

Megan* is currently participating in a program run by First Step. She notes that one of the main benefits of First Step is that 'all the right people to refer me to are in the same hub'. Previously Megan had felt that her health services were disconnected from each other, but First Step was able to provide her with a range of health services and legal services in a supportive environment.

With all of my connections at First Step, I couldn't believe that all these people took an interest in me and my wellbeing. I felt safe and was able to disclose things, including a legal matter ... I was able to avoid a conviction because I was represented by people who knew me.

Mr Lawrence reiterated the importance of providing all of the services under one roof and the effect this has on building trust with clients.

In addition to this life-saving convenience around service delivery, our approach is also based on the building of trust that comes from team building rather than referring or directing clients to other service providers.

First Step also provides support to carers. While Natalie's* son was provided with therapeutic and legal support services, Natalie was also able to access support herself.

It didn't occur to me [that I too could access support] before someone from First Step reached out to me and asked if I needed help ... First Step had a mental health nurse look after me and my hyper anxiety, my confusion about what addiction was, the pharmacological changes that were going on in my son's brain and my own reaction and behaviour.

Source: First Step, <www.firststep.org.au/>, [accessed 16 July 2020]; First Step meeting with Commissioner Armytage, 7 April 2020; *Witness Statement of Patrick Lawrence*, 28 May 2020; RCMHS, *Carer Human Centred Design Focus Group—Alcohol and Other Drugs: Record of Proceedings*, 2020.

Note: *Names have been changed to protect privacy.

Commentary page 406:

Integrated treatment, care and support for substance use or addiction

Chapter 22: *Integrated approach to treatment, care and support for people living with mental illness and substance use or addiction* presents the Commission's evidence and recommendations on the need for better integration of mental health care with treatment for substance use or addiction. The First Step case study describes an example of an existing approach to integration.

Volume 2: Collaboration to support good mental health and wellbeing

Chapter 15: Responding to Trauma

15.6 Limitations of the current mental health system's response to trauma

15.6.3 Lack of therapeutic support for trauma

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This was emphasised by Mr Patrick Lawrence, CEO of First Step, who noted that the need for both clinical and non-clinical service provision is crucial to support recovery from trauma. Mr Lawrence described the benefits of the operating model employed by First Step to provide both clinical and non-clinical support:

One of the great advantages of having a team with both clinical staff and non-clinical staff is that formal diagnoses (for example, for a mental illness) can be balanced with a broad understanding of a person's capacity and psychosocial wellbeing. An over-reliance on a formal diagnosis (for example, by determining treatment on diagnosis alone) can be as inhibiting of progress as the lack of any diagnosis at all, because every person is far more individual and complex than a mere diagnosis would allow. Balancing the clinical with the non-clinical is the best way to achieve a client-centred approach, achieve buy-in from the client, and to plan and implement their treatment.¹⁷⁷

Volume 3: Promoting inclusion and addressing inequities

Chapter 22: Integrated approach to treatment, care and support for people living with mental illness and substance use or addiction

22.1 An integrated approach to improve consumer outcomes

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Consumers who have been able to access integrated treatment, care and support from the relatively small number of services that currently offer this have spoken about the benefits to their mental health and wellbeing. For example, one consumer told the Commission about their experiences of care at First Step, a service in St Kilda that provides integrated care for people with addiction, mental illness and other health or support needs:

I entered a program at First Step, which is a recovery centre where ... everything is covered ... I was able to get legal advice, I was able to see a psychologist, a counsellor ... and I was ... able to get a diagnosis for a mental health condition that I'd had for a very long time. You know, that's what worked well for me, is having gone to one place and getting help in so many areas ... it's been amazing actually.¹⁵

22.2 The Commission's approach to mental illness and substance use or addiction

22.2.2 The language used in the Commission's letters patent

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Mr Patrick Lawrence, CEO, First Step, also stated that:

It is wrong to think that these two factors are inherently more important than psychosocial indicators such as poverty, social isolation, dysfunctional relationships, emotional under-development or homelessness. It is important to diagnose 'dual' mental illness and addiction, but a good service goes much further. We sometimes refer to this as 'dual diagnosis plus plus' at First Step. The term 'dual diagnosis' is almost never used at First Step because almost all of our clients have multiple treatment needs ...⁴⁵

In light of this, the Commission does not use the language of 'dual diagnosis' except where it describes an existing service of that name, or where evidence before the Commission uses this language.

22.3 Mental illness and substance use or addiction

22.3.5 Co-occurring mental illness and substance use or addiction at different ages and in different service settings

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Consumers who have complex support needs

As described earlier, research indicates that people with co-occurring mental illness and substance use or addiction can also have other complex support needs. These can include supports relating to housing and employment, physical health, family, interpersonal or sexual violence and the justice system.¹²⁶

For example, First Step told the Commission that a snapshot of 100 consumers at first presentation to the service indicated that:

- 65 per cent were unemployed or not studying
- 15 per cent were homeless or were at risk of homelessness in the previous month
- 11 per cent had been arrested in the previous month
- 11 per cent had experienced sexual abuse in the previous month
- 7 per cent had attempted suicide in the previous month.¹²⁷

22.7 The future system: providing integrated treatment, care and support for mental illness and substance use or addiction

22.7.1 Approaches to implementing integrated treatment, care and support

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Table 22.1: Models for implementing integrated treatment, care and support in Local Mental Health and Wellbeing Services and Area Mental Health and Wellbeing Services

<p>Model 1: Multidisciplinary teams</p> <p>Practitioners and clinicians, as well as peer workers, provide integrated care in a single service setting. There is a high degree of collaboration and coordination to deliver consumer care.</p>	<p>For example, in an acute bed-based service, multidisciplinary teams such as mental health nurses, addiction medicine specialists, psychiatrists, lived experience workers, social workers and other allied health workers work together in an integrated way to deliver treatment, care and support. An example of care provided by multidisciplinary teams is that delivered by First Step (mentioned throughout this chapter). First Step's model of care involves multidisciplinary practitioners and clinicians working together to deliver care in a single setting. The team includes GPs, an addiction specialist physician, nurses (including mental health nurses), lawyers, clinical and counselling psychologists and a psychiatrist.²⁴²</p>
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Chapter 23: Improving mental health outcomes across the criminal justice, forensic mental health and youth justice systems

23.1 Improving mental health outcomes across the criminal justice system

23.1.4 Investment in corrections, police and custodial mental health services

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Health justice partnerships

In addition to advocating for reform to minor offences, submissions to the Commission highlighted the potential benefits of health justice partnerships as a way to respond to the impact of minor offences and fines on people living with mental illness.¹⁰¹ There are a number of health justice partnerships currently or recently operating in Victoria, including:

- Melbourne Legal Care—a partnership between the Royal Melbourne Hospital and Inner Melbourne Community Legal
- Rumbalara Therapeutic Justice Practice—a partnership between the Goulburn Valley Community Legal Centre and Rumbalara Aboriginal Cooperative Limited
- St Vincent's Hospital Melbourne health justice partnership—a partnership with Justice Connect, Seniors Law
- Sunshine Hospital Family Violence Project, Sunshine—a partnership between Brimbank Melton Community Legal Centre and Western Hospital
- First Step Legal—embedded and co-located within First Step, an addiction and mental health services clinic.

Chapter 25: Addressing stigma and discrimination

25.5 Stigma and discrimination have profound impacts on people's lives

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As outlined in Chapter 22: *Integrated approach to treatment, care and support for people living with mental illness and substance abuse or addiction*, exposure to this dual form of prejudice can make it especially difficult for people to participate in society and receive proper treatment, care and support in the mental health system. People living with mental illness and substance use or addiction are also frequently blamed for their circumstances, with prevailing sentiment in the community being that addiction is 'self-induced'.⁷⁵ Such a reaction dismisses and diminishes the hardships that may have led to a person's use of or addiction to alcohol or other drugs. As Mr Patrick Lawrence, CEO of First Step, explains:

There can be judgment directed to people who appear to not be investing any energy into their life and making improvements. The strategy I often employ is to have direct discussions with people which tends to challenge stigma. I often explain that many of the people that may be stigmatised are likely to have been neglected or abused when they were children. Our society does not tolerate the abuse or neglect of children and has a visceral reaction to this. However, the people who are most in need of the support of organisations like First Step are these abused children who are now 'grown up'.⁷⁶