

PILLAR OPP40 REPORT 2023

*"37 months scaled up service
1 June 2020 – 30 June 2023"*





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We acknowledge the Aboriginal peoples as the Traditional Custodians of country throughout Australia and their continuing connection to land, sea and community. Specifically, we acknowledge the Whudjuk people of the Noongar Nation as Traditional Custodians of Boorloo (Perth) where we provide services. We pay respect to them and their cultures, and the Elders past, present and emerging.

FOREWORD

YouthLink have been working with PICYS as partners since the early nineties providing clinical mental health services and support to complement the psychosocial support PICYS Pillar program provides to reduce the impact of mental health challenges and homelessness in Perth's young people. This elevates the work we do at YouthLink as clinicians, and the impact on young people is that they benefit from a team of supports collaborating to provide the care and support they need in the face of the challenges and circumstances that lead to their homelessness and mental health struggles.

Perth Inner City Youth Service staff provide young people with acceptance, connection to community and practical support for navigating their lives. They provide a home and stability. With this they find space where they are able to explore who they want to be. The impact of PICYS support can be seen when young people make positive changes when they are provided with the right support.

JENNIFER GRIFFITHS

**SENIOR CLINICAL PSYCHOLOGIST (CONSULTANT)
FORMER ACTING DIRECTOR YOUTHLINK**



Embrace @ Telethon Kids Institute are proud to partner with PICYS. We value our work together to enable research that is informed by the voices and experiences of homeless young people experiencing mental health struggles, including LGBTIQ+ young people. Our research and others' show that a disproportionate number of LGBTIQ+ young people experience poorer mental health outcomes and have higher risk of suicidal behaviours than their peers.

ABS data shows that people who reported having a mental health condition were 2.5 times as likely to have experienced homelessness in their lifetime, compared with people who did not. LGBTIQ Health Australia have surmised that when compared to the general population, LGBTIQ+ young people aged 16 to 27 are five times more likely to attempt suicide, Transgender people aged 14-25 are fifteen times more likely to attempt suicide and LGBTIQ+ people are two and a half times more likely to have been diagnosed or treated for a mental health condition in the past 12 months. Specifically, our Trans Pathways research found that 48.1% of transgender and gender diverse people aged 14 to 25 reported that they had attempted suicide in their lifetime.

PICYS has shown that their service model and approach help young people through these difficulties and supports them towards better wellbeing outcomes. It is important to acknowledge the vital aspects of the approach taken by the PICYS staff in their work with young people. The youth worker approach that takes a practical and holistic view of the young person's current circumstances and needs, and the valuable relationship building within their work is significant. Every young person needs to feel secure to be able to thrive. The fact that PICYS can provide this to young people who might not have had any other secure base is critical.

The value of this work in responding to the needs of young people experiencing homelessness and mental health issues cannot be understated.

PROFESSOR ASHLEIGH LIN

TELETHON KIDS INSTITUTE



Since their origins in 1980, PICYS has changed the trajectories of youth struggling with homelessness and other complex life issues.

While this report documents the statistics from PICYS' successful model of support, the data is best understood by hearing the powerful stories of the young people that PICYS has helped. People such as Harmony, whose mother passed away when he was eleven. With minimal family or support, Harmony succumbed to depression, anxiety and complex grief. Another is Lara, who was homeless, struggling with her mental health and using alcohol and drugs to cope.

"PICYS has given me the will to live ... believing in me when I don't [and] providing a never-ending amount of support when I need someone."
Harmony, 18.

"They would make me want help when I didn't think I wanted help. These people are different ... They change the world by helping the most broken people become the strongest, most successful versions of themselves." Lara, 25

Because of Harmony, Lara and the many other people whose lives have been changed through the Pillar Program, the City of Perth is proud to be a PICYS organisational partner and to support this continuing work.

BASIL ZEMPILAS

LORD MAYOR



INTRODUCTION

Optimising PICYS Pillar to 40 young people (OPP40) was proposed as a scaled-up service response when the COVID-19 pandemic began to impact Western Australia in 2020. We knew that the impact of this pandemic would hit those experiencing homelessness and mental health struggles the hardest and sadly, PICYS had just had three deaths amongst the young people connected to us. We were determined to increase our capacity to prevent worsening mental health and respond appropriately to those most vulnerable to the impacts of COVID-19, mental health struggles and homelessness.

PICYS Pillar had been a service for up to 15 young people since its inception in 2006. The service focuses on providing specialist individualised psychosocial support for young people experiencing homelessness and mental health challenges, establishing, and maintaining their connection with mental health clinicians and providing case management services focused on their wellbeing, recovery, and housing stability.

Over the 37-month period OPP40 had four extensions to the scaled-up services, initially 12 months, then a further 13 months, then two 6-month extensions by grant funding. This meant that during the entire 37-month period the service was always planning for a pending reduction of service capacity back to the core capacity of only 15 young people. It is important to acknowledge that this invariably had an adverse impact on the stability of service provision based on a relational strength-based approach and the foreseeable length of time young people could actively engage with PICYS Pillar supports.

The following report highlights the service delivery and the impacts and achievements made by 103 fabulous and beautiful young people.

Each and every one of these young people deserve to have excellent individualised mental health and homelessness support and a place to call **“their home”**.

ANDREW HALL JP
PICYS EXECUTIVE OFFICER

IN THE 37 MONTHS SCALED UP
OPP40 SERVICE 103 YOUNG PEOPLE
WERE ACTIVELY ENGAGED AND
BENEFITTED; BY COMPARISON IN
THE PRECEDING 36 MONTHS ON
THE CORE FUNDING ONLY 29
YOUNG PEOPLE WERE ABLE TO BE
ACTIVELY ENGAGED AND BENEFIT.

REPORT RECOMMENDATIONS

Recommendation 1

That the Western Australian Government resource PICYS to deliver the PICYS Pillar youth mental health and homelessness service to a minimum of 40 young people.

Recommendation 2

That the Western Australian Government partner with PICYS Household Network specialist youth homelessness service to have access to a minimum of 30 supported accommodation bed capacity, to be managed by Community Housing Organisations in partnership with PICYS.



Pillar is a psycho-social support program that is being run by Perth Inner City Youth Service (PICYS). The program caters for 15-20 year old young people with a diagnosed mental health condition, that have a number of added risk factors that impinge on them achieving their treatment goals.

Pillar is able to support these young people to:

- Address their complex personal/social issues
- Develop and/or re-establish family/social and community networks
- Be empowered to participate effectively in their own care planning
- Effectively access services according to their ISP (Individual Support Plan)
- Achieve a good quality of life in:
 - Emotional, physical, material well being
 - Interpersonal relationships
 - Personal development
 - Self determination
 - Social inclusion
 - Rights
 - Identify early signs of relapse and help them with appropriate psycho-social support, and when appropriate, to access clinical services.

For a young person to be eligible for Pillar they need to be:

- Aged between 15 – 20 years old (inclusive)
- Intending to be a long term resident of WA
- At risk of homelessness or currently transient
- Seeing a mental health professional or willing to see one
- Experiencing a number of these other issues:
 - At risk of self-harm
 - Suicidal ideation or attempts
 - Exhibiting anxiety or depressive symptoms
 - Exhibiting impulsive behaviours
 - Having difficulty maintaining relationships
 - Diagnosed with a mental illness
 - Misusing alcohol and/or other drugs

As an outreach program we are able to meet the young people where they feel most comfortable, for example; at their home, at a café or at a local library. We are able to support and transport a young person to appointments that help them achieve their individual support plan.

REPORT

PILLAR OPP40

1 JUNE 2020 - 30 JUNE 2023

"37 months of scaled up services to respond to evident need"

17

Opening case load of young people on 1st June 2020 from Pillar MHCg1 Service

86

Opened young people as new cases in the 37 month period

103

Total young people actively open during the 37 month period

80

Total young people closed their active status during the 37 month period

23

Total young people in PICYS Pillar as at 30 June 2023



GENDER

43	Females
8	Males
45	Transgender, Non-Binary, Gender Queer, Intersex
7	Not specified

ATSI/CALD

9	ATSI
5	CALD

LGBTIQA

71	Young People
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AGE

1	15 years
2	16 years
1	17 years
15	18 years
17	19 years
17	20 years
17	21 years
12	22 years
9	23 years
12	24+ years

ACCOMMODATION AT ENTRY

8	Family/Foster
8	Transient
13	Couch Surfing
25	Short Term/Crisis
6	Partner's Accommodation
4	Shared Accommodation
7	Private Rental
14	Long Term
18	Not declaring information

ENGAGED WITH A MENTAL HEALTH PROFESSIONAL

88	Yes - engaged
15	No - not engaged

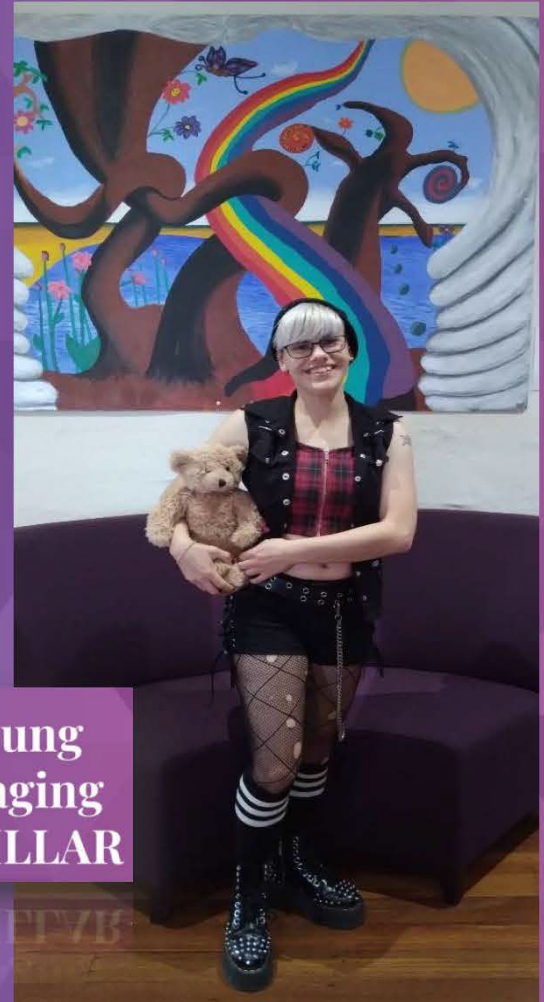
PRESENTING ISSUE

26	Suicidal Ideation
24	Homeless
14	Social Isolation
8	Accommodation
7	Financial
6	Family and Domestic Violence
6	Drug Use
5	Self-harm
2	Anxiety
1	Relationships
1	Impulsivity
1	Emotional Dysregulation
1	Emerging Emotional Unstable Personality Disorder
1	Eating Disorder

Data on young people engaging in PICYS PILLAR

PRESENTING DIAGNOSIS

32	Depression
28	Anxiety
19	Post Traumatic Stress Disorder
12	Emerging Emotional Unstable Personality Disorder Borderline Personality
2	Eating Disorder
2	Bipolar
1	Schizoaffective Disorder
5	Attention Deficit Disorder Attention Deficit Hyperactive Disorder
1	Autism Spectrum Disorder
1	Obsessive Compulsive Disorder



Key Identified Data

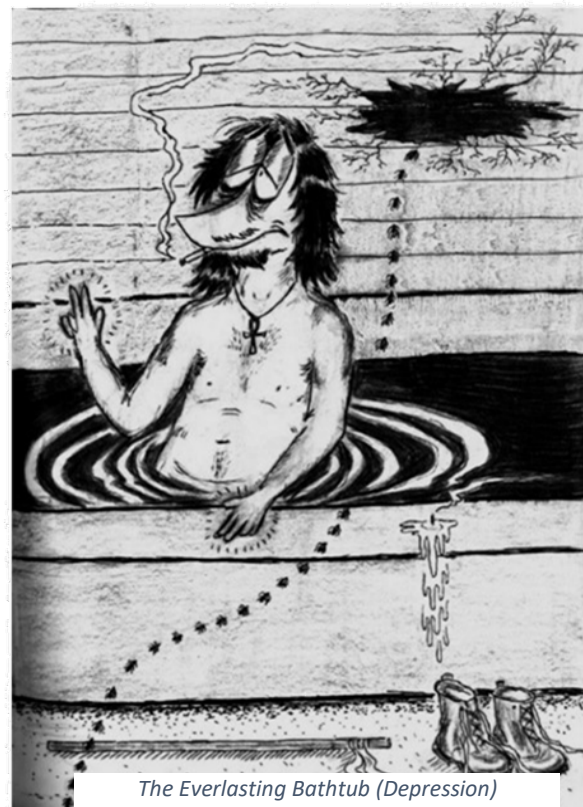
- 103** Young People Engaged
- 8.7%** Aboriginal Torres Strait Islander
- 68.9%** LGBTIQ+
- 43.7%** Trans, Gender Diverse and Other
- 85.4%** Engaged with a Mental Health Professional

Most Prominent Issues

- 25.2%** Suicide Ideation
- 23.3%** Homelessness
- 13.6%** Social Isolation
- 7.8%** Accommodation
- 6.8%** Financial
- 5.8%** Family Domestic Violence
- 5.8%** Drug Use
- 4.9%** Self-harm

Primary Diagnosis

- 31.1%** Depression
- 27.2%** Anxiety
- 18.4%** Post-Traumatic Stress Disorder
- 11.7%** Emotionally Unstable Personality Disorder/Borderline Personality Disorder



The Everlasting Bathtub (Depression)
Artist Dane McCarthy (20 years old)

Supported Accommodation



36 young people engaged in PICYS Pillar OPP40 were provided supported accommodation tenancies through PICYS Household Network



35%

of the **103** young people in the PICYS Pillar OPP 40 in the period

BaseCamp Be Well



66 number of sessions delivered to **37** unique people.

269 number of attendances



36%

of the **103** young people in PICYS Pillar OPP40 in the period attended Base Camp Be Well

To date there have been **30 topics suggested** by the young people guiding the two facilitating youth-workers for preparation of professional content and learning activities delivered in the Be Well sessions.

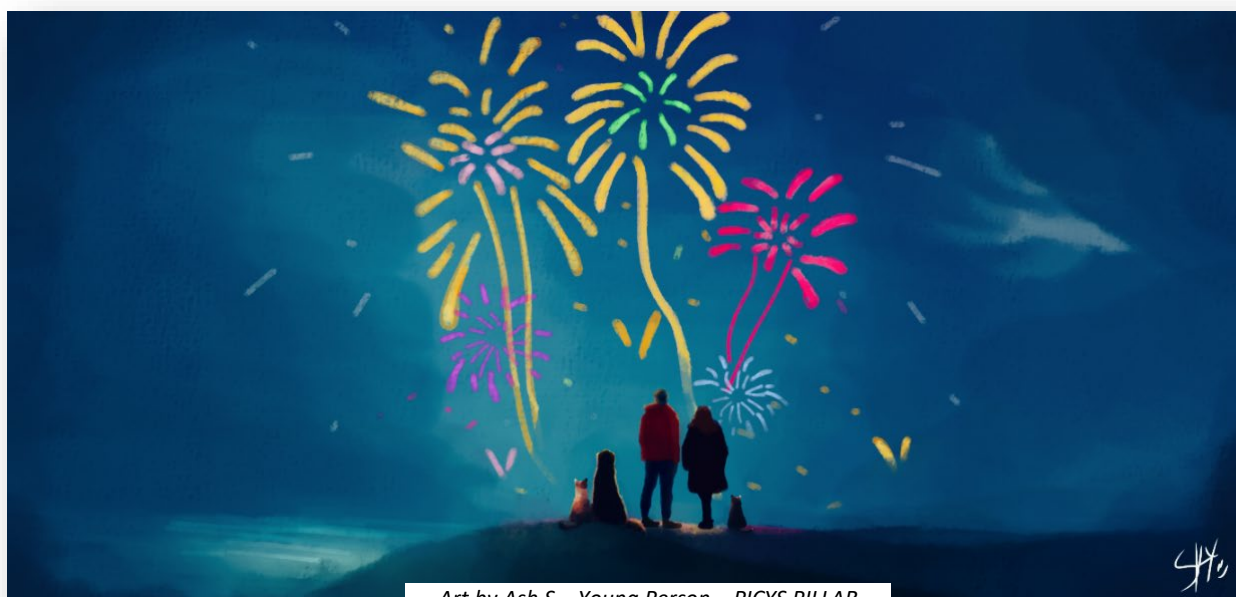


Young People – Time Spent in Program

Of the **80** young people closed during the period there were:

Number of Young People	Less than Weeks	Years	% of Young People to time	Progressive Total % <
48	52	1	60% of young people required <12 months	60% > 1 year
9	78	1.5	11.25% of young people required <1.5 years	71.25% > 1.5 years
7	104	2	8.75% of young people required <2 years	80% > 2 years
7	130	2.5	8.75% of young people required <2.5 years	88.75% > 2.5 years
2	156	3	2.5% of young people required <3 years	91.25% > 3 years
4	208	4	5% of young people required <4 years	96.25% > 4 years
3	260	5	3.75% of young people required <5 years	100% > 5 years

NOTE: Due to the scaled-up OPP40 capacity having four extensions within the 37-month period, there were effectively four scaled-down transitions also managed within this period. This adversely impacted the length of support engaged for a number of people.



Art by Ash S – Young Person – PICYS PILLAR

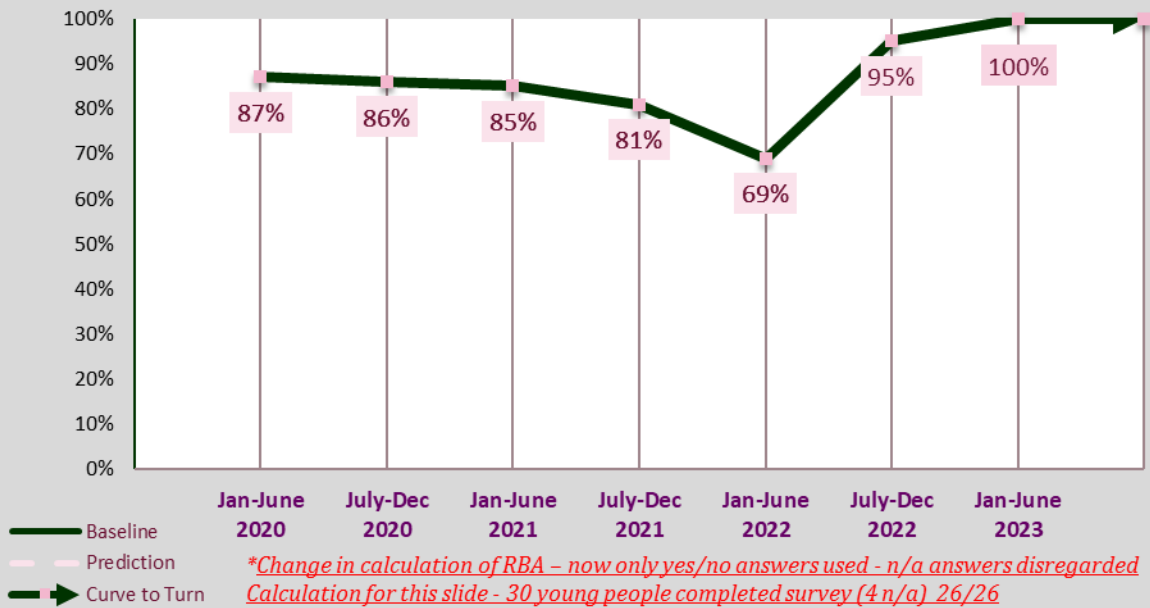
Results Based Accountability

The evaluation surveying has continued throughout the period, with Headcount Reports provided each regular 6-month progress reporting period.



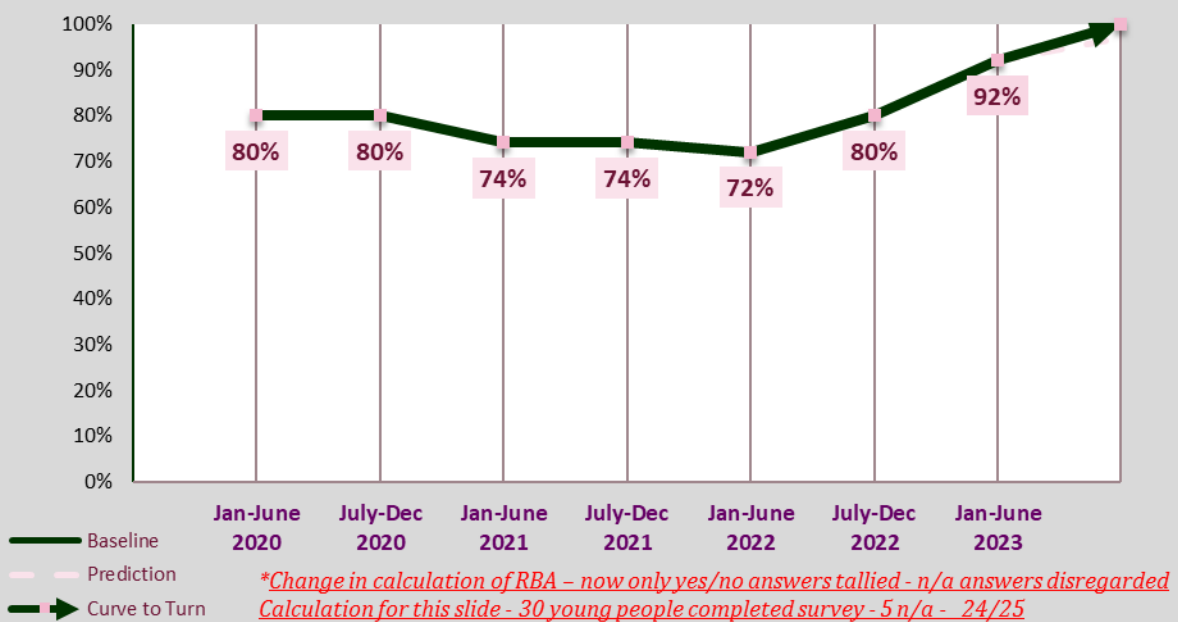
Graph 1 |

I have a better understanding of mental health and how it can impact on well-being
(coping skills, triggers, warning signs and safety)



Graph 2 |

I feel connected to communities that understand my experiences, identities and interests
(i.e. PICYS, school, sports, spiritual, cultural, peer supports, ceative and social)

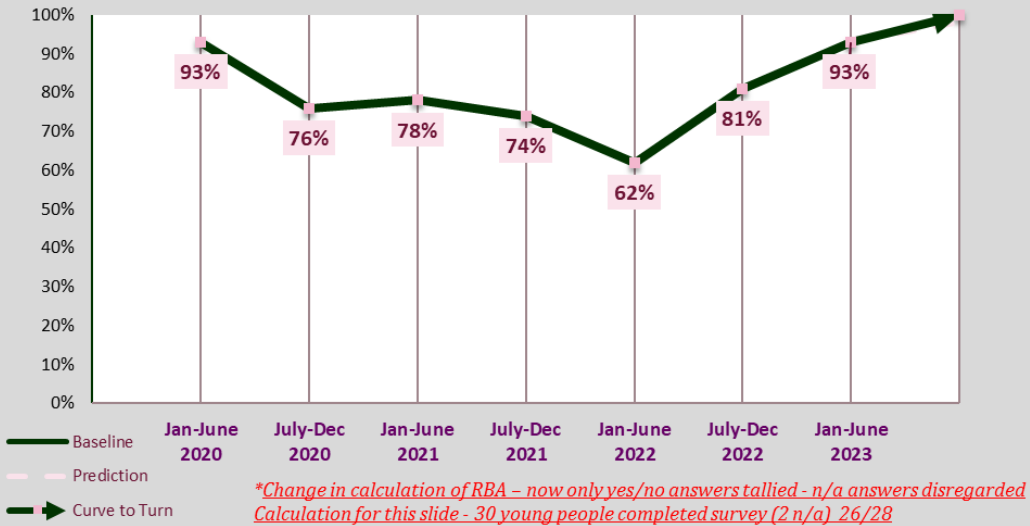




Graph 3 |

I feel I can better communicate my needs to others (individual & services)

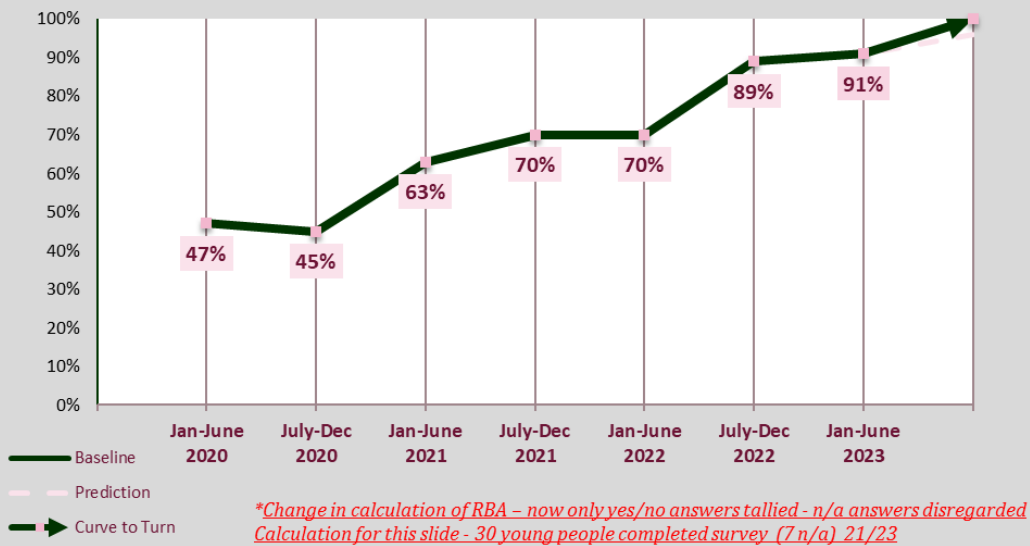
(friends, family, public, banks, voting, insurance, real-estate services; to advocate for myself, identify my own needs and be heard when I express my feelings)



Graph 4 |

I can identify healthy, safe and supportive relationships

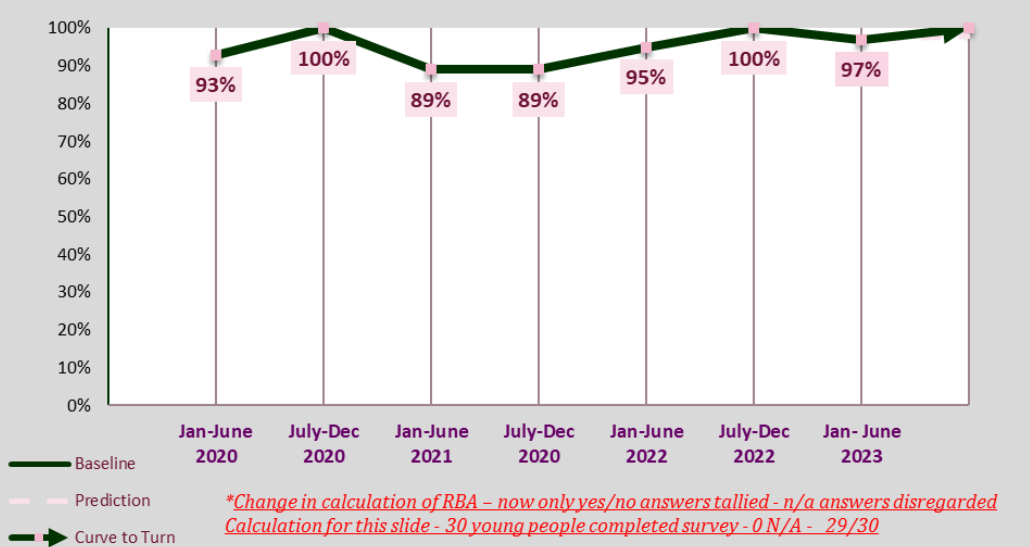
(boundaries, communication, choice and consent)



Graph 5 |

I feel I can trust PICYS workers

(predictable, consistent, reliable, persistent, transparent and competent)



MOST SIGNIFICANT CHANGE

YOUNG PEOPLE'S STORIES



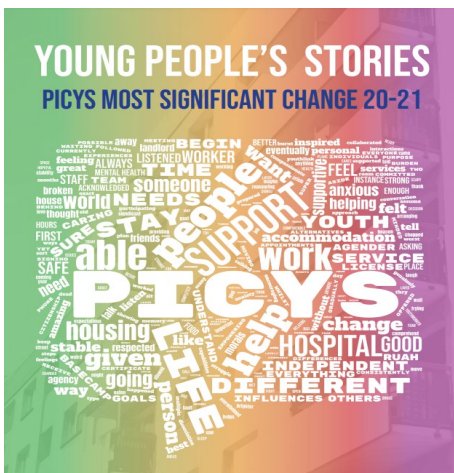
Most Significant Change-Transformative Evaluation Young People's Stories

This practice has continued throughout the period, and an electronic publication is available to for the 2020/ 2021 period. Scan the barcode for a copy.



There will be further Most Significant Change young people's stories continuing throughout 2023.

Following are excerpts from three PICYS young people's Most Significant Change Stories.



“SINCE MOVING INTO PICYS PLACE MY LIFE HAS GOT BETTER BECAUSE I DON'T HAVE TO WORRY ABOUT WHERE I'M GOING TO SLEEP AND IF I'M GOING TO BE WITH MY CATS OR NOT. BY THE TIME I FINISH AT PICYS ACCOMMODATION I'M SURE I WILL HAVE A JOB, HALF-WAY THROUGH MY LICENSE AND BE READY FOR THE ADULT LIFE AND ALL THANKS TO PICYS.”

MORPHEUS - 21 years old

Since being involved with PICYS what's been the most significant change for you?

I have noticed that I am feeling more comfortable asking for help, it's not that I am more prepared but that I feel that I am worthy. All my life I have been made out to feel that I am a burden. These are feelings that I am still tackling. There have been multiple interactions with PICYS staff where you can tell that my needs and capabilities are being acknowledged, listened to, and respected. In the past, the expectation has been that I should be able to do this myself. It has helped having people around me to let me know it's ok when I can't do something, and not to shame me for it. It also help people understand why I might not be able to do something. I don't feel that I have neurotypical expectations put on me. With PICYS, people can see that I am really trying, but still need help, so they help me where I need it.

PICYS has helped tear down a lot of my anxieties around asking for help. For instance, I've not always been open about when I am feeling suicidal out of fear of being sent to hospital. I was told that I would not have to go to hospital if we were able to work out alternatives. I did not trust this at first, but my youth worker followed through with what we both committed to, and I was trusted to stay out of hospital. Going to hospital takes away my control and agency, but in this instance, I was given that control and agency. I was listened to about my personal needs and differences in those needs and felt acknowledged about why hospital was not the best for me. Other services assume the same approach will work for all, and if it doesn't, it's my fault. Having my personal needs listened to and respected consistently has been empowering.

... I was given support that I did not expect to receive, such as, helping me to move out, and providing financial support to stay at a lodging whilst arranging other accommodation. PICYS really went above of what I thought were the limits of how they could help. They collaborated with [multiple other support services] and worked out plans and offered them to me. This was not done behind my back, but with me participating. ... Without the support of PICYS, I genuinely believe I would have ended up on the street, or dead.

SMASH - 22 years old

Since being involved with PICYS what's been the most significant change for you?

Getting housing changed everything, it allowed me to work on my goals. I made friends at PICYS, the friends are better influences, who are also working on goals and are more like minded. I was able to be admitted into hospital for a long-term stay. During my stay I was able to work on my mental health, get stable, stay away from drugs and people that were bad influences. Between hospital and Ngatti PICYS helped keep me stable by always talking to me, showing me, someone cares and helping me get to appointments. I love who I am now.

ELLIS

Since being involved with PICYS what's been the most significant change for you?

There were so many times when i felt so alone, overwhelmed and like I couldn't get anything done and she pulled me up and made sure we got things I needed to do done.

The most significant change has just been having someone so willing to go out of their way to support me and make sure I'm able to do the things I need to do whilst also making sure my mental health is as stable as it can be. I'm legitimately not sure where I'd be without my Youth Worker's help and support.

Decreasing Demand on Hospital Mental Health Services with Community Based Support

PICYS Pillar program monitors the hospitalisations of any case managed young people by keeping records at staff meetings, case reviews and case notes.

This enables the team to focus on being vigilant and planning for safety to avoid hospitalisations altogether or plan for safe, supported releases from hospitalisation into the community.



Title – Clairvoyance, Good Fortune and Self-Empowerment
Artwork by - Dane McCarthy (20 years old)

Young person case example timeline of Hospital Admissions

Year	Period	Admissions	Narrative
2020	Jul-Dec	2	Entered PICYS Pillar program in October. First meeting was following a hospital admission.
2021	Jan-Jun	2	This year involved losing housing and a stay in crisis accommodation. These events occurred in the second half of the year. Following crisis, they moved into a PICYS transitional and were able to receive public housing via NPAH. During this time, 4 of these admissions were due to the instability in accommodation. The other 2 were due to the breakdown of a significant relationship.
	Jul-Dec	6	
2022	Jan-Jun	0	First year in long-term housing. Focused on goals of increasing social connection. Despite struggles with social isolation, focused on utilising coping strategies to keep out of hospital.
	Jul-Dec	0	
2023	Jan-Jun	0	Continued focus on building social connection. Notable increase in secure, stable friendships and ability to access informal supports.

CONTACT



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Here at **PICYS** we know life can be like a game of snakes and ladders...

so remember to
**Live Happy &
Spread Joy!**