



# **Youth Coalition of the ACT**

**Submission to the  
2006/07 ACT Government Budget**

Submission to the ACT Government Budget 2006-07  
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## **Summary of Recommendations**

### **Addressing Gaps in the Sustainability and Continuing Viability of the Youth Sector**

#### **Indexation**

##### **Recommendation**

That the ACT Government introduce its new community sector method of indexation on 1 July 2006, consistent with their 2005/06 Budget announcement.

#### **Training and Professional Development**

##### **Recommendation**

That the ACT Government work with the community sector to develop and implement a strategy addressing the viability of the sector with particular emphasis on training, recruitment and retention of workers within the sector.

That the ACT Government commit to ongoing funding for accredited training, professional development opportunities for staff in non-government organisations.

That any training/professional development being offered through Office of Children, Youth and Family Support be made open to the community sector either free of charge or at a subsidised rate.

#### **Incremental Salary Increases**

##### **Recommendation**

That the ACT Government build into service funding an incremental adjustment to allow for salary increases.

#### **ACT SACS Award**

##### **Recommendation**

That the ACT Government make a commitment to ensure that community sector wages are comparable to that of the ACT Public Service and allow for annual wage increments.

#### **Renew Community Infrastructure and Facilities Program**

##### **Recommendation**

That the ACT Government allocate \$500,000 per year for the Renew Community Infrastructure and Facilities Program to maintain/improve the physical conditions of community sector services.

#### **Sector Development**

##### **Recommendation**

That the ACT Government provide \$100,000 recurrently to the Youth Coalition to properly fund its Sector Development Program, to recurrently fund a full time Sector Development Officer and provide subsidised training and resources for youth services in the ACT.

## Addressing Youth Homelessness

### Capital funding to Housing ACT

#### Recommendation

That the ACT Government increase public housing stock next financial year, as per its election commitment.

### Accommodation in Gungahlin/Belconnen

#### Recommendation

That the ACT Government make five (5) Housing ACT properties available to community organisations to trial group share arrangements for young people. Three (3) of these houses are to be located in the Belconnen region to address medium term accommodation imbalances between north and south Canberra.

### Youth Specific Housing Manager

#### Recommendation

That Housing ACT establish a Youth Specific Housing Manager and Housing Manager Specialist to work with young people who may require support to maintain their tenancy.

### Identify Stairwell within Housing ACT

#### Recommendation

That Housing ACT identifies an additional appropriate stairwell within a multi-unit complex to be allocated to young people. **NB This is an action within the Youth Homelessness Action Plan.**

### Housing, Homelessness and Dual Diagnosis

#### Recommendation

That the ACT Government fund the development of template policies and procedures which would assist YSAAP services to ensure their services are accessible to young people with mental health/dual diagnosis/alcohol and other drug issues.

That high quality, timely and accessible training, is made available to community based workers, particularly YSAAP workers, to ensure a sound understanding of mental illness/dual diagnosis. **This could be partly addressed by the funding of the Youth Coalition's Sector Development Officer as outlined above.**

That the ACT Government provide ACT Housing staff with training in dual diagnosis and working with young people. **NB This is an action within the Youth Homelessness Action Plan.**

## **Improving outcomes for young people suffering from mental illness/dual diagnosis**

### **Youth Co-morbidity Worker**

#### **Recommendation**

That ACT Health resource the development of a suitable plan for services for young people with dual diagnosis, through the funding of a youth co-morbidity worker, who would sit within the Co-Morbidity Project in ACT Health.

### **Clinician support for YSAAP**

#### **Recommendation**

That Mental Health ACT resource a government-based program whereby clinical staff would support youth services across the ACT to work with young people with dual diagnosis and build capacity and confidence within organisations. **NB This is an action within the Youth Homelessness Action Plan.**

### **Early Intervention and Prevention**

#### **Recommendation**

That ACT Health directs funding towards early intervention and prevention programs for mental health and substance misuse, including programs to improve young people's emotional and social well-being. This could include the funding of additional counsellor positions for young people or expanding services which currently provide early intervention/prevention.

### **Training and Education**

#### **Recommendation**

That ACT Health make funding available to give all youth workers training in dual diagnosis and mental health, particularly in terms of early intervention and prevention.

That training and/or professional development being offered through ACT Health be made open to the community sector free of charge or at a subsidised rate.

### **Response to Self Harm**

#### **Recommendation**

That ACT Health make funding available for a project to identify appropriate and effective service models for young people who self harm, with consultations with young people who self harm being a core component.

That ACT Health make funding available to provide education and information to young people at risk of self harm.

That ACT Health make funding available for the provision of high quality training for workers in the community sector on issues related to self harm. Funding for training should also provide for young people to be trained to be co-facilitators.

## **Adolescent In-patient Unit**

### **Recommendation**

That further funding be provided to community service providers for the provision of individualised support to young people with mental health issues and their family/carers so that they can remain in their 'natural community'.

That the ACT Government commit to the development of a residential service for young people with acute mental health issues (adolescent in-patient unit), and a step down/residential 'respite' alternative to ensure a continuum of care.

## **The Youth Coalition of the ACT**

The Youth Coalition of the ACT (Youth Coalition) is the peak youth affairs body in the Australian Capital Territory and is responsible for representing the interests of people aged between 12 and 25 years of age and those who work with them. The Youth Coalition works to actively promote the well being and aspirations of young people in the ACT with particular respect to their political, cultural, economic and social development.

The Youth Coalition is represented on many ACT advisory structures and provides advice to the ACT Government on a range of issues related to young people and youth services.

The Youth Coalition works collaboratively with a range of other service providers and organisations, a key role being the provision of coordination and analysis of the implications of ACT policy and program decisions for young people and youth services.

As the peak body for the youth sector, the Youth Coalition facilitates the development of strong linkages and promotes collaboration between the community, government and private sectors to achieve better outcomes for young people in the ACT.

The Youth Coalition has a history of experience and broad range of knowledge upon which we have drawn to prepare this submission. The Youth Coalition maintains networks and runs forums for our members, young people and interested organisations and individuals. We host a monthly forum where we discuss current issues, listen to guest speakers, participate in consultative processes (and learn about other opportunities to participate), and share information. We also hold a bi-annual Policy Forum and Conference and other forums and working parties as issues arise. We aim to inform our members of new developments, funding opportunities, reform processes and other issues through our regular E-Bulletin service, website and other avenues.

As well as its usual activities, during 2004 and 2005 the Youth Coalition conducted a number of consultations with young people to inform:

- the ACT Homelessness Strategy;
- the ACT Graffiti Strategy;
- the Alcohol and Other Drugs Project;
- policy regarding young carers and young parents; and
- a response to the ACT Government Position Paper for a Commissioner for children and young people.

These consultations were undertaken using a pathfinders (peer research) model. The Youth Consultation has also consulted with youth and community services to inform our ACT Government Budget Submission.



## **1. Introduction to the Youth Coalition's 2006/07 Budget Priorities**

The following budget priorities are based on consultations undertaken by the Youth Coalition with young people and youth services throughout the year. Most of the recommendations we make in this document were previously raised in our 2005/06 Budget Submission, and in fact, in most of our submissions since 2001.

The youth sector in the ACT has reached a point whereby the ACT Government must acknowledge and address youth homelessness and mental health issues, as well as the ability of the sector to deliver high quality services to increased and more complex client loads. Due to the critical nature of these issues in the ACT, this document focuses solely on homelessness, mental health/dual diagnosis and sector viability in the ACT.

However, we recognise that there are many other issues that the ACT youth sector is currently facing. To ensure that these issues are on the agenda, we will discuss broader unmet need in greater detail in a separate document later in the year.

### **1.1 An emphasis on human rights**

Given that we are in our first year of the Human Rights Act in Canberra, it is relevant to discuss the human rights which are relevant to homelessness and mental health/dual diagnosis.

As the first jurisdiction to adopt human rights in local law, the ACT has the responsibility to uphold them in a consistent and equitable manner. The Human Rights Act recognises that everyone has the right to enjoy their human rights without distinction or discrimination of any kind.

The *Human Rights Act 2004 (ACT)* recognises that people also have other rights under domestic and international law, for example, under other treaties to which Australia is a party (ACT Human Rights Office, 2004), including the United Nations Convention on the Rights of the Child (UNCROC) and the International Covenant on Economic, Social and Cultural Rights (ICESC).

Article 27 of the UNCROC recognises the right for children to have a standard of living adequate for their physical, mental, spiritual, moral and social development.

Article 12 of the ICESC recognises the right to the "highest attainable standard of physical and mental health".

### **1.2 Homelessness and Dual Diagnosis**

The Youth Coalition recognises that mental health, substance misuse and homelessness are addressed in government policy documents such as the *Canberra Plan*, *Breaking the Cycle: the ACT Homelessness Strategy*, the *ACT Mental Health Strategy and Action Plan*, the *ACT Drug Strategy* and the *ACT Young People's Plan* and *Blueprint for Young People at Risk*.

However, in order to significantly improve health outcomes for young people, we need a more collaborative, integrated and well-resourced approach to these issues, which encompasses both government and community sectors working with young people. We believe that the following recommendations, if adopted by the ACT Government, would go some way to addressing the critical gaps in current service delivery and would move the ACT closer towards fulfilling our obligations under UNCROC, the ICESC and our Human Rights Act.

## **2. Addressing Gaps in the Sustainability and Continuing Viability of the Youth Sector**

*...data from the nation-wide ABS Community Services survey shows that every dollar spent on community service provision in the not-for-profit sector attained higher output measures [than the government sector] in all but one of the 15 activities for which reliable data is available. ACTCOSS, 2003*

### **2.1 Background**

Youth services continue to face increased and more complex client loads as well as insufficient funding for training, recruitment and retention of workers within the sector.

We believe that sector viability is pertinent to ALL priorities of the ACT Young People's Plan, particularly that *young people are supported and have access to high quality, appropriate and integrated service delivery responses.*

Community programs and services are vital components to supporting young people in the ACT. Governments have been found to be relying increasingly on non-government organisations to provide services but treating them as peripheral in the allocation of funds.

The ability of youth services to respond to demand for services by young people is a continuing concern for the Youth Coalition, as outlined in our Budget Submissions for 2004/2005 and 2005/2006. Issues include:

- staff training;
- recruitment and retention;
- salary increments; and
- pay rates (Youth Coalition 2004, 2005).

According to ACTCOSS (2005), 65% of community organisations in the ACT have difficulty attracting appropriate staff due to levels of pay and availability of paid hours. Turnover in ACT community agencies is 30.7%, compared to the national average of 16.3%.

These issues are of vital importance to the sector and need to be addressed so that it can continue to develop to become a cohesive and viable community sector in the ACT.

We therefore resubmit all of our recommendations from our 2005/06 Budget Submission that call for measures that underpin the sustainability and continuing viability of the community sector.

## 2.2 Indexation

The Youth Coalition was pleased to note that in the 2005/06 ACT Government Budget a new community sector method of indexation was announced for implementation in 2006/07. We look forward to this commencing on 1 July 2006. This initiative is much needed when considering that the youth services under the Youth Services Program missed out on indexation all together in the 2002/03 Budget. Youth services are already behind and the community sector needs to have its major issues of viability addressed.

### **Recommendation**

That the ACT Government introduce its new community sector method of indexation on 1 July 2006, consistent with their 2005/06 Budget announcement.

## 2.3 Training and Professional Development

The ACT Youth Sector continues to experience pressure in recruiting and retaining quality workers. We resubmit the following:

*Competing with local and federal government sectors that are able to provide greater professional development opportunities, better working conditions and higher wages. As a result, the sector's corporate knowledge and ability to best respond to increased complexity is minimised.*

*Over time, these factors have and will continue to impede the sector's ability to provide quality services to the ACT community – resulting in decreased social cohesion and increased social problems for young people in the community. If left unaddressed, resolving these problems will be a costly exercise in the future when the government will need to resolve what are essentially preventable issues.*

The difficulty of filling positions in the community sector with suitability skilled workers is continuously highlighted as a barrier to sustaining collaborative partnerships.

We strongly recommend that any government training/professional development opportunities should also be made open to the community sector, either free of charge or at a subsidised rate. The youth sector would particularly benefit from the opportunity to participate in training being offered through the Office of Children, Youth and Family Support.

### **Recommendation**

That the ACT Government work with the community sector to develop and implement a strategy addressing the viability of the sector with particular emphasis on training, recruitment and retention of workers within the sector.

That the ACT Government commit to ongoing funding for accredited training, professional development opportunities for staff in non-government organisations.

That any training/professional development being offered through Office of Children, Youth and Family Support be made open to the community sector either free of charge or at a subsidised rate.

## 2.4 Incremental Salary Increases

Since 2002, the Youth Coalition has raised the issue of remuneration for implementing government strategies. This issue continues to be of vital importance to the sector and therefore, we again call for adjustments in the resourcing of youth programs. We resubmit the following:

*The Youth Coalition remains concerned that the youth sector has continued to be forced to manage a number of reform processes whilst managing increases in client complexity and demand for services, within a static funding environment.*

*The Youth Coalition is committed to the continued development of a professional, cohesive and viable community sector in the ACT.*

*“The lack of an emerging career path (in the youth sector) is directly attributable to the fact that there is presently in the ACT only a tenuous link between pay scales, award conditions and quality assurance. This inevitably will leave young people, the community and finally government to manage the consequences of the loss of skills, experience and knowledge.” (Youth Sector Training in the ACT-Discussion Paper (2000), p2)*

As such, Government funding allocations to agencies should make allowance for staff costs, similar to that within the ACT Public Service. This should occur across all levels and grades.

### **Recommendation**

That the ACT Government build into service funding an incremental adjustment to allow for salary increases.

## 2.5 ACT SACS Award

For services to employ skilled and appropriate staff, the ACT Youth Sector must employ and maintain staff at reasonable pay rates. Therefore, the Youth Coalition asserts the need for continued funding of increases to ensure some parity with similar jobs in the government sector.

### **Recommendation**

That the ACT Government make a commitment to ensure that community sector wages are comparable to that of the ACT Public Service and allow for annual wage increments.

## 2.6 Renew Community Infrastructure and Facilities Program

The Youth Coalition would like to express concern over the significant funding cut that was made to the Renew Community Infrastructure and Facilities Program in the last financial year. This program is essential to the community sector and enables improvements to the physical conditions in which many community sector services are delivered and their staff work.

### **Recommendation**

That the ACT Government recurrently allocates \$500,000 per year for the Renew Community Infrastructure and Facilities Program to maintain/improve the physical conditions of community sector services.

## **2.7 Sector Development**

The Youth Coalition is seeking recurrent funding of \$100,000 for our Sector Development Program, to fund a full-time Sector Development Officer and to provide subsidised training and resources for youth services in the ACT. The Sector Development Officer is responsible for responding to the broad range of issues presently facing the sector, including (but not limited to) youth participation, case management, young parents, dual diagnosis, and self harm. As these issues cross government portfolios, we believe that funding could be allocated from different departments, including the Office for Children, Youth and Family Support and ACT Health.

This funding would provide the capacity for the Youth Coalition's Sector Development Program to:

- raise awareness and understanding across both government and non-government regarding Youth Participation;
- provide support to the Ministerial Youth Council;
- assist in the implementation of the Youth Services Program (YSP) and the findings of the YSP review, including the development of a cohesive understanding of case management across the sector;
- development of resources, based on consultations with young people and youth services;
- provide professional development and training opportunities; and
- in particular, develop and provide training, resources and professional development in working with young people with substance misuse and/or mental illness.

As outlined above, the youth sector is under increased pressure due to higher client loads and insufficient funding for training, recruitment and retention of workers within the sector. There is a real need for youth workers to receive a consistent program of training and education. This funding would provide the capacity for our Sector Development Program to formally undertake, through the YSP, a targeted Youth Workers Survival Kit to provide training and professional development opportunities for people who work with young people.

Recurrent funding for our Sector Development Program would facilitate the ongoing professional development and training of the youth sector to ensure the delivery of quality services to young people and would promote better linkages and collaboration between the youth, mental health, alcohol and other drug and family support and community sectors. This is consistent with *The ACT Young People's Plan 2004-2008* direction of Support that *young people be supported and have access to high quality, appropriate and integrated service delivery responses.*

In particular, the youth sector has indicated that they require further training, resources and professional development in working with young people with substance misuse

and/or mental illness. Currently there are limited activities in this area targeted to youth workers.

The Youth Coalition, through its Alcohol and other Drug Project has been working to improve the health outcomes of young people in the ACT through its collaborations with the youth, mental health, alcohol and other drug, family support and community sectors. Specifically, this project has provided resources and training to the youth sector on issues such as dual diagnosis – activities which otherwise would not have been undertaken.

The project has been evaluated twice and both evaluations have demonstrated a continued need for these sector development activities, however, due to lost Commonwealth funding this financial year, the project will be unable to continue this work.

#### **Recommendation**

That the ACT Government provide \$100,000 recurrently to the Youth Coalition to properly fund its Sector Development Program, to recurrently fund a full time Sector Development Officer and provide subsidised training and resources for youth services in the ACT.

### **3. Addressing Youth Homelessness**

Homelessness and housing affordability remains a huge issue in the ACT. In 2002, 400 young people in the ACT were estimated to be homeless (Council to Homeless Persons, 2005). The current housing situation in Canberra is that even those people on the early allocation list cannot access public housing for *at least* nine months. This is particularly impacting upon SAAP services, because even where young people can and do access SAAP crisis accommodation, a lack of suitable exit points results in the system being 'jammed' and prevents the recently homeless from accessing assistance.

#### **3.1 Capital funding to Housing ACT**

The 2005/06 ACT Government Budget did not deliver any increases in capital funding to Housing ACT, which exacerbated the already dire circumstances that many young people experiencing homelessness and poverty face daily.

First and foremost, we urge the ACT Government to allocate funding to the purchase of additional public housing, consistent with their 2004 election commitment. It is vital that this additional housing is purchased. The current lack of secure housing undermines young people's health, including their mental health, their relationships and their prospects in education and employment. We strongly believe that safe, secure, affordable and accessible housing options for young people are essential.

*The ACT Young People's Plan 2004-2008* states the ACT Government's commitment to improving young people's access to safe, secure, affordable and appropriate accommodation with the necessary supports to live as independently as possible within our community.

### **Recommendation**

That the ACT Government increase public housing stock next financial year, as per its election commitment.

This year the Youth Coalition was involved in the drafting of the Youth Homelessness Action Plan. We consulted with homeless young people on all actions within this plan and believe that as a result, the ACT Government has made a commitment to these young people to complete the actions.

Therefore, we strongly recommend that in 2006/07 funding be directed to the implementation of all actions of the Youth Homelessness Action Plan. Several of the actions were recommendations in our last Budget Submission, and we include a few of the most critical in the following recommendations.

### **3.2 Accommodation in Gungahlin/Belconnen**

As stated in our last submission, recent statistics (Youth in the ACT, A Social and Demographic Profile (2002, figures from June 2000)) indicate that the second largest number of young people aged 15 – 24 lived in South Belconnen. The number of young people in this age group living in Gungahlin (2800) is forecast to nearly double over the next decade, reaching 3600 in 2005.

The need for crisis and medium-term accommodation for young people in the Belconnen and Gungahlin areas continues to be an issue, despite having been raised in a number of reports and forums.

It is our view that we have sufficient information demonstrating this need and supporting a commitment of resources to responding to the accommodation needs of young people in the Belconnen and Gungahlin areas.

### **Recommendation**

That the ACT Government make five (5) Housing ACT properties available to community organisations to trial group share arrangements for young people. Three (3) of these houses are to be located in the Belconnen region to address medium term accommodation imbalances between north and south Canberra. **NB This is an action within the Youth Homelessness Action Plan.**

### **3.3 Youth Specific Housing Manager**

In consultations throughout this year, both service providers and young people expressed concern at the limited public accommodation options available to young people, and reported that the allocation of inappropriate accommodation, including being in unsafe environments, or locations that preclude access to transport, schools, family and social networks, places vulnerable young people at risk of further episodes of homelessness.

A study undertaken by Australian Housing and Urban Research Institute (AHURI) in 2003 examined the links between stable housing and support for people living with a mental illness, from the perspective of those living with the illnesses. The study confirmed the importance of matching the type of housing to the individual and the crucial role played by support workers in maintaining stable housing. The Youth

Coalition believes that this could be partially addressed by appointing a specific Housing Manager that young people can access when seeking public housing.

**Recommendation**

That Housing ACT establish a Youth Specific Housing Manager and Housing Manager Specialist to work with young people who may require support to maintain their tenancy. **NB This is an action within the Youth Homelessness Action Plan.**

**3.4 Identify Stairwell within Housing ACT**

There is a real need for a greater number and range of accommodation options to be made available which meet the diverse needs of young people. We encourage the ACT Government, in particular, Housing ACT, to increase the available supply of appropriate, safe and adaptive housing for young people at risk of homelessness and people who are homeless.

The Youth Coalition believes that an innovative, practical and cost-effective accommodation option is the identification of an additional appropriate stairwell within a Housing ACT multi-unit complex to be allocated to young people. Young people accommodated in this stairwell will need to receive support from the Youth Specific Housing Manager.

**Recommendation**

That Housing ACT identifies an additional appropriate stairwell within a multi-unit complex to be allocated to young people. **NB This is an action within the Youth Homelessness Action Plan.**

**3.5 Housing, Homelessness and Dual Diagnosis**

*[In terms of mental health and accommodation] one affects the other so much, if there is not enough housing then a person's mental health will be affected, but when mental health is not supported then a person's day to day life skills are the first to go including housing. Feedback from a service during our consultation process.*

Homelessness has an exacerbating affect on already existing dual diagnosis issues and can be a precursor to dual diagnosis. Studies have found that between 48% and 82% of homeless young people have a diagnosable mental illness.

Homelessness and dual diagnosis represent a cycle whereby people with pre-existing mental illness or substance misuse are highly vulnerable to becoming homeless; and the experience of being homeless can trigger substance misuse, mental illness or dual diagnosis.

This is a complex area that spans across several sectors and government departments – youth, mental health, housing and alcohol and other drugs. The solutions are not easy, quick or cheap.

However, the current situation facing homeless young people with dual diagnosis is unacceptable. It is not enough to say that it is too difficult or expensive to fix.



Community and government have an obligation to ensure that young people are afforded the right to good health and access to appropriate and safe accommodation.

Community organisations need to be supported through the provision of resources, training opportunities and professional development so that they can offer high quality, inclusive and accessible programs for young people with dual diagnosis who are homeless.

#### **Recommendation**

That the ACT Government fund the development of template policies and procedures which would assist YSAAP services to ensure their services are accessible to young people with mental health/dual diagnosis/alcohol and other drug issues.

That high quality, timely and accessible training, is made available to community based workers, particularly YSAAP workers, to ensure a sound understanding of mental illness/dual diagnosis. **This could be partly addressed by the funding of the Youth Coalition's Sector Development Officer as outlined above.**

That the ACT Government provide ACT Housing staff with training in dual diagnosis and working with young people. **NB This is an action within the Youth Homelessness Action Plan.**

#### **4. Improving outcomes for young people suffering from mental illness/dual diagnosis**

While we recognise the ACT Government's commitment to mental health services, we were disappointed to note that in the 2005/06 ACT Government Budget there was no funding directed to youth specific mental health or alcohol and other drug services or initiatives. This is despite the fact that the *ACT Mental Health Strategy and Action Plan 2003-2008* estimates that approximately 24% of people experiencing a mental illness in the ACT will be under 19 years of age. The Youth Coalition made several recommendations regarding the need for funding for mental health, dual diagnosis and self harm.

It is critical that funding is directed to youth specific mental health and dual diagnosis services and initiatives in the 2006/07 budget. The lack of these services is greatly impacting on young people in the ACT, including in terms of poverty, homelessness and involvement in the juvenile justice system. The recently released report *Not for Service: Experiences in injustice and despair in mental health care in Australia (Not for Service)* notes that concern was expressed amongst carers and consumers:

*regarding the paucity of services and integrated services to assist young people with mental illness or mental health problems. Such services are seen as essential from an early intervention perspective to halt spiralling negative life consequences which result in homelessness, suicide, and entry into the criminal justice system.*

The Youth Coalition believes that all of the following recommendations link with the ACT Young People's Plan under *Support - providing a wide variety of responsive and inclusive services to meet the diverse needs of young people.*

## **4.1 Dual Diagnosis**

In October 2005, the Co-Morbidity Project developed a definition of dual diagnosis. We support this project and the fact that the definition brings focus back to functionality. We anticipate that this definition will improve consistency in service delivery and reporting.

Dual diagnosis is widespread and often associated with poor treatment outcomes, severe illness and high service use. Anecdotally, between 30% and 90% of clients seen in mental health services or drug and alcohol services are dually diagnosed.

We note that there have been many improvements made in terms of dialogue and links between mental health and alcohol and other drug services in the ACT. In particular, we commend the work of the Co-Morbidity Project, ACT Health.

However, it has been reported that for young people, there is a gap between mental health and alcohol and other drug services – they get tossed between the two. Many service providers and consumer organisations try to provide holistic services, however are not funded to do this (ACTCOSS, 2003).

### **4.1.1 Youth Co-morbidity Worker**

We believe that there is also a responsibility for ACT Health to fund the development of a plan for services for young people with dual diagnosis, similar to the Co-Morbidity Project, which includes a youth co-morbidity worker. This should involve an independent review of the nature of dual diagnosis in adolescents and treatment models by an expert in the field.

#### **Recommendation**

That ACT Health resource the development of a suitable plan for services for young people with dual diagnosis, through the funding of a youth co-morbidity worker, who would sit within the Co-Morbidity Project in ACT Health.

### **4.1.2 Clinician support for YSAAP**

By accepting young people with dual diagnosis, some services are concerned that other young people may be exposed to unsociable behaviour, suicide and depression, and may be vulnerable and not have the coping or relationship skills to deal with this.

Services also argue that they do not have the ability to provide or cope with the intensive support needs of young people with dual diagnosis, due to a lack of training and staff numbers.

The Youth Coalition believes that there is a need for the development of a program whereby clinicians within Mental Health ACT provide practical support for youth services that work with young people with dual diagnosis. These clinicians would have expertise in dealing with dual diagnosis, and would have be able to assist youth services during crisis situations to make effective links between mental health and alcohol and other drug services for the young person. This would have the flow on affect of building capacity and confidence within youth services by providing hands-on training to staff as they collaboratively work to help the young person.

### **Recommendation**

That Mental Health ACT resource a government-based program whereby clinical staff would support youth services across the ACT to work with young people with dual diagnosis and build capacity and confidence within organisations. **NB This is an action within the Youth Homelessness Action Plan.**

## **4.2 Early Intervention and Prevention**

Early intervention and prevention has been identified within the priority actions of the ACT Mental Health Strategy and Action Plan 2003-08 'prevention of mental health problems' and 'increased capacity for early intervention' (p45, 64, 65). The *Not for Service* report identifies that there is little attention to issues of early intervention in the ACT. The report notes that all carers and consumers who provided submissions from the ACT mentioned how 'unacceptable it was, on many levels, for treatment and support services not to be provided at the earliest possible moment to prevent deteriorating illness'.

There is a real need for early intervention and prevention initiatives in the ACT. Through our consultations we learnt of a general feeling in the community that young people can only receive assistance if they are at the worst end of the spectrum.

There are few resources currently being directed to this issue, despite the fact that the few services which currently provide counselling services for young people cannot meet current, nor increasing demand.

Our past budget submissions have recommended the establishment of 'emotional and social well-being counsellor' positions located in community youth services/centres in regional areas and accessible locations. These positions would assist a coordinated approach to the provision of early intervention and prevention services, particularly to marginalised young people. Such positions could be located at the youth centre 'hubs' meaning that young people who would usually access these services could be supported in their established community. They could also link to the ACT Government's election commitment of establishing two new youth health services in Belconnen/Gungahlin and Tuggeranong.

Alternatively, initiatives or services that currently provide counselling could be expanded. The role/model and title of such positions should also be given consideration to ensure access. For example, it is our understanding that the Winnunga Nimmityjah Aboriginal Health Service Emotional and Social Health workers provide holistic models of intervention through their emotional and social well being services and that these services may be perceived as more accessible for young people. Both indigenous and non-indigenous young people access this service leading to an increased burden on resources and workers. The Youth Coalition believes that this service should be further funded or the model expanded to other programs/services.

As outlined in our 2005/06 Budget Submission, it is our view that regardless of the place of employment, these counsellor positions must be equipped with resources to allow them to undertake outreach to young people in the region (for example to young people in independent living), to ensure access for young people who do not, or are unable to attend youth centres and services.

### **Recommendation**

That ACT Health directs funding towards early intervention and prevention programs for mental health and substance misuse, including programs to improve young people's emotional and social well-being. This could include the funding of additional counsellor positions for young people or expanding services which currently provide early intervention/prevention.

## **4.3 Training and Education**

It is essential that training and education in mental health/dual diagnosis be offered to all professionals who work with young people, particularly in terms of early intervention and prevention. In a recent consultation, workers (including teachers, counsellors, youth workers and other professionals) highlighted gaps in terms of their training in dual diagnosis. Other services have indicated that their staff require training in mental health more broadly.

In considering training and education needs for the youth sector, it is important to consider the sector viability issues that we have outlined above, particularly in terms of time and resources. It is difficult for services to send staff to expensive and time-consuming training.

The Youth Coalition believes that we could address some of the training and education needs of the sector through our Sector Development Program as outlined above.

We also strongly recommend that any training and/or professional development being offered through ACT Health be made open to the community sector at a subsidised rate.

It is important to note that early intervention and prevention may also take the form of assistance with education (including alternative education programs), employment and general support for young people. We commend programs which offer these supports to young people and encourage further funding be directed to initiatives which support young people with issues which have the potential to become problematic and affect their mental health.

### **Recommendation**

That ACT Health make funding available to give all youth workers training in dual diagnosis and mental health, particularly in terms of early intervention and prevention.

That training and/or professional development being offered through ACT Health be made open to the community sector free of charge or at a subsidised rate.

### **4.3.1 Child and Adolescent Mental Health Service (CAMHS)**

We commend the work that CAMHS has been undertaking in terms of education and training for the youth sector. However, from our consultations it is clear that CAMHS still needs to raise general awareness of their eligibility criteria particularly in terms of self harming (ie when they will or will not engage with a young person). We therefore recommend that the ACT Government continue to support the education and training program currently being undertaken by CAMHS.

#### **4.4 Response to Self Harm**

Lifeline has indicated that self harming amongst young people is on the rise in the ACT. Evidence also suggests that this is a growing issue for service providers both in mainstream youth services, and particularly for YSAAP services.

However, we understand that this trend has not been matched by increased funding to services. In fact, there is a real gap in terms of services available for young people who self harm. In particular, youth services have indicated they often have to ring the police in crisis situations. This may be compounded by the fact that youth service staff have not received adequate education or training in dealing with self harm, due to issues raised above.

Obviously, it can be further traumatising for a young person to be in contact with the police, who may be responsible for taking them to the PSU for the first time. The Youth Coalition is also concerned to hear of instances where young people who are self harming are being remanded in Quamby as this is the only place where they can be kept 'safe'. Involvement in the juvenile justice system in this way is unnecessary and problematic.

We understand that a Memorandum of Understanding is currently being finalised between the police and Mental Health ACT. We would be interested to receive further information about how this will affect services who are dealing with young people who self harm.

However, regardless of this information, there is a clear need for a more appropriate model for working with young people who self harm. The need to direct resourcing to investigate the issue of self harm further in the ACT, as well as the need to develop strategies and services for young people who self harm has been continuously raised as a priority by stakeholders in consultations by the Youth Coalition.

In our consultations, it was raised that the rising incidence of self harm may be directly related to a lack of support and education for young people. Therefore resources need to be directed towards programs which increase education in areas such as help seeking behaviour, stress management and resilience.

As discussed in early intervention and prevention, the funding of counselling positions would help to improve the emotional well-being of young people and are vital for young people who self harm due to a lack of support.

#### **Recommendation**

That ACT Health make funding available for a project to identify appropriate and effective service models for young people who self harm, with consultations with young people who self harm being a core component.

That ACT Health make funding available to provide education and information to young people at risk of self harm.

That ACT Health make funding available for the provision of high quality training for workers in the community sector on issues related to self harm. Funding for training should also provide for young people to be trained to be co-facilitators.

#### 4.5 Adolescent In-patient Unit

As outlined in our 2005/06 Budget Submission, the ability to support young people with mental health issues in their 'natural communities' is preferable, as is the provision of a continuum of support. The de-institutionalisation of mental health has not been matched by the development of services in the community. Funding in this area is still needed to enable support to be brought to the individual and their family/carers, so that they can remain in their 'natural community' as far as possible.

However, throughout our consultations this year, the need for an adolescent in-patient facility was highlighted. The current Psychiatric Services Unit (PSU) is not youth-specific and at times is not safe for young people.

Earlier this year, Minister Corbell announced the development of an Adolescent In-patient Unit. The Youth Coalition supports this initiative and we hope to see funding associated with this to be announced in the 2006/07 ACT Government Budget.

Clearly, the broad spectrum of mental health services must also be addressed, including early intervention and prevention programs and education and training for youth workers.

We also believe that the funding of an adolescent in-patient unit should be accompanied by the funding of a step down/residential 'respite' alternative to ensure a continuum of care.

We resubmit the following from our 2005/06 Budget Submission:

The ACT Mental Health Strategy & Action Plan 2003 – 2008 noted - "*An alternative to acute admission, or step down accommodation following admission, was consistently identified as a priority*"(p105), in the adult system, and it will also be a need for adolescents, and that there should be no cost involved in accessing such a service. If there is a cost involved, this must be commensurate with the individual's circumstances – for example the need for individuals to continue rental payments so as not to risk loss of accommodation in the community, must be considered.

#### **Recommendation**

That further funding be provided to community service providers for the provision of individualised support to young people with mental health issues and their family/carers so that they can remain in their 'natural community'.

That the ACT Government commit to the development of a residential service for young people with acute mental health issues (adolescent in-patient unit), and a step down/residential 'respite' alternative to ensure a continuum of care.

## References

ACOSS (2005) Australian Community Sector Survey 2005 (ACT)

ACT Government (2003) *The ACT Mental Health Strategy and Action Plan 2003-08*

ACTCOSS (2003) *Sector Viability in the ACT Issues Paper*

Mental Health Council of Australia (2005) *Not for Service: Experiences of injustice and despair in mental health care in Australia.*

Youth Coalition of the ACT (2004) *Budget Submission 2004/05*

Youth Coalition of the ACT (2005) *Budget Submission 2005/06*