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**THE LEGISLATIVE ASSEMBLY FOR
THE AUSTRALIAN CAPITAL TERRITORY**

STATEMENT

Update on the policy directions for mental health in the ACT

**Presented by
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Madam Speaker, I rise to bring to the Assembly attention the ACT Government's response to the Productivity Commission's draft report into Mental Health and to speak to the policy directions for mental health in the ACT.

Firstly, I must express that efforts to maintain good mental health and wellbeing are crucial in these challenging times of bushfires and smoke, hail, and the current COVID-19 pandemic. These circumstances are impacting our community in unprecedented ways and we are committed to ensuring Canberran's feel safe and supported throughout this time. I strongly encourage anyone who may need mental health information or support, to check the ACT Government COVID-19 Website and call or online visit the services listed.

I am pleased to be able to speak to the ACT Government's approach to mental health.

Members may recall that in late 2018, the Federal Government announced that the Productivity Commission would be commencing an Inquiry into the Economic and Social Impacts of Mental Health.

The Office for Mental Health and Wellbeing coordinated a whole-of-government submission to the Productivity Commission. This submission was developed with all ACT Government Directorates and articulates a clear vision for the direction of mental health and mental health services in the ACT.

A key message of this original submission was how the circumstances of people's lives impact on their mental health. These determinants include factors such as housing, employment, education and transport.

The submission recognised that acute and crisis mental health services are clearly an integral part of the health system, but that they are not the entirety of an effective system. Instead, the submission highlighted the ACT Government's belief that to improve the mental health of the ACT's community, a much broader approach is required. This approach must be able to give more consideration to how we shape the wider determinants of health and wellbeing. To be clear, these are not, and never have been in the traditional purview of health services.

This wholistic approach to wellbeing has been an underlying philosophy for many of the actions that ACT Government have taken in recent years to support the mental health of people in the ACT.

This approach was a key factor in the establishment of the LifeSpan Integrated Suicide Prevention Framework in 2018, in partnership with the Black Dog Institute. This Framework is an evidence-based approach to integrated suicide prevention coordinating nine-different strategies across community-led approaches including health, education, frontline services, business and the community. I am particularly proud that the ACT Government has taken on such a Framework, as it is the only State and Territory Government that is centrally coordinating a LifeSpan trial site.

Addressing the broader aspects of life that impact on mental health and wellbeing was also an important factor in the establishment of the Office for Mental Health and Wellbeing, launched in June 2018. The work of the Office centres around the promotion and coordination of whole-of-government collaboration for the purpose of improving mental health and wellbeing across the community.

In fact, this aim is reflected in the Territory-wide Vision of Mental Health and Wellbeing that has been developed by the Office in close consultation with members of the community and other key stakeholders. The vision for the ACT that the Office is championing is “A kind, connected and informed community working together to promote and protect the mental health and wellbeing of all.”

I am pleased to say that it is not only ACT Health initiatives that are embracing this wholistic approach to mental health and its determinants either. It is also a fundamental part of the reasoning behind the Wellbeing Indicators that were announced by the Chief Minister on Canberra Day this year.

Through each of these initiatives, the ACT Government is demonstrating an ongoing commitment to the importance of mental health and wellbeing across the community. This is the commitment that we advocated to the Productivity Commission in our initial submission to their Inquiry.

I am pleased to say that, when the Productivity Commission released their Draft Report on 31 October 2019, that many of the themes the ACT Government raised were included.

In a very detailed report, the Productivity Commission raise many questions for further information and make a wide range of recommendations. Overall, the Draft Report sets out a strong case for the reform of the mental health system across Australia. The Productivity Commission then asked for further submissions in response to the Draft Report to help inform the final report.

I would now like to table the ACT Government's response to the Productivity Commission's Draft Report. This response provides feedback on the Productivity Commission's recommendations.

The discussions within the ACT Government Submission and the Commissions forthcoming Final Report represent an important opportunity to make meaningful change for the mental health of our community through both national and local reforms.

This has a number of implications for the policy direction of mental health in the ACT more broadly. I would like to discuss these implications in the context of some of the stronger themes of the ACT Government's Submission that are aligned to the Productivity Commission's findings. These include the themes of:

- Supporting a mentally health community;
- Consumer focused services and recovery; and
- Well planned and integrated services.

Supporting a mentally health community

Firstly, one of the Productivity Commission's priority reform areas is to achieve effective prevention and early intervention for mental illness and suicide attempts. This was also a key argument in the ACT's initial submission to the Productivity Commission.

The argument for increasing the support of prevention and early intervention services is clear. If the rates of mental illness continue to grow in our community, we can expect that clinical and community mental health services will need to continuously expand to match these rates. This is currently the case as national hospital activity data indicates that there has been a consistent increase of mental health inpatient care days in the ACT by an average of 2.4% per year.

Without a focus on promoting mental health, preventing mental illness and intervening early in life, this pattern is likely to continue unabated and too many people will experience difficulties with their mental health for too long. However, we do not accept that this has to be the case.

As such the strategic direction of the ACT Government to provide address and early intervention is aligned with the recommendations of the Productivity Commission. This is evident in our establishment of the LifeSpan Framework. This year's commencement of the Youth Aware of Mental Health Program in schools to promote mental health messages is one of the tangible and practical strategies pursued under LifeSpan. Our commitment is also evident in the ACT Government's support for non-government organisations that play an important role in promoting mental health, including Mental Illness Education ACT and the Perinatal Wellbeing Centre.

While the ACT Government is supportive of the Productivity Commissions' focus on early intervention, we have also argued for this focus to be strengthened and expanded in the final report. The Productivity Commission's reinforces the importance of services aimed at early childhood, which is consistent with ACT Government initiatives such as the Support at Preschool Program and the Safe and Supportive Schools policy.

Our Submission to the Productivity Commission also calls for a strengthened focus on early intervention across the life course. This is important because while prevention and early intervention for children, youth and young adults is important, there are times of transition when adults can also experience higher risks of mental health concerns. This is work that the ACT Government is pursuing, through initiatives like LifeSpan and the Office for Mental Health and Wellbeing, in addition to its focus on younger people in the ACT.

By promoting prevention and early intervention activities across the whole of people lives, the ACT Government is aiming to improve mental health across the community. This is in contrast to the historical focus of treating the symptoms of mental illness during an episode. Instead, this approach requires whole of person care, which leads me to the next important theme in our submission to the Productivity Commission.

Consumer focused services and recovery

By keeping a holistic focus, that addresses the physical, mental and social care needs of an individual, we can improve people's lives more than an individual clinical intervention alone can.

This is because, as I have discussed previously, there are a range of life factors that have a large impact on a person's mental health. This is an issue addressed by the Productivity Commission as a priority area of reform in the Draft Report.

While the ACT Government commends the Productivity Commission for this approach, we have encouraged the Commission to consider the need for an agreed national strategy or mechanism that will build effective responses through collaboration across the range of areas of a person's life, including health, education, employment and social connections.

I believe that the ACT Government is already quite advanced in this field. As examples, the Office for Mental Health and Wellbeing has an explicit mandate for coordinating whole-of-government action. This approach also underpins the ACT Wellbeing Framework which was recently launched by the Chief Minister. The Framework provides an important opportunity to champion wellbeing across the key domains of life in the ACT. Further this Framework will enable us to gain greater understanding of, and to build responses to, areas where people are experiencing challenges.

People with lived experience of mental illness have for a long time been advocating for their right to be able to make decisions regarding their lives and their health care, with support if necessary, according to their recovery goals. The ACT Government will continue to explore how to build on this knowledge and experience in the future design and delivery of mental health services and supports. Our response to the Productivity Commission highlighted the need for a greater focus on consumer's participation and a recovery focus.

In considering the direct involvement of people with lived experience I am very pleased to highlight the work of our ACT Recovery College which has a consumer led approach and delivers recovery focussed educational programs which are co-designed by people with lived experience.

In a similar approach, the ACT Government's response identified the need to acknowledge and enhance the role that family members and carers of people with mental illness in the planning and delivery of collaborative responses. The ACT Carers Strategy 2018-2028 sets out both an approach and mandate to support and recognise the work of carers and their role in the lives of people for whom they care. One very practical activity being undertaken is work Carers ACT have been undertaking with Canberra Health Services on the interaction between mental health workers and carers at the Adult Mental Health Unit.

The ACT Government is also working closely with the Australian Government and other States and Territories to develop a strong National Disability Insurance Scheme that will be able to better meet the needs of people with psychosocial disability. The ACT Government has taken the lead on work to improve the interface between the NDIS and mainstream mental health. This approach aims to build both a more holistic response for individuals as well as building a more integrated and connected service system.

Well planned and integrated services:

The Productivity Commission make several recommendations for how mental health systems can begin to close the gaps between services and focus on care coordination.

It is true that this is an important goal, one that is necessary to ensure that people can access the right level of care at the right time for them in their mental health journey. This is a central theme of the Fifth Mental Health and Suicide Prevention Plan and is a concept I have spoken about many times in this place.

However, in the ACT Government's response to the Draft Report, we have also highlighted that the Productivity Commission's focus on integration is one that is more narrowly defined around the mental health service system, specifically. In the response, we argue that this integration also needs to be ensured between health and other human services, government or otherwise.

It is important to acknowledge that this is a large undertaking that cuts across many different sectors and processes. The mental health service system is a complex system with funding and responsibility shared across all levels of government. The Productivity Commission's Draft Report identifies pathways for national reform through new national agreements. The ACT Government looks forward to the PC final report.

I believe that the ACT Government is well-placed to both participate and support national reforms as we are already progressing reform initiatives that will set the stage for the future development of the mental health system in the ACT.

I am pleased with all that the ACT Government has been able to achieve in the time I have been Minister for Mental Health. While I recognise that we are

facing significant challenges due to the COVID-19 pandemic, I am committed to responding to the needs of Canberrans and I look forward to continuing to achieve positive outcomes for the ACT community.

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