



City of Rockingham **Community Plan Strategy**

Community Support Services Strategy 2017 - 2022

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1. Executive Summary

All communities contain individuals and groups who are vulnerable or disadvantaged in some way. These vulnerable populations require extra support in order to access a similar quality of life to others in the community. In order to identify those populations, and the level of support required within the Rockingham community the City identified the need for a Community Support Services Strategy.

Consultation for this strategy was targeted to state, federal and not for profit providers within the local support services sector through online survey and stakeholder interviews.

The major issues identified within Rockingham were:

- Low income families
- Social isolation, mental health issues, suicide ideation and substance abuse
- Low levels of tertiary qualifications and disengagement from school
- Family and Domestic Violence (FDV) rates
- Lack of services, funding, sustainability of funding, collaboration across the sector and creation of hubs

Significantly these Rockingham issues reflect the issues identified internationally through United Nations (UN) research which resulted in the development of the 17 Sustainable Development Goals (SDGs). These were unanimously adopted in September 2015, at the United Nations General Assembly based on recognition that inequality exists in all nations and requires to be addressed. The first five of the SDGs include:

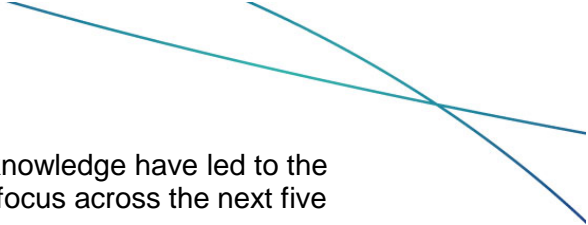
- No poverty
- Zero hunger
- Good health and well-being
- Quality education
- Gender equality

Further local consultation strongly identified that the most positive focus for the City of Rockingham within the support services sector is:

- Building collaborative effort
- Encouraging the development of joined up services
- Advocating for more funding and more sustainable funding models
- Awareness raising

This approach also resonates with the same UN research which identified as the seventeenth SDG the need to build partnerships to attain goals.

As a way forward, the City needs to focus its resources on the community as a whole in terms of provision of infrastructure, open space and services. Its role is not to resource infrastructure and services for specific support issues such as homelessness FDV and mental health. This has been and is the business of Federal and State Government funding bodies, as well as philanthropic contributions.



Outcomes from the community consultation and sector knowledge have led to the identification of the following key elements for the City's focus across the next five years:

- KE 1: Building an Effective, Accessible and Sustainable Sector
- KE 2: City Provision of Services
- KE 3: Infrastructure Development and Access

These above key elements provide synergy with the focus at state level as identified by the Western Australian Council of Social Service (WACOSS) for the next five years as advocacy, influence leaders, educate the community and lead public debate. Additionally to work collaboratively and to build the organisational capacity of the sector to provide people with the support they need. All of these align with the identified way forward for the City across the next five years.

2. Strategic Objective

Vision: For Rockingham to have an effective, sustainable and accessible Community Support Services sector providing support to vulnerable populations within the community.

Mission: Advocate for more services and for sustainable funding models to support and strengthen the Not for Profit (NFP) sector, as well as build collaborate effort locally as a way to address emerging issues and gaps.

The City's commitment to the Community Support Services sector and the City's vulnerable populations is stated in the City's Strategic Community Plan (2015 - 2025):

Aspiration B: A Strong Community

*Objective 1: Mobility and Inclusion
Community services, programs and infrastructure that effectively cater for all residents including seniors, youth and vulnerable population.*

*Objective 4: Safety and Support
A community that feels safe and secure in home, work and leisure environments, and has access to a range of effective support services and partnerships when encountering challenging or difficult times.*

3. Background

All communities are made up of individuals with needs and aspirations. The quality of their lives is impacted by how these needs and aspirations are met and achieved. They can rely on themselves, their families, people in the wider community with whom they have some type of relationship and the formal (Government, NFP) and informal (volunteer) supports available within the community. They have access to adequate income for their needs.

There are groups of people and individuals within most communities for whom meeting needs and achieving aspirations is challenging. They may not have personal resilience, strong family and peer ties, established community networks, the knowledge of, or ability to, access support agencies, or access to adequate income for their needs.

Those groups often referred to as vulnerable or disadvantaged experience a higher risk of poverty and social exclusion than the general population. They can include, but are not limited to:

- Ethnic minorities, such as Aboriginal and Torres Strait Islander Peoples (ATSI)
- People from a Culturally and Linguistically Diverse (CaLD) background
- LGBTI – Lesbian Gay, Bi-Sexual, Transgender, Intersex
- People with disability
- People experiencing homelessness and those at risk of homelessness
- Those experiencing issues with alcohol and/or substance abuse
- Those experiencing issues with mental health, suicide ideation, LGBTI and/or violence at home
- Isolated elderly people
- Those living in, or at risk of, living in poverty, (living below the poverty line)
- Families living with financial insecurity
- The unemployed/underemployed
- The socially isolated
- Young people

In common with most communities, the City of Rockingham contains many such individuals and groups.

3.1 Poverty

Internationally the need to provide extra support to such groups is clearly delineated by the United Nations Declaration of Human Rights, 1948. Article 25 of the Declaration states:

- “1. Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.*
- 2. Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.”*

So what is the basic issue that renders people vulnerable or disadvantaged? Living in poverty is the basic life experience of most of those who can be described in this way. The Australian Council of Social Service (ACOSS) is the national voice in support of people affected by poverty, disadvantage and inequality; and the peak body for community services nationally. Their 2014-2017 Strategic Plan outlines the way forward for ACOSS, setting the direction for delivery of high quality policy and advocacy in the interests of those affected by poverty, disadvantage and inequality. It defines their vision as:

“A fair, inclusive and sustainable Australia where all individuals and communities have the opportunities and resources they need to participate in and benefit from social and economic life.”

The ACOSS report, Poverty in Australia 2014, based on data released by the Australian Bureau of Statistics (ABS) for the years 2011 – 2012 outlines what poverty looks like in Australia.

“Poverty is common for any group that is not able to access the job market including single parents, women and children, people with disabilities, the old, the young, ATSI people and migrants from a CaLD background.”

In his preface to this report, Dr David Moraweytz, Director, Social Justice Fund defines poverty as:

“the pronounced deprivation of well-being, or the inability to satisfy one’s basic needs.”

He makes the important point that poverty impacts not only those experiencing it, and those dealing with it in the Government and NFP support sectors but also for our social relationships and sense of community.

In the same document Major Kelvin Alley, National Secretariat, the Salvation Army, supports this view by noting that over 60% of people using their emergency relief services reveal an inability to participate in the local community. This includes such things as sport, after school and extra curricula activities for their children, buying birthday gifts and sharing meals with friends. He states:

“Poverty is not just about income, it is about the lack of opportunities and social participation that most of us take for granted.”

From a more practical viewpoint, poverty is usually reported in terms of those living below the poverty line. The measure usually taken by Governments and expert bodies such as the Organisation for Economic Cooperation and Development (OECD) uses 50% of median household income to identify people living in poverty. This is an amount equal to half of the ‘middle income’ for all households in a country.

For those living in poverty or described as vulnerable, one of the most severe impacts is on access to food. Consideration of the statistics in relation to access to food can supply indications regarding the level of poverty within the nation.

Foodbank is Australia’s largest food relief organisation, providing 60 million meals a year to over 2,400 charities across Australia. Their primary focus is on food insecurity. As such they undertook two pieces of research in 2015 with the outcomes reported in ‘The Foodbank Hunger Report 2016’. The research included a survey of recipients of food relief, and, the ‘Foodbank Welfare Agency Survey’, the fourth such survey

undertaken. The aim of the research was to understand the reality and impact of food insecurity on Australians.

Key findings included:

- 1 in 6 Australians report having experienced food insecurity at least once in the last 12 months, with over half of those experiencing it 1-3 times and over a quarter as a regular occurrence
- 2015 saw an increase of 8% in the number of people seeking food relief
- Over 43,000 people seeking food relief each month are unable to be assisted by charities
- The main recipients are individuals and families who have low income or are unemployed, or suffering rising cost of living and/or bill shock
- Most common reasons include not enough money in the first place, unexpected or large bills, rent/mortgages
- Benefits from food relief include feeling less hungry, improved health, ability to plan and to look for work

Extrapolation of this data to Rockingham would seem to indicate significant numbers of people across the City would be vulnerable or disadvantaged, due to low income or living below the poverty line.

These findings hold for all those groups identified as vulnerable above. For some of those groups vulnerability is more obvious, such as people experiencing homelessness, those who identify as Aboriginal and Torres Strait Islander (ATSI), those struggling with mental health issues, alcohol and substance abuse and those who are unemployed. For others it can be more hidden, including seniors who live in rented accommodation, those from a Culturally and Linguistically Diverse (CaLD) background and families on the minimum wage. Given the level of vulnerability of some of these groups, it is essential to understand their experiences and needs.

3.2 Homelessness

For vulnerable groups who experience significantly low income, as well as food insecurity one of the more traumatic effects translates into the risk of becoming homeless. Homelessness Australia uses the ABS definition of homelessness which states:

“when a person does not have suitable accommodation alternatives they are considered homeless if their current living arrangement is in a:

- *Dwelling that is inadequate; or*
- *Has no tenure, or if their initial tenure is short and not extendable;*
- *Does not allow them to have control of, and access to space for social relations.”*

The problem with this definition is it does not recognise the many different types of homelessness that people can experience, for example; living in a vehicle and the varying impact of the different types on them, service providers and the wider community.

An older definition posited by Melbourne academics Mackenzie and Chamberlain (1992) includes three categories in recognition of the diversity of homelessness:

- *“Primary homelessness is experienced by people without conventional accommodation (e.g. sleeping rough or in improvised dwellings);*

- *Secondary homelessness is experienced by people who frequently move from one temporary shelter to another (e.g. emergency accommodation, youth refuges, "couch surfing");*
- *Tertiary homelessness is experienced by people staying in accommodation that falls below minimum community standards (e.g. boarding housing and caravan parks)."*

This definition was adopted by the Commonwealth Advisory Committee on Homelessness in 2001 and is widely used in the homelessness sector, as it better describes the different types of homelessness people can experience. For the purposes of this document it is a better foundation for describing the differing issues, needs of, and community responses to people who are experiencing homelessness.

The most visible are of course those who are rough sleeping (primary homelessness) in parks, on beaches, in alleyways, in vehicles, on shop door steps, on sidewalks and in public structures.

3.3 Substance Abuse

Within Rockingham, as for Australia as a whole, another of the vulnerable groups are those struggling with abuse of alcohol and illicit drugs. This type of lifestyle impacts someone's ability to work, cope with social and familial relationships, societal, family and domestic violence rates, availability of useable income and physical and mental health.

In 2014 the Australian Institute of Health and Welfare released a detailed report on the National Drug Strategy Household survey. The report identifies drug use as a *"serious and complex problem which contributes to thousands of deaths, substantial illness, disease and injury, social and family disruption, workplace concerns, violence, crime and community safety issues."*

It also identifies *"excessive alcohol intake is also a major risk factor for morbidity and mortality with binge drinking a major cause of road, and other accidents, domestic and public violence and crime."*

In brief the most significant finding is that while meth/amphetamine use did not increase, there was change in the main form used from powder to ice (crystal methamphetamine).

The Drug and Alcohol Office of Western Australia in its Alcohol and Other Drug Indicators Report for the South Metro Health Region for 2013 provides a variety of statistics. The most interesting in terms of identifying community issues are those showing rates of calls (shown as % of all calls) to the Alcohol and Drug Information Service (ADIS). This indicates that the three top drugs of concern across the region in descending order were:

- Alcohol (135%)
- Cannabinoids (126%)
- Meth/Amphetamine (77%)

The top three drugs of concern in terms of rate of treatment episodes were similar:

- Alcohol (324%)
- Cannabinoids (197%)
- Meth/Amphetamine (183%)

When considering the level of use and impact on community revealed by these statistics, it is important to note that media and police attention tends to focus on ice use due to the level of violence associated with its use and its legal status. Alcohol which is more prevalent within the community and causes more harm is not acknowledged as widely as an issue due to its legal status, the high level of advertising employed, power of the alcohol lobby and its easy availability. Additionally many people in the community use alcohol safely with few consequent harms.

Unsafe alcohol use particularly binge drinking however contributes significantly to physical and mental health issues, Family and Domestic Violence (FDV) and community level anti-social behaviour and violence.

3.4 Family and Domestic Violence (FDV)

According to an ABC News Fact Check, ABS notes that there is no single agreed definition of domestic violence. The most common definition within legislation holds in Western Australia, New South Wales, Victoria, Queensland, Northern Territory, Australian Capital Territory and South Australia. It defines the relationships where domestic violence can occur as:

“Occurring between intimate partners, relatives, family members, carers, and children and in most cases an intimate relationship can exist between two people who don’t live together (dating)”

The most obvious and commonly reported form of FDV is in families between couples, ex couples and/or their children/step children.

The forms domestic violence can take within these relationships include physical, emotional, psychological and sexual or a combination of some or all of these. Additionally denying essential money to the partner or family, isolating the partner from friends and family, insulting or constantly criticising the partner, and threatening children or pets. This is particularly prevalent between ex partners where domestic violence can occur in attempt to gain and/or maintain power and control.

Quantifying FDV rates is difficult, for a number of reasons. The ABS and different state police departments across Australia all report data differently, to the extent that the ABS has identified the need to develop a universal way of identifying and reporting domestic violence incidents nationally.

It is also extremely common for FDV to go unreported for a variety of reasons including fear of the perpetrator, lack of resources, isolation, lack of support services, lack of alternate accommodation, disbelief from others and lack of understanding at both an individual and community level.

Australia's National Research Organisation for Women's Safety (ANROWS) is an independent organisation, jointly funded by Commonwealth, State and Territory Governments to research evidence to reduce violence against women and children. Their 'Violence Against Women' report notes that one in four women has experienced at least one incidence of violence by an intimate partner they may or may not have been living with. The difficulty with such research outcomes is the definition of violence and the significance of impact on individuals. It must also be noted that men can be the victims of FDV, and ANROWS notes that a dominant percentage of the male victims noted in the statistics are in fact children of an abusive parent.

The impact for the victims of FDV is of course the most important issue. They include mental and physical health issues, psychological impact of trauma, social isolation, family breakdown and often poverty and homelessness.

The National Plan to reduce Violence against Women and their Children 2010-2022 aims to improve how Governments work together, increase support for women and their children and create innovative and targeted ways to bring about change. The Western Australian Government's Family and Domestic Violence Strategy to 2022 works within the National Plan as the WA implementation plan. It works in three year phases with the current phase covered by the 'Freedom from Fear' Action Plan, which aims to strengthen integrated, accountable and effective interventions targeting perpetrators of violence and abuse.

3.5 Mental Health

There is a difference between mental illness and mental health. Mental illness is a clinically diagnosable disorder that significantly interferes with an individual's cognitive, emotional or social abilities. Mental health problems while still interfering with cognitive, emotional or social abilities are less severe, of a shorter duration and often experienced as a reaction to life stressors.

The World Health Organisation (WHO) defines Mental Health as *"a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community."*

The accepted prevalence of mental illness in Australia is that one in five people will experience a mental health issues at some stage in their lives. The impact of mental health issues on individuals and families is significant especially when unrecognised or untreated. This is especially true for young people. There is research to indicate that there are higher incidents of mental health issues within the LGBTI, Youth, elderly, ATSI and CaLD communities.

Mental health issues can contribute to other social concerns including social isolation, loss of job and income, violence within families, shame, confusion, disengagement from education and/or training, poor and risky decision making and a loss of self-confidence and resilience.

3.6 Aboriginal and Torres Strait Islander People (ATSI)

The issues impacting ATSI people are varied and complex. One significant theory is the impact of trauma, vicarious trauma and inter-generational trauma.

Atkinson, Nelson and Atkinson 2010 explain the effects of trauma as:

“Indigenous people in Australia have experienced trauma as a result of colonisation, including the associated violence and loss of culture and land, as well as subsequent policies such as the forced removal of children. In many Indigenous families and communities, this trauma continues to be passed from generation to generation with devastating effects.

Research shows that people who experience trauma are more likely to engage in self-destructive behaviours, develop life-style diseases and enter and remain in the criminal justice system. In fact, the high rates of poor physical health, mental health problems, addiction, incarceration, domestic violence, self-harm and suicide in Indigenous communities are directly linked to experiences of trauma. These issues are both results of historical trauma and causes of new instances of trauma which together can lead to a vicious cycle in Indigenous communities.”

The basis for most Aboriginal support services is the wide health and life expectancy gap between ATSI and non-Indigenous people in Australia. This led to the establishment of the ‘Close the Gap’ Campaign under ATSI leadership with every ATSI and general population health professional and peak bodies participating, as well as significant bi-partisan support at the political level. The aim of the campaign is achieving ATSI life expectancy equality by 2030.

The ‘Close the Gap Progress and Priorities Report 2016’, similarly to the 2015 report indicates progress against the aim is difficult to measure. Indications are that progress is minimal. However the report highlights that because the lead times on the program roll out have been extended, improvements should not be expected to be measurable until 2018. Some reported positives include:

- Significant increases in the number of health checks
- Increased access to medicines
- Improvements in infant and child health outcomes

A major issue is the ‘National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes’ expired in 2014 and funding under that agreement was discontinued. The federal government needs to fund the Implementation plan for the ‘National Aboriginal and Torres Strait Islander Health Plan (2013-2023)’ with its emphasis on:

- Identifying core service models and gaps
- Workforce requirements
- Funding mechanisms
- Reducing racism
- Importance of culture to improved health outcomes

Recognition of the level of racism and community ignorance of, and value for aboriginal culture is endemic to the issues facing aboriginal families.

The City of Rockingham has a current Reconciliation Action Plan 2013-2017 which provides greater detail and is specific plan focused on the ATSI community. This document can be found on the City's website.

3.7 Culturally and Linguistically Diverse (CaLD)

The Office of Multicultural Interests (OMI) undertook a consultation in 2013 to inform the development of a Strategic Plan 2014-18. At this time it identified three key issues:

- Managing super diversity: the need to address the needs of various migrant cohorts from an increasing number of countries.
- Social cohesion: the challenge of ensuring a sense of belonging
- Economic and social benefits: promoting the benefits of cultural diversity

The experience of members of the CaLD communities vary in line with their country of birth, experience of re-settlement (whether free choice, or the result of terror and trauma), language skills, relative differences between homeland and Australian culture, level of acceptance, translatable work skills and supports available. For many the transition is not difficult, but there are also many for whom the process is extended, difficult and isolating.

For most people relocating to Australia from overseas including those from a CaLD background there is some dislocation due to isolation from family, friends, culture and all that is familiar. The City is working to form stronger partnerships and gain a greater understanding of the diversity within the CaLD community across the City of Rockingham. It is acknowledged that further work is required to form stronger connections into the CaLD community to assist in preventing social isolation, unemployment and mental health issues.

3.8 Disability

According to the City's Disability Access and Inclusions Strategy 2016 – 2019: *"The World Health Organisation (WHO) states, "Disability is thus not just a health problem. It is a complex phenomenon, reflecting the interaction between features of a person's body and features of the society in which he or she lives. Overcoming the difficulties faced by people with disabilities requires interventions to remove environmental and social barriers". The WHO World Report on Disability identifies the main barriers for people with disability as: inadequate policies and standards; negative attitudes; lack of provision of services; problems with service delivery; inadequate funding; lack of accessibility; lack of consultation and involvement; lack of data and evidence."*

3.9 LGBTI (Lesbian, Gay, Bisexual, Trans*, Intersex)

LGBTI is an acronym that refers to a group of people with diverse sexual orientation, sex, or gender identity. It includes lesbian, gay, bisexual, transgender, and intersex people, and other sexuality, sex and gender diverse people, regardless of their self-identification. (Pride in Diversity, 2015). The Australian Government, Department of Health reported that Australians of diverse sexual orientation, sex or gender identity may account for up to 11 per cent of the Australian population, with same sex couples accounting for one per cent of all couples in Australia. The number of same sex couples reported tripled between 1996- 2011 (Australian Bureau of Statistics, 2013).

The Australian Research Centre in Sex, Health and Society highlights key the issues within the LGBTI community being discrimination, physical and verbal homophobic abuse, social exclusion, mental health concerns and increased suicide ideation, individuals hiding their sexuality of gender identity when accessing services, and bullying/cyberbullying (in particular affecting young people) impacting wellbeing and education.

The City of Rockingham adheres to be a Safe Space for every member of the community and this specifically includes promoting a safe and inclusive environment where a LGBTI person can express themselves without fear of being made to feel uncomfortable, unwanted, or unsafe based on sex, sexual orientation, gender history, gender identity or gender expression.

Source: www.advocatesforyouth.org/publications/safespace/

There is currently one known specific LGBTI service available in Rockingham, being a youth based counselling and support program offered by headspace Rockingham and supported by the City's Youth Services team. Whilst a Rockingham based specific service may be deemed as a gap, strong advocacy and support exists within the current service sector and connections/referrals are made to targeted services available in Perth. In addition a nationally–orientated telephone and web based counselling and referral service (QLife) is available specifically to provide support, early intervention, peer based services to diverse people of all ages.

4. Consultation

4.1 Survey Results

A targeted community consultation was undertaken with local Service Providers through an online survey. Additionally face to face interviews were implemented with eight identified local service providers, the Injury Control Council of WA and the members of the City's Aboriginal Action Group (AAG). The consultation was targeted at service providers, and did not involve community members. As the City has not previously provided direct community support services delivery other than Youth Services and Community Transport, consulting with community could very well raise expectations of further service delivery from the community. Consultation with service providers targeted their views on the major social issues within the community, and the sorts of services the City should focus attraction, collaboration, awareness raising and advocacy efforts towards.

Responses to the survey indicated that from local service providers' perspectives the most prevalent issues locally are:

- Mental Health
- Family issues
- Access to/Knowledge of Youth Facilities/Services
- Suicide Ideation
- Homelessness
- Family and Domestic Violence
- Substance abuse
- Employment
- Family Conflict
- Low income

Service providers identified the issues that the City should focus advocacy efforts on across the next five years as:

- Homelessness/Risk of Homelessness
- Employment
- Family Support Services
- Building Community Support Services
- Infrastructure

They identified governance support areas to concentrate on as:

- Interagency and community partnerships/connections
- Interagency and community communication
- Outreach programs

Responses to the need for early intervention programs identified the areas of:

- Mental Health
- Family Support
- Youth Support

Responses in regard to areas that would benefit from forums/awareness raising campaigns included:

- Mental Health and Wellbeing (all ages)
- Social inclusion
- Family and Domestic Violence

4.2 Stakeholder Interviews

The information supplied by the Injury Control Council of Western Australia who collect and interpret hospitalisation rates across the City in relation to injuries was based on local statistics, rather than experience of the local community. Their data for 2015 indicates Rockingham's top three rates of injury in descending order were:

- Falls and Intentional Self Harm
- Adverse effects due to drugs and other substances and accidental drowning
- Transport

Stakeholder interviews and Police presentations at forums identified a significant incident rate of FDV. Not only has the rate increased, but the level of violence within these families has escalated often as the result of crystal methamphetamine (ice) use. The result is many local agencies struggling to provide services to those who need them. This has significant implications for families, especially women and young children, who can swell the numbers of homeless when escaping difficult situations.

Interviewees also focused on street present young people at night, often including those from ATSI and CaLD backgrounds is resulting in illegal use of alcohol and drugs, out of control parties, anti-social behaviour and violence.

Additionally the stakeholder interviews identified:

- Drugs and alcohol
- Social isolation
- The complexity of issues facing young families with consequent trauma impact on service providers
- Low income families struggling to survive
- Lack of affordable and social housing impacting those living in or near poverty
- Significant and complex mental health issues, particularly in the 10 – 25 years old demographic
- Social isolation across all demographics.

Strategic issues identified included:

- Lack of services (Outer Metropolitan LGA)
- Funding insecurity for services
- Stressed staff due to complexity of client issues
- Current state and federal funding practices encourages competition while paying lip service to collaboration across services
- Lack of affordable accommodation for services

Issues identified by members of the City's AAG focused on the difficulties and needs of young people across the City. There was concern regarding the aimless and sometimes criminal behaviour of street present young people and the impact of drugs and alcohol both at the direct and secondary (family) level. Real concern was expressed at the lack of respect from young people, linking this to a lack of opportunities to interact with culture and committed elders. This was strongly linked to the need for a local Aboriginal Cultural Centre or hub. Such a hub could provide a place to provide cultural opportunity for young people, a safe and welcoming activity centre for older people and a place to attract much needed support services. The few Aboriginal support services there are in the region are mainly located in Kwinana.

When considering these varied sources the following are the prevalent issues experienced by vulnerable groups and individuals within the community:

- Suicide Ideation
- Homelessness and risk of homelessness
- Mental Health
- Unemployment/Under employment
- FDV
- Alcohol/Drug Use and Abuse
- Lack of Services (Outer Metropolitan LGA)
- Funding Insecurity for services
- Lack of affordable accommodation for Services
- Social Isolation

This illustrates that vulnerable groups within the City include:

- Families with young children
- Homeless people, and those at risk of homelessness
- Families experiencing drugs and alcohol issues
- Families experiencing FDV
- Those with mental health issues
- People experiencing social isolation and disconnection from community
- Young people (including those from ATSI and CaLD backgrounds)
- People living in close to poverty/on low incomes

So what do these issues and disadvantaged groups look like in Rockingham? How do their issues present, what is available and what is required for their support? This will be addressed in terms of the current situation within the City.

5. Current Situation

When considering the current situation in Rockingham thought needs to be given to those groups typically identified as disadvantaged as described above. Anecdotally the City experiences most of the same issues as the rest of the state with the same vulnerable groups within its population. Additionally the outcomes of the targeted consultation undertaken with local Service Providers will inform direction as will information gleaned from discussions locally at:

- Community Services sector networks
- Inter-Agency Group meetings
- Emerging issues forums
- Conferences
- Sector seminars and workshops
- The City's Aboriginal Advisory Group

5.1 Poverty

For a picture of the prevalence of those community members living in, or on a low income in Rockingham, the ABS can supply the basic data. It is important to note that this data has been collected from 2011 ABS Census date.

Household income is one of the most important indicators of socio-economic status. The ABS recognises low income households as those receiving a gross income of less than \$600/week. This threshold was chosen because it is close to the bottom 25% of households Australia wide.

In 2011, the percentage of the City's total households classed as low income totalled 16.8% compared to 15.9% in Greater Perth. Those suburbs with the highest percentage of households experiencing low incomes were ranked, in descending order:

- Shoalwater (28.5%)
- Rockingham – Peron – Garden Island (28.3%)
- Hillman-East Rockingham (24.4%)
- Rockingham Ward (24.4%)
- Cooloongup (23.2%)

The City's Community profile Id for 2011 has a data set for low income households. This illustrates the types of households for whom low income is an issue across the City.

Analysis of age groupings, educational attainment, employment status, type of job, and household type highlighted that people on a low income in Rockingham tend to be in the younger age demographic (under 15 years old) or older (over 65 years old), don't hold formal qualifications, are unemployed/under employed or if employed, are in the Community and Personal Services or Technical and Trades industries. They are more often living in one parent households.

Stakeholder interviews with the Salvation Army and Soul Soup Patrol locally indicate that while many of their clients are experiencing homelessness or at risk of homelessness, more often they are families, often one parent families teetering on the edge of homelessness, often unable to feed their families, as they juggle paying the essentials of rent, and utilities. Formal financial support/relief is available from Centrelink, and informally in terms of food, assistance with bills, and emergency financial support from both larger and smaller informal NFP's. The availability of financial counselling is a significant gap within the City.

5.2 Homelessness

Homelessness can be visible and distressing for the community and can be challenging to understand and assimilate with. Homelessness has been a noticeable issue of concern within the City and community for some time, but was difficult to quantify. As a result the City paid to take part in the Ruah Street Registry which counted rough sleepers over two nights in February 2016. The results indicate that there are approximately 44 rough sleepers in the City on any night, of which seven were young people and 27 adults. Of these, 35 agreed to be interviewed as to their circumstances and nine refused to participate. Most were male at the time of count.

As well as a basic count, the registry interviews the rough sleeper regarding their background and past and current issues. Many of those rough sleeping locally reported experiencing a combination of issues including but not limited to alcohol and drug abuse, untreated mental health issues, chronic physical health issues, lack of significant relationships, and a history of incarceration, and often abuse. Engagement can be difficult due to entrenched behaviours and resistance to change. This can result in extended homelessness periods over many years and consequent greater difficulties in seeking and making positive connections to change lifestyle.

There are a number of individuals who, when ready, do make positive decisions about their health and other issues that enable them to gain assistance, and more stable accommodation, requiring significant commitment from both the rough sleeper and numbers of support services working collaboratively to achieve positive outcomes. These positive outcomes can and usually do require admission to supported crisis and transitional accommodation such as that offered by St Bartholomew's House and the Salvation Army's The Beacon in inner City Perth and St Patrick's Community Support Centre in Fremantle, which can be beneficial support to the individuals. Although Rockingham currently has very little emergency/transitional accommodation, the vision is for the City amongst other support services to advocate to attract additional services to aim to address needs. It is vital to acknowledge that there are, and is likely to always be individuals that choose to not utilise these services even when supported to do so. This is prevalent with individuals who live in vehicle based accommodation not accessing organised caravan park facilities designed to cater for this form of accommodation.

While there are very few large formal support organisations dealing with homelessness within the City, there are support service providers such as; the Salvation Army, St Brennan's Anglican, Anglicare and Mercy Re-connect, there are numbers of informal faith based volunteer organisations offering access to day time hub style support services. They provide food, washing machines, showers and informal support, medical and financial supports and referral mechanisms. This group of organisations combined contribute to providing access to food, showers and washing machines most days of the week. Additionally the Fremantle Street Doctor is available at the Salvation Army, and also visiting dentists and podiatrists on a rotational basis. The lack of

Assertive Outreach workers able to work directly with those experiencing or at risk of homelessness is a significant gap within the City.

There are no adult shelters, crisis or transitional accommodation for adults within the City, other than the local refuge for women and children fleeing FDV. These can however be accessed across the wider metropolitan area. Anglicare does provide both crisis and transitional accommodation for young people within the City.

Enquiries have been made from informal advocacy groups within the Rockingham community that access to a 'camping ground' within one of the City's owned or managed outdoor spaces should be provided for rough sleepers. There needs to be an understanding within the community and sector that the use of the City's owned and managed outdoor spaces is governed by its Local Laws, and, that this prohibits the provision of land to permit camping. The City has provided alternate recommendations and offered support for this venture with partnering organisations.

The City developed and introduced the Rockingham/Kwinana Homelessness Interagency working group (RKHIG) in 2014 and is currently the chair of this network. The network has developed a strong terms of reference and has achieved some great outcomes, in particular the provision of a central hub, one stop shop at the Rockingham Salvation Army. This has attracted new services such as a dentist, the street doctor and hairdressing/grooming services. The City actively supports the network and has provided over \$100,000 in community grants to local support services delivering programs/ services and events for people experiencing or at risk of homelessness. The network has created a homeless reference card produced by the City of Rockingham which is distributed to all agencies and services working with vulnerable populations to provide a water resistant at hand information tool on where to get assistance, showers, food and emergency accommodation. Awareness raising events and campaigns are also provided by the City of Rockingham on an annual basis. The Rockingham/Kwinana Homelessness Interagency Group is currently advocating towards an Outreach Worker in Rockingham.

5.3 Domestic Violence

A recent Rockingham and Kwinana FDV Forum within the City attempted to identify the statistics, issues and way forward for those experiencing FDV.

The Department of Child Protection and Family Support (DCPFS) presented the following statistics for 2015 for the Rockingham Kwinana Region.

Reports	Numbers
Child Protection Concerns	1,438
Safety and Well-being Assessments	1,099
Substantiated Child Abuse cases	134
Children in the CEO's care	261
Protection Applications Lodged	70
Protection Applications Granted	62

Police reported the following statistics locally for the period 2014 to April 2016:

- 2014: 2833
- 2015: 3710
- Jan – April 2016: 1336

The increase in the incidence of FDV is clear from these figures. Of course of concern is that both these sets of statistics only reflect reported cases. There are many more families within the community exposed to FDV who do not report for a variety of reasons.

Anecdotally services working directly with those effected by FDV locally have reported an increase in CaLD clients accessing their services.

While there are a number of agencies working with families experiencing FDV across the City, the high and increasing numbers of families experiencing the issue equates to increased need for funding and services, particularly services that can deal with complex, multi-systemic and highly traumatic issues.

5.4 Family Issues

Rockingham is a rapidly growing City, with many new housing developments attracting young families to affordable housing options due in some part to being an outer metropolitan LGA. Those families often have moved some distance from immediate family, interstate, from another country or are in either a Fly in Fly Out or Defence family situation. This can result in one partner not present in the family for significant periods of time, placing significant stress onto the lone parent and often onto child development and family support services. This situation is especially true for Baldivis, one of the state's fastest growing and youngest suburbs. Contributing to a prevalence of people experiencing social isolation within the community. Social isolation is significant as a causal factor in mental health issues as well as poor quality of life. It is important for the City to contribute to plan for opportunities for support services to utilise community facilities to cater for this need.

The 2011 Australian Bureau of Statistics shows Rockingham as having 35% of the population as families with children which is higher than the greater metropolitan percentage of 31.6%. Additionally the percentage of one parent families is 11%, again higher than the greater metropolitan percentage of 9.9%. The Strategy for Children and Young People will provide further information and a way forward for the City in relation to this issue.

Mental Health

Service providers report concern regarding the complexity of issues people are presenting with in terms of their mental health. The City has a number of agencies providing support to those with a mental illness and with mental health issues. Most of those offering counselling and treatment, report of waiting lists of varying lengths.

Suicide Ideation

Rates of suicide both completed and attempted are high across Australia. Locally there have been a number of instances of completed and attempted suicide in the cohort of young people. This has resulted in headspace Rockingham leading a consortium of local service providers to develop a Community Response plan. The way all service providers have worked together in response to these occurrences in both treatment and prevention modes has been respectful, inclusive, efficient and effective. The City's Youth Services team has been particularly effective due to their high level of local knowledge and engagement with local service providers and young people. The City has provided a significant number of opportunities to the local community in free suicide prevention education, with Applied Suicide Intervention Support Training (ASIST), safeTALK and Suicide to Hope Training and will continue this education and awareness raising role.

Substance Abuse

Issues with both Methamphetamines (ice) and alcohol are reported across the City. Methamphetamines (Ice) has become an issue within those families experiencing FDV, in that it has increased the level and severity of physical violence and trauma within families.

The impact of abuse of alcohol and binge drinking is most noticeable with young people. Anecdotally reports from community and sector organisations indicate that anti-social behaviour and the eruption of fights, brawls and violence are becoming more common across the City, although statistical verification of this is difficult. This was a major concern particularly for the members of the City's Aboriginal Advocacy Group (AAG), although they made the point it was common in non-Aboriginal families as well as ATSI families.

Palmerston provides substance abuse counselling across the City, but usually has a waiting list. Serenity Lodge provide residential treatment. All other treatment options are outside the City. The Local Drug Action Group (LDAG) is actively seeking the assistance of more volunteers to help them deliver valuable drug and alcohol information to the community. The City is supporting LSAF and attends regular meetings.

5.5 Demographic based Vulnerable Groups

There are a number of demographically based vulnerable groups within Rockingham who this strategy will not address in detail. Specific strategies are already in place or are under development addressing these groups. Such groups include:

- ATSI: Reconciliation Action Plan 2014 - 2017
- Seniors: Seniors Strategy 2017 - 2021
- Young People: Strategy for Children and Young People 2017 - 2021
- Disability: Disability Access and Inclusion Strategy and Disability Access and Inclusion Plan

CaLD and LGBTI populations are addressed within this strategy, but will also be included broadly within the Children and Young People Strategy and the Health and Wellbeing Strategy, addressing needs of whole community at large.

Strategically across the sector the main issues are over-utilised services, a lack of services in certain areas, lack of sustainable funding due to State and Federal procurement practices and the current socio-political climate.

The City has committed funds to deliver a capacity building approach to social connector programs and activities. Currently the capacity to target all specific vulnerable population groups is limited due to staffing resources, however there is a commitment to review and evaluate the sustainable outcomes of these programs to investigate potential re-allocation of resources within the community support services team to further deliver these initiatives.

5.6 Explanation of the role of the City and the role of other stakeholders

The City is in a strong position to advocate in partnership with local not for profit groups and service groups to seek to attract services and programs to Rockingham to address evolving community needs. The City can assist these groups through:

- Advocating at State and Federal level for a more even distribution of services and Infrastructure for these groups
- Advocating for more sustainable funding for local established NFPs to stabilise and strengthen the sector
- Building collaborative effort among the support services sector providers locally to add to the ability of an area to advocate for more services, strengthened services and sustainable funding

Strategically it is important to consider the role of Local Government in the Community Support Services arena. A Local Government Authority (LGA) such as the City of Rockingham is essentially required to provide the necessary infrastructure for the whole community – such items as roads, waste removal, libraries, community centres, recreation centres, sporting fields and facilities, parks, gardens and play grounds, and outdoor recreational spaces. It can also provide some larger demographic specific facilities such as senior’s centres and youth spaces.

The City of Rockingham is not resourced to provide issue specific or generic support services and infrastructure for vulnerable/disadvantaged groups within the community. This is the responsibility of State and Federal Government and is a strongly held position statement within the City, which does currently, and will continue to, inform responses to NFP’s and State and Federal agencies applying to the City for provision of support, infrastructure and financial assistance. Compounding this is that outer metropolitan LGAs such as Rockingham traditionally miss out on support services, with most of the state’s support sector services and infrastructure focused on inner metropolitan or regional locations.

The City actively attends and provides support to professional networks and focus groups aimed to encourage collaborative effort to address identified emerging issues. These networks share the responsibility to advocate to State and Federal Governments for increased sustainability in funding and service provision and adequate infrastructure to meet evolving demographic need. In planning community infrastructure provided by the City, service gaps and needs are addressed throughout community consultative processes. Currently the four city libraries essentially act in providing community hubs of information, social connection points whilst delivering a variety of targeted programs and events.

The City delivers an annual community grants program aimed to provide financial assistance to community groups and individuals to build capacity of the community. Grants are available for events, infrastructure, youth encouragement, travel subsidy and a general grant applicable for diverse requests. The grants range in value from \$150 - \$30,000. Community Capacity Building is the ethos behind the majority of community development delivered initiatives at the City including large community events, programs, education and awareness campaigns and initiatives. The City focuses on assisting to promote state and national campaigns such as Anti-Poverty week, Elder Abuse, Child Protection, Mental Health and Anti-Bullying and has worked in partnership with other agencies to create localized campaigns to target issues such as Family Domestic Violence.

6. City Services

Currently the City provides the following services. They are well-known within the community and sector, and recognised as providing effective, accessible and timely service to the vulnerable populations within the City.

6.1 Youth Services

Strengths

Three Youth Workers, providing advocacy, information, referral, support and case management to all young people aged 12-24 years in Outreach settings regarding issues including but not limited to:

- Case Management
- Suicide Ideation
- Mental Health
- Financial Issues
- Physical Health
- Sexual Health
- Legal Issues
- Accommodation and Homelessness
- Substance and Alcohol Issues
- Employment and Training
- Education
- Recreation
- Social Isolation

One Community Development Officer (Young People) who provides community level educative campaigns and awareness raising in relation to big issues to young people aged 6-24 years, their parents/carers and the wider community including but not limited to:

- Mental Health
- Suicide Prevention
- Resilience
- Sexual Health
- Bullying
- Respectful Relationships
- Body Confidence
- Teenage Depression
- Youth Homelessness
- Family and Domestic Violence
- Legal Issues
- Drug and Alcohol Use
- Safe Partying
- Cyber Safety

Youth Services has been particularly effective in the area of suicide prevention both in terms of education and awareness raising and in dealing directly with young people at risk.

Youth Services currently receives funding for two Full Time Equivalent (FTE) Youth Workers from Department of Child Protection and Family Support (DCPFS), as a preferred provider. With DCPFS currently reviewing their funding model Youth Services will require review following receipt of the outcomes. Possible outcomes include:

- City ineligible for funding
- City required to partner with other youth services providers
- No DCPFS funding to any organisation in the City providing support to young people
- Retain two x Youth Services positions
- The requirement to focus primarily on ATSI young people

Any or some of these outcomes will require the City to consider its level of funding to Youth Services, in terms of the two positions currently funded by DCPFS. It is important to note that the provision of support for at risk young people will remain a key focus.

Possible Improvements

A more positive and stronger working relationship with the Community Capacity Building team, particularly the Youth Development Officers should occur. There is opportunity for both teams to work together in each school holiday period in a joint program and/or event to provide outcomes for all young people including those deemed at risk.

Continued development of the working relationship between the Community Development Officer (Young People) and the Community Capacity Building team is also important, and could provide some significant outcomes. This relationship will be further informed by the Strategy for Children and Young People currently in development.

Additionally the Strategy for Children and Young People currently in development will identify the emerging issues and types of programs needing development by both teams. Further exploration of a Youth Centre will be included and possible partnerships to deliver a Drop-In Youth Space in Rockingham.

6.2 Community Transport

Strengths

The Rockingham Connect Community Transport Service (RCCTS) provides door-to-door transport for transport disadvantaged and socially isolated individuals living in the City of Rockingham, for a small fee of \$1/trip (one trip is one person one way). The service operates two 12 seater mini-vans, one of which is wheelchair accessible. RCCTS collects eligible clients from their homes and transports them to their chosen destination and returns them home again. Destinations include:

- Autumn Centre
- Bunnings
- Rockingham Shopping Centre
- Warnbro Shopping Centre
- Safety Bay Library
- Social Connector Luncheon
- Spud Shed

It must be noted that transport is not provided for individual medical appointments.

In order to use the service, residents must meet the following eligibility criteria:

- No access to private transport
- No access to public transport
- Low income, Concession, Pension or Health Care Card Holder
- Physically able to enter and exit the vehicle unaided.

Possible Improvements

Currently most clients of RCCTS are seniors. A focus on developing destinations that appeal to a wider demographic would result in a more inclusive service. It must be noted that expansion of this service may eventually result in the requirement for a third vehicle and a consequent increased vehicle accommodation allocation and relevant costs. This will also provide additional volunteering opportunities for people which assists in building stronger social connections for residents.

6.3 Social Connection

Strengths

Focuses on building connections for socially isolated people in the community. Current groups and programs operate well, are inclusive, welcoming and accessible.

Includes:

- Baldivis Book Club (Community Support Services)
- Social Connector Lunch Group (Community Support Services)
- Rockingham Connect Community Transport Service (Community Safety)
- Safety for Seniors Programme (Community Safety)
- Pop Up Communities Events (Community Support Services)
- Pop Up Community Events – Seniors (Community Support Services)
- Autumn Centre (Community and Leisure Facilities)
- Neighbours Unite (Community Safety)
- Library Programs and Events (Library Services)
- Walking Groups (Health and Well-being)

Possible Improvements

Interest focused groups for individual demographics need to be developed. For example there are young people within the community who identify as socially isolated for a number of reasons. They may have moved with their families to the state and the City late in their schooling years, not affording them the time to develop a friendship base prior to leaving school. They may have the sort of personality that makes it difficult to make friends or have esoteric interests that are not shared by many. They may be required to provide significant support to an ill or disabled parent or sibling. There are numbers of other groups within the community with similar difficulties for whom social connector groups would have a positive impact on quality of life and mental health.

As identified within this strategy, communities are very diverse in make-up and demographics. There is opportunity for the city to provide guidance to residents who are interesting in creating both formal and informal social connector groups to cater for specific interest areas. These could be recreation or support based groups and may cater for targeted vulnerable population groups to encourage greater social cohesion. Further investigation and resources are to be allocated to enable the city to deliver increased levels of guidance and support to the community to identify these opportunities and to enable them to occur.

6.4 Building Collaborative Groups

Strengths

The building of collaborative groups to deal with complex issues locally is a role the City undertakes. This is due to recognition of the lack of services locally, and in recognition of the City's position that provision of infrastructure and services within the sector is the responsibility of Federal and State Funding bodies. Currently the City provides governance and at times leadership to the Rockingham/Kwinana Homelessness Inter-Agency Group and the FDV Working Group. The City also provides governance support to the Kwinana Rockingham Action for Today's Youth (KRAFTY) group and the Community Support Services Providers Group in an attempt to encourage the development of collaborative approaches to local issues.

Possible Improvements

Whilst the City is a key stakeholder in local networks and provides administrative and governance support to the groups, it has at times created a misconception that the networks belong to Local Government to lead. A focus to improve this moving forward is to ensure that the network provides relevant agenda items to these meetings and opportunities for stakeholders to learn, share and collaborate toward achieving shared outcomes. As this can at times be hard to achieve with agencies competing for funding to deliver service, the city will aim to deliver an overarching strategic approach to encourage collective impact models of service. It will be important for networks to annually review the terms of reference, membership and purpose whilst aiming always offer continuous improvement to the support service sector across the City of Rockingham.

6.5 Awareness Rising

Strengths

The City takes a lead role in promoting state and federal and local campaigns in relation to major issues. This is a way to build community understanding and goodwill, as well as encourage collaborative effort and partnering between local agencies. Currently includes effective and inclusive events promoting:

- Family and Domestic Violence (Community Support and Youth Services)
- Suicide Prevention (Youth Services)
- Youth Homelessness Matters Day (Youth Services)
- Healthy Relationships (Youth Services)
- Child Protection (Community Support and Youth Services)
- Are you OK Day (Youth Services)
- National Youth Week (Youth Services)

- World Elder Abuse Awareness Day (Community Support Services)
- Homelessness Week (Community Support Services)
- Anti-Poverty Week (Community Support Services)
- Mental Health Week (Community Support and Youth Services)
- Seniors and Carers Expo (Community Capacity Building)
- World Disability Day (Community Capacity Building)
- Community Safety Month (Community Safety)
- Cyber Safety (Community Safety)
- Social Connection (Community Support Services)
- White Ribbon Day (Community Support Services)
- National Day of Action Against Bullying and Violence (Community Support and Youth Services)
- Neighbour Day (Community Safety)
- Walk Safely to School Day (Community Safety)
- Stay on your feet (Community Capacity Building)
- Men's Health Week (Community Capacity Building)
- Disability Awareness Week (Community Capacity Building)
- NADOC Week (Community Capacity Building)
- Harmony Day/Week (Community Capacity Building)

Possible Improvements

The City needs to continue to ensure that the issues chosen are relevant to the sector and the community. There is scope to research online tool search as webinars to provide education to the community who may be constrained by time to attend open community activities.

6.6 Advocacy

Possible Improvements

Currently the City undertakes advocacy on an ad hoc basis. It has not developed a prioritised list of issues with identified clear and focused outcomes. The development of a Strategic Leaders group to ensure up to date information in regard to issues, gaps, opportunities and solutions will ensure regular and informed advocacy efforts on behalf of the City and sector.

7. Desired Future Situation

The community support services sector within Rockingham is complex, with some disadvantaged groups enjoying adequate numbers of well-functioning agencies offering support, and others having a dearth of support agencies. The community and agencies often have an expectation that the City to provide or fund services.

The most desirable future situation would be one where:

- A community and sector that understands the role of all levels of Government and the NFP and philanthropic sectors' role in provision of services to those who are vulnerable or disadvantaged. Additionally an understanding that provision of issue specific infrastructure and support services is the business of State and Federal Governments. The City cannot resource the support sector.
- The Manager Community Support and Safety Service (CS&SS) enjoys an established and maintained strategic partnership with the strategic leaders of the major organisations involved in the community support services sector across the City, in order to maintain an understanding of the culture within the sector, the issues, gaps and opportunities.
- That the City models and supports collaborative effort and partnership building as the most effective way forward for the sector in these times of economic uncertainty and funding shortfalls.
- That the City provides awareness raising and education to the community in relation to the major issues impacting their daily lives in order to contribute to the building of an informed, accepting, inclusive and resilient community.
- That Rockingham Connect and Social Connector groups, and events continue to grow as effective tools in building social connections, as part of a Community Development wide focus on building connection as a major tool in promoting mental health and safe and healthy lifestyles for all.
- That Youth Services continues to operate as a best practice service providing the support required by local vulnerable young people in partnership with other peak body providers across the City, whilst continuing to explore opportunities for youth specific venues.

8. The Way Forward

If the City is to meet community aspirations as stated in the City's Strategic Community Plan (2015 - 2025), it will need to build an effective, sustainable and accessible Community Support Services sector providing support to vulnerable populations within the City of Rockingham.

In order to achieve this it will need to remain current with emerging issues, possible solutions, gaps in services, funding opportunities, and, identify services which may be open to consider locating to, or at least satelliting services to Rockingham.

The City will need to advocate from an informed and up to date knowledge base with appropriate Federal and State Government departments and service organisations as well as the Not for Profit (NFP), funding and philanthropic sectors. It will need to focus these advocacy efforts on attraction of services to fill gaps, identification of local low cost accommodation possibilities to facilitate this, and consideration of NFP access to some of the City's currently unused community purpose sites.

For example currently the Child Health Centre in Baldivis is accommodated in the Mary Davies Library and Community Centre. A local NFP, Kwinana Early Years' Service (KEYS) already access the building on Hebron Street in Rockingham previously utilised by the Youth Health Service. There is interest from local NFP's in the previously utilised Station Youth Centre and the forthcoming Baldivis South Community Centre.

A focus is required on advocating for better, more sustainable and collaborative funding models to support and strengthen the NFP sector, as well as build collaborate effort locally as a way to address emerging issues and gaps.

Additionally the City needs clearly defined procedures and policy positions on major community issues in order to provide clear, accepted and accurate responses to community and sector concerns and requests. An example is the City's strategic position that provision of services to those people who are experiencing homelessness and/or at risk of homelessness is the responsibility of State and Federal Governments. The City funds major community infrastructure for the use of the entire community or specific large demographic groups such as seniors. It does not and cannot resource the provision of infrastructure or more services to small issue specific groups within the community. This response holds for a number of other major issues including but not limited to drugs and alcohol, mental health and FDV.

In this way the City will have a clearly delineated and transparent role within the sector, in order to openly respond to increasing calls for assistance from the Not for Profit sector in an increasingly destabilised State and Federal funding environment.

In order to achieve this the following Key elements have been identified as the way forward for the city.

Key Elements

KE 1: Building an Effective, Accessible and Sustainable Sector

The City should take a lead in supporting and strengthening community support service sector organisations current within the City. This can be achieved through provision of support to funding applications, encouraging applications into the City's grants program, providing training opportunities to upskill staff and building collaboration between similar organisations in order to avoid duplication. This strengthens their ability to attract and retain funding.

The City also needs to advocate and lobby, the Not for Profit sector and at all levels of government to attract new services to the City to fill identified gaps and strengthen the sector. Advocacy efforts need to be based on accurate and up to date information regarding the state of play in the sector locally. They also need to be based on strong position statements describing the City role and sector requirements.

Building collaborative effort amongst service providers with a common customer base can also strengthen the sector by assisting in providing more with less.

Actions will include:

- Provision of clear position/policy statements in response to applications for assistance such as support and promote the City's Policy position placing resource responsibilities within the Community Support Services sector with state, federal and NFP organisations. This provides a firm basis for a response to requests for financial and infrastructure support within the sector such as homeless sector support.
- Advocacy for more equitable allocation of services, more services located in Rockingham, sustainable funding, strengthened current services
- Deal with wicked/complex problems and entrenched disadvantage through building collaboration across the sector
- Encourage applications to the City's Community Grants Program from the NFP community support sector
- Build and maintain awareness of vulnerable groups and significant/emerging issues
- Build and maintain partnerships to strengthen responses to particular issues
- Continue to build and sustain sector Networks (KRAFTY, LDAG, Let's Talk, Best Network, Community Support Services Provider Group); and Inter-Agency Groups (Homelessness, FDV)
- Attract and fund training opportunities for the sector using current technology to assist reaching all the community
- Establish a Senior Strategic Leaders group locally to meet quarterly to discuss emerging issues and gaps and identify solutions and opportunities
- Supporting and strengthening the Local Drug Action Group (LDAG) in order to provide education and awareness raising in the area of substance abuse
- Explore opportunities for social enterprise models and increased opportunities for volunteering.

KE2: City Provision of Services

The following provision of services will continue:

- Youth Services providing support, information, referral, advocacy and brief case management to young people 'deemed at risk in outreach locations across the City, dependent on funding. Providing awareness raising sessions, educative campaigns, groups and programs to the broader community of young people aged 0-24 and their families regarding major issues. These will include but not be limited to suicide prevention, mental health, drug and alcohol use/misuse, cyber safety, protective behaviours, positive parenting and healthy relationships.
- Rockingham Connect Community Transport Service connecting transport disadvantaged and often socially isolated residents to social and support opportunities including shopping, libraries, Autumn Centre and community groups and programs.
- Social Connector program providing opportunities for socially isolated people across the demographics to connect to groups such as book clubs, language/cultural groups and luncheon groups, targeted neighbourhood community initiatives and events.
- Community Support Services: awareness raising and educative campaigns re issues including but not limited to FDV, Homelessness, Poverty, Child Protection, Social Isolation, Mental Health, White Ribbon and Elder Abuse.
- Foster partnerships and opportunities with private and the business sector to enhance social responsibility and connectedness.

KE 3 Infrastructure:

- Identify, promote and empower usage opportunities in City buildings
- Identify promote and empower usage opportunities of Community Purpose Sites
- Promote the Information Development Planning Grant including funding for feasibility studies
- Consult and collaborate with Community Infrastructure Planning on inclusion of spaces for NFP's in future community infrastructure developments

9. Measuring success

Record and report both quantitatively and qualitatively on all implementation actions through the Bulletin.

Record and report outcomes from Inter-Agency groups, strategic leadership meetings, collaborative groups.

All educative and awareness raising events/sessions/forums/workshops to be measured both quantitatively and qualitatively:

- Quantitative measurement to include number of sessions and topics, identified audience, numbers attending.
- Qualitative measurement to include the development of a set of statements to be measured at each event/session. Record rate of responses and establish a document to record comments received.

Annually review outcomes achieved in reference to strategy actions.

10. Risk Management

Following the completion of the current review by the Department of Child Protection and Family Services (DCPFS) of its Youth at Risk funding model, the City may no longer be eligible for funding. No funding from DCPFS to the City or any local providers of Youth Services would negatively impact provision of services to vulnerable young people and their families locally.

11. Actions

11.1 New Actions

KE 1: Building an Effective, Accessible and Sustainable Sector

<i>Task</i>	<i>Cost \$</i>	<i>Team</i>	<i>Commence</i>	<i>Complete</i>
<i>Support and promote the City's Policy position placing resource responsibilities within the Community Support Services sector with state, federal and NFP organisations</i>		CS&SS	May 2017	2022
<i>Establish a Senior Strategic Leaders Group meeting quarterly locally ; to focus on emerging issues and services gaps, identifying solutions and opportunities</i>	2,000	CS&SS	April 2017	2022
<i>Review mapping of sector service delivery in the City annually to provide accurate data for advocacy efforts.</i>	10,000	CS&SS	2017/2018	2022
<i>Advocate to relevant bodies for sustainable funding approaches on behalf of the NFP sector</i>		CS&SS	2017	2022
<i>Advocate to large NFPs to satellite their services to Rockingham to fill gaps</i>		CS&SS	2017	2022
<i>Provide governance support and leadership to the sector for collaborative or joined up approaches</i>	2,000	CS&SS	2017	2022
<i>Promote the City's Community Grants program to the sector</i>	624,000	CS&SS	2017	2022
<i>Advocate for more affordable and social housing within the City</i>		CS&SS	2017	2022
<i>Become a member of Shelter WA</i>	500	CS&SS	April 2017	2022
<i>Support and strengthen the Local Drug Action Group as a provider of community education and awareness raising</i>		CS&SS	2017	2022

<i>Task</i>	<i>Cost \$</i>	<i>Team</i>	<i>Commence</i>	<i>Complete</i>
<i>Explore opportunities to provide education and support using technology</i>		CSSS	June 2017	2022
<i>Research opportunities for social innovation/enterprise programs to be introduced in Rockingham</i>		CSSS	2017	2022

KE2: City Provision of Services:

<i>Task</i>	<i>Cost \$</i>	<i>Team</i>	<i>Commence</i>	<i>Complete</i>
<i>Develop and review demographic specific Social Connector Groups with the aim to extend programs</i>	5,000	CS&SS	2017	2022
<i>Extend destinations of Rockingham Connect</i>	45,000	CS&SS	2017	2022
<i>Extend usage of Rockingham Connect to a variety of demographic groups across the City</i>		CS&SS	2017	2022
<i>Review Youth Services following the outcome of DCPFS funding review</i>		CS&SS	June 2017	October 2018
<i>Review/create procedures for internal staff regarding homelessness</i>		CS&SS	April 2017	June 2017

KE 3: Infrastructure:

<i>Task</i>	<i>Cost \$</i>	<i>Team</i>	<i>Commence</i>	<i>Complete</i>
<i>Identify NFPs requiring accommodation in City buildings and work with Community And Leisure Facility to investigate tenancy options and opportunities</i>		CS&SS	2017	2022
<i>Work with Community Infrastructure Planning to identify useable Community Purpose Sites</i>		CS&SS	2017	2022
<i>Advocate to Lotterywest and other funding bodies for local NFPs to gain access to appropriate funding to enable access to Community Purpose Sites</i>		CS&SS	2017	2022

<i>Task</i>	<i>Cost \$</i>	<i>Team</i>	<i>Commence</i>	<i>Complete</i>
<i>Ensure the NFP sector is aware of the availability of the City's Community Infrastructure grants</i>		CS&SS	2017	2022
<i>Consult with Community Infrastructure Planning on inclusion of spaces for NFPs in the planning phase for City buildings</i>		CS&SS	2017	2022

11.2 Ongoing Actions

KE1: Building an Effective, Accessible and Sustainable Sector

<i>Task</i>	<i>Cost \$</i>	<i>Team</i>
<i>Support the Rockingham Kwinana Homelessness Inter-Agency Group</i>	500	CS&SS
<i>Provide ongoing support to local faith based informal organisations providing support to rough sleepers and those on a low income</i>		CS&SS
<i>Support the Community Services Sector network</i>	500	CS&SS
<i>Support the FDV Working Group</i>	2000	CS&SS
<i>Deliver Community Grants Program</i>	520,000	CCB
<i>Support the KRAFTY network</i>	200	CS&SS
<i>Provide ongoing Emergent Issues Forums</i>	2000	CS&SS

KE2: City Provision of Services:

<i>Task</i>	<i>Cost \$</i>	<i>Team</i>
<i>Deliver Youth Services Outreach (ROYS) (DCPFS funded)</i>	180,000	CS&SS
<i>Deliver Youth Services (City funded)</i>	370,000	CS&SS
<i>Deliver Youth and Community Support Services educative functions</i>	72,000	CS&SS
<i>Maintain membership of headspace Rockingham consortium</i>		CS&SS
<i>Deliver Rockingham Connect Services</i>	45,000	CS&SS
<i>Deliver Social Connector programs</i>	7,000	CS&SS
<i>Support ongoing Social Connector groups</i>	250	CS&SS
<i>Deliver Pop Up community events</i>	7,000	CS&SS
<i>Deliver issue specific awareness raising sessions</i>	10,000	CS&SS and CCB
<i>Deliver issue specific emergent issues forums</i>	5,000	CS&SS
<i>Deliver issue specific and demographic specific education sessions</i>	5,000	CS&SS
<i>Continue to provide support to Headspace GLBTI youth support programs</i>		CS&SS
<i>Deliver events focussed on celebrating specific demographics, eg; NADOC, Seniors Expo</i>	25,000	CCB
<i>Deliver community events aimed to increase participation in community life</i>		CCB, Libraries and CS&SS

12. Stakeholder Engagement

<i>Key Stakeholders invited to participate</i>	<i>Contributed? (Yes/No)</i>	<i>Engagement method used</i>
Injury Control Council of WA	Yes	Power Point Presentation
Salvation Army	Yes	Stakeholder Interview
DA/District Director Department Child Protection and Family Services Rockingham	Yes	Stakeholder interview
South Coastal Women's Health	Yes	Stakeholder Interview
CEO SCALES Legal Services	Yes	Stake holder Interview
Rockingham Regional Hospital	No	
CREW	Yes	Stakeholder interview
CEO Kwinana Early Years Group	Yes	Stakeholder Interview
SOUL Soup Patrol	Yes	Email Questions and Responses
Rockingham Aboriginal Advisory Group	Yes	Stakeholder Discussion
Local services providers	Yes	Survey Responses
City of Rockingham Coordinator Youth and Community Support Services	Yes	Stakeholder Interview
City of Rockingham Community Support Officers x 2	Yes	Stakeholder Interview
City of Rockingham Youth Workers	Yes	Stakeholder Interview
City of Rockingham Secretary Youth and Community Support Services	Yes	Stakeholder Interview

13. References

Report: United Nations Universal Declaration of Human Rights

Report: Australian Council of Social Service, 2014, Poverty in Australia

Report: Foodbank, 2016, Fighting Hunger in Australia

Strategic Plan: ACOSS Strategic Plan 2014-2017

Strategic Plan: Western Australian Council of Social Services Strategic Plan 2016-2020

Internet/Websites: City of Rockingham Community Profile ID

Report: Ruah, Perth Registry Week 2016 Less Homeless

Report: Australian Institute of Health and Welfare, 2013 National Drug Strategy Household Survey detailed report

Report: Drug and Alcohol Office Western Australia, Alcohol and Other Drug Indicators Report – South Metro Health Region

Book: Atkinson, J. Nelson, J and Atkinson, C. 2010, "Trauma, Transgenerational Transfer and Effects on Community Wellbeing", in Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice, Purdie, N. Dudgeon, P. and Walker, R. (eds.), accessed 14th April 201

Strategic Plan: Office of Multi-Cultural Interests Strategic Plan 2014-18

Report: ABC News, 2016, Fact file: Domestic Violence in Australia

Report: Department of Social Services Australian Government, 2015, Family and Domestic Violence

Report: Ruah, 2008, Overview of Mental illness

Report: Closing the Gap, 2016 Progress and priorities report 2016

Strategic Plan: Australian Government, 2013, National Aboriginal and Torres Strait Islander Health Plan 2013-2023

Report: Australian Government, 2013, National Aboriginal and Torres Strait Islander Health Plan Companion Document on Commonwealth Government Strategies and Reforms – July 2013.

Power Point Presentation: Injury Control Council of Western Australia, Injury Rates in WA

Power Point Presentation: Rockingham and Kwinana Family Domestic Violence Forum