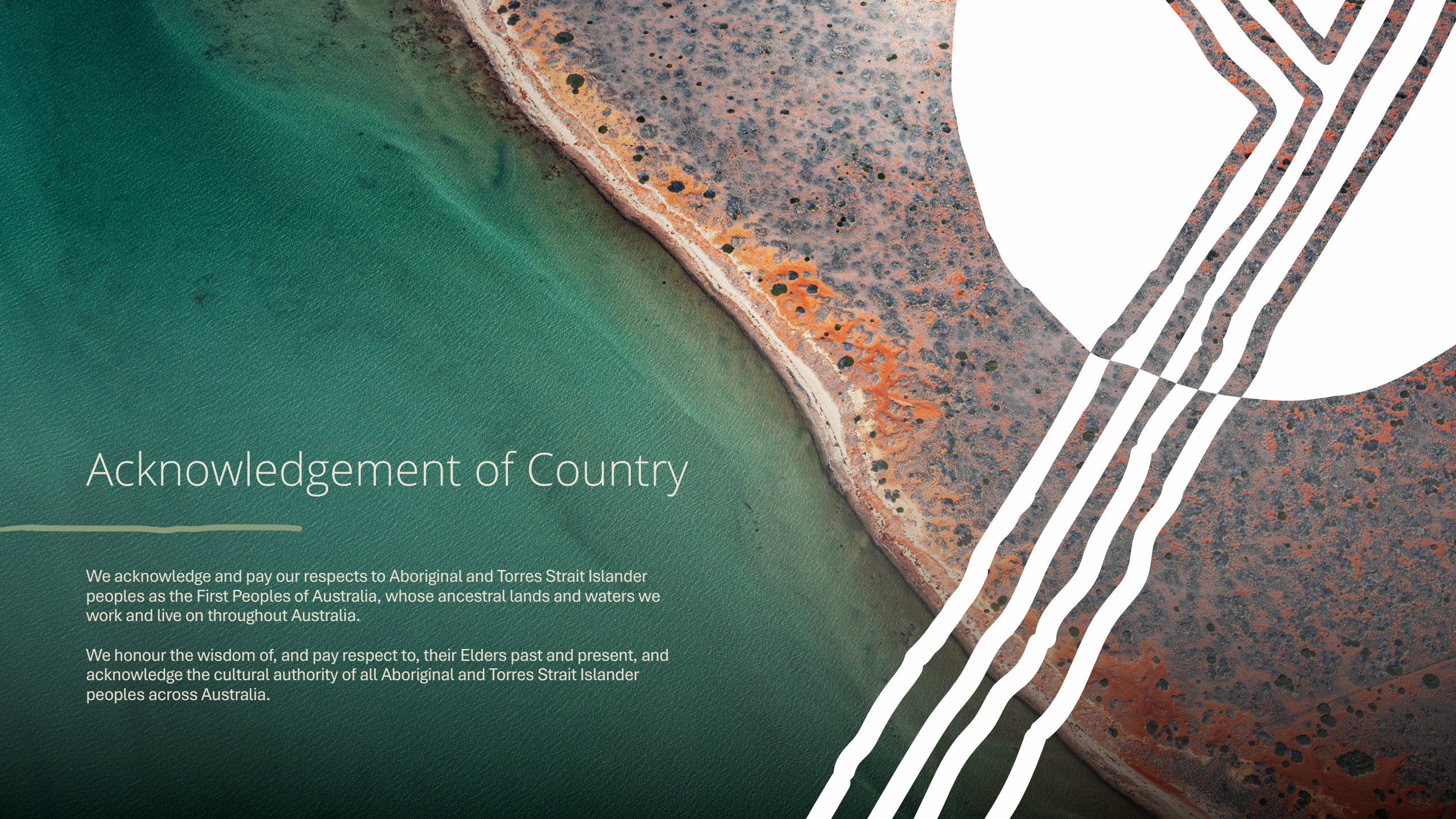
yamagigu
Together with Deloitte

ACT Aboriginal and Torres Strait Islander Youth Social and Emotional Wellbeing Service Model

Community Report

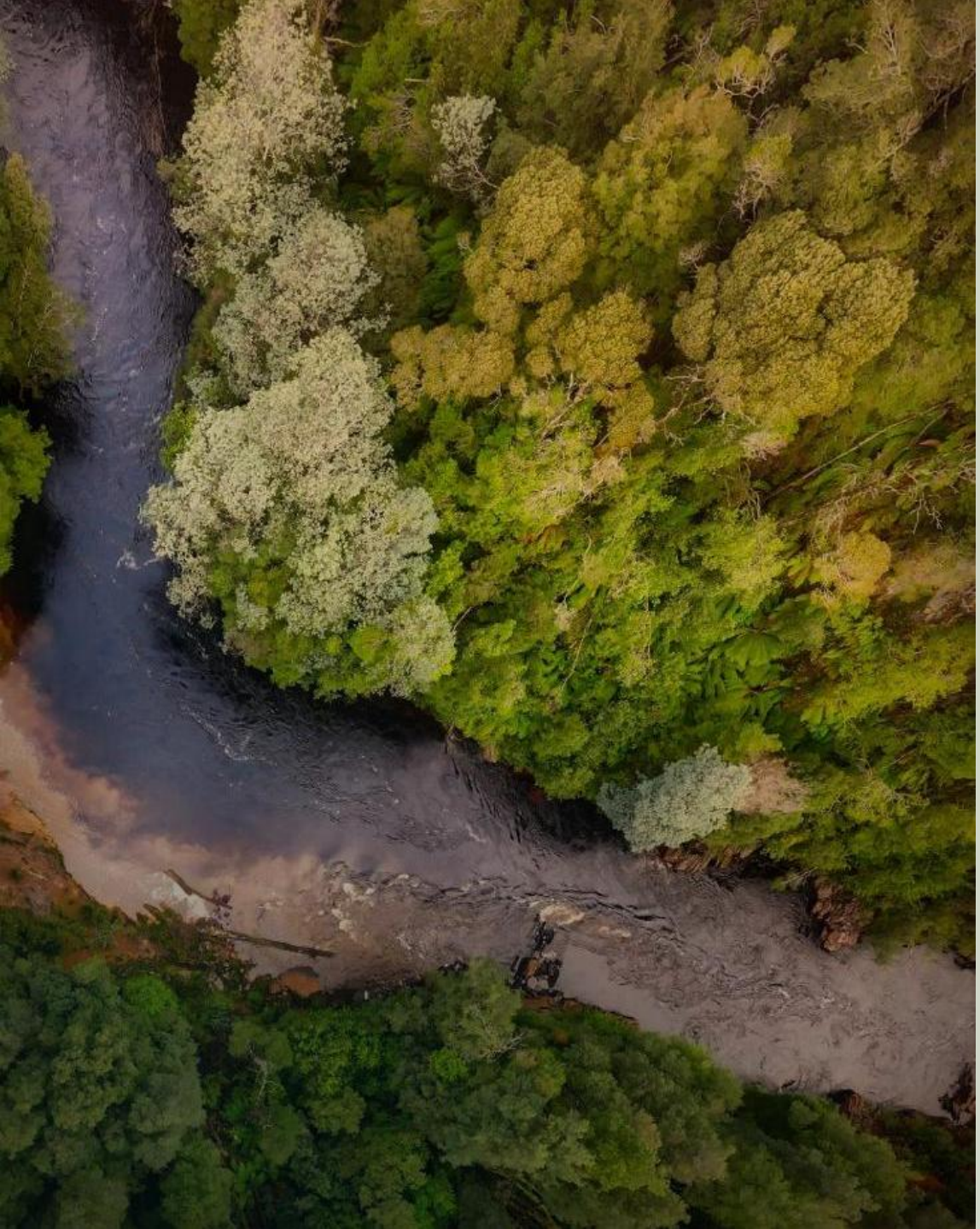
July 2026



Acknowledgement of Country

We acknowledge and pay our respects to Aboriginal and Torres Strait Islander peoples as the First Peoples of Australia, whose ancestral lands and waters we work and live on throughout Australia.

We honour the wisdom of, and pay respect to, their Elders past and present, and acknowledge the cultural authority of all Aboriginal and Torres Strait Islander peoples across Australia.



Section 1

Project Background and Scope

Project Overview and Scope

Aboriginal and Torres Strait Islander young people in the ACT face significant barriers to accessing culturally safe wellbeing support.

ACT Health and the Community Services Directorate have engaged *yamagigu* and IAHA, together with our partners Tanja Hirvonen and Polis Partners, to co-design a new service model for Aboriginal and Torres Strait Islander youth.

This project focuses on designing a mental health service for Aboriginal and Torres Strait Islander young people aged 12–25, particularly those with moderate support needs*.

Our hope is for a community-led, culturally grounded, and clinically strong service, incorporating cultural governance alongside clinical systems.

What's within project scope?

- To deliver a youth focused and fully costed service model supporting moderate need*.
- The model to benefit of Aboriginal and Torres Strait Islander youths who live in the Canberra and immediate border communities.
- To design a model that can be used for a budget submission.

What isn't within project scope?

- Another mainstream mental health model.
- A guarantee that the service will be implemented.
- A crisis or acute care model.
- A service for the greater Canberra region (South Coast, Goulburn)

** The term moderate support need is being further defined and tested through this project. In essence we understand this to mean SEWB support that does not require inpatient care or presentation to ED.*

Social and Emotional Wellbeing (SEWB) as our focus

(Adapted from Gee et al.,2014)

Framing the Mental Health Service Model as a Social and Emotional Wellbeing model.

Community and research strongly support this perspective, based on:

- Aboriginal and Torres Strait Islander knowledge systems of wellbeing being around for more than 60 000 years
- Aboriginal and Torres Strait Islander concepts of health and wellbeing are holistic.
- Mainstream biomedical approaches to mental health care don't always meet care aspirations for Aboriginal and Torres Strait Islander peoples.

This ensures that the design process and the final model is grounded in culture, holistic in nature and best placed to provide a culturally safe and responsive service.

A young person-centred foundation for this report

Fire is our guiding metaphor for this service. It speaks to life, renewal, healing, and connection to Country. It also speaks to the kind of service we are trying to design, one that feels welcoming and grounding, where young people can visit without fear, take the time they need, and feel the presence of others around them.

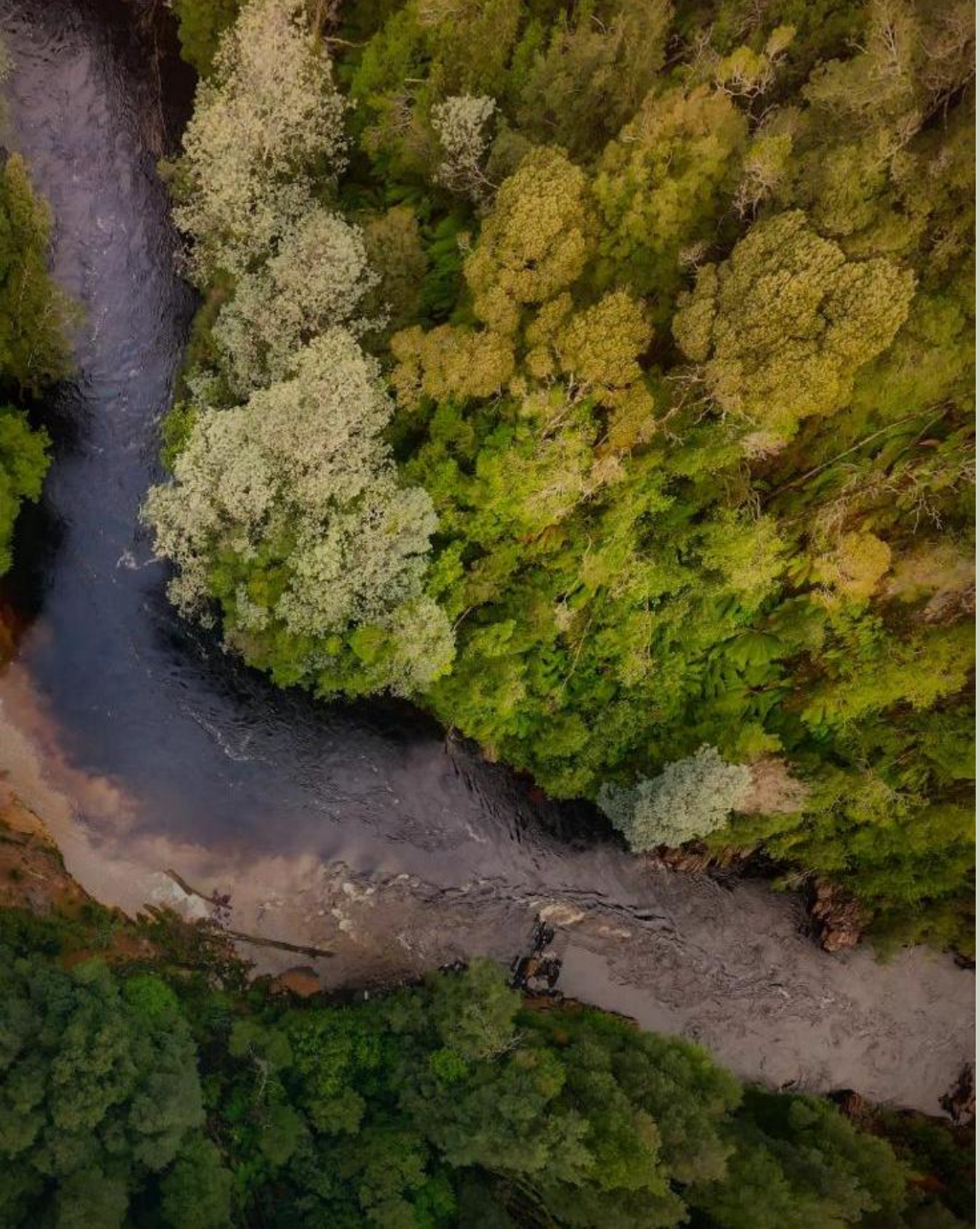
Like a fire, this service should be grown steadily and safely, creating warmth and energy over time rather than burning too fast or too hard. For our young people, this means support that is consistent, relational and responsive, not overwhelming, not transactional and not rushed.

A fire can only keep burning with the right environment. In this service, that means removing barriers, making access easier, and protecting what sustains our young people's wellbeing. It means paying attention to trust, kindness, culture and connection, the things that help young people feel safe enough to stay.

It also means recognising what can extinguish a fire and actively protecting against it. Rigid systems, unsafe environments or practices, judgement, silence, long wait times, repeated retelling of stories, or support that feels tokenistic and impersonal are all risks to our fire. Our approach is to understand and address these barriers, allowing the fire to continue burning steadily rather than being repeatedly put out.

Fire is also a gathering place, a place for reflection, storytelling, relationship-building, and honest conversation. This service is designed to be a culturally safe space where young people, families, and community can come together, connect, and heal. Fire and smoke also cleanses and makes way for renewal and creates opportunity for a fresh start.

Above all, this model is about keeping the fire alive in our young people, supporting their strength, identity, and resilience so that what starts here can thrive for generations to come.



Section 2

Aboriginal and Torres Strait Islander Young People in the ACT

Who are the young people we are designing for?

Aboriginal and Torres Strait Islander young people in the ACT inspire us and have inherent strengths that we should seek to build upon.
The service design must consider how to build upon these strengths and how it might enable young people to heal together.

Young people in the ACT:
- Are masters of technology and social media
- Are street smart and resilient in new and innovative ways
- Are strongly connected to each other, in a way that stakeholders reflect is unique and more beautiful than generations before.
- Have meaningful relationships with other young people without judgement of each other's nationalities, sexual orientation or gender expression.
- Are protective of each other and forgive each other quickly.
- Value their connection to one another and find safety and strength in connection.

The wellbeing needs of Aboriginal and Torres Strait Islander young people are diverse.
The service must be able to support people with different needs, without isolating or telling young people their needs are too complex.

- When young people reach out for support, their most immediate concern might appear straightforward on the surface, but in reality, can be the result of many underlying complex experiences.
- The service must validate help seeking behaviour and cannot contribute to the feeling of 'being unfixable or unsavable' that many young people experience.
- While the service might most commonly see presentations for social isolation, anxiety and depression, there is also a cohort of young people who are being turned away from other services who are experiencing symptoms of early psychosis, schizophrenia and other stressors. They are 'too complex' for one service and 'not complex enough' for the next.

Aboriginal and Torres Strait Islander young people have had their trust broken by the system many times.
The new service must stay reliable and operate in a way that demonstrates respect and value for the trust invested in it by young people.

- Aboriginal and Torres Strait Islander young people are overrepresented in justice and child protection systems. For these young people, diagnoses often occur first in carceral settings focused on medicating rather than healing, and without crucial through-care upon community re-entry.
- When in an environment of trust and safety, young people do not shy away from personal accountability and speak honestly about the choices they have made. This honesty and accountability is rarely reciprocated by the systems that have broken their trust.

Who are the young people we are designing for?

Aboriginal and Torres Strait Islander young people in the ACT are part of a highly connected community.
The service must consider measures to manage any possible conflict and confidentiality concerns to ensure it is accessible to most young people.

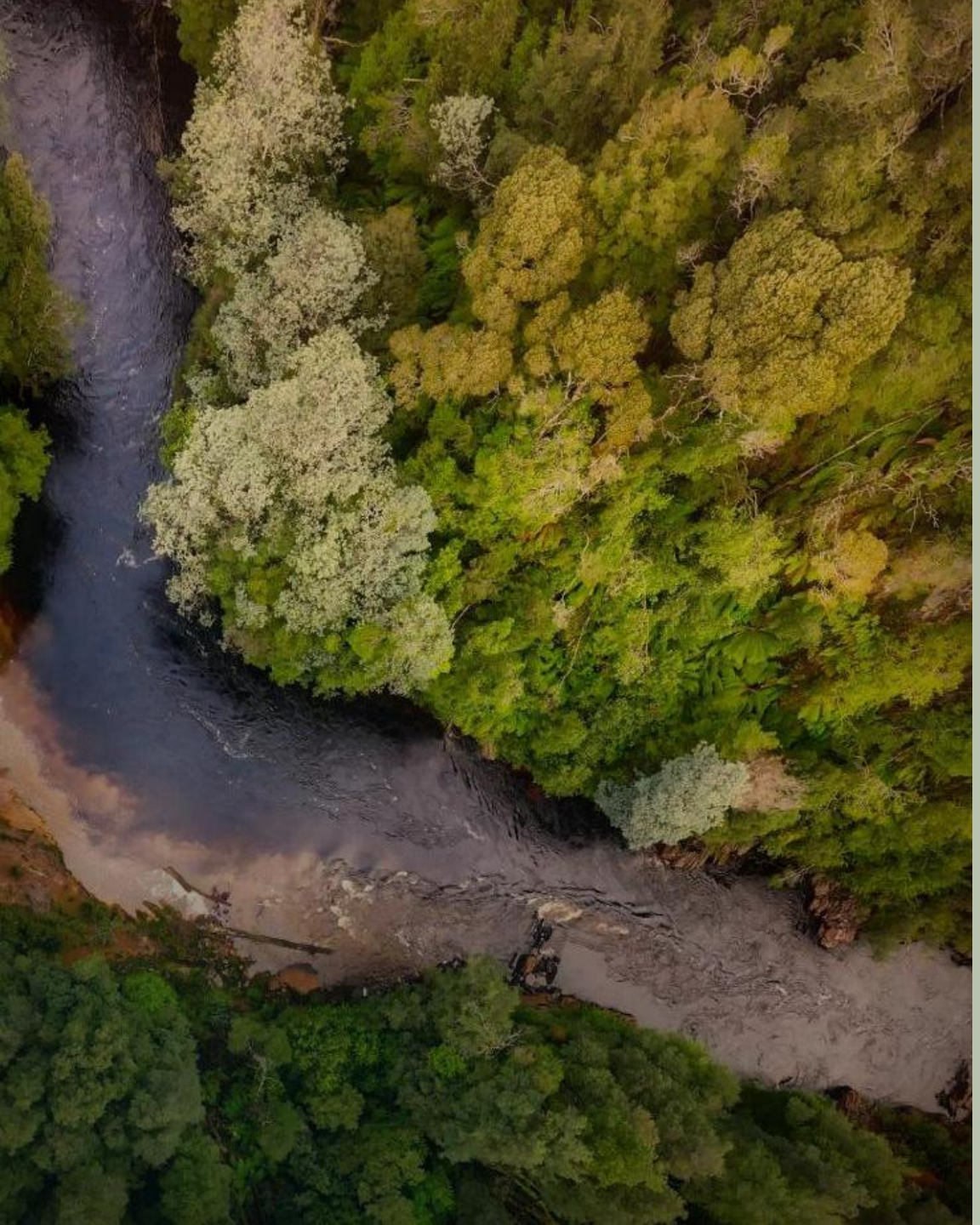
- While this interconnectedness has benefits, it also limits the extent to which young people expect their privacy and confidentiality to be protected when accessing Aboriginal Community Controlled Health Services, especially where family members might be employed there.
- This interconnectedness also creates concerns when considering accessibility for young people who may be subject to non-association or other legal orders regarding other clients.

Aboriginal and Torres Strait Islander young people want support that looks at them as their whole selves.
The service must respond to young people's whole selves through embedding a variety of programs and cultural spaces and connections.

- Too many services seek to address young people's concerns in isolation of their broader life experiences.
- Young people are craving support that considers their social and emotional wellbeing in connection to culture, community, how and where they live and the other systems they might be connected with.
- Responding to their whole selves includes embedding programs for young parents, places for young people to wash their clothes and get a feed, developing life skills, creative outlets, and family-based therapy. It must also include spaces for cultural strength and connection, such as through an Elder in residence and embedded cultural mentors and healing programs.

Supporting Aboriginal and Torres Strait Islander young people in the ACT must include supporting their families and communities.
Young people exist within their families and the broader community. The service should support families and peers helping young people.

- Young people are deeply cared about and their support system, despite best efforts, is not always equipped or knowledgeable about how to best support their loved one who is experiencing social and emotional wellbeing challenges.
- The service must support families and communities in their own wellbeing, as well as education and tools to best support loved ones who are struggling.
- The service should also recognise that many young people carry a sense of responsibility to others.
- For young people who feel isolated and without a safe support network, the service should seek to walk alongside them to help navigate their care and create a sense of community.



Section 3

Stakeholder Insights

What are peoples experiences with accessing current services?

Excessive wait times, if they are eligible for the services at all

Young people don't know where to go, system is impossible to navigate, it's easier to give up

Duplication of services that don't address gaps

Lack of privacy or nerves about confidentiality where family/community members are also staff

Services available are not appropriate for young people's needs

Lack of culturally safe places and people for support, no trust with services

Limit to defined number of appointments

Ability to self-consent as a barrier for young people's access

Insights in detail

What are peoples experiences with accessing current services?

Excessive wait times, if they are eligible for the services at all

Quote

"Wait times to access services are too long."

"We hear commonly that clients tried to engage before it got bad, but they were put on a waitlist and now their issues have gotten really bad."

Summary

Waitlists were seen as a major issue to getting support. Long waits made it harder to get help and often reduced the chance they would stay engaged. Stakeholders shared that some young people are not eligible for support anywhere and can fall through the cracks across services. Barriers and long wait times can impact on wellbeing, leading to contact with emergency departments, police, justice or other crisis responses. This is described as deeply frustrating and a major barrier to getting young people the right help at the right time.

What does this mean?

- Services should have a culturally centred and transparent process (no wrong door).
- When there are waitlists that there is ongoing contact with young people to prevent issues from escalating.
- Ongoing communication to ensure young people feel supported whilst waiting (text check ins/follow ups).
- The service should aim for an appropriate staffing to reduce waitlist time (caseloads).

Young people don't know where to go, system is impossible to navigate, it's easier to give up

Quote

"How do we stop retraumatising people by sending them from agency to agency to retell their stories. [Current models without warm handovers are] just continually retraumatising people and not providing care, we're just providing intake."

"What happens if we refer and then those services refer them to another place and so on with no oversight. That tells people no-one can handle them or their needs."

Summary

The current system can feel fragmented and hard to navigate. The burden of joining the dots between services falls back on the young person.

When young people are also involved with systems such as Bimberi and child protection, it can be harder to stay connected to care, with a greater risk of repeated assessments, retelling their story and retraumatisation.

Stakeholders shared that there can be limited help to navigate pathways, which can leave young people feeling stuck and unsupported.

What does this mean?

- The service should embed a caring and holistic approach to all services to minimise the burden placed on young people (warm referrals).
- Support moving and care between services.
- Ongoing follow up to ensure young people do not fall between the gaps of service (active case management).

Insights in detail

What are peoples experiences with accessing current services?

Duplication of services that don't address gaps

Quote

"There is a duplication of services, but we're still missing sections and still have gaps."

"Stay away from duplication and towards partnership so there's a lack of competition for money."

Summary

ACT wellbeing services are seen as disconnected. Services appear to overlap, while other needs remain largely unmet. This creates confusion about who, what, when, where and why, and which service is best for the young person. There can be unhelpful competition between providers for limited funding which may affect referrals, willingness to share care, or how easily young people can move between services. For young people, the result can be a system that is disconnected and harmful.

What does this mean?

- Ensure the service is not duplicating services (service mapping).
- Design the service around current gaps in service and embed collaboration to link young people to existing services.
- All services should work together to provide the best quality care for young people, regardless of funding.

Lack of privacy or nerves about confidentiality where family/community members are also staff

Quote

"Newer organisations are not as well known, which can be a benefit and might make the young people feel like confidentiality is there"

"They might want to talk to someone they don't know. They don't want us to know what they're going through and want that element of privacy."

"I noticed we have patients who are really worried about who they'll interact with."

Summary

Young people described feeling nervous about attending services where they might be recognised by staff, other community members, or people connected to their family. This can be especially difficult in the ACT, where community and service networks are closely connected. These concerns can create another barrier to help-seeking,.

What does this mean?

- Design the service environment to support privacy and discretion, when young people enter, wait and engage in ways that protect privacy.
- Having staff and staff-only spaces separate from public areas where possible, reducing unnecessary contact for young people.
- Ensure all staff are trained in confidentiality, privacy and culturally safe information handling – for small communities.

Insights in detail

What are peoples experiences with accessing current services?

Services available are not appropriate for young people's needs

Quote

"The supports available in schools are lacking and that's usually the main support you can access as a young person. From my experience, schools don't have the capabilities to deal with the complexities that our young people can have."

"Services that are accessible to our people include counselling, which doesn't fit if you need a diagnosis or specialist intervention or medications."

Summary

Young people shared that available services were not always appropriate to their needs.

When seeking treatment for complex issues, counselling services were often unable to provide the level of care required and lacked clear referral pathways.

Together with the difficulty of navigating the system, this left some young people without appropriate support.

What does this mean?

- The service should meet the needs of young people and reach the gaps in service.
- Access to psychologists and psychiatrists should be available for young people who require more specialised mental health support.
- Create pathways to support young people to understand their conditions and the types of support the service can offer and provide effective referral pathways.

Lack of culturally safe places and people for support, no trust with services

Quote

"The main point is a lot of the systems are racist."

"The services are not built for our young people."

"The way [schools and other access points] diagnose our children, it's a western way of thinking. They don't have cultural safety or an Aboriginal lens."

Summary

Many existing supports were seen as lacking cultural safety, and young people described several of the environments they moved through as feeling unsafe.

Racism in schools and other settings contributed to feelings of discomfort, mistrust and disconnection, making it harder for young people to seek support and feel confident that they would be understood and treated appropriately.

What does this mean?

- Cultural safety should be embedded as a core feature of service design, not treated as an add-on.
- Create a space for Aboriginal and Torres Strait Islander young people to ensure they feel understood and safe within the service.
- All staff should be supported through cultural safety training, reflective practice and accountability mechanisms to ensure care is respectful, validating and trauma-aware

Insights in detail

What are peoples experiences with accessing current services?

Limit to defined number of appointments

Quote

"[Existing services'] practice of needing 6-12 sessions doesn't help, you need that time just to be comfortable with someone, let alone make steps in the right direction."

"When you do finally get into a system that wants to speak and listen to you, you then spend 6 sessions building that rapport, but then your allocated time is done and they assume you can pay or you're mentally well after that."

Summary

Young people described needing time to build trust before they felt comfortable talking openly about what was going on for them. In current services, a limited number of allocated sessions (linked to Mental Health Care Plan criteria) often reduced the time available to build that trust and relationship. As a result, some young people reached the end of their service period before they felt ready to fully engage, leaving them feeling exposed, unsupported and unsure where to turn next.

What does this mean?

- The model should recognise that trust-building is part of care, not separate from it, and allow time for relationships to develop before expecting young people to disclose more complex issues.
- The service should create opportunities for informal or lower-pressure engagement that help build familiarity, safety and trust before or alongside more structured appointments.
- During wait periods or between appointments, young people should be able to stay connected through check-ins, group activities, outreach, peer support or other forms of low-intensity engagement.

Ability to self-consent as a barrier for young people's access

Quote

"I've found the age of consent to receive support at 16 is a huge barrier, particularly for someone who's experiencing family violence or complex trauma."

"The age of consent means because of family violence, parents won't sign off on it, then it's compounding trauma and having them sit in a space that isn't safe for them because they are not able to access help."

Summary

Young people under the age of 16 who are experiencing family complications, or who do not have a safe adult available to provide consent, may be unable to access services and support because of age of consent requirements. This can leave some of the most vulnerable young people without an appropriate pathway to care and may allow needs to escalate further before support becomes available.

What does this mean?

- Ensure access to appropriate, age-relevant and rights-based communication.
- Create a safe space where these young people feel welcomed, even if they are unable to be serviced (space for connection, not just treatment).
- Create safe opportunities for young people unable to obtain consent to engage with the service in other ways. This may include sport or group connection activities, or peer support that doesn't require parental consent.
- Enter discussions surrounding age of consent with the Directorate and whether access to counsellors or non-diagnostic / non-treating appointments can be made on a self-referral basis.

What do young people and communities need?

- Timely assistance and to not feel forgotten when waiting for clinical support
- A service which can understand them as a whole person
- A welcoming space for connection and education
- A service which can meet them where they are
- Support for families, parents, and peers
- An Aboriginal and Torres Strait Islander led model, trusted to deliver
- A service and staff they can trust
- A place to go when they need it

Insights in detail

What do young people and communities need?

Timely assistance and to not feel forgotten when waiting for clinical support

Quote

"Timely access to services is really important. By the time a young person agrees to go see someone, it might take a long time before an appointment is available, so by the time their appointment comes around they might have changed their minds and now don't want to be seen."

"Sometimes just calling and saying you're not forgotten, still engaging and asking if there's anything else while they're on the waitlist and to check in with them."

Summary

Young people described the importance of feeling seen, validated and responded to when they first reach out for support. Even where clinical support is not immediately available, early acknowledgement and continued contact can help young people feel connected to the service and reinforce that seeking help was worthwhile. Without this, waiting periods can feel isolating and may reduce the likelihood that young people stay engaged.

What does this mean?

- Design a communication plan for the service to communicate with young people to retain engagement with the service.
- Create a space for young people to feel connected to the service while waiting for clinical support.
- Design staffing models to reduce avoidable wait times and support timely early responses.
- Provide an initial appointment or triage contact to understand need, offer early support, and put interim supports in place while further care is being arranged.

A service which can understand them as a whole person

Quote

"We don't think of ourselves as silos, it should be viewed as a more holistic approach, but the design of current services doesn't really cover that."

"They need to have these wraparound services to compliment what the service does, if you don't have that, the service is useless."

Summary

Holistic and wraparound supports were discussed as central to a new mental health service. Young people felt they were seen only in silos and in isolation to their issues when accessing supports due to the disconnection and lack of holistic interactions between different services.

What does this mean?

- Design the service to provide holistic, wraparound support that responds to the young person's broader circumstances, strengths and intersecting needs, not just a single presenting issue.
- Build strong pathways for warm handovers and coordinated support across intersecting services, so young people do not have to navigate disconnected systems on their own.

Insights in detail

What do young people and communities need?

A welcoming space for connection and education

Quote

"Youth centers were a safe nice hub where people went to. It was all about community when they went there, and it wasn't about watching the footy or the activities they had but it was about the community and connection these spaces facilitated."

"Helping remove that stigma for young people too, these are my group of peers who are experiencing similar things to me or who I know I can talk to. Creating a sense of community for each other."

Summary

Young people described the importance of having a space that feels welcoming, comfortable and safe, somewhere they can relax, be themselves and connect with others. Opportunities for peer connection were seen as an essential part of the service, alongside practical education that helps them navigate everyday life. In particular, young people identified life skills courses and other non-clinical activities as important features of a more holistic and engaging service model.

What does this mean?

- The design of the space should reflect cultural safety, youth ownership and encourage peer connections. The space should be accessible to all young people.
- Include educational and practical support components, such as life skills courses and other opportunities that help young people build confidence and everyday skills.
- Create reasons for young people to attend beyond clinical support alone, including non-clinical activities, connection and practical support.
- Staff should feel welcoming and engage with young people as they walk in. Remove reception desks and barriers to create an open space for young people to feel connected.

A service which can meet them where they are

Quote

"That outreach component is really needed. Invariably, some of those young people are not going to go the service because they're disengaged, and workers going out to where these young people are is really important."

"Wherever it is located will need an outreach part so both North and South side can access it."

Summary

Flexible service delivery was seen as essential to making a new service genuinely accessible and useful for young people. Stakeholders noted that transport is a significant barrier for many young people, and that relying on one fixed site alone may limit who can access support. An outreach component was therefore seen as an important feature of the service, helping extend reach and making it easier for young people to engage in ways that suit their circumstances, preferences and needs.

What does this mean?

- Ensure young people across the ACT have access to a component of the service, whether that is the main space or an outreach service.
- Flex the delivery of the service to meet what young people are after, and structure the service to meet their needs and desires in how they want to connect and approach the service.
- Build the service close to transportation or investigate alternative options to ensure young people have a safe way to access the service.

Insights in detail

What do young people and communities need?

Support for families, parents, and peers

Quote

"Another huge thing for young people is the peer support that happens, and the lack of education to your peers. When they are trying to support you and they don't know how to help you, it puts so much pressure on young people."

Summary

Parents and carers described wanting more support and education so they could help guide young people towards the help they need. Stakeholders also noted that peers and friends are often close to young people in distress or crisis, but may not know how to respond or where to seek help. Strengthening the knowledge and confidence of the people around young people was seen as an important part of building a more reliable and trusted support system.

What does this mean?

- Create a family-friendly atmosphere to encourage a young person's support system to engage in the space as appropriate.
- Build guidance and education for communities around young people on how to help support and navigate the complex services system.
- Become a 'one stop shop' for needs, so young people and their support networks know they can access the service and leave with help and guidance.

An Aboriginal and Torres Strait Islander led model, trusted to deliver

Quote

"It's important the right people take on this service."

"I don't care [...] as long as something is impactful for a young person and they're being picked up somewhere."

Summary

There was strong interest in a model that is Aboriginal and Torres Strait Islander-led and trusted by young people, families and community to deliver real value. Stakeholders consistently emphasised the importance of First Nations leadership, community voice and governance arrangements that keep social and emotional wellbeing at the centre of care. At the same time, consultation raised practical considerations about how a community-governed model would operate within the broader ACT service landscape, including funding pressures, the capacity of current governance arrangements, and the need to avoid further system dynamics undermining trust or delivery.

What does this mean?

- The model should embed strong Aboriginal and Torres Strait Islander leadership and community governance.
- Young people should have a genuine and ongoing voice in how the service is shaped, governed and improved.
- The service should prioritise accessibility, safety and the needs of young people, while being supported by governance arrangements that are stable, trusted and workable in the local context.

Insights in detail

What do young people and communities need?

A service and staff they can trust

Quote

"Making sure the employment is meaningful for staff, because staff [changes] breaks the trust with young people."

"Having someone who understands what they go through – potentially some younger people of an appropriate age who understand their needs."

"The service should be modelled like a family, once the person comes into the program and we support them, it's a huge risk to brush them off."

Summary

Young people need time and space to build trust in a service, particularly where they have had negative experiences with other services in the past. Stakeholders emphasised that young people are more likely to engage when they feel validated, respected and able to move at their own pace, rather than being rushed through a process or expected to open up before trust has been established.

What does this mean?

- A peer workforce component could build relatability and engagement and further encourage the impression of the service as a youth-centred space.
- Employing Aboriginal and Torres Strait Islander staff and empowering this workforce to create meaningful employment, leading to greater engagement with the Aboriginal and Torres Strait Islander young people accessing the service.
- Providing time and space to respect the individual's needs and wants as well as keeping communication pathways open to make them feel seen, validated, and not forgotten.

A place to go when they need it

Quote

"Between 3-8pm is prime time particularly if you feel alone, you can't go to bed because it's too early, but you also can't go to school, you just feel alone. If you can catch people then, I think having support available outside those hours is vital and really important."

Summary

Young people consistently described the need for a service they can access when they need it, without having to choose between seeking support and staying engaged in school, study, work or other parts of daily life. Stakeholders emphasised that service hours and availability should reflect the realities of young people's schedules, including when distress or crisis is most likely to occur, rather than expecting young people to fit within standard service hours.

What does this mean?

- The service should have an alternative opening hours model to best meet the needs of young people experiencing crisis, particularly focusing on late nights and weekends.
- Support young people to remain engaged in schools and their work commitments by extending opening hours to after-school times.

What challenges are current services navigating?

Lack of staff and Aboriginal and Torres Strait Islander workforce shortages

Opaque view of current services provided in the region

Lack of collaboration between existing services

Time constraints for patient care and structural limitations to culturally responsive practice

Transitioning service navigation as the young person's needs evolve

Insights in detail

What challenges are current services navigating?

Lack of staff and Aboriginal and Torres Strait Islander workforce shortages

Quote

"The workforce is non-existent here [in the ACT]."

"Why would they work for less pay or the same amount of pay in a more challenging environment?"

"[We should be] thinking about how this is contributing to the sustainability of the workforce as well."

"Students take a lot of work, and it's worthwhile, but it's exhausting."

Summary

All providers emphasised difficulties faced in staffing their service, particularly clinical roles. An Aboriginal health service provider discussed how the ACT region has a particularly difficult staffing situation, and how for their service, finding effective staff willing to take on more complex needs patients for the same pay as mainstream or other services was a significant barrier facing Aboriginal health service providers in the region.

What does this mean?

- Create meaningful opportunities for employment to encourage staff retention.
- Embed student workforce opportunities to grow the service's future workforce.
- Investigate workforce sharing models with other service providers.

Opaque view of current services provided in the region

Quote

"These things that people need, some things are there and are available, but no one knows where to find them at the moment."

"There is a lack of information about how to navigate these systems, especially if you don't know what you're looking for."

Summary

Many consultations revealed confusion and frustration surrounding the lack of clarity of what services are currently available in the ACT region and how the services interact with one another. Service providers also noted they were unclear of what other services provided and this led to uncertainty in navigating referrals.

What does this mean?

- Encourage the creation of a live Service Mapping of current available services in the region.
- Utilise an overview of current services to ensure new services does not duplicate existing supports and can use this overview to create referral pathways and provide clarity for those accessing the service for other needs.

Insights in detail

What challenges are current services navigating?

Lack of collaboration between existing services

Quote

"Young people need more effective warm referrals between services."

"For [our service working with children below the age of 12], if we could have a warm handover to other services at the end of our client's support period with us, that would be wonderful. Our clients reach 12/13 and there is nowhere to send them for support."

"The problem for us is that there's nowhere for us to refer them to."

Summary

Despite desire by services to collaborate with one another, many services felt there was a lack of collaboration and warm handovers and referrals between services. Current service providers emphasised that this negatively impacted on people seeking support through their services when they were unable to communicate and to collaborate effectively between different services.

What does this mean?

- The service should establish relationships with other providers in the region and create warm referral and handover processes with other services.
- The service should be designed to reduce competition and duplication of existing services to support positive relationships with other providers.

Time constraints for patient care and structural limitations to culturally responsive practice

Quote

"We can't provide more time because we end up with time limited services."

"Waitlist pressures. We can't spend the time with someone who needs it."

"You need that time to just be comfortable with someone, let alone make steps in the right direction."

"Young people with complex needs and a mistrust of systems take a long time to build trust."

Summary

Current providers noted that the time spent with patients was valuable, but due to staff shortages and system pressures they were unable to fulfil the time needs for patients. Young people need time to build a relationship with a service to feel comfortable in accessing the support they need, but many providers noted time was difficult to provide to clients, which may impact the quality of patient care.

What does this mean?

- Employ adequate staff to enable an increase in service options and appointments.
- Create opportunities for young people to engage with the service and build trust prior to clinical appointments to reduce time needed for relationship building within the clinical setting.
- Continue communication pathways, as disengagement may not mean a young person does not need service, and instead might mean they need more time to feel comfortable in the service.

Insights in detail

What challenges are current services navigating?

Transitioning service navigation as the young person's needs evolve

Quote

"The referrals to other places are essential but it's so hard. [...] I have to start from scratch and go through everything again. I'm not going to chase those things up and I get fatigued."

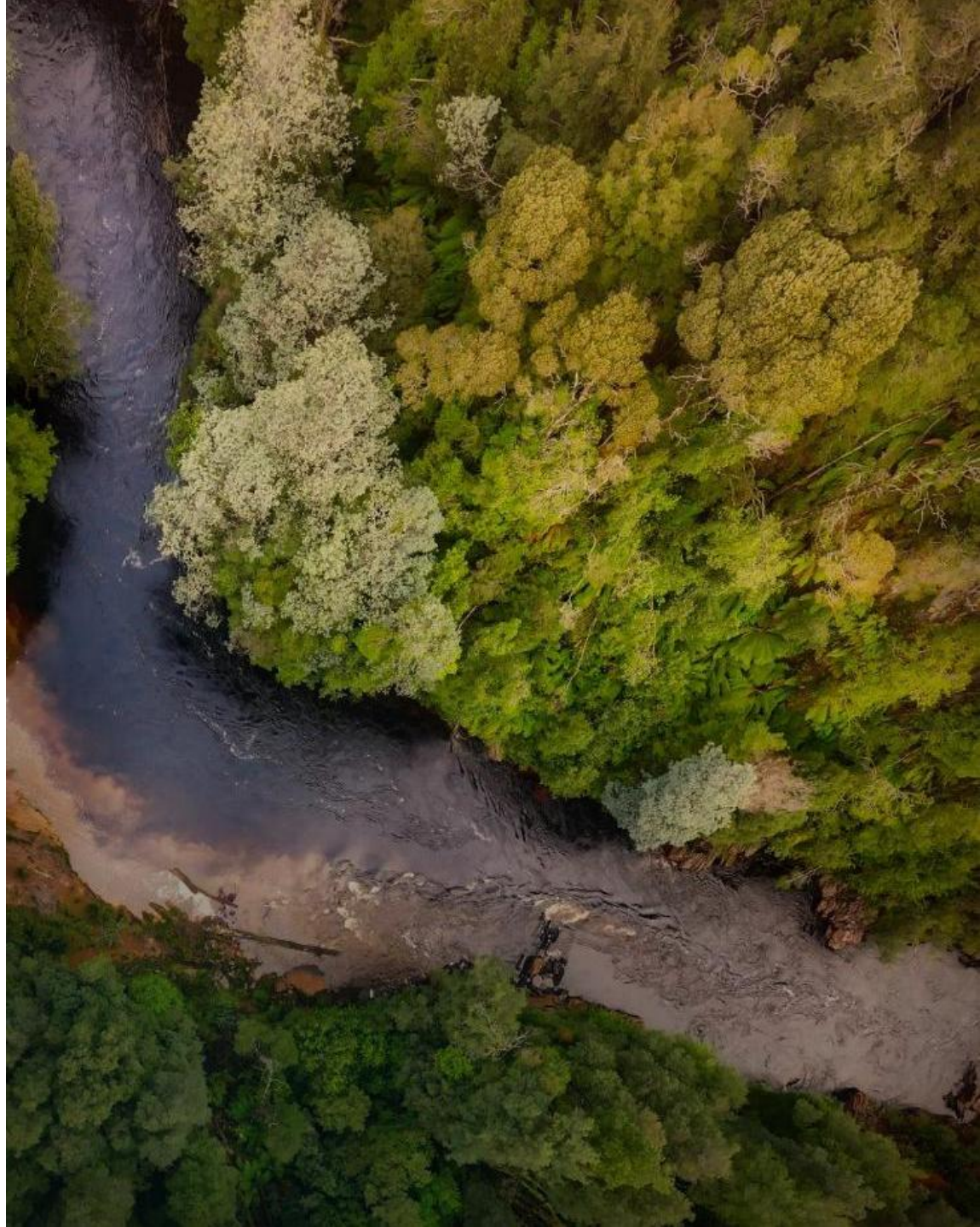
"If you're connected with a service in education but you age out of education, what happens next? Especially not having money at that age group makes it even harder."

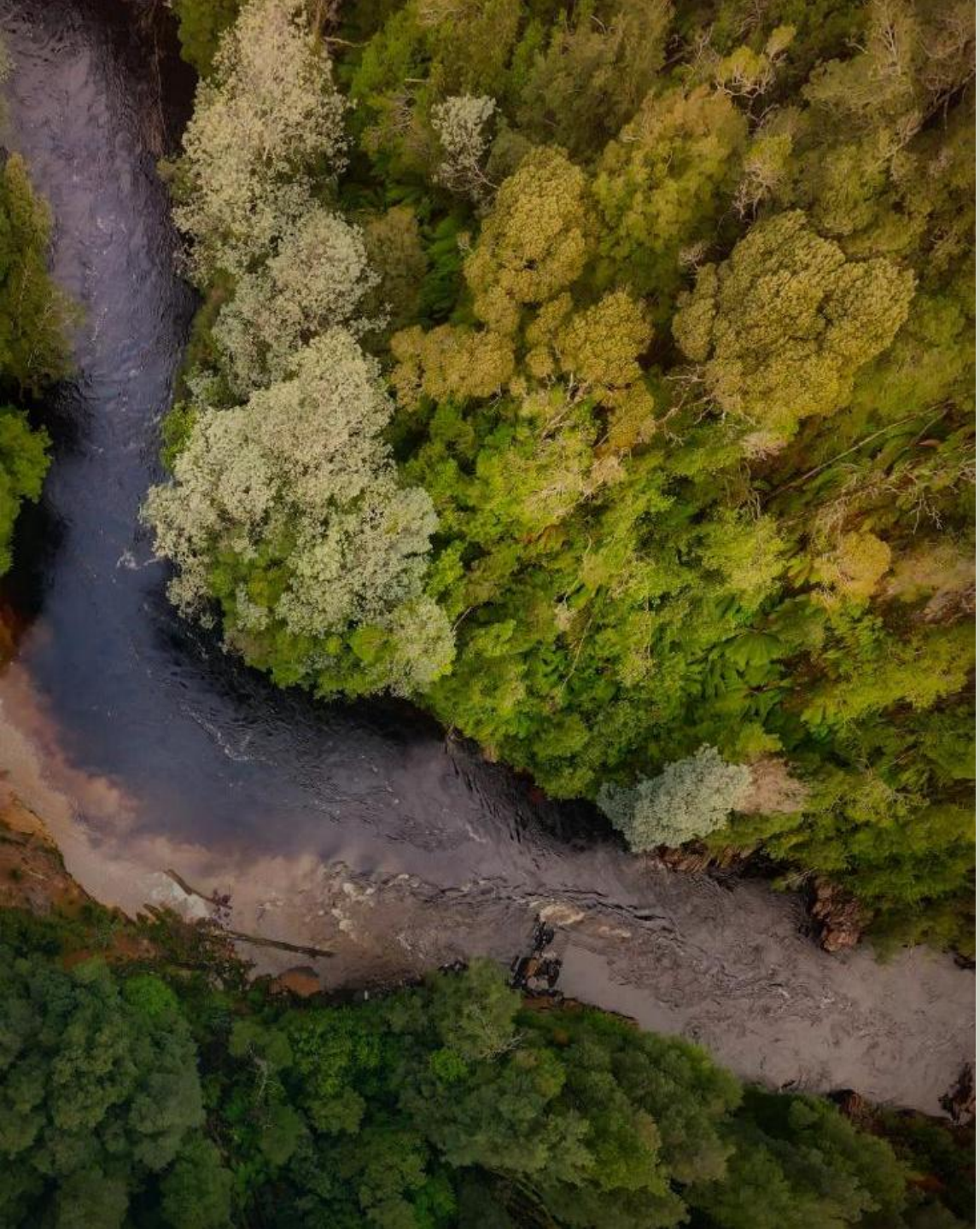
Summary

Transition between different services or requiring different services at different stages in their life journey, was seen as a large struggle in young people's abilities to navigate between intersecting areas. We heard that for young people with more complex needs, the challenges in navigating the many services they required impacted their mental health, and fatigue reduced their likelihood to pursue more areas for support.

What does this mean?

- Incorporate working relationships with other services and intersecting areas to provide effective referrals.
- The service should investigate capacity for a care navigator role to assist young people with more complex needs to reduce their burden.
- Operate under a no wrong door approach. Embed the ability for the service to provide referrals and follow up on young people seeking support, even if it is guidance towards a more appropriate service.
- Retain flexibility and discretion in service eligibility for evidence and relationally based decisions to continue and maintain care where it is appropriate.





Section 4

Broader System Considerations

Broader System Considerations

Trust in mental health services is low within community

Fragmentation, circular referral pathways and weak handovers

Current service landscape is difficult to navigate

Policy and structural barriers make continuity of care harder

Broader system challenges reduce access and sustainability

Why this is important

Wider system issues that sit beyond the scope of the new service will still shape whether the service can succeed. It is important because even a well-designed service will struggle if the broader ACT system remains fragmented, hard to navigate and difficult for young people and families to access.

Implications

The new service cannot fix these broader issues on its own, but it will need to be designed with them in mind. The ACT system will also need parallel effort to improve visibility, coordination, throughcare, transition planning, workforce development, cultural safety and cross-directorate collaboration if the service is to have the best chance of success.

System Navigation and Barriers to Access and Continuity

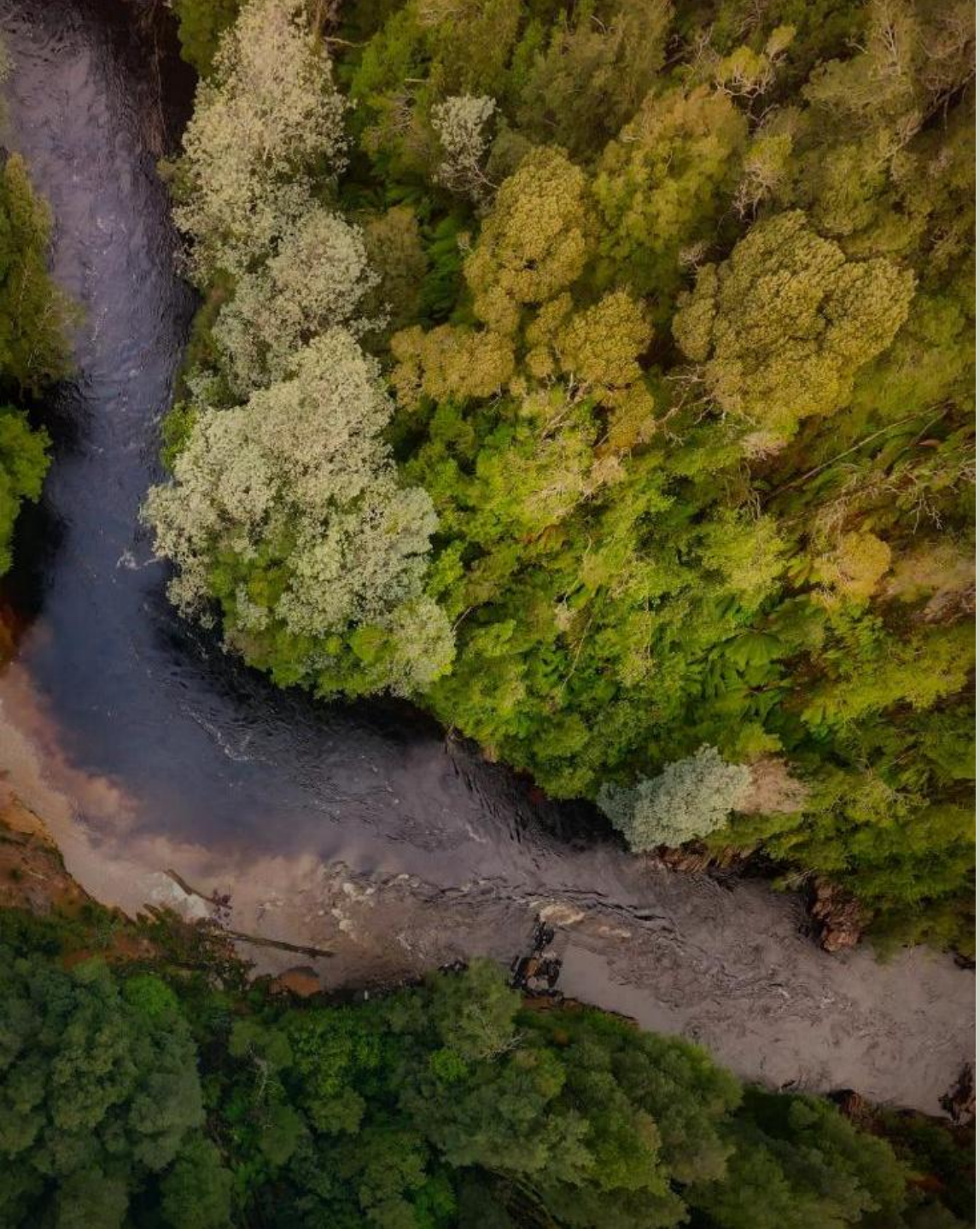
Stakeholder feedback highlighted several cross-system and policy and structural key issues which affect access, navigation and continuity of care.

System Navigation

- Limited visibility of the current service landscape, including what services exist, what they offer, who they are for, current capacity, referral thresholds and waiting times.
- Lack of a live or reliable view of available resources across the system.
- Continued fragmentation between services, making it difficult for young people, families and providers to know where to go.
- Concern about circular referrals and poor interface management, particularly between CAMHS and hospital-based services.
- Deeply embedded poor reputation of existing mental health services within the local Aboriginal and Torres Strait Islander community.
- Lack of clear ownership of care when young people move between services or present with more complex needs.
- Lack of throughcare for people exiting custody, with little to no referral to other services and a seven day only script for any medication.

Policy and Structural Issues

- Age of consent settings that can make it difficult for some young people to access care without parent or carer involvement, especially for those who want help but do not feel safe or able to involve family.
- Age-based eligibility thresholds that can create abrupt or poorly coordinated transitions out of services.
- Transition gaps for young people with ongoing needs, especially where they are moving between adolescent and adult systems.
- Significant workforce shortages, further amplified by cost of living in Canberra and competition including higher paid locum and agency opportunities.
- Significant lack of cultural safety and responsiveness across health and other systems within the ACT, and in policy and workforce.
- Lack of choice of care providers, stakeholders shared that experiences of systemic racism in mainstream services and close relationships with staff within the ACCO sector can limit care accessibility.
- Siloed systemic approach, creating significant complexity for young people and families to navigate when in contact with a number of directorates and risk to ongoing sustainability of a new service if there is a change of government.
- Little to no suitable options for 0-12 year olds or anyone 25 and older.



Next Steps

Next Steps

Between the midterm report and the final report, the next phase of work will focus on validating the findings, confirming the preferred service model, and developing that model to the level of detail required for final recommendations, costing and cost-benefit analysis.

Share back and validate the midterm findings

Community validation sessions will be part of the next phase of this project. You are welcome to attend these sessions or to reach out to the project team as we test the findings and gather feedback.

Confirm the preferred model and develop detailed design

The next phase of service design will focus on refining a preferred service model selected based on feedback to the level of detail required for an ACT budget submission.

Undertake further targeted engagement

Additional targeted engagement, including with young people, will be undertaken to further test the preferred model and refine the intended user experience, service features and design assumptions.

Finalise costing and cost-benefit analysis

Based on the detailed design of the preferred model, further work will be undertaken to confirm activity assumptions, complete detailed costing, and undertake the cost-benefit analysis.

Prepare the final report

The final report will consolidate the outcomes of this additional engagement, detailed design work, costing and analysis, and provide the final recommended service model for consideration.