



SERVICES AND PROGRAM ENTRY

CATEGORY: Psychosocial and Support

ENTRY TITLE: PICYS – An Affirming and Holistic Approach to Working with Disadvantaged Young People

NAME OF APPLICANT: Adam Why

ORGANISATION: Perth Inner City Youth Service

Additional Information about Entry (1 x A4 page).

Please expand upon the brief description given in Part A.

The PICYS model provides a holistic approach to youth work that is based on Maslow's hierarchy of needs. The design of each component is informed by both the principles of youth participation, and the youth work code of ethics. Its programs include two case management programs, Household Network (HHN) and PILLAR, a Drug Education Support Service (DESS), and regular community and group activities. The design of each group session works to target different sections of the hierarchy of needs.

PICYS currently has two programs that involve active case management. These are Household Network (HHN), and the PILLAR program. The HHN program supports young people in attaining safe and stable accommodation. Within the program, PICYS has access to 9 transitional properties, allowing PICYS to provide accommodation to a total of 16 young people. These properties are managed by community housing organisations whom PICYS has a partnership with. The PICYS PILLAR program which provides psychosocial support to young people who are homeless or at-risk of homelessness. Both programs operate on a low threshold, providing support opportunities for young people who may have been turned away by other services. From July 2021 to June 2022, HHN supported 50 young people, with 30 young people being able to access PICYS HHN supported accommodation. As the programs work collaboratively, and from July 2021 to June 2022, 14 young people who were engaged in the PILLAR program were housed in PICYS HHN properties, making for 26% of young people supported in the PILLAR program having access to PICYS transitional accommodation.

Alongside case management support, PICYS also facilitates community sessions. These sessions are open to anyone aged 15-25 and provide young people with the opportunity to socialise, complete referrals, have access to emergency relief, share a meal, and make use of other facilities at PICYS (computers, shower, washing machine etc.). The sessions have been designed with the intent to provide a pro-social gathering, giving young people a sense of community belonging with mutual care and respect. From July 2021 to June 2022 there was a total of 111 unique young people who engaged the Base Camp Drop In, 73 of which were not case-managed by PICYS. These sessions have the intention of not just supporting young people in the community, but supporting young people to have their own community.

In addition to the two case management programs, PICYS has recently been funded for a Drug Education Support Service (DESS). This service provides AoD education and support programs to young people who are experiencing AoD issues. PICYS has a unique position in that, out of the 16 funded programs, it is the only program in which supported young people live off-site. This program is integrated into the rest of the PICYS model so that the DESS worker is able to provide brief interventions with young people attending community drop-in spaces, whilst also giving young people supported by either HHN and PILLAR programs with an opportunity to receive one-on-one education and support on AoD issues.

Address the following Criteria (max. 10 X A4 pages).

Judges allocate marks to each criterion

1. Evidence of a significant contribution to the field of mental health on a local, state or national level.

Our contribution is in supporting young people, including those who are part of the LGBTIQ+ community, in accessing accommodation, community, and other supports. PICYS is a low threshold service, often working with young people who are experiencing complex social and mental health needs. Our model of service meets young people at different points in their recovery and offers opportunity for them to scale-up, or scale-down their supports. PICYS offers a range of support that includes case management, group facilitation, emergency relief, and AoD support.

As previously mentioned, PICYS has an intentional focus on working with young people who are part of the LGBTIQ+ community, with a further intentional focus within that in supporting young people who are trans or gender diverse (TGD). The reason for this intentional focus is due to the increased vulnerability and risk of homelessness within the TGD population. A study by the Telethon Kids Institute (TKI) found that out of a total of 668 young TGD people, 22% had experienced issues with accommodation (including unstable accommodation, couch-surfing, and homelessness) with 17.8% of the participants experiencing homelessness. Of those that experienced homelessness, 93.9% had self-harmed and 77.5% had attempted suicide.

PICYS' intentional focus seeks to address these issues by providing young LGBTIQ+ people with access to accommodation via a service that is affirming of their identity and supportive of their mental health recovery. At time of writing, out of a total of 37 young people supported by the Pillar program, 33 are LGBTIQ+ with 32 being TGD. Meanwhile, in HHN out of a total of 22 young people supported by HHN, 12 are LGBTIQ+ with 7 being TGD. As a homelessness service that is a recovery-oriented and person-centred service, PICYS looks to address common issues faced by those who are homeless and at-risk of homelessness, with the goal of supporting young people to maintain and develop their own lives within their own community.

In addition to accessing accommodation, PICYS case management programs support young people to access psychotherapeutic services, NDIS, gender-affirming treatment, financial counselling, healthcare services and so on. With its connections and various community partnerships, PICYS works to ensure that services accessed by young people are affirming of their identity, developing a strong community of care for young people. In working alongside young people and their care-team, PICYS seeks to improve young people's coping strategies and enable them to remain safe in community and reduce hospital admissions. This is done through a case-management approach that strongly emphasises the young person's agency and ability to keep themselves safe. The following quote from a young person exemplifies this approach:

"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." – Morpheus, 21yo

The DESS role is a recent addition to PICYS. As PICYS takes a housing-first approach, it is not irregular for young people accessing our services to have pre-existing AoD issues and be ineligible for other accommodation services. The DESS role gives young people an opportunity to engage in AoD education in both one-on-one settings, or in a group. As the role is focused on education, this enables other PICYS workers to engage in discussions regarding AoD interventions with the DESS worker, as well as the DESS worker being able to engage young people who may be concerned about their friend's AoD use in discussing safe ways to intervene. This role thus provides a way to complement PICYS services in both case management and community sessions.

As many young people who engage our service are often incredibly socially isolated due to issues such as family abuse and discrimination our service not only aims to provide young people with access to housing, but also provides the opportunity to develop a connection to community. This community is provided through delivering several groups that PICYS facilitates. At the start of 2023, PICYS was successful in attaining funding for its group activities, allowing it to build on its group programs. As of current, these groups are: BaseCamp Drop In, Be Well, Be Seen and Be Heard, Be Active, Be Social, and BaseCamp aGender. Each of these groups are designed to target parts of Maslow's hierarchy of needs:

- **BaseCamp Drop-In:** These sessions run for 3 hours 3 times a week, providing young people the opportunity to collect food, hygiene supplies, and over the past 2 years, includes face masks, hand sanitiser, and rapid antigen tests. During these sessions, there are often activities for young people to engage in, and on occasion, opportunities for young people to engage in consultations with research and other organisations whom PICYS have partnerships with, actively encouraging young people's self-advocacy and voices being heard.
- **Be Well:** a psycho-educative group which was established in 2020 as part of OPP40 funding in the PILLAR program. Topics for each session are decided on by group participants, allowing for topics to remain relevant to young people's lives, and foster a strong sense of group ownership.
- **BaseCamp aGender:** a monthly 3 hour group that is for trans and gender diverse young people. Much like the Drop In sessions, this group provides opportunity for young people to access emergency relief. The group is also regularly attended by a stylist who supports young people by providing access to free clothing that affirms their sense of self.
- **Be Seen and Be Heard:** a group that focuses on advocacy and creative ways to communicate, engaging young people in all processes and decision making. Projects of the group have included having consultations on

reviewing PICYS' results-based accountability process, and securing external funding to deliver mental health courses and events to young people.

- **The SESH (Substance use Education, Support, and Harm minimisation):** a group facilitated by the DESS worker and a co-facilitator with the focus of educating young people on the impact of AoD use. This is open to all young people regardless of current or lack of current AoD use. This group has only recently started as part of the DESS role.
- **Be Active:** a group involves a partnership with Thriving in Motion and seeks to engage young people in physical exercise that is trauma-informed and trans inclusive. This group has only recently started and resulted from a grant from the Mental Health Commission.
- **Be Social:** a group that seeks to improve young people's engagement in the community through monthly outings to varying events. This group has only recently started and resulted from a grant from the Mental Health Commission

These groups, in combination with case management means that PICYS is able to deliver a broad range of services whilst being a relatively small team. The various purposes of the groups also means that young people do not just have access to community, but also other ways to enrich their lives.

In addition to the work that PICYS does directly with young people, PICYS staff have also acted as representatives on several advisory groups such as the CCYP Trans and Gender Diversity Working Group, and the City of Perth LGBTQIA+ Advisory Group. Outcomes of this work include assisting in the development of the LGBTQIA+ Inclusive Practice Guide for Homelessness and Housing Sectors in Australia. PICYS has also provided input into reports and research projects such as the Youth Affairs Council of WA (YACWA) and Youth Pride Network (YPN) state of play reports, and several TKI youth mental health research projects.

2. Evidence of innovation and/or recognised best practice.

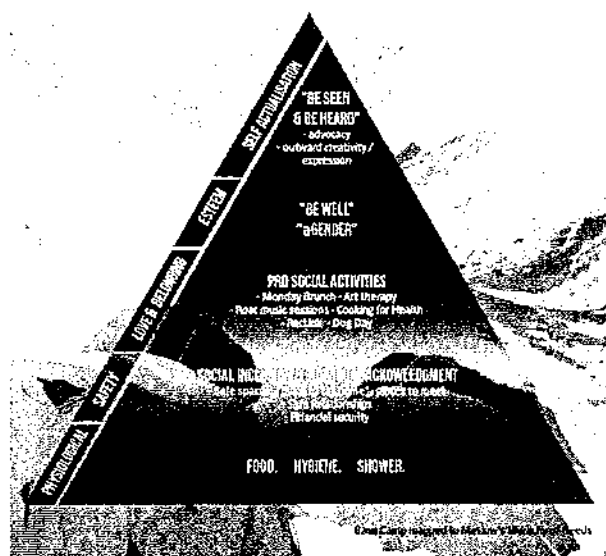
The PICYS BaseCamp model is unique in its approach in offering young people various levels at which they can engage the service. The model allows young people to engage at different points of the model, and access as much or as little as the service as they may need. For instance, a young person may engage PICYS community sessions, but not seek a referral or access emergency relief. For example, a young person may start by attending a Base Camp Drop In and show an interest in attending a mental health psycho-educational group (Be Well), or they may start by attending Base Camp aGender and having built some connections, start attending Base Camp Drop-in which is more open and diverse in its participation. Furthermore, this model can allow for young people who are new to PICYS to get a sense of the service and feel comfortable before engaging in case management. Likewise, young people who have been case managed by PICYS but are no longer needing one-to-one support are welcome to continue attending Base Camp sessions to maintain a connection with the community of supports. This allows for young people to smoothly enter or exit PICYS services in a way that allows them to determine the level of support they wish to receive, respecting their autonomy and independence wherever they are in their own recovery journey.

PICYS operates out of a suburban home that has been refurbished thanks to a LotteryWest grant, allowing it to be wheelchair accessible. The entrance to the house is a large, open hallway that is adorned with various LGBTQIA+ flags and ATSI flags. The open nature of the hallway gives an inviting appearance for those new to the service. The rooms have been arranged to give a particular focus. For example, one room has been setup as a low-sensory environment, providing a space for young people to utilise should they be feeling overwhelmed during a base camp session. Rooms also have baskets of fidgets and stimtoys for young people to use. Staff regularly use the kitchen area during base camp sessions to make meals for the young people, with the intent of giving the feeling of a communal gathering. This suburban home setting has regularly been commented on positively by young people and other services due to its warm and inviting nature.



BASE CAMP

"A PLACE TO BE AND BECOME"



The PICYS Base Camp Model

The groups themselves utilise best practice in providing space for young people to direct the groups. The Be Well group, which started in 2020, had its group agreement designed in collaboration with young people. To keep up with changes in participation, the group agreement has been given space for revision and amendment. This allows for newcomers to feel included in the group and given space to suggest additions to the agreement that assist their participation. Topics are also set by the group, allowing the topics to main relevant to young people's lives

and foster a sense of joint ownership of the direction of the group (see appendix for list of group topics). Similarly, the Be Seen and Be Heard group has focused on developing young people's advocacy skills. As part of this group, rules for the regular Base Camp Drop In sessions were designed by the group and written to be accessible to young people. The Drop In sessions being open to both case managed and non-case managed young people allows for greater diversity and opportunities for young people to find commonalities that are not limited to sharing case management by PICYS. This creates an open and inclusive space where young people are able to form connections to others that have the potential to continue beyond service engagement.

Staff at PICYS have a mix of various qualifications, allowing for a breadth of experience, knowledge, and skills. Within our team we have had academic experience ranging from sexology to psychology and social work, to creative writing and community development. This knowledge allows for multiple perspectives and opportunities to engage young people on different topics, as well as the ability for workers to upskill each other in conversations about their practice.

PICYS also utilises its partnerships to broaden its scope. As part of these partnerships, PICYS has offered use of its building (a large suburban home situated in the West Leederville area) to its partners so they may hold regular meetings. This has included groups such as Discharged, a suicide prevention group for young trans people, and Transfolk of WA's parents and carers support group, their concurrent TJuniors group for under 18 trans folks, and a trans adults social support group. PICYS has also allowed for organisations such as Youth Affairs Council of WA (YACWA) and Youth Pride Network (YPN) to engage in consultations with young people at PICYS during its Base Camp Drop In sessions. This has been important in ensuring that opportunities to engage in advocacy are made accessible and at a regular time and space which young people are familiar with.

Both of our case management programs have a focus on working with young people who are homeless, or at-risk of homelessness. They are unique in having a strong focus on working with young people who are particularly marginalised or vulnerable, meaning that they may often be deemed having too much "risk" for other services to take them. Both services support young people to develop coping strategies, independent living skills, having a community of care, find accommodation, and many other key areas of case management. In being prepared to work with young people who face significant hardships and complex mental health challenges, PICYS has had many successes with young people who may have otherwise 'fallen through the cracks' of WA's services landscape.

Overall, what is innovative about the PICYS service model is its ability to meet the various unique needs of young people who engage the service. Young people are not just able to access individualised case management, but can also develop their own community, develop themselves through various group activities, or access emergency relief and other basic needs all through the service. Each part of the PICYS model relates strongly to the others, allowing for an approach that is strongly holistic, and fosters the ability for young people to develop their independence and connection to community, increasing the likelihood of their long-term stability.

3. Evidence of participation of mental health consumers in the planning, implementation and evaluation of mental health service delivery. Evidence of prioritising increased level of engagement and influence of consumers and where higher level participation such as authentic co-design is highly favoured.

There may be exceptions to the involvement of mental health consumers. Some entries may reasonably explain any particular circumstances where the involvement of mental health consumers is different or limited.

As part of its delivery of case management support, PICYS utilises two processes that involve the participation of mental health consumers in the evaluation of its service delivery. These are the Most Significant Change (MSC) evaluation, and the Results Based Accountability (RBA) survey. These processes work to engage consumer feedback at both a qualitative and quantitative level.

The MSC is a story based qualitative evaluation process that was developed by Edith Cowan University. The process invites young people to share their experience, of what has been the most significant change since being supported by PICYS. The youth worker then writes a reflection on this young person's experience, discussing the support they have provided and their role in the development of this change. Following this, both the young person's story and the youth worker's reflection are read to the PICYS team, who engage in a group reflection on the young person's experiences and the youth worker's practice. These reflections are written up as a group reflection. In the final stage, all three reflections are read at a subsequent meeting with the stakeholder group, which is comprised of members whom PICYS has a partnership with, who engage in their own stakeholder's group reflection and choose two stories that best represent the PICYS' services and the young people we support's experiences. The resulting stories are then published in the PICYS annual report. This process has recently been adopted in the Be Well group as part of its own evaluation processes. See appendix for an example MSC story and reflections.

The RBA survey is conducted bi-annually with all young people who have been case managed by both the HHN and Pillar programs within the six-month period. The survey contains questions that target all aspects of case management. Results of the survey are compiled into a graph so that trends can be identified and discussed. These results are discussed individually by each team focusing on reasons for the outcome, and ways to improve upon the outcomes of each question. See appendix for the RBA survey questions.

In addition to the MSC process and RBA survey, PICYS runs the Be Seen and Be Heard group. The Be Seen and Be Heard is a group focused on supporting young people's self-advocacy, and outward creativity and expression. Group projects are decided upon by the group and may involve participation in community projects, grant applications, or co-design of other PICYS projects. To date, group projects have included participation in developing a PICYS youth week event and the development of accessible and youth-friendly guidelines for BaseCamp Drop In sessions. This group has recently received funding as part of a grant from the MHC, allowing for it to become a solidified part of the PICYS service.

The Be Well group itself was formed alongside young people, with young people participating in the development of the group agreement, and being able to give suggestions for topics. Feedback forms are completed at the end of each group, allowing for feedback to be readily utilised in time for the next session. As group participation will change over time, facilitators have allowed for the group agreement to be modified according to the needs of the group. Due to the focus on co-design, topics have ranged from discussions on setting boundaries, controlling impulses, and self-care strategies, to topics such as forgiveness, responsibility, and dealing with rejection.

4. Evidence of partnerships and linkages with all key stakeholders (collaboration for continuity between organisations).

Rainbow Community House

PICYS partnership with Rainbow Community House (RCH) provides opportunities for both PICYS and RCH to make referrals to each other respectively. RCH is a mental health service for LGBTIQ+ young people aged 12-25. Two of the three founding members of RCH are PICYS staff and board members. The PICYS Base Camp model helps to provide an avenue in which RCH can refer young people to support their development of social inclusion. PICYS has also made referrals to RCH for LGBTIQ+ young people who are needing one-on-one counselling support.

Youth Affairs Council of Western Australia

PICYS has a partnership with the Youth Affairs Council of Western Australia (YACWA), who share the same founder. PICYS partnership with YACWA is via YACWA's Youth Educating Peers (YEP) program and Youth Pride Network (YPN). This program seeks to educate young people on relationships, sexual health, and blood-borne virus issues. This partnership has allowed for YEP and YPN to engage young people at PICYS Base Camp Drop In sessions in consultations and discussion. In addition, this partnership has helped build the capacity of PICYS youth workers in supporting young people.

TransFolk WA

PICYS has provided TransFolk WA with the use of the PICYS building so that TransFolk WA may run their Discharged group and their parents and carers support group and concurrent TJuniors group for under 18 trans folks, and trans adults social support groups. Discharged is a weekly suicide peer support group for trans, gender diverse, and gender questioning people who are 18+ years old. This partnership allows for TransFolk WA to utilize a space that is known within the community for free. This can also provide an avenue in which young people who engage with TransFolk WA can develop a familiarity with PICYS before engaging a PICYS service. In its development, Transfolk of WA have regularly had volunteers, staff and board members who have also been PICYS employees.

YouthLink

PICYS and YouthLink have a longstanding professional and productive partnership whereby both services have been a source of referrals to the other. PICYS and YouthLink work closely together when jointly supporting young people to ensure the best outcomes for the consumer. The partnership has also allowed for young people attending BaseCamp sessions to be supported in making a referral to YouthLink.

Likewise, YouthLink has encouraged young people to attend PICYS Base Camp to support their social inclusion.

Connect Groups

PICYS and Connect Groups have formed a partnership whereby Connect Groups facilitates a group, Alternatives to Suicide, out of the PICYS building. This group is for young people who attend PICYS Base Camp sessions, or who are case managed by PICYS. The group provides an open, non-judgmental space for young people who are dealing with thoughts of suicide to build coping strategies and distress tolerance skills. This partnership helps to provide a complementary component to the Base Camp model by providing a mental health group with a more specific focus on thoughts of self-harm and suicide. Connect Groups are in the process of handing the Alternatives to Suicide initiative over to Helping Minds so we are currently in a transition stage of this partnership.

Telethon Kids Institute

PICYS has partnership with Telethon Kids Institute (TKI) who engage in research projects regarding the mental health and wellbeing of trans young people and young people experiencing homelessness. PICYS has collaborated with TKI on various research projects, and the research by TKI has helped to inform the development of PICYS services.

PFLAG+ (Parents, Families and Friends of Lesbians and Gays)

PICYS and PFLAG+ partnership has involved providing a meeting space for PFLAG+ at the PICYS building, and the ability to mutually support each other in their development. PFLAG+ helps friends and family to understand and support LGBTQIA people in their lives. This relationship can provide an avenue in which those engaging with PFLAG+ groups may wish to support their friend or family member in engaging with PICYS services and help to inform PICYS in best practice when working with friends and family of the LGBTQIA young people engaging their services.

Salvation Army

PICYS and the Salvation Army have formed a partnership in working with young people in Out of Home Care, leaving care, and transitional housing. From 2020 to 2021, PICYS worked with the Salvation Army to provide case management for young people living in their transitional housing properties. This partnership has since continued, with our services referring to each other and the PICYS Base Camp model providing a space for young people engaged with the Salvation Army to build social connections and access to other needs provided by the Base Camp model.

Perth's Children's Hospital, Gender Diversity Service

PICYS has formed a partnership with the Gender Diversity Service (GDS) at Perth Children's Hospital (PCH). This partnership has involved collaboration in the development of the Western Australian Lesbian, Gay, Bisexual, Transgender, Intersex Health Strategy 2019-2024. PICYS regularly work with trans and gender diverse young people who visit the GDS, and this partnership has ensured the best outcomes for those young people.

5. Verification of effectiveness (quality improvement activity, data collection and its use, including graphs and tables, achievement of performance indicators, e.g. attendance figures, outcome measures, number of document downloads, page views, click through rates etc).

In June 2020, PICYS was funded by OPP40 as part of the WA state government's response to Covid-19 for homeless populations. Having core funding for an initial caseload of 17 young people, the Pillar program opened a total of 60 young people in a 25-month period from 1/6/2020 to 30/6/2022. Of the total 77 young people supported, 60% were LGBTIQ+ and 39% were trans or gender diverse. Between July 2021 and June 2022, of a total 54 young people supported, 91% were able to gain or maintain a connection with a mental health clinician.

Meanwhile, from July 2021 to June 2022, the HHN program supported 50 young people, with 52% being LGBTIQ+, and 24% being TGD. During this period, 97% of Household Network tenancies had successful future accommodations with 20% being able to access secure private rentals, and 17% accessing accommodation with Department of Housing or accessing future supported accommodation options.

Combined RBA data from both HHN and PILLAR programs for June 2022 showed the following:

- 85% agreed they had a better understanding of mental health and its impact on their wellbeing
- 78% agreed they were better connected to communities that understood their experiences, identities and interests
- 82% agreed their ability to care for themselves had improved
- 71% agreed they had a better understanding of how to maintain a home
- 71% agreed they were better at identifying healthy and safe relationships
- 65% agreed they could better communicate their needs to others (both individuals and services)
- 69% agreed they had a better understanding of managing their own money
- 63% agreed they had a better understanding of AoD use and its impact on wellbeing
- 73% agreed they knew more about accessing education, employment and training services
- 88% agreed they trusted PICYS workers

PICYS Base Camp community sessions have also been successful. From July 2021 to June 2022 there was a total of 111 unique young people who engaged the Base Camp Drop In, 73 of which were not case-managed by PICYS. BaseCamp aGender held 11 sessions with 17 unique young people and a total attendance of 57 visits by young people. Meanwhile, the Be Well group held 17 sessions with 15 unique young people and a total of 62 attendances.

Quotes from young people's MSC stories do well to highlight the qualitative impact of the work that PICYS does. These quotes use pseudonyms in order to deidentify the young person.

"PICYS has helped change the course of my life for the better (and to be honest probably extended it), their drop-in service has linked me to the important people in my life and was a good respite from home. The drop-in really taught me how to keep my life enriched with community." – May, 25yo

"I am now able to see good in a world I thought was broken. I am motivated to be different to the people I was raised by. Inspired in life to be myself and fight for my rights and my morals..." – Lara, 25yo

"I now have a place to live. I have my own space to wear what I want and explore my gender and identity. I have worked on my independent living skills, such as cooking and cleaning. I have also been given the opportunity to learn about paying bills and being a tenant. I feel closer to being able to live by myself in long-term housing." – Flower, 18yo

"I always love going to PICYS because it's a connection to a place where you know people genuinely care about how you're doing and will be there with you when things are tough, finding ways that work best for you." – Archie, 20yo

In 2022, participants in the Be Well group engaged in a reflection on what the most significant change has been for them since participating in the group. The following quotes are from young people who have attended Be Well:

"Through Be Well I've gained friends and my skills have grown and developed. I find myself more able to have open conversations about some challenging topics. We're constantly asked for feedback on the group and the facilitators are always happy to take on this feedback and grow the group for the benefit of everyone within the group as much as they can." – Adrian, 20yo

"I enjoy having open discussions to do with mental health and other people's experiences and their coping mechanisms as well as learning new things about myself and how I function as a result of my mental health." – Ellis, 21yo

"Be Well has provided a great environment to play and discuss topics that I learned in therapy" – Jennifer, 25yo

Conclusion (1/2 x A4 page).

PICYS has made a strong contribution to the lives of young people experiencing homelessness and mental health issues, in particular those who are part of the LGBTQIA+ community. This contribution is made through a unique model of service that is able to provide young people with access to various needs, including that of access to accommodation, food, and community. By providing such opportunities, PICYS works to ensure young people are able to leave the service with greater stability, and a community of their own.

By being person-centred, and recovery-oriented, PICYS support is tailored to meet the unique needs of each young person who engages their service. Young people do not have to be case managed to access BaseCamp drop-in sessions, and it is not expected for a young person who is case managed to engage any of the other

PICYS services unless they believe it is something they need. By being trauma-informed and neurodivergent friendly, PICYS has also been able to curate low-sensory spaces so that young people can take time out from a busy BaseCamp drop-in. This maintains an overall attitude of inclusion and being able to meet young people where they are at in a given time and space.

PICYS partnerships with other organisation provides avenues for staff and young people to engage in advocacy at both an individual and systemic level. These opportunities have included consultations which occur during PICYS BaseCamp drop-in sessions, placing them within something that occurs regularly rather than something that happens at another time and place. This valuing of young people's voices is further reflected in PICYS RBA and MSC evaluation processes. Such a unique, holistic model of care would be amazing to see replicated elsewhere.

Referees (1/2 x A4 page).

Nominate two referees.

[Redacted text]

Appendix of Support Material (max. 8 x A4 pages).

Page and word limits must be strictly adhered to. Any submission that exceeds the stated maximum will not be accepted and returned for review.

Links to other documents or websites may only be included in the Appendix/Supporting Material Section (2xA4 Pages) and are not to be included anywhere else in the submission. Links to other documents or websites in the main submission will not be considered by the judges.

Please directly copy all content/essential information to be reviewed by the judges in the main submission as links within the Appendix/Supporting Material Section will only be viewed at the judges' discretion.

Be Well Group Topics

Below is a list of topics that have been prepared and covered in the Be Well group.

Assertiveness

Depression and Mood Management

Forgiveness

Health, Balance, and Wellness

Healthy Relationships

Identity

Masking

Mindfulness

Perfectionism

Preparing for the Holidays

Problem Solving and SMART Goals

Procrastination

Rejection Sensitivity

Responsibility

Self-Advocacy

Self-Care

Self-Compassion

Sleep Hygiene

Social Anxiety

Stress

Thoughts, Feelings, Behaviour

Most Significant Change Story and Reflections

Lara - 25 years old

Since being involved with PICYS what has been the most significant change?

My life didn't begin when my birth certificate was signed, it didn't begin when I got home, and it didn't begin when I took my first steps. For me life started when I made the decision to be different, to have my own morals and to be myself, that wasn't an exact day in my life. And I'll tell you a bit about it. Them days for me happened in strange and weird ways. It would be when I took a phone call from a caring, supportive, understanding, and compassionate PICYS worker, it would be signing my lease with a landlord and picys staff person who had given you a chance to be independent and safe, something I had always wanted. It would be when I received food on a day I hadn't eaten, or it would be when someone supportive sat there and put everything aside just to listen and be validating and make me strong when I didn't think I deserved it. It would be when a lovely person sat beside me in a scary waiting room while I wait to get help for things, I didn't understand but they would sit there and make me laugh and make me see good in the world through them.

They would make me want help when I didn't think I wanted help. These people are different, they change and help the world one person, one conversation, one meeting, one plan and one goal at a time by supporting them and encouraging them to be the best versions of themselves.

They change the world by helping the most broken people become the strongest most successful versions of themselves.

That may not be the president I am now inspired to change, and I have lived through my worst days, and I got through it to become the strong independent person I am today. I know I have a long way to go yet, but I have come so far already and that would not have felt possible without the support of the PICYS team and to me that's my most significant change:

I am now able to see good in a world I thought was broken. I am motivated to be different to the people I was raised by. Inspired in life to be myself and fight for my rights and my morals... I just want to thank all the picys staff an amazing team made up of so many different caring individuals from support workers to admins and housing people and everyone I have met along the way that has made my days brighter and given me more purpose in life...

Youth Worker's Reflection:

Lara is a 25-year-old female who has been linked in with PICYS since 2014. When Lara first came to PICYS she was homeless, was dealing with past and present trauma, struggling with her mental health, was using alcohol and other drugs, and found it difficult to trust anyone.

During Lara's time at PICYS there were many changes, but the most significant change she identified was the control she gained over her life and her choices.

When I first started working with Lara in August 2020, she had already had 2 PICYS workers that she had built great rapport with. Lara really struggled with the fact that her previous worker had left and as a result her mental health had declined, and she had begun using recreational drugs again. Lara was initially reluctant to working with someone new, but it didn't take too long before Lara was engaging extremely well.

The main goal Lara wanted to work on was applying for an NDIS package so that she was able to get the appropriate level of support for her mental and physical needs. With the help of Black Swan, Youthlink and PICYS Lara's application for NDIS funding was approved and Lara was able to begin accessing supports from the NDIS. Although there were some issues along the way, this was a great time for Lara to practise speaking up about it was that she wanted and needed from the supports the NDIS could offer.

During this year staff also assisted Lara with maintaining her tenancy in her long-term housing. When Lara was feeling very stressed, depressed, or overwhelmed she would often contact department of housing to give up her house and then regret it soon after. Staff were in close contact with Department of Housing and put strategies in place for when this did occur.

Lara often struggled with friends and family taking advantage of her financially. PICYS were able to help Lara to get a Public Trustee to assist her with gaining control of her money again. Lara also learnt skills to put in stronger boundaries with her friends and family so they could not take advantage of her in other ways. PICYS assisted Lara with taking out a violence restraining order out against a family member to help keep her safe and reduce the negative impacts they were having on Laras mental health. PICYS team continued to build trusting and safe relationships with Lara to help demonstrate what it is she should expect from healthy relationships. I believe this helped Lara see some of the challenges and issues in her current relationships with friends and family and apply the necessary boundaries.

Lara often found it hard to effectively communicate what it was that she needed when her mental health was struggling. In the 12 months staff were working with Lara, she became more open to the idea of attending hospital for mental health admissions when she felt she couldn't keep herself safe at home anymore. This was a huge step for Lara as she had previously been very reluctant to attending hospital for mental health. Staff also assisted Lara with attending psychology and psychiatry appointments and organising stays in Hampden House step-up step-down program as an early intervention to prevent hospital admissions.

As Lara was getting closer to aging out of her youth supports, staff worked with Laras other supports to assist with the transition to adult mental health services. Lara had built such a strong connection and good working relationship with her youth supports at PICYS and Youthlink so transitioning over to adult services was a great challenge for her, but one she knew had to happen.

Although Lara is no longer case managed by PICYS Pillar program, she still accesses PICYS base camp sessions. When case management first stopped with Lara, she found it hard to move from a case management space to the drop in space, but this is something she has worked hard on and is now able to attend base camps and use the space appropriately.

Upon closing as a case managed young person with the Pillar Program Lara was still living in long term housing, was actively engaging with her NDIS supports to ensure she was able to receive the level of care she required, maintained a good relationship with her supports at Youth Link, had begun her transition to adult services, had put in strong boundaries with friends and family, but

most importantly Lara was able to see a future for herself, a future that involved her taking control of her own life and making choices that were going to be best for her.

Youth Workers Group reflection:

Key themes focussed around finding the balance of both independence and getting the support and care Lara needs. This was useful in a multitude of aspects of Lara's life including with family relationship boundaries, and with her mental health care in hospital stays and generally. The youth worker group reflected on how important and helpful the PICYS relational model was in how the honest and respectful approach, along with its connection as well as limits and boundaries, worked to be empowering for Lara. This enabled her to choose her own values for herself as she developed into an independent adult who could also realise and accept that she does need help as well as being able to make her own decisions. The group reflected on how the relational approach also embedded her sense of self-worth in her as a person. This recognition of her worthiness enables her to be different from her family of origin, assert what she needs, make decisions for herself and choose her own path forward with confidence. Overwhelmingly, self-worth, confidence and empowerment were realised for Lara through the supportive PICYS relational model.

Stakeholder Group reflection:

Lara was case managed through PICYS for seven years until she was transitioned to adult services. In that time she had three case workers with whom she developed strong and trusting relationships. This illustrates the quality of the workers employed by PICYS as well as the strength of PICYS support model.

Lara eloquently describes the assistance provided by PICYS and states that her life only started with this support. PICYS assisted her to see the world differently and provided her with the confidence to be herself and put in place appropriate boundaries with friends and family.

A key theme is the balance achieved by PICYS in supporting Lara's independence while at the same time ensuring she had the care and support that she needed. This was illustrated by Lara's acceptance of her need to access hospital support for her mental health issues and PICYS relationship with Lara's housing provider.

It is clear that PICYS' focus on supportive, relational case work has enabled Lara to access extremely important supports that she probably would have been unable to organise herself ie. NDIS and Public Trustee. It has also resulted in self-worth and confidence, and a sense that Lara has control over her own life. As Lara states, "I am now able to see good in a world I thought was broken. I am motivated to be different to the people I was raised by. Inspired in life to be myself and fight for my rights and my morals."

Lara has demonstrated great resilience and with the support of PICYS is now living in long term housing, is actively engaging with her NDIS supports, maintaining a good relationship with her supports at Youth Link, and has begun transitioning to adult services.

Completed: December 2021

Link to other MSC Stories: <https://picys.org.au/wp-content/uploads/2022/10/PICYS-Most-Significant-Change-Stories-2020-and-21.pdf>

RBA Survey Questions

1. I have a better understanding of mental health and how it can impact on well-being. (coping skills, triggers, warning signs and safety)
2. My ability to physically care for myself has improved. (showering, brushing teeth, regular meals, drinking water and spending time outside)
3. I have a better understanding of how to maintain a home. (paying bills, organising lease agreements, following house guidelines, cleaning, cooking and shopping)
4. I feel I can better communicate my needs to others (individual & services). (i.e to friends, family, general public: banks, voting, insurance, real-estate services; to advocate for myself, identify my own needs and be heard when I express my feelings)
5. I can identify healthy, safe and supportive relationships. (boundaries, communication, choice and consent)
6. I have a better understanding of drug and alcohol use and its impact on a person's well-being. (safety, relapse, lapse, triggers and harm minimisation)
7. I feel connected to communities that understand my experiences, identities and interests. (i.e. PICYS, school, sports, spiritual, cultural, peer supports, creative and social)
8. I know more about managing my own money. (budgeting, accessing emergency relief funds, Centrelink payments, accessing financial counsellors and tax)
9. I know more about how to access education, employment and training services. (TAFE, school, universities, apprenticeships, courses, volunteering, employment services/employers and unions)
10. I feel PICYS is culturally safe and appropriate. (my identity is acknowledged and respected, I can be linked up with an interpreter if required, workers are aware of racism and unconscious bias, I can see my culture/cultures respected in the PICYS service)
11. I feel I can trust PICYS workers. (predictable, consistent, reliable, persistent, transparent and competent)