OUR VISION

To build a strong connected community
Established in 1976 as an outreach and street work program
We now encompass 10 programs and have over 35 staff
Intensive ongoing work with 1200 individuals a year
Reach over 4500 people a year
WHO WE WORK WITH

- Children
- Young People
- Women
- Families
WHO WE WORK WITH

Over 70% of the people we work with are Aboriginal or Torres Strait Islander people.
WHERE WE WORK

Redfern, Waterloo
La Perouse,
Maroubra
and surrounding
Inner West
ISSUES

• Intergenerational poverty and complex trauma
• Aboriginal and Torres Strait Islander disadvantage
• Homelessness
• Childhood abuse and neglect
• Mental health and substance use issues
• Poor education
• Unemployment
• Racism
• Over representation of Aboriginal young people in the criminal justice system
**OUR MODEL**

We are a multifunctional “one stop shop” organisation that provides access to opportunities and tailored support that provides a way up and a way forward for disadvantaged children and young people.
THE FOCUS

We don’t change people, we empower people to change their lives

We work hard to showcase people’s strengths and build resilience
THE FACTS

WE KNOW THAT YOUNG PEOPLE ARE FACED WITH MANY CHALLENGES

75% OF MENTAL HEALTH ISSUES Emerge Before the Age of 25

Suicide Rates Amongst Young People are on the Rise

Suicide is the Leading Cause of Death Among Young People 15 - 24 Years Old

40% higher rate for Indigenous People
History of Dual Diagnosis

- Established in 1998 as a Pilot Study to work with young people experiencing coexisting mental health and drug and alcohol issues
- The Speak Out Program was the first program to be funded in NSW to do this work

**Fig. 1 Substance Use Continuum**

**Fig. 2 Mental Health and Mental Illness Continuum**
Speak Out Dual Diagnosis Program

- We work with young people aged 12 – 28 years experiencing mental health and AOD challenges
- We are person centered, strengths based and trauma informed; we see mental health and AOD issues as coping strategies that have helped the young person survive horrific events
- We provide individualised care and long term care
- We are funded by Department of Health
**Speak Out Dual Diagnosis Program**

- We are a team of 10 - counsellors, caseworkers and project workers
- We currently have 80 clients engaged in long-term counselling and casework support
- Of these, 69% identify as Aboriginal people
- 50% are male and 50% are female
- 80% of our clients are self referral
The way we work: Long-term, trauma informed, strengths based, person centred
Speak Out Dual Diagnosis Program Casework

- Housing
- Homelessness
- Centrelink
- Employment
- Education
- DL/ID
- Court + legal support
- Parenting
- Tutoring
- Advocacy
- Brokerage
- Social justice + human rights
Speak Out Dual Diagnosis
Program Projects

• Social Group
• Bush Circle Cultural + Nature Camps
• Art + Creative programs
• Gardening programs
• Youth Advocacy + leadership opportunities
• Education + Training
• Sport including basketball at the NCIE, City 2 Surf
• NAIDOC Events
• Youth Week State Competition
• Mad Pride Youth Event
• Job Ready Hub
• Reiby Juvenile Detention Centre
We run art workshops in the Marie Bashir Ward at RPAH and the Manning Unit at Concord Hospital
WHAT INFORMS OUR WORK

• Trauma informed care
• ACE Study, 1998 (Adverse Childhood Experiences Study)
• National Review of Mental Health Programs and Services Report – “Contributing Lives, Thriving Communities”
• Elders Report

“To fully understand how we become the persons we are – the complex, step-by-step evolution of our orientations, capacities and behaviour over time – requires more than a list of ingredients, however important any one of them might be. It requires an understanding of the process of development, how all of these factors work together in an ongoing way over time”

Alan Sroufe (2005)
90% of public mental health clients have been exposed to multiple traumas (Adverse Childhood Experiences (ACE) Study, 1998)

Unresolved trauma will lead to maladaptive coping strategies such as chronic alcohol or other drug use

Without interventions to break the intergenerational cycle of trauma, the effects of trauma will continue

Aboriginal and Torres Strait Islander people are at the highest risk of developing mental health and AOD issues due to the complex individual, inter-generational and racial trauma they have experienced and continue to experience
“If we can help to heal the individual, we will empower them to heal the family, the community and the nation”

- Rosemary Wanganeen
ACE STUDY

- First large scale study to examine the relationship between childhood trauma (0-18 years) and adult health risk behaviours and disease

- 9500 participants in San Diego, California, USA

- The study found a strong correlation between the number of adverse childhood experiences and the prevalence of physical and psychological challenges later in life

- Care must be trauma informed because childhood trauma effects all facets of a person's well-being

- The resolution of trauma will lead to a reduction in alcohol and other drug related harm and better management of mental health issues
Independent review of government funded services across

Australia conducted in 2015

Identified that services are not meeting the needs of the whole person – housing, education, training and employment must be included in a person’s care plan

Speak Out addresses these practical needs while supporting the client to work intensively on their mental health and AOD challenges
Elders Report

- Care must be holistic
- Care must be culturally appropriate
- Care must involve community consultation
RESULTS + OUTCOMES

Client satisfaction surveys

Of the most recent 25 Client Satisfaction Surveys completed by our clients:

28% “strongly agree” and 40% “agree” that their alcohol and other drug use has decreased in the time they have participated in the Speak Out Dual Diagnosis Program;

28% “strongly agree” and 68% “agree” that their emotional and mental health has improved;

28% “strongly agree” and 60% “agree” that they can better manage the impacts of trauma;

32% “strongly agree” and 52% “agree” that their life skills have improved;

32% “strongly agree” and 60% “agree” that their social connectedness has improved;

32% “strongly agree” and 44% “agree” that their physical health has improved;

28% “strongly agree” and 40% “agree” that their involvement in the criminal justice system has decreased.
A little bit of the right support at the right time goes a long way
INVOLVING CONSUMERS IN OUR PROJECTS

Stories of Lived Experience

- Our most recent Evaluation to capture community feedback and insight about service delivery
- Intergenerational connection to the service over 40 years
- Complex and persistent mental health and AOD issues
“The opposite of addiction is connection”
- Johan Henry
Our broad range of programs allow our clients to work intensively on the mental health and AOD challenges they face while engaging in other meaningful and empowering activities.
CREATIVITY & COMMUNITY

#HealthyStrongWell
Mental Health & Wellbeing

https://youtu.be/WJo_emt1vGs

"If you can’t talk about your feelings, draw them!"

#WEAVESURVIVALTIPS
IN SUMMARY

Speak Out:
• Recognise the importance of complex, case coordinated and integrated care for clients experiencing dual diagnosis
• Offer mental health and AOD support within one program
• Understand the relationship between trauma, mental health and AOD issues
• Offer long term support
• Tackle complexity
• Are culturally aware
• Understanding the importance of offering creative and meaningful programs and opportunities
Weave Video – Way Up Way Forward

https://www.youtube.com/watch?v=Yarm3xcA8Xs
QUESTIONS OR COMMENTS?