

Meeting the needs of Indigenous Youth in central Brisbane

Our experiences, learnings and future directions



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Overview

- IYHS – Who are we
- Our clients – an overview of our clients
- Outcomes of the Get Real Challenge
- Outcomes and consequences of the Place of Safety Project
- Some strengths, weaknesses and barriers
- Future directions in delivering services for young people with complex needs



Indigenous Youth Health Service

The Aboriginal and Islander Community Health Service
(AICHS) - Brisbane



- Overview of the service
- What the aims of the service
- Development of services to assist young people who use volatile substances and have complex needs

Service delivery changes

- Chroming has increased within the Indigenous community in Brisbane since 2000
- Unfunded outreach programs and community consultation noticed an unmet need
- IYHS explored the needs of young people developed the Get Real Challenge – activity based program to engage young people
- Evaluation of Get Real Challenge
- Increased broader community concern regarding public place usage – funding reactive

Presentation of IYHS clients

- Data was from Get Real Challenge Intervention Evaluation
 - Method
 - Measures
- Evaluation participants
 - N=18 results of questionnaires completed by staff about participants
 - 67% male, age range of 12 - 18 years (average age of 16).
80% of the sample as currently using inhalants.
 - N=14 participants who completed a semistructured clinical interview at intake
 - 64% male, age range 12 - 18 years (average age 15 years).
61% of the young people were currently using inhalants.



Presentation - mental health

■ Stress

- 46% experiencing clinical levels of stress
 - Ranges: 8% severe, 16% moderate, 23% mild

■ Life Stressors

- 83% concern about the health and/or well being of a close family member/ friend.
- 50% currently coping with grief and loss.
- 80% had recent experiences of covert racism, 40% had recent experiences of overt racism.
- Participants cited the following current stressors: parental disagreements, family member/close friend being incarcerated, relationship breakdown, and providing care for younger people

Presentation - mental health

■ Suicidality

– History of Suicidality

- 100% reported a history of suicidal ideation
- 29% reported a previous attempted suicide

– Current Suicidality

- 71% reported current suicidal ideation
- 21% reported current intention and/or a plan
- Risk of impulsive suicide

■ Depression

– 62% experiencing clinical levels of depression

- Ranges; 8% extremely severe, 15% severe, 8% moderate, 31% mild

Presentation – alcohol and drug use

- Alcohol and other drugs
 - All young people smoked cigarettes (nicotine).
 - 93% of young people reported binge drinking at least once in their life, 50% reported binge drinking at least once per month.
 - 93% reported trying other drugs.
 - 21% using cannabis more than twice per week.



Presentation - VSM use

- Average amount used
 - Frequency
 - Quantity
 - Context
- Age of first use: 14 years. Gap between trying and using regularly was 9 months
- Patterns of use
 - Experimental
 - Short term binge
 - Irregular social use
 - Regular social use
 - Chronic

Presentation- living situation

- Living situation

- Homelessness

- Risk of homelessness
 - 'Couch surfing'
 - Out of age for key child protection response
 - Come to the attention of justice
 - Overcrowding

- Living conditions

- Monitoring of behaviour
 - Demands
 - Inconsistent role modelling

Presentation - education

- Education and meaningful activity
 - Average school attendance: 8 days per month
 - Interest in school: 90% reported interest in education
 - Staff rated level of meaningful activity was very low (1/5)

Presentation – risk behaviour

■ High risk behaviour

- 64% reported regular involvement in fights
 - Management of emotion, interpersonal conflict
- 65% reported regular involvement in crime

■ Relationship between variables

- High VSM and low school attendance
- High VSM and low mental health
- High VSM and low perceived family support
- Low VSM and high culture identification and participation in activities

Presentation - culture

- Culture
 - 50% of participants reported taking part in cultural activities
 - 93% of participants reported wanting to learn more about their culture
 - Connection to culture and importance of culture to self identity
- IYHS clients are culturally diverse group
- Difficulties in service provision in urban areas

Presentation - Strengths

- Resourceful
- Intelligent
- Talented
- Resilient
- Brave
- Provided strong support to peer group
- Keen to learn when opportunity provided

Presentation – relationship with agencies

- High rates of involvement with other agencies – yet little contact
 - Juvenile justice
 - Child protection
 - Education
 - Child and Youth Mental Health
- Relationship with other agencies
 - Need for flexibility
 - Difficulties with transport

Impact of client presentation

- Hierarchy of Needs

- The conundrum of Maslows Hierarchy

- High level and complex welfare needs are prioritised over mental health and wellbeing concerns - which may be the key drivers to ongoing welfare needs

- Need for flexible service delivery

- Account the role of peers and family

- Need for consequences, rewards and monitoring

Get Real Challenge

- Activity based education model of service delivery
 - Outreach also provided by IYHS
- Key components of program
 - Ease of referral
 - Addressed boredom
 - Regular substance free day
 - Regular contact with role models
 - Regular health promotion
 - Opportunity to develop relationships with workers
 - Brief intervention opportunities
 - Problem solving opportunities
 - Strength based
- Evaluation period was 8 months

GRC outcomes

■ VSM

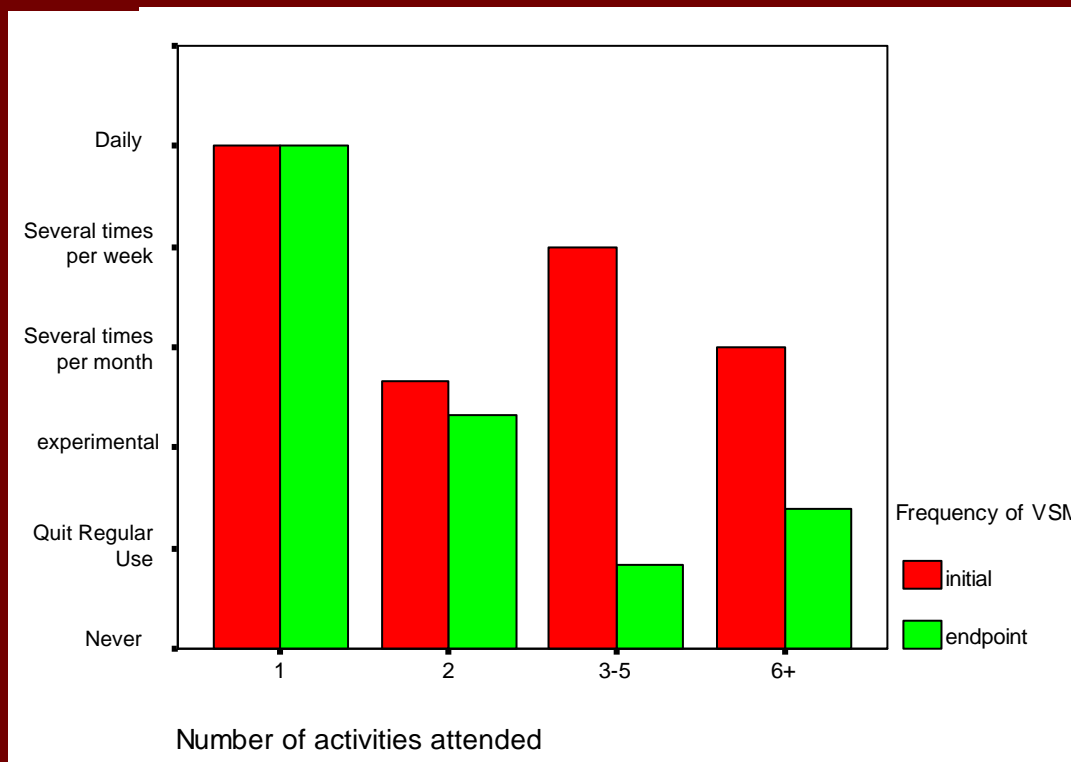
- No young people met criteria for diagnosis
- 83% using at start were no longer using
- Evidence of increased understanding
- Increased confidence in saying 'No'
- Increased motivation to change

"woke me up to what I was doing to myself"

"gets me doing stuff not drugs, keeps me out"

"don't need drugs to have fun"

GRC outcomes



GRC outcomes

- Suicidality
 - Only 7% reported ideation at the endpoint
 - None reported intention/plan at end point
- Depression
 - 50% reduced severity of symptoms
- Stress
 - Fluctuated
 - High levels of stressful life events

GRC outcomes

- Education and meaningful activity
 - 66% increased past month school attendance
 - 62% increased staff rated level of meaningful activity
 - Increase in motivation to change
- High risk behaviour
 - 67% had reduced frequency of getting into fights
 - 50% reported being involved in less criminal behaviour
- Peer group
 - 67% reported spending more time with friends who did not use

What did the findings tell us

- VSM is an indicator of complex multiple problems
 - Linked to more serious negative developmental outcomes: school success, crime involvement and mental health

- Response to VSM needs to recognize and address all areas of need
 - Mental health and wellbeing
 - Culture
 - Education
 - Family
 - Drug and alcohol use
 - Peer group
 - Sexual health
 - Life skills
 - Domestic violence
 - Welfare

What did the findings tell us

- Ongoing participation was related to improvements in VSM and other life areas – Programs require more than one off service provision
- Importance of engagement
- Time taken to develop engagement with service
- Importantly connection to culture and participating in cultural activities was a protective factor against VSM
 - This highlights the importance of treatment provision by Indigenous organisations and the necessity for the inclusion and recognition of culture in treatment
- Importance of Drop In and Outreach Service

What did the findings tell us

- Proposed changes to service model as a result of findings
 - Need for service to have capacity to follow-up between activities beyond out reach and drop in
 - Need for hand over and transfer of information between out reach and activities
 - The impact of changes in young peoples living circumstances
 - The need (and community request) for involvement with families
 - Increase in responsibility of young people as involvement increases – avoiding the one-size all approach

Impact presentation and findings for service delivery

- Opportunity to be children (adult decision making – young people)
- Opportunity to develop emotional responses
- Opportunity for non-punitive service delivery

- The Get Real Challenge was not refunded

Place of Safety

- Changes in political situation and changes in funding body
- Introduction of place of safety legislation
- Resulted in Place of Safety funding
 - Initially IYHS as a secondary point of call
 - Later as a stop gap while service delivery model was revisited

Changes in client presentation from GRC to place of safety

- Consequence of Move On powers
 - Location of young people
 - Visibility of young people
- Changes in patterns of substance use
 - Increase in amphetamine use
 - Cyclical nature of VSM
- Age of clients

Place of Safety

- Respond to young people referred to place of safety by police
- To receive referrals from “Place of Safety” in inner city
- 8 months funding
- Provide case management and psychological assessment
- Provide regular activities

Place of Safety Response

- IYHS Services
 - Outreach
 - Drop in
 - Case Management
 - Activities
- IYHS Staffing
 - 2 Case managers
 - 1 Activity worker
 - Casual out reach workers
 - 0.2 Psychologist

Place of Safety - Outcomes

■ Positive outcomes

- Increased cross agency collaboration at case level and organisational level
- Advocacy for young people
- Consulation Liason
 - Has enabled other services to access client group
 - Assisted other agencies in provding appropriate services
- Young people were assigned a case manager and case meetings were commenced
- Cultural activities were provided
- Skill development activity was run
- 2 x Camps were run

Place of Safety - Outcomes

- Limited efficacy of service
 - Problems with referral process
 - Outreach became transport
 - Mismatch between goals of agency and legislation
 - Funding tied to a model, not client needs
 - Participation linked with negative behaviour
 - Family worker not hired
 - Unclear time limits
 - Difficulty explaining changes to client group

Learnings – some barriers and weaknesses

■ Outreach

- Lack organised handover between outreach workers and case workers
- Training of outreach workers: brief intervention

■ Drop in

- Lack of rules between services
- Lack of availability of staff to provide consistent monitoring
- Roles of staff
- Agency/funder understanding of drop in

Learnings – some barriers and weaknesses

■ Activities

- Number of young people attending (assessment conundrum)
- Frequency of debrief (structured and unstructured)
- Capacity for follow up

Learnings – some barriers and weaknesses

■ Case management

- Lack of clinical supervision
- Dual roles of case managers
- Lack of clear roles and responsibilities
- Lack of training for staff
- Limited availability of psychologist
- Limited involvement with families and community
- Difficulties with maintaining collaborative relationship with Education sector and child protection sector

■ Overall service delivery

- Lack of clear pathways between sectors
- Lack of reporting guidelines
- Exit strategy - generalisation

Learnings – Strengths and successes

- IYHS produced positive outcomes with limited funding for previous 5 years.
- Involved in developing a coordinated a response to Indigenous inner city youth
- Developing a comprehensive knowledge base and evidence based practice in providing services for Aboriginal and Torres Strait youth

Learnings – Strengths and successes

- Indicators of improved mental health and well being
 - Young people re-entering education, providing ongoing follow up
 - Harm minimisation and reduction in VSM
 - Developing positive relationships with IYHS
 - Goal setting and future plans
 - Increase in self referred access to health services
- Commitment of young people to be involved in service development

Learnings – some strengths and successes

- Focus on the hierarchy of needs
- Accessible to young people
- Easy to refer to for individuals and other services
- Access to mental health support
- Access to health services
- Flexible service delivery
- Culturally appropriate, role models/ mentors
- Strengths focussed
- Knowledge base in the community
- Aims to integrate best practice and cultural appropriateness

Learnings – the future direction

- Outreach
- Drop in (incl bean bag net centre)
- Activities
- Case management
- Cultural engagement

Outreach program

Provides food, transport and response to immediate need in inner city

■ Aims

- Safety and harm minimisation
- Welfare
- Relationship building with service
- Opportunistic counselling, advice
- Brief intervention for substance use
- Referral
- Clear roles for staff
- Opportunity for outreach workers to hand-over
- Clear rules for use of outreach by young people and that this is communicated to young people

Drop In Space

- Manage Indigenous referrals from places of safety and outreach workers
- Makes it 'easier' for young people to access services
- Provide opportunities for brief assessment and brief intervention, opportunistic counselling

Drop In Space

- Provide alternative activities and safe environment
- Substance free space
- Manage welfare needs
- Space to contact and collaborate with other agencies
- Include outreach staff to enable continuity of care

Activities program

- Provide general pleasant/fun activities – that can incorporate health promotion and used to increase engagement
- Structured activity program to develop skills (problem solving, vocational) gradually through experiential learning.
- Improved coping and problem solving skills, Improved communication, Improved self esteem
- Guided by stage of change
- Something else to talk about

Activities program

- Components of service delivery:
 - Frequency of activities
 - Participation over time to become contingent on young person's behaviour
 - Cultural engagement, education
 - Include broader community events
 - Strengths based intervention, promotes resilience
 - Planned opportunistic intervention
 - Develop non threatening opportunity for counselling and education
 - Consistency of behavioural management with staff
 - Positive reinforcement, opportunity to experience success
 - Young people's involvement in their own treatment

Case Management

- Guided by initial and ongoing assessment
- Goal directed treatment plans
 - Measureable outcomes
- Family Assessment and involvement
- Ecological intervention
- Link in with activities
 - Activities as the way to implement a case management plan
- Provide advocacy and linkage between different service providers

Case Management

- Links to mental health
- Case management and supervision structure
- Case accountability
- Links with outreach and drop-in
- Doing other services roles?

Cultural Engagement

- Targeted activities
- Camps
- Individual family tracing
- Opportunistic education

Service delivery

- Organisational components of service delivery
- Links between sections
- Links to other IYHS and AICHS services
- Flexible
- Provides many doors to service provision
- Staff training, supervision and retention planning

Learnings – ongoing barriers

- Under-resourced to work with young people and families
- Funding
 - Lack of long term funding
 - Funding limited to band aid solutions
 - Specified funding –VSM or place of safety
 - Tender process
- Limited availability of long term treatment options
 - Dual diagnosis, trauma
 - Homelessness, education and welfare
- Consistency and collaboration between services
 - IYHS called in crisis
 - Sharing information
- Cultural appropriateness of other services – capacity of other services to deliver cultural engagement

Contact IYHS



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Aboriginal and Islander Community Health Service



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