care?

Acute care is short-term and urgent, sub-acute care supports recovery after a crisis, and non-acute care provides ongoing help for long-term or stable conditions.

16 Providing mental health and alcohol and other drugs support for people engaged in or exiting the justice system and for those at risk of entering

This section describes the importance of mental health and alcohol and other drugs initiatives linked to the justice system that includes police, courts and prisons. These are important because there are many people in our justice system experiencing mental health issues and conditions and/or impacted by alcohol and other drugs.

Future focus examples include:

- Early intervention programs through police and courts that can support a person with their personal recovery and help prevent them from becoming involved in the justice system in the future.
- Mental health and alcohol and other drugs-related support for people to transition back into the community after they are released from prison.
- Mental health hospital beds for young people in detention who need specialised mental health care and treatment.

17 Facilitating access to specialised statewide mental health treatment for people with complex or co-occurring needs

This section focuses on the need for safe, personalised treatment and support for people experiencing certain mental health conditions that are complex and beyond the scope of general services. Examples include eating disorders, neuropsychiatry and development disorder, and mother and baby mental health. It's especially important to make sure people across the state can access these services. This means working better across different sectors, helping people find and use the right support, and using digital tools like telehealth to reach more people.

Future focus examples include:

- Availability and accessibility of specialised support services for personality disorders, older adult mental health services and eating disorders.
- Supports for people experiencing more than one of these complex issues.





Strategic Pillar 5

Foundations for contemporary, people-centred systems

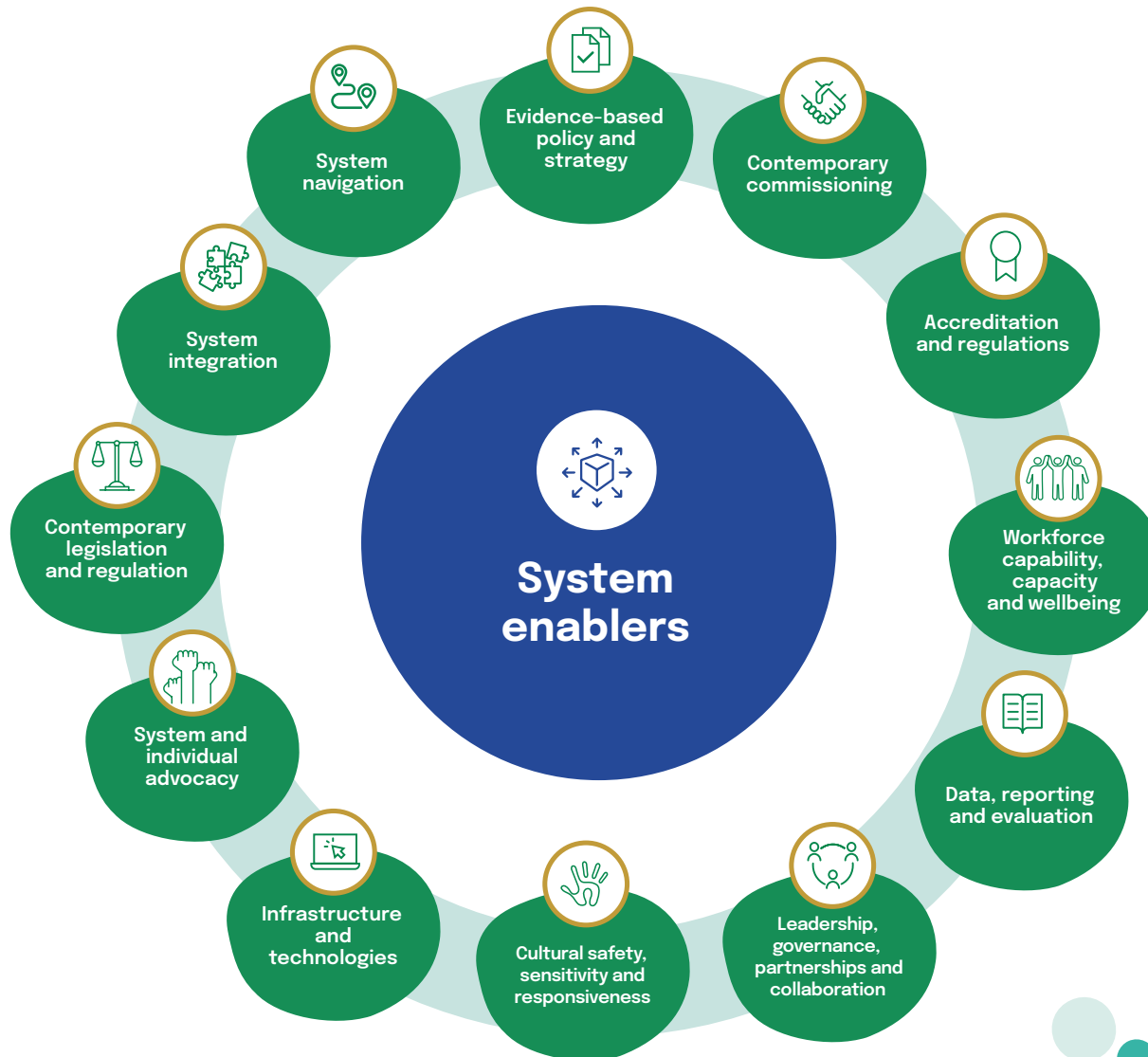


Strong foundations are needed to enable our systems and services to work effectively. This means having the right workforce, access to technology and infrastructure, coordination across sectors and access to data for monitoring, evaluation and accountability.

It also includes looking at how organisations work, and the cultural changes needed to work and think differently so Aboriginal people and those with lived and living experience are meaningfully involved in designing, delivering, and reviewing programs and services.

It is also important to work together with Aboriginal people to support Closing the Gap and address the inequity and inequality in health and social outcomes.





? What are system enablers?
 System enablers are the key parts that help the mental health and alcohol and other drugs systems work better.

Figure 2 - System enablers



Focus Areas

System relation ● Mental Health System ● Alcohol and Other Drugs System

18 Culture that values lived and living experience, diversity and equity

This section describes what is required for building a system that responds quickly, and values lived and living experience, diversity and cultural safety.

Future focus examples include:

- Ways of working that make sure services are culturally safe, respectful and tailored to local needs.
- Organisational change to embed lived and living experience perspectives and to apply recovery-oriented and people-centred approaches to everything we do.
- Approaches to addressing stigma and discrimination so people are safe and respected.

? What is cultural safety?

Cultural safety is when people feel their cultural identity is understood and respected and their cultural needs are met.

19 Robust and accountable leadership, governance, partnerships and collaboration

This section describes how people-centred outcomes can be driven through leadership, partnerships and governance arrangements.

Future focus examples include:

- All levels of government working together to make sure services are better coordinated, meet local needs and deliver better outcomes for communities.
- Effective peak bodies that represent the voice of different groups of people and professions to make change to what matters most to them.



20 Complementary and coordinated state and national strategies

This section outlines the importance of evidence-based policy and strategy, laws, regulation and quality standards to keep people safe, ensure high-quality care and protect human rights.

Future focus examples include:

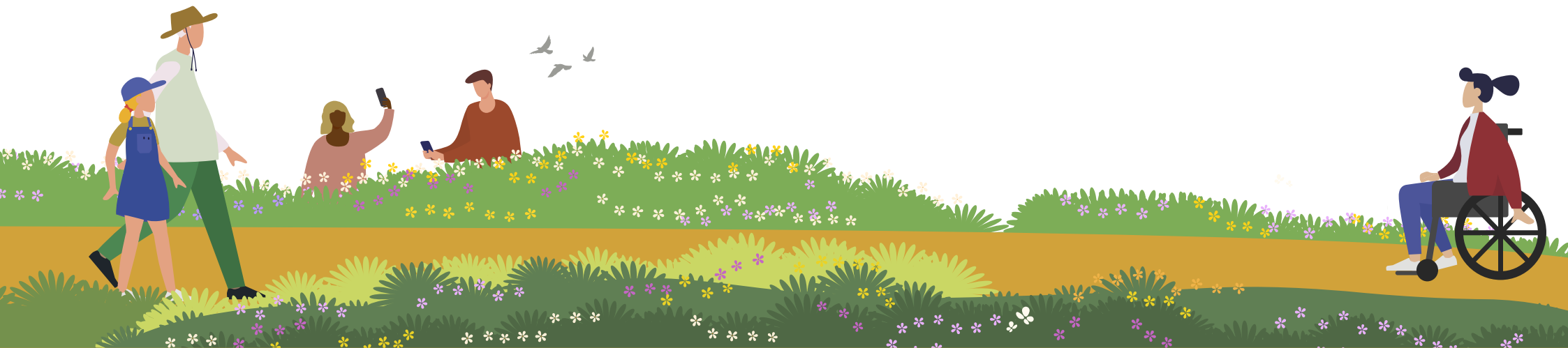
- Statewide strategies that outline what is required across all sectors to improve outcomes for people, families and communities.
- Partnering with the Australian Government to ensure we are working collaboratively on shared priorities.

21 Infrastructure, technology and initiatives that promote system performance and access to information, supports and services

This section describes the structures, technology and processes that make it easier for people to find and access the services they need, no matter their situation or background.

Future focus examples include:

- Services located and designed with those that will use them, and equipped to meet community needs.
- Online services and peer support initiatives that help people and their families, carers and significant others to access information and services more easily.



22 Skilled, diverse and supported workforces

This section outlines what is required to support the development, growth, retention and wellbeing of different types of workers to provide people-centred care and support.

Future focus examples include:

- Making sure the workforce has the right number of people with the right skills, in line with national and state workforce plans.
- Growing and supporting Lived Experience (Peer) workers.

23 Strengthening data, monitoring and evaluation to improve system and service performance

Data sharing, collection, reporting and evaluation is required to support effective planning and improve responsiveness of programs and services to better meet community needs.

Future focus examples include:

- Frameworks to measure what matters to people and communities.
- Collecting data to better understand the needs of different community groups such as LGBTQIA+SB communities and people from culturally and linguistically diverse backgrounds.



How will we know if we are making a difference?

Implementation

To keep track of how the Strategy is progressing, and to provide honest and transparent reporting, we will develop Annual Implementation and Monitoring Plans (AIM Plans).

These plans will outline the actions the Commission and other government agencies are leading or facilitating, showing how they support the Strategy's purpose, Pillars, and Focus Areas.

The AIM Plans will be created to keep the community informed about what's been achieved.

The Commission's person-centred Outcomes Measurement Framework provides one way to track mental health and alcohol and other drugs outcomes in Western Australia.



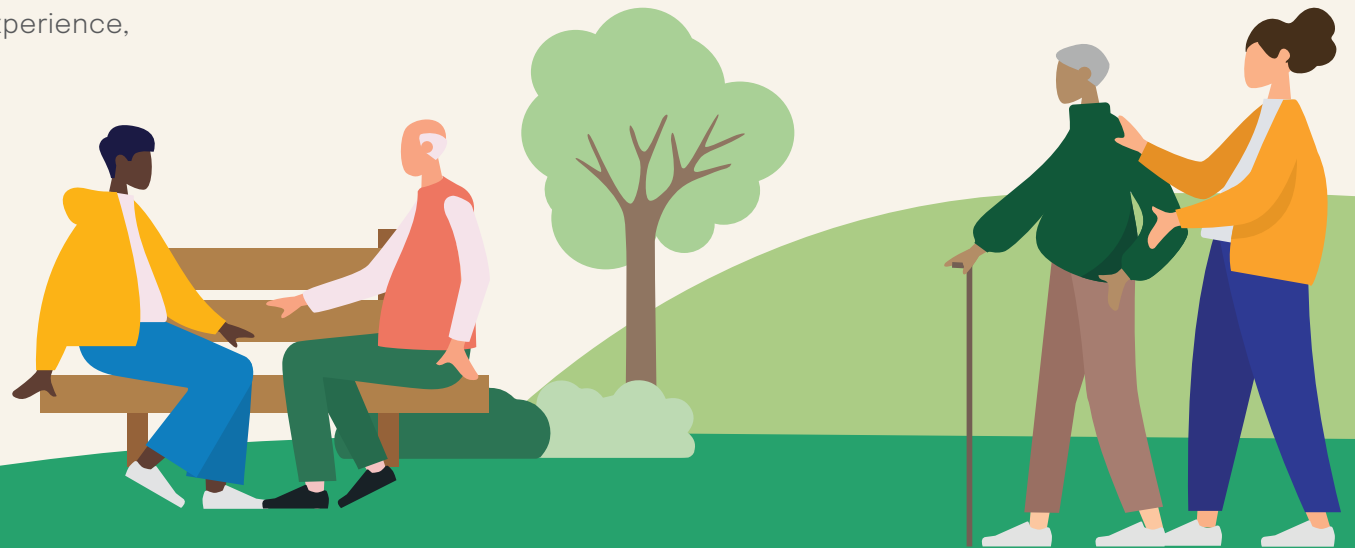
Governance

Governance structures for the mental health and alcohol and other drugs systems will support the Commission to lead the Strategy's implementation and monitor its progress. The Commissioner will report to the Minister for Health; Mental Health and the Minister for Preventative Health.

The initiatives in this Strategy focus on system-level changes the State Government will lead in Western Australia.

There are many stakeholders who will also be involved in its delivery, including people with lived and living experience, their families, carers and significant others.

By working together and staying focused on the Aspirations, we can all help achieve the Strategy's priorities.





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