

Forrestfield



Integrated Systems of Care to support Aboriginal and Torres Strait Islander People with mental health, alcohol and other drug issues (AISC)

Community Engagement and Co-Design Workshop Report

2017

Executive Summary: Forrestfield Area

[Forrestfield Aboriginal and/or Torres Strait Islander population: 361]

[Forrestfield population: 12,690]

Richmond Wellbeing, in collaboration with consortium partners, has been commissioned by WA Primary Health Alliance (WAPHA) to develop an integrated system of care program to support Aboriginal and/or Torres Strait Islander people with mental health, alcohol, and drug issues in the Perth South Primary Health Network region from April 2017 to June 2018. The purpose of this activity is to focus and improve the health and wellbeing of Aboriginal and/or Torres Strait Islander people who are living with co-occurring AOD (alcohol and other drugs) and MH (mental health) conditions.

The Richmond Wellbeing (RW) ISC engagement team conducted outreach into communities in this location to listen to community member's experiences, concerns, issues and ideas regarding problematic mental health and AOD use in the community. The RW team heard from community members who experienced these issues themselves, and from people who are carers, families, friends and supporters of people experiencing problematic AOD and MH issues.

Mental health services, AOD services and other service providers in the area were also contacted by the RW team to gather information on issues and concerns of the organisations. Ideas on ways to provide better access to services for vulnerable and disadvantaged community members and better integrate AOD and MH services were discussed in this engagement

Feedback from the local community was collated to provide themes for place-based co-design workshops attended by local community members and service providers working together on solutions to address these issues.

FORRESTFIELD AREA:

CONSULTATION AND ENGAGEMENT	
Community Members	Service Providers
12	4
WORKSHOP ATTENDANCE	
Community Members	Service Providers
12	2

Co-design Workshop

Workshop Themes:

- Increase local Aboriginal-specific and culturally acceptable AOD and MH services – “We need local services available who understand our mob”.
- Increase local family support available for those caring for those experiencing AOD and/or MH issues – “Make it easier to fund and access support for families that need help”.
- Provide after-hours mobile outreach services – “We need an after-hours service that would come to you”.
- Build local Aboriginal workforce – “We need more Aboriginal workers in the local area who understand the way we do things”.

A co-design workshop was held for community members and service providers in Forrestfield on October 3rd 2017. This workshop provided an opportunity for service providers and local community to come together to co-design local service activity.

Workshop Findings:

The co-design workshops identified six key findings to be considered by the Project Management Group:

1. Employ Aboriginal peer workers with lived experience as integrated members of staff within local AOD and MH services.
2. Develop an employment program to increase employment and education opportunities for local Aboriginal youth and adults.
3. Create a local community centre as a safe space that provides access to culturally safe AOD and MH services, delivers a range of programs and activities for the local community, and is staffed by an Aboriginal workforce.
4. Create a multi-purpose, community managed and led, 24/7, culturally safe outreach mobile service that specialises in AOD and MH, with the ability to provide and link into other relevant support services.
5. Develop ‘The Carer’s Carer’ support program to provide education, training and support for local families affected by AOD and MH.
6. Develop a Cultural Connection program to increase understanding of self, cultural connection and foster a sense of belonging.

Solutions to Address Key Findings:

1. Employ Aboriginal peer workers with lived experience as integrated members of staff within local AOD and MH services.

Identified need:

- ❖ Need to employ local Aboriginal people who have a good understanding of Aboriginal culture.
- ❖ Need to provide timely access to local services that are culturally safe for Aboriginal people.
- ❖ Need to provide two-way learning between Aboriginal and non-Aboriginal staff (e.g., culture, respect, different ways of working).
- ❖ Service providers need to be warmer and more understanding when people ask for help.
- ❖ Services need Aboriginal workforce to be the bridge to the community.

How to do it:

- Provide placement opportunities within services for local Aboriginal people with relevant skills and lived experience.
- Provide training and education scholarships leading to employment for local Aboriginal people.
- Recruit the right Aboriginal people with the right experience (e.g., knowledge of how family trees work).
- Acknowledge importance and value of lived experience when people are applying for positions.
- Provide opportunities for Aboriginal staff to build as a team (e.g., go out into country together).
- Develop an Aboriginal Peer Support Group.
- Staff engage with local Aboriginal people and with Elders to ensure AOD and MH services are tailored and meeting local needs.
- Provide promotional materials for Aboriginal-specific services that shows services are culturally appropriate and welcoming (e.g., 'no shame').
- Share cultural experiences and what they have been through with clients and other staff.
- Provide ongoing cultural awareness training to non-Aboriginal staff and 'go-to' cultural person for debriefing.
- Share information on different ways of working as a team and with clients.
- Encourage sharing of Aboriginal culture with non-Aboriginal staff (e.g., NAIDOC week).
- Ensure these Aboriginal staff are provided flexibility with employment (e.g., attendance at funerals, leave when need to support family).
- Aboriginal people at all levels of organisations to be involved in decision-making processes.

2. Develop an employment program to increase employment and education opportunities for local Aboriginal youth and clients.

Identified need:

- ❖ Need to train and educate more Aboriginal people in local area.
- ❖ Need more education and skills for young people in community.
- ❖ Need to provide opportunities for local people to apply lived experience.
- ❖ Need an Aboriginal employment agency.

How to do it:

- Identify leaders within the family groups, and train and employ them to work with their own families.
- Build local culture and language and understanding and knowledge into community via local workforce.
- Engage with training/education services to deliver local training to youth and adults.
- Provide workshops and training for employment related to financial and educational support (e.g., resumes, computers).
- Tailor program to audience by identifying and building on different skill sets.
- Provide training in Aboriginal Mental Health First Aid.

3. Create a local community centre as a safe space that provides access to culturally safe AOD and MH services, delivers a range of programs and activities for the local community, and is staffed by an Aboriginal workforce.

Identified need:

- ❖ Need more local support and appropriate services for Aboriginal people who have AOD and/or MH issues.
- ❖ Need more programs for youth and families in the community.
- ❖ Need more Aboriginal staff working in local services.

How to do it:

- Provide access to a range of services, including:
- AOD and counselling services;
- Aboriginal health nurse;
- Outreach support workers;
- Drop-in services;
- Wait list support;
- Visiting services;
- Employment services;
- Support groups (e.g., women and babies);

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- Sober up services; and
 - Centrelink and Department of Housing.
 - Provide programs and activities for youth and adults, including youth camp, sporting activities, exercise for Elders.
 - Provide cultural programs and activities (e.g., bush tucker, language classes, cooking, storytelling).
 - Provide workshops and training for employment related to financial and educational support (e.g., resumes, computers).
 - Provide a safe space for sobering up and for anyone to go at any time for help.
 - Provide access to food, a shower, and a safe place to have a sleep.
 - Provide opportunities to increase awareness and develop relationships with service providers.
 - Link with health services for early intervention treatment.
 - Link into services to support young people (e.g., advocacy support, housing, doctors, education, WA Police).
 - Help young people get their license.
 - Provide a transport service to get to the centre or provide access to local transport so people can attend.
 - Provide a crèche and playground for children.
 - Have an Aboriginal flag and painting out the front of the centre.
 - Seek support from community and shire council and have a community meeting or rally with an Elder as a spokesperson.
 - Develop a petition for support and use social media to reach young people and the broader community to advertised and seek support.
 - Run according to a cultural and clinical model.

4. Create a multi-purpose, community-managed and led 24/7 culturally safe outreach mobile service that specialises in AOD and MH, with the ability to provide a link into other relevant support services.

Identified need:

- ❖ Need to provide service alternatives that do not rely on transport.
- ❖ Need access to culturally secure AOD and MH services.
- ❖ Need to provide after-hours AOD and MH services.
- ❖ Need a wrap-around services to focus on meeting all needs of the individual.

How to do it:

- Mobile outreach services designed, led and run by the community.
- Employ male and female staff members and local Aboriginal people.
- Provide range of services available 24/7 that come to you, including counsellor and healer, nurse, GP, Aboriginal Health Worker and MH Worker.

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- Use a runabout van as transport to link people up to services.
 - Rotation of staff and location on different days of the week to service multiple locations and hotspots on a regular schedule or roster.
 - The van is mobile and multi-purpose, including access to:
 - Clinic services (e.g., counselling);
 - Kitchen;
 - Shower;
 - Pop up community entertainment (e.g., music, TV, PlayStation); and
 - Cultural activities, excursions and day trips (e.g., arts and crafts, tools, bushwalking).
 - Align outreach service with existing organisations.
 - Engage with other services and potential funding bodies.
 - Set up a Local Advisory Group to drive the program.
 - Identify a lead organisation, recruit staff in partnership with Local Advisory Group, and provide training for Local Advisory Group and staff.
 - When service is up and running, locals should be informed of what, when and how to access.

5. Develop 'The Carer's Carer' support program to provide education, training and support for local families affected by AOD and MH.

Identified need:

- ❖ Need a support service for carers and local families.
- ❖ Need to provide training and education to help families cope and develop resilience.

How to do it:

- Provide training and education workshops for carers/families to develop knowledge and strategies to support others and keep self-safe.
- Look to "Noongarise" a current carer's service to meet the needs of the local Noongar community seeking carer and family support services.
- Develop a Family Support Network for families to come together to provide and receive social and emotional support.
- Facilitate access to doctors, emergency teams, transport and communication for individuals and carers and families.
- Provide a direct phone line for a carer or family member to get advice and education about a specific AOD or MH problem.
- Provide a mobile education service that offers a safe space for families to go to for help.
- Provide support for Elders and family leaders to get respite.
- Staff with Aboriginal workers and lived experience peer workers.
- Treat family members as experts when people go looking for help.

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- Support links to services for families to be able to talk to doctors and service providers to explain concerns and what is happening.

6. Develop a Cultural Connection program to increase understanding of self, cultural connection, and foster a sense of belonging.

Identified need:

- ❖ Need to re-establish cultural connections for Aboriginal people and the community.
- ❖ Once people know who they are, where they and their family come from, this fosters a sense of belonging.
- ❖ Need to focus on youth and foster their sense of connection and wellbeing.

How to do it:

- Use Woodlupine Family Centre
- Take the program to the community
- Partner with other programs:
 - Yorgum Link Up;
 - South West Aboriginal Land and Sea Council; and
 - Mooditj Kaart's Aboriginal Mental Health First Aid.
- Provide community group activities:
 - Bush tucker;
 - Bush medicine – Aunty Vivien; and
 - Men and women's healing groups.
- Support for family tree tracing to learn where come from, where you connect and belong in community setting venues.
- Focus on youth (e.g., support, skills, training).
- Provide mentoring so young people can support and work with other young people.
- Need to fund training and support and establish paid local roles.
- Ask other agencies to support.
- Battye Library have an Aboriginal person to support people tracing their own family (Damien Webb).
- Have senior Aboriginal men and women working with Aboriginal consultants.