

## **Mental Health Reform in Australia & the role of Mental Health Commissions**

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## **Historical Development Impact of European Colonization**

Male orientation  
Fear and Isolation  
Rebellious spirit  
Frontier mentality  
Invasion of Aboriginal lands & culture

## **Mel Gibson as Mad Max : The Australian Equivalent of Jackie Chan Movies?**

### **Mental Illness in European Colonizers**

“Sunstroke”  
“Intemperance”  
“Bush madness” or “Moral Insanity”  
“When life is cheap, suicide is rare” .....(Cunningham-Dax)

### **The 1st National Mental Health Strategy**

Service-user, carer and GP involvement  
Mainstreaming of services with general health care  
Community awareness - challenging stigma  
Intersectorial partnerships  
National Mental Health Casemix Study  
Crisis & Continuity Alternatives  
To Psychiatric hospital admissions

### **7 Day & Night Home & Community based care**

Crisis and Family Intervention  
Home Treatment & Support  
Assertive Community Treatment Teams  
“GOLD standard” of case management

One size does not fit all  
Small caseloads  
Evidence based content  
Fidelity criteria  
Link to real work for real pay

### **Asylum in the Best Sense**

1. A Haven in which to take refuge
2. A Harbour from which to set out again

-John Wing, U.K.

A Place of both Serenity & Preparation & Hope.. like Wood-shedding-J Strauss

### **Residential Alternatives to Psychiatric Hospital-based Care**

Secure Extended Care Units  
24 hr supervised Community Care Residentials  
Range of Supervised households- with Non- Government Organisations  
Host family homes  
Community Residential Respite with 24 hour support

### **Continuum of Care**

#### **Ordinary Homes and full Citizenship of the Community**

##### **“Residential Plus Support” Longer term Variants**

FACT study: Hobbes Newton Rosen Tennant: 2 and 6 year follow-up replication of TAPS in UK

Are residents allowed to retire?

HASI (Housing & Support Initiative) in NSW

Social Housing for Homeless MI : “Housing 1<sup>st</sup>”

Intentional Communities (eg Queanbeyan NSW)

#### **Communities of Identity or Ghettos?**

### **The 2nd National Mental Health Strategy**

National Mental Health Standards  
Awareness, promotion and prevention  
Partnerships eg Rotary  
Early Intervention Strategies  
National Community Prevalence Study  
National Outcomes Measurement

## **Changing Mindsets**

Mental Health Awareness & Education  
Challenging stigma

## **Early Intervention Services for Psychosis and Other Disorders**

School Community and Primary Care Awareness  
Low dose technologies – low impact admissions  
Cognitive Interventions  
Socio-cultural Interventions  
Vocational  
Family  
Countering Stigma  
Assertive Case Management  
Young adults persisting care team

**Reference:** Byrne P & Rosen A, Early Intervention in Psychiatry: EI of nearly everything for better mental health, Oxford: Blackwell Wiley, in press.

## **3rd Australian National Mental Health Plan 2003-2008**

Improving Population Mental Health  
Service Responsiveness  
Safety & Quality  
Innovation & Sustainability  
Accountability

Another National MH & Wellbeing Survey 2007  
Conservative Federal Reforms: PHAMS & Fee- for-service Psychologists for high prevalence disorders equivalent to IAPT in UK

## **4th Australian National Mental Health Plan 2008-2013**

No distinct strategic goals & targets  
Never operationalized with an action plan  
Generally ignored  
Superseded by Federal Budget of 2011 with coordinators but depletion of community workers to coordinate  
A CoAG “10 year Roadmap” without any destinations

Recovery has a trajectory

## **Don't confuse Interventions with Delivery Systems**

### **Workforce Up-skilling & Culture:**

What encourages Adherence to the Fidelity Manuals? Alliance or Compliance?  
Coercion, Good Engagement, Good Training or Good Instincts?

### **TheMHS Conference**

#### **The Mental Health Conference of Australia and New Zealand, Inc.**

Twice yearly

All providers, consumers and carers are stakeholders

ANZ Binational Mental Health Achievement and Media Awards

Crucible & forum for the mental health reform movement

Strong advocacy for a National Mental Health Commission in Australia

### **The Advent of Type II Mental Health Commissions**

New Zealand, then...

Canada, then....

Western Australia, Australian National, New South Wales, Queensland....

Canada

BRIEF HISTORY

### **Canada**

HOW WE WORK

### **Type II Mental Health Commissions**

#### **Common Roles**

#### **Diverse Tasks**

#### **(Similar goals but opting for different ways of herding cats)**

Type II M H Commissions' Common Roles

Set the mhs system reform agenda—being **blatantly aspirational but practical:**  
**identifying service gaps**

**Advocacy** for mhs system reform

**Transparent accountability** monitoring

Regular **consulting** & amplifying the **voices** and concerns of all mhs stakeholders to the highest levels of government

**Earning trust** of all the mhs community

**All-of-government**, all-of-community

**Fearlessly independent**

**Walking together** with government: respectfully, independently and robustly engaged

## **Type II M H Commissions' Diverse Tasks**

National or State MHS Strategy +/- or Blueprint  
Monitoring Method: eg Report or Score Card  
Strategic Plan for MHS  
Commissioning & De-commissioning Services  
Anti-Stigma & Anti-Discrimination / Social Inclusion /Community Awareness programme  
Workforce development  
Knowledge Exchange Centre  
Social Movement  
Marginality: Homelessness, Indigenous, Remote  
Housing, Jobs  
Multi-modal bio-psycho-socio-cultural intervention

### **Is A Healthier Psychiatry Possible?**

Address Social Determinants of Mental Illness, including real pay, enough money, stable housing  
Early intervention  
Home visiting, active response  
Actively involving the family  
Recovery and resilience  
Celebrating complexity (not over-simplifying)  
Wholistic –bio-psycho-socio-cultural, multi-factorial & multi-modal  
Dealing also with physical risk factors, and with meaning & spiritual concerns?

### **Global Mental Health as a Social Movement**

Access to adequate prevention (public health approach) & good enough  
**wholistic** integrated person-centred psychiatric care as a **human right**  
Eg. Mental Hygiene Movement  
Eg. Early intervention in Psychosis  
Eg. Physical care of individuals with persistent mental illnesses eg quit smoking programs  
Eg. Gun Control  
Eg. Challenging Stigma & Discrimination  
Eg. Tackle Social Determinants of mental illness

**We can be more effective if we are on the same page**