



Government of Western Australia  
Mental Health Commission

# Young People Priority Framework

## *Consultation guide*

The Mental Health Commission would like to thank you for participating in the consultation to guide and inform the development of the Young People Priority Framework.

### **The current picture**

As mental illness is the leading cause of disability and poor life outcomes for young people<sup>i</sup>, the mental health of our young Western Australians has been identified as a priority issue since at least 2015. Both the Western Australian Mental Health and Alcohol and Other Drug Services Plan 2015 – 2025, and the Commissioner for Children and Young People’s ‘Our Children Can’t Wait’ report from 2015, highlighted the need to improve services available to support young people with mental health and/or alcohol and other drug (AOD) issues. In March 2020, the Minister for Mental Health released the WA State Priorities Mental Health, Alcohol and Other Drugs 2020 – 2024, in which young people were confirmed as an immediate priority. In October 2019, The Productivity Commission identified in its Draft Report<sup>ii</sup> into Mental Health (the Draft Report) that poor mental health costs the Australian economy an estimated \$500 million per day (between \$10 and 18 billion per annum) and that 3 in 4 people with a mental illness develop symptoms before the age of 25. Given the Draft Report<sup>iii</sup> also found that by year 9, students with mental illness may be up to 5 years behind students who do not have mental illness, the case for ensuring young people have access to the mental health and AOD services they need is clear, even if only viewed from through an economic lens.

The Draft Report was published before the advent of the COVID-19 global pandemic. The findings at that point were bleak enough, but a picture is emerging of the effects of the pandemic on the mental health of young people that suggests the situation will only worsen unless a response is urgently planned. Notwithstanding a prolonged period of zero community transmission in Western Australia that has allowed the easing of restrictions on economic and social activity, mental health is the issue of greatest concern to young Western Australians. The WA COVID-19 Recovery Framework published by the Youth Affairs Council of Western Australia (YACWA) in August 2020, states that 88% of all survey respondents were concerned about their mental health. The steering committee that developed the framework reports that young people feel that ‘job loss, economic instability, poverty, poor mental health, social disconnection, education disruption, and loss of services during COVID-19 will have a monumental and disproportionate impact on young people for decades.’ We know that those who already had a mental health or AOD issue are being disproportionately affected by the impacts of the pandemic. Those who didn’t are at higher risk of developing an issue that could have life-long impacts if not caught early.

*We're working for  
Western Australia.*



## Key themes for consideration

In considering a vast array of current reviews, research, strategies and reforms; and related discussions with key stakeholders, we have heard of many of the current gaps and opportunities across the entire service system from prevention through to treatment. We are proposing to consider the issues in themes; to check that our understanding is correct and explore the ideas that people think will have the biggest impact. Some of the consistent themes which we plan to further explore throughout the consultation phase and within the workshop(s) include (but are not limited to) the following:

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| <b>Availability</b>  |
| <ul style="list-style-type: none"> <li>▪ Location of services</li> <li>▪ Finding the right service</li> <li>▪ Operating hours including after-hours support</li> <li>▪ Service type</li> <li>▪ Wait times</li> </ul>   |
| <b>Accessibility</b>   |
| <ul style="list-style-type: none"> <li>▪ Privacy and confidentiality</li> <li>▪ Cost</li> <li>▪ Contact method (e.g. face to face, online, in the home)</li> <li>▪ Eligibility criteria</li> <li>▪ Language</li> </ul>   |
| <b>Experience</b>  |
| <ul style="list-style-type: none"> <li>▪ Stigma and discrimination</li> <li>▪ Appropriateness (e.g. culturally competent and appropriate, LGBTI inclusive and friendly)</li> <li>▪ Age-appropriate service provision</li> </ul>  |
| <b>Support</b>   |
| <ul style="list-style-type: none"> <li>▪ Transition to and from services and into the community</li> <li>▪ Warm referrals to available and accessible services</li> <li>▪ Discharge planning and appropriate follow-up</li> <li>▪ Holistic approaches to care (e.g. considering housing, education and employment needs)</li> <li>▪ Genuine family/carer involvement</li> <li>▪ Support for families and carers</li> </ul> |

## The Framework

The purpose of the Framework is to enable relevant government agencies, and the mental health and AOD sectors to gain a current and clear picture of the gaps in services for young people (12 to 24 years) from prevention and early intervention to treatment and post treatment support; in hospitals and the community and identify the areas where priority action is needed. This will inform advice for consideration by Government introducing new ways of working across existing services to achieve better outcomes for young people. The Framework will build on existing knowledge, modelling and reports, primarily through consulting widely with young people and their families and carers, clinicians, service providers and all other relevant stakeholders and seeking to update data wherever possible.



## The consultation

The workshop(s) that you have been invited to attend have been organised by Nous Group and YACWA on behalf of the MHC, and will involve key stakeholders across the mental health and AOD system, including young people and their carers, and family.

During the consultation, the following questions will be explored:

1. *What do young people, families and carers, service providers, peak bodies, and government agencies agree to be a realistic **vision for the mental health and AOD service system** in Western Australia for young people that can be achieved by 2025?*
2. *What do they see as the **key gaps and opportunities** for change within the current system in Western Australia?*
3. *What do they see as the **priority initiatives and strategies** to deliver on the vision for the mental health and AOD service system for young people?*

In preparation for the workshop, it is recommended that you consider these questions in light of the above-mentioned key themes. In addition, the following documents and **Appendix** provide useful context regarding the needs of young people, current priorities and recommendations, and key areas of focus in addressing the mental health and AOD needs of young Western Australians.

- Ombudsman Report – [Preventing suicide by children and young people 2020](#)
- Commissioner for Children and Young People - [Our Children Can't Wait: Review of the implementation of recommendations of the 2011 Report of the Inquiry into the mental health and wellbeing of children and young people in WA](#)
- Commissioner for Children and Young People - [Speaking Out Survey 2019 – Summary Report](#)
- Youth Affairs Council WA - [A Framework for Young People's Recovery from COVID-19 in Western Australia](#)
- Young Minds Matter - [The Mental Health of Children and Adolescents. Report on the second Australian Child and Adolescent Survey of Mental Health and Wellbeing](#)
- Orygen - [A Global Framework for Youth Mental Health: Investing in future mental capital for individuals, communities and economies](#)
- Western Australian Association for Mental Health – [Prevent. Support. Heal. State Election Platform](#)
- Western Australia Association for Mental Health – [Youth Services Integration Report 2019](#)
- Mental Health Commission – [Western Australia Mental Health, Alcohol and Other Drug Service Plan 2015-2025](#) and [Plan Update 2018](#)
- Department of Health – [WA Youth Health Policy 2018-2023](#)
- Department of Health – [Western Australian Lesbian, Gay, Bisexual, Transgender, Intersex \(LGBTI\) Health Strategy 2019–2024](#)
- Aboriginal Health Council of Western Australia – [Western Australia Aboriginal Youth Health Strategy 2018-2023](#)



## APPENDIX – What the evidence says

In Western Australia, for people aged 15 to 24, suicide is the leading cause of death.

Many young people aged 12 to 17 years are now choosing not to drink (37.8%), although alcohol consumption does increase with age.

For those ages 18 to 24 years, 16.2% reported drinking alcohol in the last week at levels that exceeded the recommended guidelines.

Young people have experienced the most significant increase in moderate and severe psychological distress of all age groups during the COVID-19 pandemic.

*My daughter and I have been going around in circles with the mental health system for several years, desperately trying to get help for her condition which has now become chronic because, I believe, there wasn't enough done by both inpatient and community services in the early stages.*

*One of the biggest ongoing issues we have had has been accessing a mental health bed when she is in crisis and unsafe. – MHAS 2018-19 Annual report*

LGBTI young people are particularly at risk of mental health and AOD related issues, due to their experiences of stigma, discrimination, exclusion and a range of social, cultural and legal barriers they face in respect to their sexuality and gender.

Young Aboriginal people often have poor mental health, social and emotional wellbeing outcomes, and are more likely to experience serious mental illness, with 31.6% of young Aboriginal people (15-19 years) meeting the criteria for probable serious mental illness compared to 22.2% of non-Aboriginal people.

*"There doesn't seem to be much support out there. And what is out there, you are either not unwell enough, too unwell, or unwell in the wrong way." -Community supports survey participant, WAAMH*

Mental illness is the leading cause of disability and poor life outcomes for young people, contributing 45% of the overall burden of disease in those aged 10–24 years.

48.5% of students in Years 7 to 12 don't know where to get mental health support in their local area and 33% don't know where to get help for smoking, drinking or other drugs.

In Western Australia young Aboriginal people (5 to 17 years) are eight and a half times more likely to die by suicide than non-Aboriginal young people.

General Practitioners are the most commonly accessed health professional for young people and usually their first contact with the health system.

1-in-4 students say they can't always access support for health worries when needed.

3.3% of 12-17 year-olds had a severe mental disorder compared with 1.1% of 4-11 year olds.

Children with autism and intellectual disabilities have a higher incidence of mental health difficulties compared with the general population (36 per cent compared with 8 per cent).



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<sup>i</sup> Orygen (2020). *A Global Framework for Youth Mental Health: Investing in Future Mental Capital for Individuals, Communities and Economies*. World Economic Forum. Retrieved from: <https://www.orygen.org.au/Policy/World-Economic-Forum-partnership/Files/Orygen-WEF-global-framework-for-youth-mental-health.aspx>

<sup>ii</sup> Productivity Commission 2019, *Mental Health*, Draft Report, Canberra. Retrieved from: <https://www.pc.gov.au/inquiries/completed/mental-health/draft>

<sup>iii</sup> Productivity Commission 2019, *Mental Health*, Draft Report, Canberra. Retrieved from: <https://www.pc.gov.au/inquiries/completed/mental-health/draft>