

## Response to question on notice

### Questions on Notice Paper No 9

5 September 2025

Question No. 574

**Chiaka Barry MLA:** To ask the Minister for Mental Health

1. How are the needs of other family members considered when returning a person from a mental health or substance abuse crisis.
2. What options are available to parents or other family members living with an individual undergoing a mental health or substance abuse crisis.
3. How should families in the circumstance referred to in part (2) access assistance.
4. What temporary respite care or other accommodation options are available for a person suffering from a mental health or substance abuse crisis.
5. What are the current wait times for entry to the alternative accommodation options referred to in part (4).
6. What case management, counselling or social work services are provided in the ACT to affected individuals, and to their families during periods of mental health or substance abuse crisis.
7. Why is it that parents are left primarily responsible in situations of mental health or substance abuse crisis, even when the affected family member is an adult.
8. Why are the number of incidents relating to a mental health or substance abuse crisis and the challenges finding supports on the increase in the ACT.
9. Have there been any changes to policies at ACT Mental Health or Emergency wards that explain the rise in the numbers of families being relied on to provide support.

**RACHEL STEPHEN-SMITH MLA** - The answer to the Member's question is as follows:

1. Wherever possible, Canberra Health Services (CHS) ensures family members, including those in a carer role, are recognised and supported throughout the person's recovery journey. Where possible, family members are engaged in care planning, particularly when preparing for discharge. Several programs offered by Mental Health, Justice Health and Alcohol & Drug Services (MHJHADS) specifically offer support to family members and carers of people accessing these services. This includes family therapy and parenting groups as well as individual and group psychoeducation sessions.

Principles of the *Carers Recognition Act 2021* are embedded within CHS procedures, recognising the valuable contribution made by families and carers. Child and Adolescent Mental Health Services (CAMHS) is working in collaboration with Carers ACT to launch the Carers Experience Survey (CES), as part of a quality improvement activity. Carers ACT will be supporting CAMHS to deliver education sessions on carer inclusion, promoting the *Carers Recognition Act 2021* and the importance of the CES.

2. A range of community based Non-Government Organisation (NGO) services and options are funded by the ACT Government to support parents, carers and/or other family members living with an individual experiencing mental health or substance abuse issues.

For example, the ACT Government provides the Family Drug Support (FDS) approximately \$200,000 per annum (GST exclusive) until 2031 to operate a support service for family members and carers affected by another person's use of alcohol and other drugs (AOD). ACT residents can access the support service through the FDS website (<https://www.fds.org.au/>), by contacting the FDS national 24/7 phone helpline (1300 368 186), or by registering to attend a weekly online support meeting.

The ACT Government also provides funding to Carers ACT, which offers a range of supports for carers, including connecting them with other carers, providing advice and guidance through online counselling, coaching and peer groups. Carers ACT services can be found at its website: <https://www.carersact.org.au/for-carers/support-for-carers/>.

In addition, the ACT Government provides funding for Minds Together, which is a free online program providing support and advice for families, friends or carers of someone in distress to support themselves and the people they care for. Minds Together is available online at: <https://mindstogether.org.au/supporting-someone-in-the-act/>.

3. As detailed above, these programs are accessible through a range of avenues including receiving referrals from services and by direct contact through phone numbers and online resources.
4. The ACT Government provides funding to NGOs for a range of temporary accommodation including residential step up, step down (SUSD) supports for mental health and for residential rehabilitation programs for people affected by alcohol or other drugs.

The ACT Government provides \$6.46 million annually for community SUSD programs. These programs provide up to three months of short-term residential clinical and psychosocial supported mental health services for consumers who are either 'stepping up' from the community, and who need support to avoid a hospital presentation, or 'stepping

down' from a hospital stay, but who need more support before they can return to the community. These programs include:

- a) the STEPS program provided by Marymead CatholicCare Canberra and Goulburn (MCCG), which provides up to three months of SUSD support for 13 to 17 year olds (\$1.86 million in 2025-26);
- b) the Youth SUSD program operated by Wellways Australia, which provides up to three months of SUSD support for 18 to 24 year olds (\$1.40 million in 2025-26);
- c) the Adult SUSD program operated by Wellways Australia, which provides up to three months of SUSD support for adults aged 25 to 64 (\$1.72 million in 2025-26); and
- d) the Southside SUSD operated by Stride Mental Health Ltd, which provides up to two weeks of SUSD support for adults (\$1.48 million in 2025-26).

The ACT Government provides approximately \$17 million (GST exclusive) per annum to NGOs delivering residential rehabilitation programs for people affected by alcohol or other drugs, funding approximately 105 beds across all services (with some variation due to infrastructure changes and service demands). The duration of residential rehabilitation programs varies between service providers and may range from days to several months depending on the person's needs. Residential rehabilitation programs include:

- a) Directions Health Services, Karralika Programs Inc, and The Salvation Army services for adults affected by AOD;
- b) Ted Noffs Foundation specialist services for young people aged 12 to 24 years; and
- c) Toora Women specialist services for women and their accompanying children.

In addition, the ACT Government is investing \$49 million in the construction of the Watson Health Precinct, which will include a new residential AOD treatment facility for Aboriginal and Torres Strait Islander people and purpose-built facilities for the Ted Noffs youth AOD services and MCCG's STEPS program.

5. Wait times for these residential services differ for each service. Service providers typically consider applications for residential treatment on a case-by-case basis as per their internal policies and procedures. The ACT Government encourages ACT residents to directly contact AOD service providers to discuss the suitability of treatment options and to seek advice on any expected wait times. Information regarding programs can also be found at ATODA's Program Directory here: <https://directory.atoda.org.au/>. In addition, the ACT Government's [MindMap](#) is a mental health portal for young people up to 25 years old and their parents and carers, which includes both a navigation tool and an active hold service for young people who are on a waiting list for mental health treatment.
6. People of all ages living with a moderate to severe mental illness can access recovery support through public mental health services. This service provision includes clinical management, various treatment programs and interventions, a range of psychosocial therapies as well as general education, information and advice. Wherever possible, families and carers are engaged as part of these processes. MHJHADS will also refer individuals, their families and carers to a range of support services offered across government, community and private sectors.

Alcohol and Drug Services (ADS) offer a range of treatments and interventions including counselling, case management and referrals to support services such as Counselling and Treatment Services, Youth Drug and Alcohol Program and Karralika Family Program. Counselling is offered through a range of ADS programs with the approach tailored to the specific needs of the individual. Case management is also offered to people referred to Police and Court Diversion Services as well as those referred to the Drug and Alcohol Court.

The newly established Co-Occurring Needs Program aims to provide for a more integrated assessment, treatment and care approach for individuals with complex and co-occurring mental illness and substance use issues.

In addition, the ACT Government funds NGO counselling and case management services in a range of settings for people and families affected by mental health or substance abuse issues. Examples of these programs include:

- a) Canberra Alliance for Harm Minimisation and Advocacy (CAHMA), delivering peer-based support and case management services to people who use drugs or access AOD services.
  - b) MCCG delivering counselling to people affected by AOD.
  - c) Winnunga Nimmityjah Aboriginal Health and Community Services, delivering case management and counselling to Aboriginal and Torres Strait Islander people affected by AOD.
  - d) The Transition to Recovery (Trec) program, provided by Woden Community Services, which includes an intensive outreach support program that includes after hours support, using a recovery-oriented and strengths-based psychosocial outreach approach.
  - e) The Youth and Wellbeing Outreach program, provided by MCCG, which provides home-based outreach for young people experiencing mental health difficulties, using a case management model.
7. The ACT Government acknowledges that times of crisis place significant stress on families and carers, who feel they are taking on responsibility for the safety and wellbeing of their family member or person they care for. Families and carers are not expected to bear primary responsibility for clinical support. However, they can play a critical role in fostering improved outcomes for people experiencing mental health and/or substance use issues. The Government recognises that families and carers may require support themselves to provide this care. The *Carer's Recognition Act 2021* emphasises that families and carers have unique knowledge of people seeking and receiving care and should be viewed as equal partners in this process.
8. In general, the ACT Government has seen an increase of PACER encounters across the last two years as well as increased mental health presentations to emergency departments. At the same time, there has been no significant increase in the number of contacts with the Access Mental Health phonenumber. Hence, some caution needs to be exercised in drawing conclusions around the patterns of mental health incidents in the community.

The ACT Government acknowledges that there can be challenges to finding and accessing supports for people in the ACT, particularly during times of crisis. There are several

directories, online resources or phone lines that can help people, carers and family members to identify services that could be of assistance.

More detailed information on the range of public mental health and alcohol and drug services is readily available on the CHS website: [Services and Clinics - Canberra Health Services](#).

ACT residents seeking further information about available alcohol and drug services can access the Alcohol, Tobacco and Other Drug Association ACT (ATODA) directory at: <https://directory.atoda.org.au/programs/>.

For children, young people and families seeking mental health support services, the MindMap Youth Portal is a dedicated portal for children and young people (up to 25 years of age) to help navigate Canberra's mental health system and to find the right service and support. MindMap is accessible at: <https://www.mindmap.act.gov.au/s/>

9. There has been no change in policy or practice in the public mental health inpatient wards or emergency departments that would be expected to increase demands on families or carers. Despite increased demand on emergency departments in general, access to mental health facilities has not been impacted negatively.

**Approved for circulation to the Member and incorporation into Hansard.**



**Rachel Stephen-Smith MLA  
Minister for Mental Health**

**Date:** 21 | 10 | 25

This response required 14hrs 20mins to complete, at an approximate cost of \$1,485.95.