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Via email - Murphy.Wright@nousgroup.com.au

Dear Ms Wright

Thank you for the opportunity to provide feedback on the design and delivery of the models of services for the Youth Step Up Step Down (SUSD) service, Youth Long-term Housing and Support Program, and Youth Psychosocial Packages.

About us

Shelter WA is the independent peak body in WA that advocates for social and affordable housing and ending homelessness. Shelter WA takes a strategic leadership role, championing the development of an effective housing system and bringing all parts of the system together to achieve this. Shelter WA brings together a strong coalition committed to diverse and affordable housing choice for all with a focus on housing for people on low to moderate incomes and groups that experience housing insecurity. Shelter WA undertakes research and policy development, engagement, and advocacy to drive solutions to build an effective housing system and alleviate housing-related poverty.

The Western Australian Alliance to End Homelessness (WAAEH) is a coalition of individuals, businesses and agencies from the WA community sector that have been active in bringing about change on the issue of homelessness in WA over the past four years. WAAEH launched a 10-year strategy in April 2018 to end homelessness in Western Australia. Collectively, the strategy was developed by homelessness service providers, people experiencing homelessness (lived experience), researchers and academics, service funders, and members of the WA community. This Strategy provides a framework to inform the process for ending homelessness in WA, and providing signposts for action. It is intended to act as a blueprint - replicable in terms of processes, and guidance in terms of approach. Shelter WA acts as the backbone organisation on behalf of the Alliance and its goals closely align with it.

General principles for all three services

Co-design

Shelter WA and WAAEH welcome the Mental Health Commission's commitment to co-design in the development of these services and YACWA's leadership of this process. We hope that the engagement of young people, and in-particular young people of lived experience, in the development of the models of service will be only the start of sustained effort to ensure the voices of young people are privileged across service design and ongoing service delivery.

Housing First

As identified by the Mental Health Commission, having access to safe, secure, stable and appropriate accommodation is widely recognised as one of the most significant factors in achieving recovery for a person with poor[1]. In addition, an individual may need a fixed address or stable housing in order to access needed health services as well as other services and supports. [2] Despite widespread recognition of the importance of enduring housing, homelessness and gaps in supported accommodation services remain some of the most significant issues impacting the mental health system in WA. Of particular concern is the current lack of social housing stock in Western Australia. As at 31 August 2021, of the 17 480 applications on the public housing waitlist, 3 548 were priority listed, representing 7 065 individuals. Increasing stock will be critical to successful implementation of Housing First. New government investment into social housing announced in the recent state budget is welcome, however given the pressure on the social housing system additional investment will be required to meet current and future need.

Shelter WA and WAAEH welcomed the commitment by both the Mental Health Commission and the Department of Communities to a Housing First approach. Housing First is predicated on the principle that access to stable accommodation should support people with complex issues and not be dependent on an individual having successfully addressed mental health or addiction issues. Housing First programs respect client choice, follow a harm reduction approach, believe that support provided while in housing is more effective than without a house, provide a stronger platform for education and employment and transition out of support services, and see permanent housing as a basic human right. [3] Programs that provide temporary or interim accommodation that do not separate housing and supports, and where young people lose their housing when they exit the program, are not consistent with a Housing First approach. A Housing First approach advocates that people experiencing homelessness are better able to access support and achieve long-term positive outcomes from the stability of a home.[4] As such, it is vital that accommodation support packages provide access to permanent, safe and secure housing with strong links to mental health support, informal community support and clinical support as needed to enable mental health recovery and growth, and to enable access to services and resources that will assist young people to live independently in the community.

A 2016 AHURI study on the health, social and economic benefits of providing public housing and support to formerly homeless people found that the provision of public housing significantly reduces health service use and that reduction in health service use was greatest for tenancies sustained between one and four years.[5] This finding should be factored into decision-making around the length of time people are provided access to accommodation packages.

The community housing sector is ideally placed to provide long-term housing options for young people with mental health challenges. Many Community Housing Providers (CHPs) have a strong history in delivering person—centred approaches and already fulfill an important role providing access to, and sustainment of, housing to those who have complex needs in our community. Investment in partnership with government to

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[1] https://www.mhc.wa.gov.au/media/2788/mental-health-outcomes-statements-1-1.pdf

[2] https://www.ahuri.edu.au/housing/policy-analysis/mental-health-and-housing

[3] The Western Australian Strategy to End Homelessness: A 10 Year Plan to End Homelessness in Western Australia 2018-2028, Western Australian Alliance to End Homelessness (WAAEH). Retrieved from: https://www.endhomelessnesswa.com/strategy Page 11.

[4] The Western Australian Strategy to End Homelessness: A 10 Year Plan to End Homelessness in Western Australia 2018-2028, Western Australian Alliance to End Homelessness (WAAEH). Retrieved from: https://www.endhomelessnesswa.com/strategy Page 11.

[5] Wood, L., Flatau, P., Zaretzky, K., Foster, S., Vallesi, S. and Miscenko, D. (2016) What are the health, social and economic benefits of providing public housing and support to formerly homeless people?, AHURI Final Report No. 265, Australian Housing and Urban Research Institute Limited, Melbourne, https://www.ahuri.edu.au/research/final-reports/265

a supportive landlord model will provide a positive complement to the Housing First model and assist help vulnerable individuals sustain their tenancies.

The Supportive Landlord Service Model, developed by community housing providers on behalf of the Mental Health Commission in 2019, is based upon an assumption that a supportive landlord service fulfills an important safety net role, preventing people with complex needs potentially slipping through the gaps of support services and losing their home.[6] We recommend a supportive landlord approach is included in the Youth Long-Term Housing and Support Program accommodation service model. Significant work has been done documenting essential components of such an approach, including recent work by WAAMH and Shelter WA.[7] Shelter would be happy to provide further detail about this work.

Young people face specific barriers accessing accommodation and it will be important work is done to address these. It is well-known that people in Western Australia often languish in hospitals, mental health inpatient facilities, prisons and youth detention facilities past their discharge or release date due to a lack of suitable accommodation available for them in the community. We understand this is also the case with the current adult SUSD facilities. It will be important to ensure all three youth programs facilitate access to appropriate accommodation in the community so that young people are not kept in SUSD or inpatient facilities unnecessarily.

We note the best outcomes are achieved by adopting a specific youth Housing First model that takes into account that the causes and conditions of homelessness in young people are distinct from those in adults.[8] Work is needed to develop such a model for Western Australia.

Choice and control
It is important services are person-centred and that young people have choice and control over the services and supports they receive. Where possible services should be available closer to where young people, their families and friends live, and integrated to enable ongoing support for people in their own community.

Aboriginal and Torres Strait Islander young people

The Mental Health Act 2014 contains a range of important principles around the assessment and treatment of Aboriginal and Torres Strait Islander peoples, including that there should be collaboration with Aboriginal mental health workers and significant people from an Aboriginal person's community, during any mental health assessment, examination or treatment. As noted by former Chief Mental Health Advocate Debora Colvin, 'these provisions recognise the holistic concept of mental health for Aboriginal people including social, emotional, cultural and spiritual wellbeing issues to be taken into account when assessing, examining or treating an Aboriginal person.'[9] An inquiry undertaken last year the Mental Health Advocacy Service (MHAS) found that significant gaps exist in the provision of cultural support and collaboration in the treatment and support of Aboriginal people, and that greater compliance with the Act is needed to improve the experience

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[6] Supportive Landlord Framework Sway. Available at: https://sway.office.com/ZTWfKLNjOIdPkLZx?ref=email
[7] See, for example Brankovick, J, Penter, C. and McKinney, C 2020 Review of the Personalised Support Linked to Housing: Supportive Landlord Services Program Area As Part of the Independent Living Program, Western Australian Association for Mental Health. Available at: https://www.mhc.wa.gov.au/media/3101/mhc-735-ilp-report.pdf
[8] See for example, Gaetz, S. (2017). THIS is Housing First for Youth: A Program Model Guide. Toronto: Canadian Observatory on Homelessness Press. https://www.homelesshub.ca/sites/default/files/COH-AWH-HF4Y.pdf
[9]Mental Health Advocacy Service Inquiry into Services For Aboriginal And Torres Strait Islander People and Compliance with the Mental Health Act 2014 – Final Report, 2020. Available at:https://mhas.wa.gov.au/assets/documents/Mental-Health-Advocacy-Service-Inquiry-into-services-for-Aboriginal-and-Torres-Strait-Islander-people-and-compliance-with-the-Mental-Health-Act-2014.PDF

of Aboriginal people in the mental health system.[10] It is important these gaps are addressed in the operation of the youth SUSD facility and that cultural aspects are integrated across all aspects including design, service provision, staff competencies, and information resources. In the housing sector, Noongar Mia Mia have recently created come excellent resources for Noongar tenants which incorporate language and contemporary cultural practice. It would be worth considering whether similar resources would be appropriate for the SUSD facility.

Child safe principles (Question 12)

All youth services and programs must embed a child safe culture across all activities and supports. The Commissioner for Children and Young People has produced a range of resources to support organisations to implement the ten National Principles for Child Safe Organisations, as well as other information that can inform service design and delivery. Resources guiding organisations in the development and design of effective and accessible complaint processes for children and young people are particularly pertinent and should be used to inform the development and ongoing operation of all three services.[11]

Transitioning across services

Transitions in and out of services, and from one service to another, can be particularly challenging times for young people. Fragmented pathways present a significant risk and ideally the service system should be based on an enduring model of care with joined up case management approaches.[12] In particular, continuity of care must be ensured for young people transitioning from one service type to another, including those that age out of youth services into adult services. Individualised and flexible approaches to transition are required to ensure successful transfer from youth to adult mental health services.[13]

Cross-agency collaboration

Service providers must work closely to ensure young people receive integrated support from all relevant agencies, for example Department of Communities (Child Protection), NDIS, Department of Justice (Youth Justice) and the Department of Education. We note the findings from a recent evaluation of a Homeless Youth Assistance Program in New South Wales regarding poor outcomes from services for children in the child protection system due to a lack of service collaboration.[14] To deliver better outcomes for the target cohort the evaluation recommended the redesign of the homelessness service response to improve integration of services across child protection, accommodation and health and mental health.[15] These findings are relevant for mental health service responses to children in the child protection system. Mechanisms should be put in

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[10] Mental Health Advocacy Service Inquiry into Services For Aboriginal And Torres Strait Islander People and Compliance with the Mental Health Act 2014 – Final Report, 2020. Available at: https://mhas.wa.gov.au/assets/documents/Mental-Health-Advocacy-Service-Inquiry-into-services-for-Aboriginal-and-Torres-Strait-Islander-people-and-compliance-with-the-Mental-Health-Act-2014.PDF

[11] The Commissioner for Children and Young People has produced a range of resources to support organisations to implement the ten National Principles for Child Safe Organisations. Further information on the principles is available at: https://www.ccyp.wa.gov.au/our-work/child-safe-organisations-wa/implementing-the-10-principles/. Further information about complaints processes is available at: https://www.ccyp.wa.gov.au/our-work/child-safe-organisations-wa/child-friendly-complaint-processes-and-reporting/

[12] See for example Mental Health Advocacy Service Annual Report 2019-20 available at: https://mhas.wa.gov.au/assets/documents/MHAS-Annual-Report.PDF

[13] https://picys.org.au/wp-content/uploads/2016/02/PICYS-Annual-Report-2019-2020.pdf

[14] Department of Communities and Justice, 2021, Key findings from the evaluation of the Homeless Youth Assistance Program (HYAP) - August 2021 - Evidence to Action Note. NSW Government. Available at: https://www.facs.nsw.gov.au/download?file=816871

[15] Department of Communities and Justice, 2021, Key findings from the evaluation of the Homeless Youth Assistance Program (HYAP) - August 2021 - Evidence to Action Note. NSW Government. available at: https://www.facs.nsw.gov.au/download?file=816871

place to ensure young people are at the centre of decision making and to avoid concerns over children staying in inpatient mental health facilities 'amid a battle between mental health and child protection services and/or disability services and NDIS' as outlined by the MHAS.[16]

Linking with other services and supports (Question 6)

Linking with other services and supports should, as much as possible, be directed by the person receiving or seeking to receive those supports. It is essential that support to obtain and maintain safe, secure, appropriate and enduring accommodation is available. Other linkages should be facilitated to individualised supports with the flexibility to cater to people's different needs in order to best support them on their recovery journey. For example, young people may be parents and so may need access to parenting supports. Crisis accommodation providers often report that having a pet is an important protective factor for people's mental health and yet caring for a pet is often extremely difficult when you don't have secure accommodation. Consideration must be given to how to support and sustain pet ownership for those individuals who need this.

Measurement and monitoring (Question 11)

Optimum outcomes development and monitoring requires deep and sustained engagement with young people. Outcomes should be determined based on what is important to service-users as well as funders, including the consideration of quality of life and wellbeing outcomes. Stability of housing over time should be part of outcomes measurement and the success of the service. It will also be important to consider the mental health services within the broader community sector and where possible link with other relevant datasets like the By-Name list.
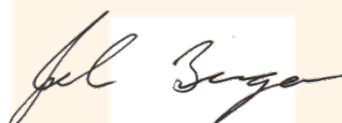
Conclusion

Thank you again for the opportunity to provide feedback to inform the model of service development. Shelter WA and WAAEH note that stable housing is a foundation for mental wellbeing and key element to recovery and we believe facilitating access to safe, stable, secure appropriate accommodation should be a central consideration in the development of models of service. We welcome the commitment by the Mental Health Commission to ensure the voices and experiences of young people and the community sector are reflected in the design and delivery of these important services.

Yours sincerely,

Michelle Mackenzie
CEO
Shelter WA

John Berger
EO
WA Alliance to End Homelessness

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[16] https://mhas.wa.gov.au/assets/documents/MHAS-Annual-Report.PDF