



**ACT
Mental Health
Consumer Network**

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 A.C.T. LEGISLATIVE ASSEMBLY COMMITTEE OFFICE	
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**ACT Mental Health Consumer Network Submission to
Legislative Assembly Select Committee on Estimates 2007 – 2008
Public Hearing, Friday 15 June 2007**

Let me first give a short description of our organisation and its role.

The ACT Mental Health Consumer Network is the peak body for Members of the ACT community with experience of personal mental illness (mental health consumers). Since 1999 the ACT Mental Health Consumer Network (The Network) has represented the interests of Mental Health Consumers in the Australian Capital Territory (ACT) and to the Commonwealth.

The Network has a growing membership, but strives to represent the interests not only its membership, but the entire 7000 or so persons with mental illness who are seen by ACT public mental health services each year. In addition the Network strives to represent the interests of those persons with mental illness who are not seen by the public mental health services by advocating for better and easier access and more prevention and early intervention measures.

At this point it must be raised that the area of mental health is the only sector of health that has its' own legislation for when people are too unwell to make decisions relating to their own health. Therefore, we need to ensure that the legislation reflects best practice for implementing someone's health care. With the Mental Health Legislation being under review at this time, organisations representing consumers' interests need extra funding to make sure that our citizens are being represented at the basic grass roots level. That funding is necessary to ensure that we can have consumer representatives in all areas of the review, and additional staff to adequately support them. This is vital to the

health and well being of the consumer, as again, we are the only citizens' who are told where they can reside, their medical treatment, who they can and cannot see and where they can and cannot go.

Standard Three of the National Mental Health Standards states:

"Consumers and carers are involved in the planning, implementation and evaluation of Mental Health Services".

The ACT Mental Health Consumer Network is the key community sector partner for ACT Health with respect to consumer participation in planning, development and evaluation of mental health services

ACT health and Mental health have shown a commitment to implementing standard Three by developing in collaboration with consumers and carers a Framework for consumer and carer participation across Mental Health ACT and initiating development of a Framework for participation for ACT health as a whole.

Unfortunately this commitment in words has not yet been matched by a commitment of resources to support consumer and carer participation neither within ACT Health nor in the community sector.

As I mentioned the ACT Mental Health Consumer Network is a key player in relation to consumer participation in its capacity as the central organisation for recruiting, training, nominating and supporting consumer representatives involved in various committees, boards and working groups across ACT Health and the community mental health sector.

The Network, however, is lacking the resources to sufficiently support its representatives. Lacking the resources to provide representatives with quality organisational and policy support or even sufficient coordination between representatives, the Network can't support consumer participation in a sustainable manner. As a result representatives are being overworked and risk burn-out and consumer participation risks becoming tokenistic and rubber stamping.

If ACT Health and the ACT government are truly committed to meaningful consumer and carer participation more resources must be committed to making this realistically possible.

Broader issues of concern to mental health consumers in the budget.

Turning to the parts of the budget relevant for mental health consumers more broadly, the Network would first like to acknowledge the positive indications in this budget in comparison with the last budget.

The increase in funding for the mental health sector in general (12.6 mill over four years compared with , the indication that a relatively large part of this increase would go towards the community sector, and the funding of a step-up/step-down facility are all welcome initiatives from a consumer perspective. There is still a long way to go, however, for the government to meet it's pledge of allocating 12% of the total health budget to the mental health sector by 2012. We, the consumers, would like to hold the government to that promise and hope to see a large part of that funding going into the community sector to build capacity and to provide services such as home-based support, rehabilitation and sub-acute care.

The Network is also particularly concerned to see that the indigenous and culturally and linguistically diverse (CALD) populations, as well as the homeless population have once again been overlooked in the budget. These groups are among the most disadvantaged groups in our society and their very particular needs in relation to mental health are not being addressed in the budget. For the indigenous and CALD populations the absence of culturally appropriate services is not addressed in the budget. The Winnunga Nimmityjah Aboriginal Health Service provides a relevant service for indigenous consumers, but is inadequately resourced and cannot meet demand. It is also necessary to explore possibilities of establishing other appropriate services, such as a "healing farm", and to employ indigenous and specially trained CALD mental health workers, including indigenous clinicians.

Housing and supported accommodation is another key issue for indigenous, CALD and homeless populations and for mental health consumers in general.

While the budget contains some good initiatives on housing they are insufficient and do not address the specific problems of consumers.

The ACT Legislative Assembly Standing Committee on Health and Disability has recently released a report on "Appropriate Housing for People Living with a Mental Illness". This very good report identifies a number of important problems and gaps in policy and services and should inform priorities for mental health and housing in the future.

One telling example from the report is the statement that:

"The waiting lists for general public housing are combined with a relatively small number of houses specifically reserved for people with a mental illness. There are 213 funded places in supported accommodation, spread across four different categories: (medium to long term rehabilitation places; group homes; respite and outreach places).

The Director of Mental Health Services for the ACT, Dr Brown estimated that four to five hundred accommodation units of various types were required to meet the social and treatment needs of people with a mental illness in the Territory."

The report also states:

"Regrettably there are numerous examples of mental health patients moving through various unsatisfactory situations receiving virtually no professional support and having little opportunity to re-establish themselves in the community."

As the report also makes clear even mental health consumers who have accommodation are at risk of losing their accommodation when experiencing a medical crisis and the report identifies an obvious gap in policies in this area, where for instance consumers rent will be paid while they are in hospital, but not if they are in rehabilitation or otherwise absent.

As should be obvious, the issues raised in the report must be addressed.

There are many more issues which could be raised if time was not important, but for now we thank you for listening.