



The peak organisation representing the non-government mental health sector in Tasmania at a state and national level

Submission

Response Ten Year Roadmap for National Mental Health Reform



The Mental Health Council of Tasmania has a vision for a vibrant and effective mental health sector in Tasmania.

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The Mental Health Council of Tasmania (MHCT) is the peak body representing the interests of consumer, carer and community mental health sector organisations, providing a public voice for people affected by mental illness and the organisations in the community sector that work with them.

The MHCT advocates for effective public policy on mental health for the benefit of the Tasmanian community as a whole and has a strong commitment to participating in processes that contribute to the effective provision of mental health services in Tasmania.

The MHCT appreciates the opportunity to provide comment on the draft document *Ten Year Roadmap for National Mental Health Australia* circulated by the Australian Government.

The MHCT congratulates the Australian Government on prioritising National Mental Health Reform. This Roadmap demonstrates a shared vision for Australia's future where positive mental health is valued, focussing on prevention of mental ill health and acknowledging the invaluable contributions families and carers make in supporting people living with a mental illness. This will enable people living with a mental illness to live fulfilling and meaningful lives.

The MHCT notes that for each of the five Key Directions outlined in the document there are short and longer term actions attached to each area. The MHCT recommends that timelines needs to be attached to these actions, to enable accountability for the Reform.

Page 14 of the document states:

“Short Term Actions: In summary, the shorter terms actions identified under this Roadmap involve commencing a national effort to tackle mental illness among our young people;”

The MHCT supports this action, however recommends this statement be expanded to cover all people across the age spectrums.

Overall the MHCT is pleased with the level of detail each action outlines, however to ensure these targets are reached, the MHCT recommends the Roadmap needs to outline an action plan and the amount of resources and/or funding that will be allocated to each area.

The MHCT will provide comment on each Key Direction outlined in the document.

Key Direction 1: Promoting Good Mental Health and Wellbeing and Preventing Mental Illness and Suicide

Page 16 of the document makes reference to the government providing better targeted services to populations at greater risk of mental illness and suicide. The MHCT notes the Culturally and Linguistically Diverse (CaLD) communities, the Lesbian Gay Bisexual Transgender Intersex (LGBTI)

communities and people living with an acquired brain injury (ABI) have not been mentioned. The MHCT recommends these communities be included in this section.

Page 17 of the document notes the developing and delivering of a national stigma reduction and anti-discrimination campaign. The MHCT applauds this short term action and recommends the government fund it accordingly through Community Mental Health Australia.

Key Direction 3: Putting Consumers and Carers at the Heart of Services and Supports

Page 24 of the document outlines a short term action in establishing a national organisation for consumers to strengthen and consolidate a national mental health consumer voice in mental health planning, policy and program directions. The MHCT endorses this action, however questions how the Consumer Peak Network will work with the existing National Mental Health Consumer and Carer Forum. For equity purposes, the MHCT recommends there also needs to be the establishment of a national mental health carer and family network. This will allow carers and family members to have a national mental health carer and family voice in mental health planning, policy and program directions.

Page 24 of the document outlines a longer term action in increasing the number of peer support workers and improving their training, skill development and support. The MHCT endorses this action, however would broaden the training in the area of peer support to include the entire community mental health workforce. This would enable the mental health sector workforce to have a greater understanding of the role of peer support workers.

Page 24 of the document outlines measurements which include the proportion of people who receive treatment from public mental health services and private hospitals with positive clinical outcomes. The MHCT recommends the use or development of tools to measure outcomes in the community mental health sector need to be extended to the community mental health sector.

Key Direction 4: Supporting People to Participate in Society

Page 27 of the document states:

- *“Proportion of people who are employed by mental health status.”*

The MHCT believes this statement contributes to the stigma which people living with a mental illness encounters in the work place. People should be employed according to their skills and knowledge, not just their mental health status.

Key Direction 5: Making Services Work for People – Access, Quality, Integration and Coordination

Page 29 of the document states a short term action is to establish a national organisation for mental health consumers. The MHCT recommends this extend to include the establishment of a national organisation for carers and families.

Page 29 of the document outlines a short term action is to improve the provision of holistic primary health care services for consumers. The MHCT recommends this action outline the importance peer support workers, family and carers play in assisting people in their recovery.

Page 29 describes another short term action is to improve the accessibility of culturally and linguistically appropriate mental health services and support. The document suggests improving access to appropriately qualified Aboriginal and Torres Strait Islander mental health workers. The MHCT recommends this need to extend to also improve access to CaLD mental health workers.

Page 29 outlines a longer term action through developing integrated medical and psychological support for older Australians. The MHCT recommends this longer term action needs to include social support in this section.

Page 29 describes a longer term action through improving coordination and integration between mental health and health drug and alcohol, housing, justice/corrections, employment, disability community, and immigration services. The MHCT recommends this longer term action needs to include the education sector in this section.

Page 30 outlines a number of measurements. The first one mentions the number of formal shared care arrangements between mental health services and various sectors. The MHCT recommends this section needs to include the housing sector. Dot point three mentions the number of supported housing opportunities created for consumers with enduring psychiatric problems. For consistency purposes of the document, the MHCT recommends the term 'psychiatric' be replaced with 'mental health'.

The MHCT congratulates the Australian Government on the *Draft #4 Ten Year Roadmap for National Mental Health Reform* and looks forward in contributing to future consultations of the Roadmap.