



FEDERATION
OF COMMUNITY LEGAL CENTRES VIC

ADDRESS CONNECTED LIFE ISSUES

THE BENEFIT OF INTEGRATED SERVICES FOR MENTAL WELLNESS

Royal Commission into Victoria's Mental Health System

Submission Paper 2 of 3
July 2019

ABOUT THE FEDERATION

The Federation is the peak body for Victoria's Community Legal Centres (CLCs). Our members are at the forefront of helping those facing economic, cultural or social disadvantage and whose life circumstances are severely affected by their legal problem.

For over 40 years CLCs have been the heart of a powerful movement for social change, reshaping how people access justice, creating stronger more equitable laws, and more accountable government and democracy.

We pursue our vision of a fair, inclusive, thriving community through challenging injustice, defending rights and building the power of our members and communities.

WE WANT A COMMUNITY THAT IS FAIR, INCLUSIVE AND THRIVING: WHERE EVERY PERSON BELONGS AND CAN LEARN, GROW, HEAL, PARTICIPATE AND BE HEARD.

The Federation:

- ▼ Enables a strong collective voice for justice and equality;
- ▼ Mobilises and leads CLCs in strategic, well-coordinated advocacy and campaigns;
- ▼ Works with members to continuously improve the impact of community legal services;
- ▼ Drives creativity and excellence in the delivery of legal services to communities;
- ▼ Helps make justice more accessible.

Read our strategic plan online:

fclc.org.au/about



THE FEDERATION ACKNOWLEDGES THE TRADITIONAL ABORIGINAL OWNERS OF COUNTRY AND WE PAY OUR RESPECTS TO ELDERS PAST, PRESENT AND EMERGING. WE RECOGNISE THEIR CONTINUING CONNECTION TO LAND, WATER AND COMMUNITY. SOVEREIGNTY WAS NEVER CEDED.

CONTENTS:

1. Overlapping Life, Mental Health And Legal Issues	4
Terms of Reference	5
Summary of Recommendations	5
2. Improve Service Systems That Impact Mental Health	7
2.1 Improve the Fines System	7
2.2 Connect the Family Violence and Mental Health Systems.....	9
2.3 Support Children and Families	10
3. An Integrated Response	11
3.1 Reaching People Who Are At Greatest Risk of Experiencing Poor Mental Health Outcomes	12
Aboriginal People	14
Young People	15
LGBTIQ.....	15
Older People	16
Women Experiencing Family Violence	17
People in Mental Health Units	18
3.2 Prevention and Early Support.....	19
Post-natal Depression and Early Childhood Support	19
Adolescent Mental Wellbeing	20
Preventing Homelessness.....	21
3.3 Supporting the Mental Health Workforce.....	22
3.4 Whole of Government Commitment	25



1. OVERLAPPING LIFE, MENTAL HEALTH AND LEGAL ISSUES

People do not experience mental health problems in a vacuum, life continues, often around them. Problems can build up. When going to work becomes difficult or impossible, debts build up too.¹ Pressure from shame, stigma and anxiety may create family breakdowns and with it, family law matters.² Poverty and homelessness experienced by many struggling with mental health issues, may lead to fines for living in public spaces. Life and legal problems overlap, and if not addressed early, or at all, can snowball.³ This results in the development of mental health conditions,⁴ or the exacerbation of existing conditions.

People who experience mental health conditions often need more than medical care. As a community, the best response we can have is to provide wrap around support services, which put the mental health consumer at the centre of our approach.

Wrap around services should include many elements of assistance tailored to the person's needs, whether these are medical care, social care, housing, employment services, or legal assistance and representation.

Health and legal problems are intrinsically linked, particularly for people who experience mental health conditions. More people ask their doctor or nurse for legal advice than a lawyer.⁵ For a person experiencing a legal problem, the problem does not appear to the person as a statement of legal claim; it is more likely to appear as a feeling of stress and anxiety. It feels like a health problem.

Mental illness is both caused *by* and a cause *of* legal problems. Over half of the people who experience a legal problem say that it has an impact on their daily life: 19 per cent said it resulted in stress related illness, 18 per cent said it caused physical ill health.⁶

The Victorian Access to Justice Review found that people who experience a disability are particularly vulnerable to having a legal problem, and those who have experience of mental illness have significantly more legal problems compared to people with other disabilities.⁷

The Legal Australia-Wide Survey (LAW), the first comprehensive research into legal needs in Australia, found that legal problems tend to cluster and then compound, particularly for people who experience disadvantage. A third of all respondents, accounted for four-fifths of all legal problems. In other words, having a legal problem itself increases the likelihood of experiencing further legal problems, with vulnerability increasing over time the more legal problems someone experiences.⁸ Over 60 per cent of people who experienced more than six legal problems reported having mental illness.⁹

At least 20 per cent of the people who community legal centres assist and represent experience mental health issues, and we believe this is underreported, particularly when there is consideration of trauma. For our specialist legal service, the Mental Health Legal Centre, 100 per cent of the clients they work with have a mental health condition.¹⁰ At our specialist centre for young people, Youthlaw, 80 per cent of the people they assist experience mental health issues.¹¹ The targeted programs and projects that our centres run see a large number of people with mental health issues, such as Justice Connect's Women's Homelessness Prevention Program, where 84 per cent of the women accessing the service reported having a mental illness.¹²

Our community legal centres have a wealth of experience of the needs of people with complex and intersecting mental health and other health issues and how they impact and overlap with their lives. Our knowledge has informed how we work with our communities.



Terms of Reference

This submission addresses:

- ▼ **Prevention:** integrated services assist in addressing the social determinates of health, by providing meaningful and accessible support in communities which experience disadvantage and discrimination
- ▼ **Early intervention, crisis management, and ongoing support after a crisis:** recognition that addressing people's multiple and complex legal issues is a necessary step to mental wellness

The integrated nature of the work outlined in this submission means that our programs cut across a number of the Royal Commission into Victoria's Mental Health System (the Royal Commission) terms of references and formal outline of questions.

In particular this submission seeks to address terms of reference 1, 2, 4 and 5, and respond to the Royal Commission's outline of questions 2 to 8.

This submission provides examples of just some of the many integrated services being run by our 48 specialist and generalist community legal centres across Victoria. Most services are precariously funded, with services regularly having to compete for funding to keep their doors open.

The Federation of Community Legal Centres would welcome the opportunity to provide more details to the Royal Commission on the services community legal centres and our partners provide to people experiencing mental health conditions and communities in need.

Summary of Recommendations

This is paper two of three. The recommendations in this paper follow on from the previous paper.

22. Amend Section 9 of the *Fines Reform Act* to require Fines Victoria to waive or reduce costs where a person's mental health (special circumstances) substantially contributed to the person being unable to attend to their infringements in a timely manner.
23. Introduce a new legislative discretion to set aside a seven-day notice where the person has a mental health problem or other special circumstances. This would mean that the person is not excluded from applying for enforcement review, to the Family Violence Scheme or for a Work and Development Permit after the seven-day notice has expired.
24. Retain the Special Circumstances List of the Magistrates' Court – the specialist therapeutic jurisdiction for people with fines with serious mental health conditions and other special circumstances.
25. Adopt policies to encourage more agencies to become Work and Development Permit accredited, particularly for medical and mental health care. This includes funding for Work and Development sponsors.
26. Roll out Streamlinefines to more inpatient and community outpatient psychiatric facilities.
27. Coordinate the response to achieving the goals of the Royal Commission into Family Violence, Access to Justice Review and address the overlapping mental health issues: ensure the Access to Justice Review recommendations, in particular 3.4, 3.5, 6.20 and 6.21 are implemented alongside, and give full effect to, the Royal Commission into Family Violence and the forthcoming recommendations of the Royal Commission into Victoria's Mental Health System.



28. To achieve the goals of the Royal Commission into Family Violence alongside addressing the mental health needs of those impacted by family violence, implement a timeline and plan for implementation of legal triage in the Orange Door and increase access to legal services more broadly for family violence and mental health.
29. Link women and families, including pregnant women, with culturally appropriate legal, mental health and wrap-around supports, at the earliest opportunity and before any consideration of removing children.
30. Support and expand existing integrated services and establish new services to remove barriers to access and address multiple needs for people experiencing mental health and related issues.
31. Provide ongoing funding for existing integrated services and a minimum of four-year funding blocks for new integrated services, in recognition that partnership and workforce development take time to establish and develop relationships of trust and shared learning.
32. Implement the Access to Justice Recommendation 3.4 to support integrated services, to meet service delivery gaps experienced by people with complex mental health needs in our community.
33. Develop a whole-of-government budget process that is responsive to holistic needs of communities and individuals in need of support.
34. Work with services and communities to develop nuanced outcomes measurement of successful program delivery for people who experience multiple and complex vulnerabilities and commit to consistency across departments and funding providers.



2. IMPROVE SERVICE SYSTEMS THAT IMPACT MENTAL HEALTH

Evidence shows homelessness,¹³ financial stress,¹⁴ family violence¹⁵ and other legal problems¹⁶ cause mental health problems. Early legal support is a protective element that can prevent the mental illness developing or stop it from becoming as severe.¹⁷

Legal support and representation empowers people to understand the situation they are in, their rights and responsibilities, and can help resolve the stressful situation. For example, a person facing eviction into homelessness can, with the help of a lawyer, have an unreasonable compliance order revoked or an arrears payment scheme negotiated.

A community lawyer can assist a person under financial stress to have an unfair pay day loan debt wiped, or advocate to the Magistrates' Court for a reduction in a toll road fine (too often a person can be appearing before the Court without representation and up to \$100,000 in toll road fines).

A woman experiencing family violence can have legal protections put in place to allow her to escape the violent situation safely and allow her to clean up often a web of financial abuse and debt that the relationship might have caused. All of these complex life situations create mental stress, anxiety and anguish that can escalate into lifelong mental conditions.¹⁸

We need early support, as well as changes to the systems that prevent people from recovering.

2.1 Improve the Fines System

The fines system disproportionately impacts those who experience mental illness, alcohol and drug dependencies and other forms of disadvantage.¹⁹ Victoria Legal Aid reports that of the five million fines issued in 2018, only 26,000 were revoked on special circumstances - on grounds such as mental illness, disability, drug addiction and homelessness.²⁰

Enforcement processes can be difficult to navigate for anyone. For someone who experiences mental illness, there are additional hurdles to overcome in managing this debt,²¹ undermining their ability to adequately access remedies to challenge the fines and ultimately unsettling their mental health.

Amending the *Fines Reform Act* to waive or reduce costs where a person's special circumstances contributed to the person being unable to pay the fine on time, rather than requiring a nexus, would reduce the number of people with mental illness issued for fines which they do not understand nor have the ability to pay. This has been introduced for people experiencing family violence and should be broadened.

The Special Circumstances List at the Magistrates' Court provides for people who experience mental illness, serious addiction, family violence or homelessness²² to have their matters heard in a therapeutic setting. In 2016-17, there were over 55,000 matters referred to this list.²³ This allowed people with mental illness, and related issues such as problematic drug use or homelessness, to have all their fines dealt with in one hearing before a Magistrate who understood the complexity of the issues the person faced.

The Magistrates' Court intends to abolish the Special Circumstances List in anticipation of changes in processing fines. However, while people who experience mental illness and other vulnerabilities continue to



receive fines (at a higher rate than otherwise well people),²⁴ the Special Circumstances List should be maintained.

To assist people who cannot pay fines through complex life circumstances, including poor mental health, the Work and Development Scheme was introduced in Victoria in 2017.²⁵ This allows people to pay off fines through participating in medical treatment or care, education, counselling, or unpaid work.²⁶ Currently, there are not enough sponsors to allow all the people who would like to participate in the program to be able to do so. For people who experience mental illness, the ability to pay off multiple fines that may have accumulated during an episode of ill health, by seeking and receiving treatment, would be hugely beneficial. More people need support to access the scheme, through appropriate time limits for accessing the program and by promoting more services – particularly medical and mental health services – to become accredited work and development sponsors.

Streamlinefines is an innovative partnership between Victoria Legal Aid, WEst Justice, Moonee Valley Legal Service and Peninsula Community Legal Centre that combines technology, health justice partnerships and bulk processing of similar infringement matters. The aim is to address the ever-increasing number and complexity of special circumstances fines matters being handled by Victorian Legal Aid and community legal centres. The project has significant advantages to helping people who experience mental health illness to resolve fines they will unlikely ever be able to pay and that are causing them stress and anxiety: and outreach should occur in areas of most need, such as inpatient and outpatient psychiatric care.

Stephanie's Story

Woman experiencing homelessness and mental health concerns takes 34 months to resolve her fines through the infringements system

Stephanie is a middle-aged woman with a history of homelessness, who suffers from an acquired brain injury and depression. She also experiences financial hardship and is reliant on a Newstart Allowance. Stephanie approached her community legal centre after she had been issued with five fines from July 2012 to July 2013 for travelling without a valid ticket on public transport.

Stephanie was homeless after having to leave her rental property when her relationship ended. She was paying her ex-partner to be able to sleep on a couch in his office, but could not stay at the office during business hours.

The fines were generally issued when Stephanie was travelling to a suburban soup van for dinner (there were no kitchen or bathroom facilities in the office). Between September 2013 and February 2014, Stephanie's community lawyers obtained a variety of support letters from treating doctors, support workers and the operator of the soup van. The letters commented on her homelessness and mental health concerns.

The court process started in February 2014 and was not resolved until May the next year. During that process, Stephanie was required to provide detailed evidence that more clearly identified the link between Stephanie's special circumstances and the fines.

The fines were unconditionally dismissed by the Magistrates' Court. Despite this ultimately positive outcome, 34 months passed between the time Stephanie was issued her first fine in July 2012 and the dismissal of this fine by the Magistrates' Court.

The process could have been resolved more simply if the link between the fines and her special circumstances had been identified by what is now Fines Victoria, before the matter went to Court.



Recommendations

22. Amend Section 9 of the *Fines Reform Act* to require Fines Victoria to waive or reduce costs where a person's mental health (special circumstances) substantially contributed to the person being unable to attend to their infringements in a timely manner.
23. Introduce a new legislative discretion to set aside a seven-day notice where the person has a mental health problem or other special circumstances. This would mean that the person is not excluded from applying for enforcement review, to the Family Violence Scheme or for a Work and Development Permit after the seven-day notice has expired.
24. Retain the Special Circumstances List of the Magistrates' Court – the specialist therapeutic jurisdiction for people with fines with serious mental health conditions and other special circumstances.
25. Adopt policies to encourage more agencies to become Work and Development Permit accredited, particularly for medical and mental health care. This includes funding for Work and Development sponsors.
26. Roll out Streamlinefines to more inpatient and community outpatient psychiatric facilities.

2.2 Connect the Family Violence and Mental Health Systems

Women who experience gender-based or family violence are more likely to experience mental illness during their life: 77 per cent of women who have experienced gender-based violence report anxiety disorders, 56 per cent report post-traumatic stress disorders, and 35 per cent (one in three) had made suicide attempts.²⁷ One third of people who commit suicide in Victoria have exposure to interpersonal violence: making up half of all female suicides and a third of all male suicides.²⁸

For some women and older people who are victims of family violence, their abusers use the mental health system to perpetuate their abuse by forcing them into compulsory treatment. Special training and awareness should be provided in relation to how family violence perpetrators may use the system against their intimate partner or family member.

The Victorian Access to Justice Review found that for women experiencing family violence, access to legal services is a critical aspect of their survival and recovery.²⁹ Family violence victims are 10 times more likely to have legal problems than others in the community.³⁰ If these problems are not addressed, they lead to severe adverse impacts for these women individually and on their communities.

The Access to Justice Review recommended that legal services be integrated with other services to improve access to justice, particularly so legal services can be provided to complement a person's care.³¹ The Review also recommended that the Victorian Government increase the amount of public money provided for legal assistance, as well as recommending that the Commonwealth Government contributes their share.³²

Despite the Victorian Government accepting these recommendations, their implementation has been slow. The impact is felt acutely in how they relate to the state-wide response to family violence and the opportunity to address the mental health of women experiencing family violence.



What is needed now, is recognition that a coordinated approach between family violence and mental health is critical, as family violence rarely occurs without mental health implications. Accessing justice is necessary to empower and overcome family violence and mental health issues.

Currently, despite the ongoing and increased demand for legal assistance, there was no increase in funding for legal services to be part of the new Orange Door family violence hubs. This missed an important opportunity to ensure holistic support is provided for women to escape family violence safely.³³

Building on the implementation of the Orange Door, ensuring access to justice, legal assistance and mental health is a core element of the services provided is the necessary next step in reforming our service systems.

Ensuring women experiencing family violence are able to identify and assert their legal needs, and have access to the right services to address their legal problems, like personal safety, secure homes, immigration support, parenting advice and good financial counselling is essential. It's time to ensure the foundations are laid for improved access to justice for women escaping family violence, both as a preventive for mental illness, and to alleviate its causes.

Recommendations

27. Coordinate the response to achieving the goals of the Royal Commission into Family Violence, Access to Justice Review and address the overlapping mental health issues: ensure the Access to Justice Review recommendations, in particular 3.4, 3.5, 6.20 and 6.21 are implemented alongside, and give full effect to, the Royal Commission into Family Violence and the forthcoming recommendations of the Royal Commission into Victoria's Mental Health System.
28. To achieve the goals of the Royal Commission into Family Violence alongside addressing the mental health needs of those impacted by family violence, implement a timeline and plan for implementation of legal triage in the Orange Door and increase access to legal services more broadly for family violence and mental health.

2.3 Support Children and Families

Inadequate mental health supports for women and children experiencing family violence in the child protection system impede family reunification and increase permanent separations of children from their families.

The Royal Commission into Family Violence recognised that family violence profoundly and negatively impacts women's mental health.³⁴ Women victims of family violence need mental health and other supports, before any consideration of removing their children. Too often, women and children are further traumatised by being separated, following historical or ongoing family violence.

The longer-term mental health and trauma of separating mothers from their children significantly affects women and children,³⁵ and results in poor health outcomes for newborns, including lower birth weights, premature neonate, and foetal stress and trauma.³⁶ Additionally, there are long-term impacts of mother and child separation, and the impact of poor treatment of children in out-of-home care (especially children with special needs).³⁷



People who are removed from their families as children and put into out-of-home care are more likely to end up in the criminal legal system. We need to stop the cycle before it begins, by supporting families with wrap around holistic and culturally appropriate support. The Federation of Community Legal Centres' submission paper three, *End Criminalisation*, provides specific recommendations on ways to avoid criminalising children in and out of home care.³⁸

Our members inform us that too many children are removed from their mothers and families due to a lack of access to mental health supports. This is particularly the case for Aboriginal children and families who face the effects of entrenched systemic racism and intergenerational trauma. The Federation endorses both the Victorian Aboriginal Legal Service's and Djirra's submissions in full. However, we particularly draw the Commission's attention to their recommendations in this area, due to the record level of Aboriginal children in Victoria being taken from their families and communities.

The approach in this area should be to support families at the earliest opportunity, and prevent child removal.

Recommendation

29. Link women and families, including pregnant women, with culturally appropriate legal, mental health and wrap-around supports, at the earliest opportunity and before any consideration of removing children.

3. AN INTEGRATED RESPONSE

Fines, family violence, and child protection impact people's mental health but they are only a few of the legal problems a person who experiences systemic disadvantage and mental health issues may face. A person-centred holistic response is required to address the multitude of overlapping issues.

One of the tasks of the Royal Commission into Victoria's Mental Health System is to determine 'how to deliver the best mental health outcomes and improve access to the navigation of Victoria's mental health system for people of all ages'.³⁹ Addressing the overlapping and intersecting systemic health issues will be a necessary element to delivering the best mental health outcomes and improving access to the navigation of the system, particularly for those who experience systemic disadvantage.

These are the people most impacted by the negative impacts of the social determinants of health. The World Health Organisation defines social determinants of health as:

'The conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.'⁴⁰

What has proven to be successful to address social determinants of health are community based partnerships or integrated services.⁴¹ This is where healthcare professionals, social workers, financial services, educational institutions and legal services work together to provide holistic support and care when and where people need it most. Integrated services focus on providing help, care, and support to the whole person, instead of forcing someone to seek different services to have their varied needs met.



The Victorian Access to Justice Review found that ‘integrated and collaborative forms of service delivery’ better targeted disadvantaged and vulnerable groups and had positive impact on their health.⁴² The Review found:

‘Community legal centres in Victoria have been at the forefront of finding new ways to provide legal help to people facing disadvantage, hardship, and discrimination’.⁴³

Integrated models of legal and other services are used by community legal centres to address their communities’ needs. Integrated services create better health and wellbeing outcomes, because they treat a person as an *individual* with complex needs. Rather than responding to whatever need is the most pressing or urgent, integrated services can deal with needs simultaneously, not needing to prioritise one need over the other. For example, medical care with legal assistance can treat suicidal ideation alongside a tenancy problem. Resolving the housing situation may seem a secondary need, however addressing both needs together creates stability and security for the person, which can assist their path to recovery. The Australian Productivity Commission found that:

‘Holistic services are a particularly effective mechanism for disadvantaged individuals to have their legal needs addressed. For example, close connections between disability advocates and lawyers may help to overcome the barriers faced by people with disabilities who may need additional assistance to understand information or communicate with their lawyers.

Holistic services can ‘help to prevent the degeneration of circumstances that can lead to further problems for users by targeting a number of their problems at once.’⁴⁴

‘Integration’ can take different forms including co-location, multidisciplinary teams or partnerships with other community services. Models of integrated services that community legal centres are involved in include, but are not limited to:

- ▼ Community legal centres employing one or more social workers, financial counsellors, or family violence workers;
- ▼ Community legal centres that are based or auspiced by a health or other partnership services settings; or
- ▼ Social service organisations that employ a lawyer within their service.

For people, particularly those who never had or no longer have family and carers who are able to support them, integrated services act as a safety net, to stop them falling through the gaps of the mental healthcare and social services systems.

Integrated services take the pressure off our traditional mental health system and the nurses, social workers and other workers, who are often asked to do too much, or who take on too much feeling their patients have no one else to turn to.

3.1 Reaching People Who Are At Greatest Risk of Experiencing Poor Mental Health Outcomes

Unsurprisingly, poverty, inequality, racism and discrimination are damaging to the mental and physical health of Victorians.⁴⁵ As someone’s socioeconomic status declines, experiences of racism increase. In fact, Victorians who frequently experience racism are almost five times more likely to have poor mental health than those who do not.⁴⁶



Social determinants of poor health occur in communities which are strong and resilient. People in these communities often have to deal with more complicated issues that impact their mental health, with less resources and support than advantaged communities have.⁴⁷

People with a low socioeconomic status and people experiencing mental illness are least likely to have the capability to respond to their legal problems, which in turn compounds the problems they have.⁴⁸ People of low socioeconomic status often report feeling despair, hopeless, overwhelmed and of being undeserving of justice.⁴⁹

For many people, mental illness is a direct cause of poverty. For people experiencing mental illness, finding and maintaining a job can be difficult.⁵⁰ In fact, 34 per cent of people receiving Disability Support Pension report having a mental illness.⁵¹ For many others, because their experience of mental illness may be episodic or the barriers in the application process are too numerous, access to the Disability Support Pension is out of reach,⁵² leaving them to rely on the lower Newstart Allowance rate, of just \$278 a week.⁵³

Racism and discrimination also increase the likelihood of mental illness, particularly for Aboriginal people. The Aboriginal Experiences of Racism survey conducted by VicHealth in 2010-11 found that almost all of the Aboriginal Victorians surveyed had experienced racism in the last 12 months.⁵⁴ The people who experienced the most racism, reported the most psychological distress.⁵⁵

People who experience poverty, discrimination, and mental health problems are more likely to experience life problems that have legal solutions, and they are more likely to experience more than one.⁵⁶ When they do have a problem, they are less likely to seek help.⁵⁷

Effectively, to seek a legal solution to a problem, a person must identify the legal dimension of their problem, recognise they have a right that has been breached, know and understand the justice system or have the capacity to gain this information. Then, they must communicate and explain their problem to others in sufficient detail, know how to act in a timely manner and they must be able to perceive a just or desired outcome.⁵⁸ It is no wonder, that in the midst of a crisis, particularly a mental health crisis, seeking help can be overwhelming.

A person experiencing a mental health crisis does not generally book an appointment with a community lawyer and turn up, particularly if their mental health problems overlap with other complex issues such as discrimination, poverty or problematic alcohol and other drug use. The complexity of their lives, their isolation, financial disadvantage and low awareness of legal issues make them more reluctant to seek help than people who do not face these barriers.⁵⁹

Many people who experience discrimination, systemic racism, or have been in prison, understandably have a conscious or subconscious mistrust in the system and are less likely to engage.⁶⁰ This is particularly true of young people.⁶¹ Furthermore, young people who experience violence and trauma are likely to have a mistrust of authority, which makes them even less willing to seek assistance.⁶²

One of the biggest barriers for people at greater risk of poor mental health is their limited capacity to find and access all of the services they need: *they need the services to find them.*

Following are examples of where community legal centres have reached out to ensure people most at risk of experiencing poor mental health, have the access to justice barrier removed: Aboriginal people, young people, LGBTIQ, older people and people in mental health units.



Aboriginal People

Colonisation, racism, and lack of appropriate services continues to impact on Aboriginal people in Victoria.

Aboriginal Victorians experience far higher rates of mental illness than the rest of the population: they are three times as likely as non-Aboriginal people to experience high or very high psychological distress; 35 per cent of Aboriginal people have been diagnosed with depression and anxiety (compared to 20 per cent non-Aboriginal people). Intergenerational trauma is a contributing factor; almost half of Victoria's Aboriginal people have a relative who was forcibly removed. Today, Aboriginal children are 12 times more likely to be in child protection and for 60 per cent of Aboriginal children who are removed from their parents, mental health is the driving factor.^[i]

Djirra (formally Aboriginal Family Violence Prevention and Legal Services Victoria) and the Victorian Aboriginal Legal Service have both made submissions to the Royal Commission into Victoria's Mental Health System outlining their recommendations for improving mental health of Aboriginal people.

The Federation of Community Legal Centres endorses these submissions and the rights of Aboriginal people for self-determination. There is an acute need to support specialist services in order to overcome barriers to access and provide environments where Aboriginal women feel safe and heard. The connection to community and integrated ways of working in specialist Aboriginal and Torres Strait Islander services such as Djirra and the Victorian Aboriginal Legal Service are vital to ensuring the mental health and wellbeing of Aboriginal and Torres Strait Islander peoples. In particular, Aboriginal and Torres Strait Islander women who face significant barriers in accessing culturally safe and effective mental health services.⁶³

Djirra Koori Women's Place

Djirra's Koori Women's Place is an initiative that empowers Aboriginal women to lead independent and thriving lives as they work through adverse circumstances such as the ongoing trauma of family violence. The Koori Women's Place is culturally safe, providing appropriate support as a result of client relationships rooted in trust and a connection to culture. The Koori Women's Place seeks to overcome the isolation that many Aboriginal women affected by family violence experience, through creating connections with other Aboriginal women in a welcoming space that fosters feelings of safety and cultural acceptance. Through the Koori Women's Place, Aboriginal women are able to access required supports, including mental health support in addition to cultural programs that strengthen and affirm cultural identity, sense of belonging and self-worth.

These integrated ways of working provide assistance for not only the pressing family violence issues and resulting mental health and legal needs but also enable Aboriginal women to access tools for mental wellbeing and address deeper systemic and intergenerational traumas. This unique assistance and support assists to create a foundation of cultural pride and safety that will ripple through to not only other Aboriginal women but their families and communities as well.



Young People

Young people who are homeless are particularly vulnerable to lifelong poor mental health outcomes.⁶⁴ To reach these young people is difficult. Their lives are chaotic as a result of unstable housing and substance abuse problems which itself is a consequence of high rates of dual diagnosis.

Mental health and legal service for young people

Check-in

YouthLaw is a specialist community legal centre that provides legal assistance to young people under the age of 25. Eighty per cent of the young people YouthLaw sees have experience of mental health issues, and most of these are a result of childhood trauma like abuse, neglect, their parents' own mental illness or substance abuse.

Frontyard Youth Service, partnering with YouthLaw, recently established a mental health program called *Check-in*, designed for young people between 12 and 25 displaying psychological distress and who are at risk of or who are experiencing homelessness,⁶⁵ and with it, lifelong poor mental health outcomes.⁶⁶

To reach these young people is difficult. Their lives are chaotic as a result of unstable housing and substance abuse problems that have occurred in relation to their mental health conditions.

The service provides legal assistance for young people such as unpaid fines, assistance in family violence matters, or to resolve tenancy issues.

The service helps young people navigate the health service and get the therapeutic and social support they need, addressing a large gap in service delivery. Because these young people are most at risk they often present with challenging behaviours, so the specialist support team helps them get their lives back on track as well as prevent them from self-harming or suicide.

LGBTIQ

Lesbian, gay, bisexual, intersex, and/or queer people (LGBTIQ) people report experiencing high rates of disadvantage on key indicators including mental illness, homelessness and suicidal ideation.⁶⁷ As many LGBTIQ people are distrusting of the legal system, due to previous discrimination when seeking legal help in the past,⁶⁸ or their well-justified fear of being "outed" to friends and family in order for them to seek the help they need, legal outreach is critical.

LGBTIQ Legal service

Last year, the St Kilda Legal Service and Thorne Harbour Health launched Australia's first dedicated LGBTIQ health justice partnership – the LGBTIQ Legal Service.

Thorne Harbour Health, formerly the Victorian AIDS Council, is a community-controlled organisation which provides a range of health and allied services to people living with HIV and the broader LGBTIQ community.⁶⁹



Eddie's Story

Connected services

Eddie, a bisexual man in his 50s, has significant mental health, drug and alcohol issues relating to traumatic personal history. When his social housing home was destroyed in an act of violence by a stranger, he was left homeless.

It was his specialist LGBTIQ drug and alcohol case manager who identified that he needed legal assistance and connected him with the in-house LGBTIQ community lawyer. His community lawyer was able to successfully advocate for him to the Department of Health and Human Services to urgently find him a new home. His community lawyer then assisted him to make a victims of crime application and make out a will (which he had been wanting to do for years but couldn't afford to).

Eddie would have been unlikely to receive legal help without specialist LGBTIQ health services being integrated with the legal service.

Eddie now has a new home and financial support from the victims of crime claim, which has reduced the ongoing mental impact of the violence act. By writing his will, he has taken back control over his life and his financial affairs.

Older People

Up to one in 20 older Victorians experience elder abuse, which is abuse perpetrated by a person in a position of trust with the older person.⁷⁰

A person experiencing mental illness, disability or social isolation is at a high risk of also experiencing elder abuse.^{71,72} However, an older person who is otherwise well and healthy may experience abuse perpetrated by an adult child who is unwell. Experiencing elder abuse can have a detrimental effect on the older person, often resulting in depression, anxiety and stress or exacerbating existing mental illness.

The complex nature of elder abuse and the family relationships involved means older people are less likely to ask for help. Legal assistance that is provided alongside healthcare and other support has been proven to be particularly effective intervention.⁷³ Such approaches are run by many of our community legal centres that address elder abuse, including: Seniors Rights Victoria, Justice Connect Seniors Law, and Eastern Community Legal Centre.

Health justice for older people

Evaluation of Justice Connect Seniors' Law program, found that over two years, they addressed 436 legal issues, with referrals increasing 112 per cent in the second year. Once there is awareness of the issue and awareness of support available, the need for services increases. Before seeing a lawyer, 70 per cent of the people said the issue was causing them stress. After receiving help, nearly 60 per cent felt less stressed.⁷⁴



Peter's Story

Elder abuse using mental health system as form of control

Andrew is 50 years old and he moved into his father's home. He took his father, Peter, to a lawyer to appoint himself as his father's enduring power of attorney. Andrew was also in financial difficulty and wanted to receive his inheritance from his father so he began a vicious campaign to convince his father that he was losing his 'marbles' and the capacity to manage his own affairs.

Andrew took his father to medical appointments and convinced Peter's GP that Peter was exhibiting signs of dementia. Peter was put on medication that produced a sedative-like effect. Andrew then arranged a neuropsychological assessment of his father, took him to his appointment and ensured he had taken his medication beforehand. Unsurprisingly Peter failed the test and Andrew made a successful application to VCAT to become Guardian and Administrator of his father and all of his affairs.

With legal assistance of Senior's Rights Victoria, Peter was taken off his dementia medication and his condition improved markedly. He went to VCAT after successfully passing his neuropsychological assessment and revoked the previous order, and was allowed to appoint his own trusted attorneys.

Women Experiencing Family Violence

The mental impact of family violence manifests most frequently as depression, anxiety, post-traumatic stress and suicidal ideation.⁷⁵ Women who experience family violence are twice as likely to be depressed, anxious or abuse alcohol.⁷⁶ Additionally, high levels of violence are linked to bipolar disorder, psychosis, schizophrenia and eating disorders.⁷⁷

Delayed access to justice, sometimes due to lack of integration with other services, can cause long-lasting trauma and mental health impacts. This can be particularly acute for women and their children experiencing family violence.⁷⁸

Family violence, with its mental health and legal implications, requires a holistic, person-centred response.

Women's Legal Service Victoria

Link Virtual Outreach Program

Women's Legal Service Victoria (WLSV) works with and for women experiencing particular disadvantage to address legal issues arising from relationship breakdown or violence. Their Link Virtual Outreach Program links specialist legal advice and representation to women experiencing family violence across Victoria. Using Skype and other internet-based tools, the project coordinates a virtual legal practice, allowing WLSV lawyers to meet with clients from multiple locations around the state during any one day.

Link provides assistance to some of the most disadvantaged and isolated women in Victoria, partnering with regional social services agencies including health centres, family violence refuges and community legal centres.

The program also conducts training for family violence partner organisations, based on the Critical Legal Issues Map developed by WLSV, which helps to identify critical legal need and facilitate timely referrals for



legal advice. The Map provides family violence practitioners with the knowledge and tools to identify legal need and refer women for urgent help. The Map training provided to their family violence partners around Victoria ensures that women are referred for legal advice and representation before a legal issue escalates to a crisis.

People in Mental Health Units

Victoria's Auditor General's report into mental health access, showed there were 184,000 Victorians with severe mental health illness, but there are only 72,852 registered users of mental health services.⁷⁹ The lack of availability of services means that from 2009 to 2016, demand for acute admissions increased by 19 per cent.⁸⁰ The lack of services means that the severity and complexity of needs have increased⁸¹, with holistic support necessary to ensure the mental health needs are met, especially given the length of stay is decreasing and unplanned readmission increasing.⁸² Resolving issues causing stress and complexity in a person's life, such as family violence, housing, or unpaid fines during this brief contact with the health system, can assist sustainable recovery when they leave hospital.

WEstjustice Community Legal Centre and Werribee Mercy Hospital Mental Health Unit

Werribee Mercy Hospital's health justice partnership with WEstjustice assists clients residing in the Werribee inpatient psychiatric unit primarily with family violence, fines and debts. These financial stressors are recognised as significant contributors to stress and reduced wellbeing.⁸³ Since its establishment in mid-2016, the service has assisted over 230 clients to have their fines cancelled and debts waived.

Clients have told us that this has impacted positively on their mental health and their capacity to recover from inpatient care without the stress of financial pressures, such as debt collectors and the Sheriff pursuing them. The partnership has also been beneficial for the Mercy Hospital and their patients. The Mercy Hospital defined the project as a highlight:

'Werribee Mercy Hospital's partnership with WEstjustice is benefitting some of the most vulnerable people in our community...[the service] offers patients attending antenatal clinics and mental health services the opportunity to seek confidential advice in relation to matters of family violence, fines and personal debt... the service is supporting Werribee Mercy Hospital patients and the state government's priority to respond to family violence.'⁸⁴

Recommendation

30. Support and expand existing integrated services and establish new services to remove barriers to access and address multiple needs for people experiencing mental health and related issues.



3.2 Prevention and Early Support

To be effective, intervention has to occur in the critical point of the cycle – before the life or legal problem spirals out of control and begins to cause or exacerbate mental health problems.

The Victorian Access to Justice Review found:

Integrated service delivery models offer a preventive approach to reduce and resolve complex social, legal, and health problems. These problems are often interrelated, and if not dealt with at an early stage, can contribute to people being the recipients of a range of public services over the course of their lifetime. Crisis points for many people can involve a legal issue, for example, about debt, housing, family relationship breakdown, family violence, substance abuse, or the death of a family member.⁸⁵

Community legal centres have worked with their communities to identify points of critical need for mental health and wellbeing, and are delivering targeted services to these communities to prevent problems escalating and to try to avoid lifelong mental illnesses developing.

The following models highlight how intervening early with legal, health and related supports can prevent and reduce mental health issues.

Post-natal Depression and Early Childhood Support

Family violence against a woman often first occurs during pregnancy or at the birth of her child.⁸⁶ A new mum who experiences family violence is four times more likely to also experience post-natal depression than a mother who has not experienced family violence.⁸⁷

Witnessing or experiencing family violence as a child also increases the likelihood of requiring mental health care as an adult. Data shows that 40 per cent of men, and somewhere between 50-90 per cent of women accessing mental health services have experienced family violence, with most experiencing or witnessing it when they were children.⁸⁸ Children exposed to family violence in their first year are more likely to have emotional/behavioural difficulties at the age of four.⁸⁹

Stopping the cycle before it begins, by intervening during pregnancy or the early days of motherhood makes sense. This is why a number of community legal centres provide legal support and referrals within maternity hospitals and maternal child health centres.

MABELS – Early intervention family violence legal assistance

MABELS is the health justice partnership Eastern Community Legal Centre runs with Boorndawan Willam Aboriginal Healing Service and local councils.

Access to this support significantly increases legal assistance received. One local council had family violence referrals increase by more than 18 times the pre-program rate.⁹⁰

Seeing a community lawyer allows the new mother to understand the nature of family violence and the options and supports available for her and her children. The community lawyer can put in place a safety



action plan that is tailored to the woman's needs: this may be an intervention order and safe accommodation, or it may be ensuring financial security and joint bank accounts are not emptied by the perpetrator.

Seventy two per cent of women said they would not have seen a lawyer if it was not for the program.⁹¹

The maternal health nurses report that the program has even reduced their own occupational mental stress and anxiety, allowing them to assist new mothers in a better, holistic way:

*"I can see someone at the centre on Thursday who has made a disclosure [of family violence]. By the next Tuesday she will be meeting with the MABELS team, and by the following week she's being assisted at court with a family violence intervention order."*⁹²

Providing empowerment and advice early in the cycle of family violence can mean that women leave the violent situation earlier than they would have without advice. This prevents or reduces the likelihood of lasting mental health problems for mothers and their children.

Adolescent Mental Wellbeing

One in seven children aged between 4–17 years old have experienced a mental health disorder in the last year.⁹³ Data shows that the first onset of mental disorders occurs in early childhood or adolescence.⁹⁴ Timely interventions may reduce the severity of or even prevent the development of further mental health conditions.⁹⁵

School Lawyers

The school lawyer programs provide legal education, legal assistance and representation to students at school and their families. Working in this way enables young people to address their overlapping life and legal problems, like unpaid fines, family violence,⁹⁶ crime, homelessness, cyberbullying, online safety, and dealing with police.⁹⁷

Evaluations of the school lawyer programs show that getting legal assistance improves the health and wellbeing of the students, their family and teachers.⁹⁸

One student said:

*It makes you feel safer if you know your rights. Before I was nervous and scared of the outcome. And I didn't know how to handle the situation and I was scared to go to court alone. Knowing that the School Lawyer was there to support me made me feel relieved.*⁹⁹

Having access to a school lawyer that the student knows and trusts makes a world of difference. Kyle* had been couch-surfing since he was 16. After disengaging with school for some time, he went back at 18 years old and tried to finish but he had Myki fines and had been told he had a Centrelink debt of \$6,000 which was being automatically deducted from his payments, making it difficult for him to be able to properly support himself:

"The School Lawyer was a big support for me. I could talk to him about what had happened and my circumstances at the time, and he discussed with me my different options. Having these options



eased so much pressure for me. I felt like I could breathe. Coming as far as I have come, it feels like an achievement. I completed Year 12, and got a job. I am now living in a stable home, and I am going to go to university and want to pursue a career".¹⁰⁰

From the schools' perspective, helping parents and students navigate the legal system can lead to a more stable home. This will mean better attendance and retention rates, and better life and wellbeing outcomes for the student:

"If you've got a young person who has significant issues at home or is unsure about their future, it's pretty destabilising. If you're a young person who is traumatised or doesn't know whether they're going to be in the same house this time next week, that has huge impacts on learning." – School Principal¹⁰¹

"In the last two to three years, we've had lots of Horn of Africa families move in. They're becoming more engaged in our school and I think with any new group coming into the school, it's very difficult to adjust to how our community operates and often the law is a very significant part of that. The law is all around us. So people do need some guide to work towards those areas." – School social worker¹⁰²

School is a place where nearly all young people go.¹⁰³ Integrating mental health, social, legal and other supports in the school is an effective intervention at the most critical moment of development in a child's life that may prevent, or reduce the severity of a mental health condition.

Preventing Homelessness

Almost half of Victorians experiencing homelessness are women and one-sixth are children under 12.¹⁰⁴ Family violence is the most common cause of homelessness in Victoria, with 34 per cent of people citing family violence as the main reason they need help from a specialist homeless service.¹⁰⁵ There are currently over 82,000 people on the waiting list for social housing in Victoria¹⁰⁶ and less than 1 per cent of private rental properties in and around metropolitan Melbourne are affordable for single parents on low incomes.¹⁰⁷

Timely assistance to keep women and children in their homes and prevent evictions, can do a great deal to prevent significant mental harm for both the woman and her children.

Women's Homelessness Prevention Project

Justice Connect's Homeless Law runs the Women's Homelessness Prevention Project, where their community lawyers work in partnership with social workers to prevent women and their children being evicted into homelessness. In two years, the program assisted 102 women and 157 children to access and maintain housing.

The program focuses on assisting women who are in housing and at risk of becoming homeless: so they can prevent the negative impact of homelessness.

While 84 per cent of the women Homeless Law helped already had a mental health illness, becoming homeless can have wide-ranging effects on children's long-term physical and mental health,¹⁰⁸ and is likely to exacerbate the mental health conditions of the mother.



The program directly prevented 62 women and their children being evicted into homelessness, and allowed 21 women and their children to resolve debt and other barriers preventing their access of housing. By preventing the evictions of 62 women, the modest program saved \$1.8 million in health, justice and welfare costs to the state, and more importantly led to better health and wellbeing outcomes for the women and their families.¹⁰⁹

Nicola's Story

Single mother of five and victim of family violence facing eviction after paying childcare debt instead of rent

Nicola is a 38 year old woman with five children in her care. She lives in a private rental property and her only source of income is Centrelink payments. Nicola and her children have all been exposed to family violence from Nicola's ex-partner.

Nicola suffers from depression and anxiety and does not sleep well. At one point, Nicola was hospitalised for her mental health conditions and her youngest children had to stay overnight with a family day care worker. This resulted in a large childcare bill that Nicola paid instead of her rent.

Nicola's landlord then issued her with a notice to vacate her private rental property and obtained a possession order from VCAT. Nicola didn't attend the VCAT hearing as she hadn't been regularly checking her mail due to the family violence and other stress.

When she contacted the Women's Homelessness Prevention Project, there was a warrant and the locks were going to be changed in the coming days.

She was booked into the clinic urgently. At the initial appointment, Nicola saw lawyers and the social worker. The lawyers made an urgent application for a re-hearing because Nicola had reasonable grounds on which she did not attend the first hearing. This put a hold on the eviction.

The lawyers then negotiated a payment plan with the landlord for Nicola to repay the arrears.

The social worker helped Nicola access support for other expenses, including beds and food for her children, so more money could be contributed to the rent. She also linked Nicola with support to help recover from long-term family violence.

At the VCAT hearing, Nicola's lawyer successfully argued for a payment plan to be put in place, which enabled Nicola to repay the arrears at an affordable fortnightly rate. The lawyers and social worker worked together to avoid Nicola and her children being evicted into homelessness. This gave her the time she needed to look for a more suitable rental property, as well as to establish crucial links with supports that are helping her to recover and her children to find their feet again.

3.3 Supporting the Mental Health Workforce

Mental health services are stretched. The workforce is overburdened. Often people experiencing mental health conditions or episodes need intensive, at times constant support. When mental health conditions are treated in isolation, pressure on overburden services are stretched even further.



Taking pressure off the healthcare system by providing holistic support has been proven to work. Integrated services benefit both people in need of help and service providers. As the Productivity Commission found:

“A better understanding of people’s problems reduces the number of referrals to inappropriate services and allows for those resources to be better utilised. Further, holistic services can streamline some functions. This is achieved by: ‘... [eliminating] the duplication of tasks such as intakes, eligibility, assessment, diagnosis and personal and social history taking.’”¹¹⁰

By having established relationships and partnerships in place, mental health workers and social workers know who to go to when their patient discloses a legal problem. This saves health professionals time and reduces stress levels in their workplace, ensuring better care for the patient.

A maternal and childcare nurse working at one of our integrated health and legal services said, “Before MABELS [the integrated family violence service], with a family violence disclosure, we would think ‘Oh my God, what am I going to do now?’ Now it’s like, ‘Sure, we can help you [because we have a lawyer in-house].’ MABELS is just such a relief!”¹¹¹

Community legal services offer professional development training to their community partners to assist them to identify whether their patient has a legal problem. Knowing there are solutions for their patient’s complicated life problems can reduce healthcare professionals’ stress and anxiety, and help them focus on supporting their patient’s recovery.

Additionally, community lawyers can assist in freeing up hospital beds; people who are otherwise well often cannot be discharged because they do not have a safe and suitable home to go to.¹¹² Community lawyers can help provide assistance in family violence cases to make arrangements for the victim-survivor to safely return home, or for people who are homeless, they can assist with barriers to social housing, such as outstanding bond loan debts.

Relationships in integrated services, particularly between large hospitals and relatively small community legal centres take time to develop, raise awareness and build knowledge and trust. As Consumer Action Law Centre identifies: ‘Successful relationship building requires time, a good experience, and trust. One-off contacts are rarely enough to build long-term successful relationships. Long-term partnerships require long-term funding and integration’.¹¹³

Furthermore, as the Victorian Access to Justice Review found, short-term funding arrangements are ‘ineffective because they require organisations to use resources to seek further funding, and undermine an organisation’s ability to undertake long-term planning and retain staff’.¹¹⁴

The Victorian Access to Justice Review recommended that public funding should be provided in four-year minimum blocks.¹¹⁵ This enables planning for service provision and is particularly relevant for integrated services, where time is set aside to build and develop the workforces and the partnership.

Secure funding is critical to maintaining a stable workforce. Supporting holistic models takes pressure off professionals by allowing them to support each other to do their jobs.

Bolton Clarke Homeless Persons Project and Mental Health Legal Centre

Bolton Clarke Homeless Persons Project nurses work closely with lawyers from the Mental Health Legal Centre, a community legal centre, specialising in working with people experiencing mental health problems.



Over the last year alone, the Mental Health Legal Centre lawyers have assisted 119 clients with 176 legal matters as part of the Bolton Clark Homeless Persons Project.

Clients report exceptionally high levels of service satisfaction (scoring service 4.7 out of 5):

- ▼ 73 per cent of clients consider that the legal service has had a positive impact on their health
- ▼ 86 per cent said it had a positive impact on their well-being

The nurses themselves rate the importance of the health justice partnership with a score of 4.8 out of 5. Over 80 per cent of the nursing team have referred clients to the specialist community lawyers. The nurses report that resolving legal matters has had a tangibly positive impact on their clients' health and wellbeing, as well as improved their capacity to focus on their health needs.

Funding for this program will finish at the end of 2019. Without securing further funding, this health justice partnership will no longer be able to provide assistance to those people experiencing homelessness and mental illness.

Sid's Story

Empowerment and self-determination

A Bolton Clark Homeless Person Project nurse referred Sid to the Mental Health Legal Centre. Sid was 54 years old with a mental health condition and had been on an Administration Order for more than 25 years.

The Mental Health Legal Centre lawyer took detailed instructions from Sid about his living arrangements and how he managed his money. Sid told his specialist community lawyer he was originally placed on an Administration Order because he refused to live in a boarding house. Sid had accommodation at the time of the hearing but liked to move around and found it frustrating that State Trustees would not listen to him and continue to pay rent for properties he no longer lived in.

With the help of his specialist community lawyer, Sid was able to prove that he managed his mental health condition and the little money he had well. The Tribunal agreed to revoke Sid's Administrative Order. This meant Sid had control of his own finances and decisions for the first time in more than a quarter of a century.

Inner Melbourne Community Legal and Royal Melbourne Hospital

Inner Melbourne Community Legal, a community legal centre, runs a health justice partnership with Royal Melbourne Hospital. This means they provide free, accessible legal assistance at clinics in the two hospital campuses in Parkville. Three quarters of the people Inner Melbourne Community Legal assists in the hospital have a disability, including mental health conditions. Nearly half of them are homeless or at risk of homelessness and a third have experienced family violence.¹¹⁶

Evaluations of this partnership have found that:

- ▼ 60 per cent of people felt their legal issue had an impact on their health and wellbeing.



- ▼ After the legal consultation with a specialist community lawyer, 76 per cent of people surveyed felt they were able to cope better with their legal issues, compared to 44 per cent before their legal consultation.¹¹⁷

The specialist community lawyers have become a critical part of the patient's care team. Specialist community lawyers also train health professionals to increase their understanding and identification of legal problems, and to promote referrals. Additional secondary consultations by telephone allow health professionals to call the lawyer directly for advice or to clarify a tricky legal question.

*"A lot of my patients are limited in being able to move and so the legal service has been really flexible in meeting with people on the ward. I think with my type of clients... they can be homeless or have mental health issues or a disability that makes it challenging for them to follow through with an appointment if they ever booked one [in the first place]."*¹¹⁸

"[co-located, integrated services are] very useful, particularly for our women, they're really difficult to engage and they often don't follow up with appointments if they're offsite so having a bit of a 'one-stop shop' at our clinic is really helpful."

– Social Worker, Royal Women's Hospital¹¹⁹

Despite the demonstrated success of this partnership for patients, their families, and their communities, this critical holistic service has never been able to secure funding for longer than 12 months at a time.

If long-term funding is not secured, this program will stop helping people and their communities in October 2019.

Recommendation

31. Provide ongoing funding for existing integrated services and a minimum of four-year funding blocks for new integrated services, in recognition that partnership and workforce development take time to establish and develop relationships of trust and shared learning.

3.4 Whole of Government Commitment

The effectiveness of integrated services as part of a holistic response to address people with complex needs has been demonstrated time and again.

The Victorian Access to Justice Review, in recognising the effectiveness of integrated services, recommended the Victorian Government provide sustainable funding to integrated services to support more integrated and holistic service delivery:

Recommendation 3.4 – Supporting integrated service delivery:

The Victorian and Commonwealth governments should seek to identify ongoing funding for integrated services where there are demonstrated legal needs for tailored or targeted services to reach particular client groups. Such services require cross-portfolio co-ordination between justice and human services areas. Certainty of funding would help legal service providers build long-term collaborative relationships with non-legal service providers, and provide more effective services to vulnerable and disadvantaged members of the community.



The Victorian and Commonwealth governments should seek to identify ongoing funding to proven programs that employ secondary consultation by non-legal workers, in order to improve the capacity of non-legal workers to identify legal problems, strengthen referral pathways, and expand the reach of legal assistance to people who would not otherwise access it.¹²⁰

The Victorian Government responded to the Access to Justice Review in 2017 and agreed to implement Recommendation 3.4 in full.¹²¹ The implementation of this recommendation has been delayed. There continues to be a lack of ongoing long-term funding to enable community partnerships to develop 'long-term collaborative relationships' that the recommendation calls for.

Holistic service delivery requires commitment by all levels of government: Commonwealth, state and local. A person's life does not fit neatly into the silos expected by government departments or agencies. When a person experiencing a mental health condition is the centre of our approach, it is clear that government processes are the ones that need to adapt and be more responsive to them and not the other way around.

The Productivity Commission found that:

Pursuing a holistic approach to solving legal problems is challenging. Establishing and building relationships between agencies that provide legal, health and social services requires planning, cooperation, resources and time. For holistic services to be effective, changes to how funding is allocated and the way that organisations operate may also be required.¹²²

Our community health partners and community legal centres find that one of the biggest barriers to establishing and maintaining successful integrated services is how funding is coordinated across departments. The breadth of partnerships that our community legal centres enter into can be funded from a variety of different government departments: the Department of Health and Human Services, Department of Justice and Community and Safety, and Department of Education, to name a few.

Sometimes partnership funding is provided for the legal assistance component but not for the health and social workers in the partnership, and sometimes it is the other way around. For an integrated partnership to work and effectively benefit people and their communities, all of the partners need to be properly funded to do the work.

To ensure that there is a genuine whole of government approach to integrated mental health service delivery, we need a whole of government budgeting process. A commitment for coordination at the policy level can be positive and create valuable innovations. However, this coordination falls down when budget processes require that the policy solutions are siloed through separate government departments, with each department having their own competing priorities and outcome frameworks.

The current department-based funding arrangement creates unnecessary and unhelpful competition between the different government departments, which leads to partnerships that do not fit neatly into a single government department being unfunded, or funded short-term.

Consideration should be given to reform how service delivery and coordination can be better integrated in formal budgeting processes to create a person-centred approach to mental health care.

Additionally, a shared commitment to integrated services requires a commitment, not just to the funding model, but to the reporting mechanism and accountability requirements that allow these services to deliver the care people need. Reporting to multiple funders often means that individual services have competing outcomes measurements, which itself can 'conflict with the holistic approach'.¹²³

For people with complex mental health conditions and complicated social needs, including being homeless, surviving family violence, or living in poverty: quantitative outcome measurements, such as the number of



clients through the door, or the number of case files opened, do not properly reflect the benefit or the impact of the support they have received. So that we can learn from what works well and what we can do better, we need more nuanced measures of success that consider mental and physical wellbeing outcomes and not just outputs.

Addressing the way our governments operate to better reflect everyone's needs is necessary for lasting change.

Recommendations

32. Implement the Access to Justice Recommendation 3.4 to support integrated services, to meet service delivery gaps experienced by people with complex mental health needs in our community.
33. Develop a whole-of-government budget process that is responsive to holistic needs of communities and individuals in need of support.
34. Work with services and communities to develop nuanced outcomes measurement of successful program delivery for people who experience multiple and complex vulnerabilities and commit to consistency across departments and funding providers.

¹ Frijters, P., Johnston, D.W. and Shields, M.A., 2014, *The effect of mental health on employment: evidence from Australian panel data*, Health Economics, vol. 23, no. 9, 1058–1071

² Robinson, E. Rodgers, B. Butterworth, P. 'Family relationships and mental illness: impacts and service responses' Australian Institute of Family Studies: Australian Family Relationship Clearinghouse (2008) 4.

³ Law and Justice Foundation of New South Wales, *Legal Australia-Wide Survey (LAW) (2012) 14*

⁴ LAW Survey found half (54 per cent) of people who experienced legal problem it had a 'severe' or 'moderate' impact on their daily life: 19 per cent reported stress related illness, 18% physical ill health. Law and Justice Foundation of NSW 'Legal Australia-Wide Survey of Legal Need in Victoria' (2012), xvi.

⁵ Of those people who sought help for a legal problem in the LAW foundation study 12-17% of people seek legal advice, 27% see a health care professional like a doctor or psychologist: Law and Justice Foundation of NSW, 'Legal Australia-wide Survey Legal need in Victoria' (2012) 187.

⁶ Law and Justice Foundation of NSW 'Legal Australia-Wide Survey of Legal Need in Victoria' (2012), xvi.

⁷ Department of Justice and Community Safety (Vic) 'Access to Justice Inquiry: volume I' (August 2016) 78.

⁸ Law and Justice Foundation of New South Wales, *Legal Australia-Wide Survey (LAW) (2012) 14*

⁹ Ibid. 25

¹⁰ See YouthLaw, 'Submission to the Royal Commission into Victoria's Mental Health System' (2019) 1.

¹¹ National Association of Community Legal Centres, *Community Legal Assistance Services System (CLASS)*, 2017-2019.

¹² Justice Connect Homeless Law, 'Keeping women and children housed: Women's homelessness prevention project – 2 years on 10 clients stories and 10 calls for change' (2018) 4.

¹³ Australian Housing and Urban Research Institute, *Housing, Homelessness and Mental Health: Towards Systems Change* (2018), 13.

¹⁴ Many help and government resources recognise the significant link between financial stress and poor mental health: See Lifeline, 'financial problems' <https://www.lifeline.org.au/get-help/topics/financial-problems> (Accessed: July 2019), Department of Health (Cth), 'Meaningful life: finances' <https://headtohealth.gov.au/meaningful-life/feeling-safe-stable-and-secure/finances> (Accessed: July 2017).

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¹⁵ Rees S, Silove D, Chey T, Ivancic L, Steel Z, Creamer M, Teesson M, Bryant R, McFarlane AC, Mills KL, Slade T 2011, 'Lifetime prevalence of gender-based violence in women and the relationship with mental disorders and psychosocial function', *JAMA*, vol. 306, no. 5, pp. 513–521.

¹⁶ LAW Survey found half (54 per cent) of people who experienced legal problem it had a 'severe' or 'moderate' impact on their daily life: 19 per cent reported stress related illness, 18% physical ill health. Law and Justice Foundation of NSW 'Legal Australia-Wide Survey of Legal Need in Victoria' (2012), xvi.



- ¹⁷ Kessler, R. Amminger G, Aguilar-Gaxiola, S. Alonso, J. Lee, S. Ustud, T. 'Age of onset of mental disorders: A review of recent literature' *Curr Opin Psychiatry*. 2007 Jul. 20(4): 359-364. 359.
- ¹⁸ For example the impact of family violence on mental stress has been well documented in Rees S, Silove D, Chey T, Ivancic L, Steel Z, Creamer M, Teesson M, Bryant R, McFarlane AC, Mills KL, Slade T 2011, 'Lifetime prevalence of gender-based violence in women and the relationship with mental disorders and psychosocial function', *JAMA*, vol. 306, no. 5, pp. 513–521.
- ¹⁹ The Federation of Community Legal Centres has received recommendations from our specialist Infringements Working Group that, through their experience as lawyers in the field of fines enforcement, has informed this section.
- ²⁰ Victoria Legal Aid, 'Streamline fines – a new way of dealing with infringements' (20 March 2018) available at <https://www.legalaid.vic.gov.au/about-us/news/streamline-fines-new-way-of-dealing-with-infringements> (Accessed: July 2019)
- ²¹ NSW Law Reform Commission 2012, Penalty notices, report 132, NSW Law Reform Commission, Sydney
- ²² Special circumstances is defined in s.3 Infringements Act 2006 (Vic).
- ²³ Magistrates' Court of Victoria, 'Annual Report 2016-17' (1 September 2017) 32
- ²⁵ See Department of Justice and Community Safety, 'Work and development permit' available at: <https://www.justice.vic.gov.au/wdp> (accessed July 2019)
- ²⁶ See Department of Justice and Community Safety, 'Work and development permit' available at: <https://www.justice.vic.gov.au/wdp> (accessed July 2019)
- ²⁷ Rees S, Silove D, Chey T, Ivancic L, Steel Z, Creamer M, Teesson M, Bryant R, McFarlane AC, Mills KL, Slade T 2011, 'Lifetime prevalence of gender-based violence in women and the relationship with mental disorders and psychosocial function', *JAMA*, vol. 306, no. 5, pp. 513–521.
- ²⁸ Victorian State Government, 'Chief Psychiatrist guideline and practice resource: family violence' (2017)
- ²⁹ The Government of Victoria's Royal Commission into Family Violence (RCFV) (March 2016), and the Commonwealth Government's subsequent Access to Justice Review (August 2016), confirmed this nexus
- ³⁰ The Law and Justice Foundation of NSW *Quantifying the legal and broader life impacts of domestic and family violence*
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