Dear Accommodation and Support Strategy Team

Feedback on the draft *Western Australian Mental Health, Alcohol and Other Drug Accommodation and Support Strategy 2018-2025*

Thank you for the opportunity to comment on the draft *Western Australian Mental Health, Alcohol and Other Drug Accommodation and Support Strategy 2018-2025* (the Strategy).

As Commissioner for Children and Young People in Western Australia, my role is to advocate for the best interests of all children and young people under the age of 18 in Western Australia, and to promote and monitor their wellbeing. In doing so, I must have regard for the United Nations Convention on the Rights of the Child, and give priority to Aboriginal children and young people, and children and young people who are vulnerable or disadvantaged for any reason.

My office has conducted a range of work around the mental health and wellbeing of children and young people in Western Australia, as well as looking at the needs and experiences for children and young people who are experiencing homelessness or housing issues, either as individuals or as part of their family unit. Our most recent work in this space focusing on the needs and experiences of homelessness for young people under the age of 16, in response to a gap in services for this cohort of children and young people.

I am pleased to see that the draft Strategy outlines a range of considerations in relation to the needs of children young people, and their families, and would like to provide some additional considerations for inclusion in the Strategy. Throughout this document, I have also provided some quotes from young people that have been involved in consultations with office, to outline their relevant lived experiences.

**Overall feedback on the Strategy**

The Strategy provides important direction for the provision of appropriate accommodation and support options for people experiencing mental health issues and alcohol or drug (AOD) problems in Western Australia, however there are some areas of the Strategy that could be strengthened or explained more comprehensively.
Specific target groups and populations

While the Strategy does highlight some priority populations in the section on Specific Needs of Population groups, it could more clearly and comprehensively detail the specific target groups or populations who are most vulnerable to experiencing issues related to mental health, AOD use, or maintaining stable accommodation and housing. It could be envisaged that this was aligned to the priority populations outlined in the Western Australian Mental Health, Alcohol and Other Drugs Services Plan 2015 – 2025 and other Mental Health Commission strategies.

In addition to the target priority groups already outlined in the Strategy, these should also include children and young people (as individuals experiencing issues relating to their own mental health, AOD use or accommodation), including children under the age of 16; families with children and young people where parents may be experiencing mental health or AOD issues; lesbian, gay, bisexual, trans and intersex (LGBTI) people (including children and young people); children and young people in, or leaving, out-of-home care; and people with complex needs. The inclusion of these groups in the Strategy would ensure clearer direction both for the Mental Health Commission and the sector to consider the needs of specific groups of people, and the supports required to meet these needs.

Initial aims

The initial aims outlined in the document include the aim to “prevent homelessness through improved intervention and support services, where required, to assist tenants with mental health and/or AOD issues to live independently”, as well as a “contribution to a reduction in stigma towards mental health and AOD issues to facilitate improved access to accommodation options”. These aims, particularly the prevention focus, are important aspects of the Strategy, and require more significant consideration throughout the document to help guide services and approaches within the sector.

Age appropriate services

It is important that the Strategy addresses the need for age appropriate services across the service spectrum and accommodation provision, in line with the Western Australian Mental Health, Alcohol and Other Drugs Services Plan 2015 – 2025. This may include providing examples of services to address the mental health, AOD and housing needs of infants, children and adolescents, youth, adults (including parents with children), and older adults.

The strategy does discuss some needs and considerations for youth, older adults, and families with children but fails to discuss strategies to address the needs of children and young people at a younger age (either as individuals or as children of parents with mental health, AOD or housing issues). Given that the factors that influence or precede issues relating to mental health, AOD use and homelessness typically occur prior to a young person turning 16,¹ this needs to be reflected in the aims of the Strategy. Service examples might be provided to included services which support a child or young person with mental health or AOD issues to remain in appropriate and safe accommodation in the family home where safe to do so, through the provision of support to family members or carers; or how families or parents with mental health

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and/or AOD issues who have children are supported to access suitable and safe accommodation.

Child safe organisations

It is vital that all organisations take responsibility to protect children and young people from harm and abuse, and implement strategies to manage and identify risks that affect their safety and wellbeing. This includes creating conditions that minimize the likelihood of harm occurring, that increase the likelihood of harm being discovered, and which responds to disclosures or allegations of harm.

The Royal Commission into Institutional Responses to Child Sexual Abuse assessed the varying degrees of risk of child sexual abuse in children and young people’s interaction with organisations, based on characteristics of the child, the nature of engagement with children and young people, and the characteristics of services and organisations.2 Whilst the risk was discussed specifically in the context of child sexual abuse, it is applicable to the risk of other types of harm to children and young people. Given that there is an increased risk of vulnerability for children and young people and/or their families who are experiencing issues relating to their mental health, AOD use, and housing, and increased situational risk for organisations providing accommodation and support services, it is vital that the Strategy outlines the need for services take responsibility to ensure the safety of children and young people across all aspects of their service provision, and to implement strategies to address child safety.

My office have been committed to promoting and supporting the implementation of principles and practices of child safe organisations in Western Australia. Our Child Safe Guidelines mirror the frameworks established by the Royal Commission into Institutional Responses to Child Sexual Abuse, and other national frameworks, focusing on strategies across the following nine domains:

- Leadership, governance and culture
- Child safe and friendly policies
- Child friendly complaint process and reporting
- Empowering children to participate
- Managing staff and volunteers
- Education and development
- Involving family and community
- Safe environments – physical and online
- Continuous improvement3

Our office have a range of resources to support organisations to develop child safe strategies, including the Child Safe Organisations WA: Guidelines and Child Safe Organisations WA: Self-assessment and review tool, available at www.ccyp.wa.gov.au. We would also be happy to facilitate further discussion with the Mental Health Commission, mental health, AOD and accommodation organisations to support the implementation of child safe strategies across the sector.

3 Commissioner for Children and Young People WA, 2016, Child Safe Organisations WA: Guidelines, Commissioner for Children and Young People WA, Perth.
Feedback on Key Focus Area 1: Increased access to appropriate, affordable, safe, long-term accommodation.

This key focus area could more clearly outline the need for age-appropriate accommodation options for children and young people, which consider their individual’s level of independence, the nature of support that they would require, and how they would be supported in areas such as education and other aspects of their lives. Services for children young people need to be equipped to manage some of the complex and challenging needs that they may be facing, for example, co-existing mental health and AOD use, as this level of support is often not able to be provided under existing funding models.

"Being homeless is probably been the worst time of my life like, getting beat nearly every day, and being homeless has led to, getting depressed, and taking drugs, you know I abuse drugs, cos you think it’s the only thing to do, you don’t have any money to spend on anything, you pick up drugs, you end up in debt to people you don’t want to end up in debt with or you end up being really mentally unstable, because all your family’s really rat shit."15 year-old, (Homelessness consultation)

There is a need to look at access to appropriate accommodation services for under 16s who are unable to live with family, as this group often fall through the gaps in terms of their eligibility to access youth homelessness and accommodation services. Due to their age and consent issues where they live away from parents, this would require planning and collaboration with the Department of Communities.

"The biggest barrier for me getting something is my age... I’m just 15 and I’m almost a month away from being 16, you still have boundaries until the first second you turn 16 and you can do all these things and like its just ridiculous, you should be able to do something a couple of weeks before you turn 16."17 year-old (Homelessness consultation)

Action 1C: Working with a co-design framework, undertake reforms on current eligibility, social housing allocation guidelines, waitlist, tenancy management and eviction policies and processes, to take into consideration the specific needs of people with mental health, and AOD issues.

I am supportive of using co-design frameworks to identify existing issues within the accommodation and support sector, and ways to address these to better meet the needs of people with mental health and AOD issues. I would envisage that this would be guided by the Mental Health Commission’s Working Together: Mental Health and Alcohol and Other Drug Engagement Framework 2018-2025, which I believe is still to be finalised. I provided feedback to the draft of the engagement framework, outlining the need for specific considerations about consulting with, and engaging children and young people in co-design and co-production approaches, to ensure that their voices and opinions are heard and considered in a meaningful way. All co-design and co-production approaches need to be facilitated by skilled practitioners, who are experienced in working with the specific target group they are engaging, particularly for children and young people.

It is important that in undertaking these reforms, that the specific systemic issues affecting children and young people or families with children are considered. This may include addressing some of the specific eligibility requirements for young people’s access to accommodation and housing services (e.g. the requirement to be enrolled in
a day program), to determine whether these are restrictive or appropriate for young people who may be experiencing issues relating to their mental health or AOD use.

"I've been in and out of hospital... Wasn't allowed to stay in [youth accommodation hostel] during the day, when came out of hospital had to crash at mate's place, just wanted to sleep." 15 year-old (Homelessness consultation)

It is also important that reforms consider the need for service flexibility to best meet the needs of the individual child or young person, as well as flexibility around the age at which a young person can be supported, to ensure that they do not fall through the gaps or are left unable to access support services.

**Action 1D and 1E: Ensuring effective transitions and processes are established.**

The Strategy could highlight the need for transitions to consider the unique needs of children and young people, and their families. This might include examples about how children and young people may be supported to transition back into the family home and associated supports for parents and other family members; supports for young people who may be transitioning between support services who do not have the support of family or other supportive adults; transitions for young people into independent living and the supports required; and supports for families with children.

**Feedback on Key Focus Area 2: Establishment of strategic collaborative partnerships.**

There is a strong need for cross-sector partnerships to deliver better integrated and cohesive services for children and young people and their families who are experiencing issues with their mental health, AOD use and housing. This needs to include better collaboration and coordination of services, and flexibility about the way that services are offered in order to meet the needs of the individuals, families or local communities.

Mental health, substance use and housing issues are some of the primary drivers for child protection intervention, children and young people coming into care, and child and youth homelessness, signalling the importance of a strong partnership and collaborative approach with the Department of Communities to address these issues early. The Strategy should discuss the alignment with the Department of Communities Earlier Intervention and Family Support Strategy, which outlines the need to deliver shared outcomes for vulnerable Western Australians, with a collective effort across Government. Examples of collaborations could include the involvement of the Mental Health Commission or other mental health or AOD organisations in forums such as the Regional Managers Forums, or through local Family Support Networks.

"Was living with mum, there was a family trauma, mum had mental health issues which declined, she kicked me out, then kicked my brother out." 23 year-old (Homelessness consultation)

"I didn't exactly leave home, I was homeless before I even decided to leave home, I was always homeless cos my mum uses drugs." 16 year-old, (Homelessness consultation)

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Other cross-government collaboration would be required to address some of the specific needs of children and young people and/or their families, for example, for those who are in, or leaving, out-of-home care, have involvement with the justice system, have a disability, are engaged in (or disengaged from) education, etc.

"They [Department of Communities – Child Protection and Family Support] tried to find me but not exactly helping in a lot of ways. The help I was receiving wasn’t the right form of help, I wasn’t receiving assistance with counselling, really stuff I needed like counselling was the main thing I needed living on the streets for so long. I needed someone to talk to, because I never had someone who was there 24/7 for me. I always had a different person I seen when I came to DCP, it became frustrating and scary for me. So I never had no one to trust." 18 year-old (Homelessness consultation)

Feedback on Key Focus Area 3: Provision of contemporary housing and support models

My office would be supportive of a review of existing models, with a specific focus on how they meet the needs of specific target groups or populations, including children and young people and families with children. This review should include looking at the existing services which focus on the prevention of homelessness for families with mental health and AOD issues, or for children and young people where they are experiencing these issues. This may include looking at in-home support services which support children and young people with mental health or AOD issues to remain in the family home, where safe to do so, or other in-home supports that can provide intensive case management and support for families to address mental health, AOD issues, and housing issues. Support models must address the needs of the entire family unit, not just the individual.

"Well I used to live with my mum, say you are referred to an agency and then they send you to rehab, and you’re clean and then you still got to go back home where they are drinking and smoking that’s what I mean you just can’t go and say look he’s a kid on the radar, he’s the one that did the crimes, he’s the one you need locking up, but when he gets out the drinking and smoking are still there, egging you on to go steal, go steal a drink or go steal this come back with a list of things to do, so you gotta work with the whole family, not just the young people as well, you can’t expect to change them ‘cause it’s the family’s behaviour not just theirs.” 17 year-old (Youth Justice Consultation)

"In the end it was getting too hard and it led to my self-harm, even suicidal because of what they’d been doing in my family... I’ve gone through depression including emotional pain and that’s very hard to go through......" 21 year-old (Homelessness consultation)

Feedback on Key Focus Area 4: Provision of planning, education and training.

This focus on the provision of planning, education and training for the service system workforce should also include looking at training to build the capacity of the workforce to support specific target groups and populations, in particular, the capacity of the workforce to support children and young people and their families.
Key Focus Area 5: Provision of data and research to improve accommodation and support responses.

There are currently gaps in the way that data is recorded for children and young people and their families, either by not recognising children and young people in the data recorded when systems interact with an individual parent or family member, or by not capturing data from younger children and young people who may present to, but are not eligible to access accommodation and support services. It is important that data, monitoring and reporting is able to sufficiently capture the experiences of children and young people, including those under the age of 16, and of families with children and young people in their care, in order to provide a clearer picture of the needs of these groups, their access to services, gaps in service provision, and the effectiveness of the supports and services in place to support them.

Summary

I appreciate the opportunity to provide feedback on the draft Strategy and look forward to receiving a copy of the final Strategy. If you would like to discuss the content of this letter, please contact me on 6213 2297, or if it is more convenient, please contact Katherine Browne, Principal Policy Officer, on 6213 2224 or katherine.browne@ccyp.wa.gov.au

Yours sincerely

[Signature]

COLIN PETTIT
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