



MENTAL HEALTH NGO SUBSECTOR COMMISSIONING: FEEDBACK PAPER

Children and Young People

June 2023

ACT Commissioning for Outcomes
2022- 2024

WHAT WE KNOW

Mental health and wellbeing are crucial factors for children and young people (ages 0 to 25) that underpin their social and emotional development, enabling them to thrive and grow. Research also indicates that the majority of mental illness experienced in adult life begins during childhood or adolescence¹.

This makes it clear that addressing mental health concerns early in life, and in episode, for children and young people not only improves their wellbeing but is also a cost-effective approach to ensuring life-long outcomes for people. However, there are a number of barriers that children and young people experience in accessing the correct mental health treatment and support.

Good mental health in children and young people in the ACT remains a priority for the ACT Government and a focus in the delivery of mental health services. As such, there have been several pieces of work completed by ACTHD to further understand the needs of children and young people in the ACT. This includes the Review of Children and Young People in the ACT (the Review)².

The Review found the top three main issues facing young people under 25 years old are anxiety or stress, school or study problems, and experiencing bullying. Children under 12 years old report facing similar problems of experiencing bullying, anxiety and stress, and peer pressure. The main obstacles in accessing any care were wait times, affordability and stigma.

The Review provided three recommendations, developed by the community, for the improvement of mental health services:

1. Make access to services easier, affordable and increase capacity of current providers
2. Increase the awareness and education addressing stigma and fear around mental health
3. Need for new service targeting moderate to severe mental illness with 24/7 access.

Since the Review, there have been a number of projects commenced to target these needs, including:

1. The establishment of MindMap – ACT Youth Portal which is an online youth navigation tool for children and young people up to the age of 25 to find services and supports in the ACT. MindMap also supports parents and carers seeking information or support for the young people in their care.
2. The implementation of the Youth Aware of Mental Health Program, which is a school-based education program that addresses the mental health needs of young people through discussion and role play. It supports problem solving skills, knowledge about mental health, building resilience and promoting early intervention.
3. A review of the mental health programs available in primary schools including a literature review and direct engagement with ACT primary schools.
4. Work to understand the ‘Missing Middle’ of children and young people with moderate to severe mental health concerns who experience difficulties accessing services. This led to a detailed report published in August 2022 looking at the needs and barriers to inform future work³.

In addition, there are a range of child and youth focused mental health projects that are currently being progressed under the National Mental Health and Suicide Prevention Agreement and the Bilateral Schedule between the ACT and Commonwealth Governments.

These include Head to Health Kids ACT, and a number of activities under the Youth at Risk project. The Head to Health Kids service will include a multidisciplinary team to improve mental health access for children up to 12 years old and the Youth at Risk project will provide a coordinated response to trauma for young people with complex needs, who are at risk of developing mental illness.

In partnership with the ACT Youth Coalition and the Capital Health Network, the ACTHD has established an ACT Child and Youth Mental Health Sector Alliance with representation from government, non-government, young people with lived experience and the broader community. This Alliance will enhance collaboration and connections across the sector and will work to progress key issues facing the child and

youth mental health sector. Members from the Alliance will also support key projects in youth mental health to improve transparency across the sector.

With all these projects and initiatives focused on children and young people, the Mental Health Commissioning for NGO services process has to carefully consider the future of these services to ensure that there is no duplication or repeated services.

However, this is also an important opportunity for the Commissioning process to identify the occasions where services could be designed to work in tandem or fill any gaps between these services and what community NGOs can do to support the mental health of children and young people in the ACT.

POLICY AND FRAMEWORK DOCUMENTS

To commission the best NGO mental health services for children and young people, we need to ensure that our work is consistent with guiding policy documents, frameworks and priorities affecting the design of mental health services. This includes considering the projects committed to under the Bilateral Schedule of the National Mental Health and Suicide Prevention Agreement, as listed above. These include:

- ACT Wellbeing Framework⁴
- National Safety and Quality Health Service Standards⁵
- National Safety and Quality Mental Health Standards for Community Managed Organisations⁶
- Mental Health Statement of Rights and Responsibilities⁷
- National Mental Health and Suicide Prevention Agreement⁸

DESIGN CONSIDERATIONS

In this Mental Health Commissioning process, the team wants to identify the specific characteristics or design of mental health NGO services that will best support children and young people. This includes considering the projects, outlined above, that are currently being developed or are in place, as well as reviewing any gaps or opportunities for commissioning services to work alongside these projects.

For this ACTHD will look to the ongoing projects and work closely with the project teams to assess these gaps and opportunities. Any feedback received in this Commissioning process that relates to these projects will be provided to the project teams for inclusion in their work.

However, the Commissioning team is also considering broader service design questions as part of the Design phase. These are questions that will help to assess what NGO services will need and should look like to effectively support the mental health of children and young people. These include:

- **Increasing promotion and mental health education at young ages.** This may include engaging with organisations who deliver in-school mental health education from primary school, and includes engagement with our universities. This could be represented as an end-to-end program.

Question: What should the top priorities for mental health promotion and education be for children and young people?

For example: stigma reduction, developing resilience, or increasing coping skills.

- **Family support or counselling** to support people in understanding how to best help young people. This could be an education program aimed at reducing stigma and supporting successful

Question: What barriers have organisations experienced engaging directly with families? What methods have worked and what haven't?

recovery or as a more intensive family-based counselling service. This would be limited to those families who are willing to access this service.

- **Lived experience work, and targeted workforce** have a unique ability to engage with children and young people. While this would be harder to implement for children, a lived experience youth workforce is a model that has been identified with positive outcomes in primary care for young people.

Question: How could organisations increase engagement with a lived experience workforce? What barriers would there be for organisations?

- **A trauma informed service** to engage with at risk youth, might reduce the chance of intergenerational trauma and improve the outcomes of the young people it supports.

Question: How would a trauma informed service differ from other mental health services currently provided? What might this service need to look like?

However, noting the services that are being developed it is also worth considering if we operate services similarly to how they are being operated now, and readdress the needs once these are operational. This would reduce chances of duplication and allow these services to be used in full effect and evaluate them before readdressing any further or emerging needs.

Question: Noting the projects and suggestions listed above, what would be your top priority for NGO services to support the mental health of children and young people?

POTENTIAL OUTCOMES

Through Commissioning there are a number of Principles in the Blueprint⁹ that we expect all services to achieve. Alongside these, there will be a number of outcomes that will drive service delivery and reporting for our NGOs.

Noting that ‘children and young people’ represents a broad group from 0 to 25 across a range of life stages, it is important to identify any outcomes to be measured for children and young people through this commissioning process and for future work.

Question: What do we need to measure to know that children and young people are better off and that NGO services and supports are having a positive impact on people’s lives?

For example:

- **Improved mental health understanding at school ages; and**
- **Reduced risks of developing mental health concerns; and/or**
- **Increased number of connections in a child or young person’s life.**

Question: What challenges do NGO services have for recording and measuring data relating to children and young people?

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TERMS, ACRONYMS AND DEFINITIONS

Acronyms:

ACTHD	ACT Health Directorate
NGO	Non-Government Organisation
CHN	Capital Health Network
CHS	Canberra Health Services
MHJHADS	Canberra Health Services Mental Health, Justice Health, Alcohol & Drug Services
PHN	Primary Health Network



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