

Senate inquiry into Mental Health Services in Australia

Submission from:
Transcultural Mental Health Centre



Senate Community Affairs Committee

Summary of Transcultural Mental Health Centre submission

- a) In contrast to the Select Committee reports (*A national approach to mental health – from crisis to community, First and Final reports*) the *National Action Plan on Mental Health* does not discuss the issue of culture and mental health.
- b) This omission weakens the positive contributions the plan makes to the development of community-based care.
- c) Over the past 12 months the Transcultural Mental Health Centre has contributed to the implementation of the following recommendations as they relate to people from CALD communities:

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- d) We recommend that current Transcultural Mental Health Centre programs are re-funded and identify some of the gaps in funding and service provision for people of CALD background: short-term counselling, supervision for bilingual workers, rural

and remote outreach, older people, consumers, carers, culturally appropriate assessment tools, and suicide prevention.

a The extent to which the action plan assists in achieving the aims and objectives of the National Mental Health Strategy

*The National Action Plan on Mental Health 2006-2011*¹, produced by the Council of Australian Governments (COAG) represents an important step forward in the development of mental health services in Australia. Unfortunately, however, it does not make any mention of the issue of culture and mental health and does not incorporate the following part of recommendation 1 of *A national approach to mental health – from crisis to community: Final report*²:

The committee recommends that COAG initiates:

...Development of population-specific budgets, mental health plans and evidence based protocols for children, youth, **culturally and linguistically diverse communities** and Indigenous people...(our emphasis).

It also does not incorporate recommendations 76-81, which deal with culturally and linguistically diverse (CALD) communities and refugees.

In this respect it does not assist in implementing the multicultural aspect of the National Mental Health Strategy, which is outlined in *Framework for the implementation of the national Mental Health Plan 2003-2008 in Multicultural Australia*³.

The *Framework* outlines the cultural issues in all the areas covered by the *National Action Plan on Mental Health* and identifies four action areas:

- a population health approach to mental health for people from CALD backgrounds
- improving service responsiveness to cultural diversity
- strengthening quality
- fostering culturally inclusive research, innovation and sustainability.

The failure to incorporate these issues into *The National Action Plan on Mental Health* has implications for the provision of culturally appropriate mental health services in NSW, which are currently being developed with the context of the *Framework*.

In its *First report*⁴ (March 2006) the Select Committee paid considerable attention to the issues facing CALD communities and refugees (sections 15.66 – 15.111, pages 429 – 444) and the rationale for the importance of cultural issues in mental health is outlined in the *Framework* and the references cited there.

b The overall contribution of the action plan to the development of a coordinated infrastructure to support community-based care

The positive proposals in *The National Action Plan on Mental Health* have the potential to support community-based care but could be improved if cultural issues were taken into account. In NSW the Sydney metropolitan area has high proportions of first- and second-generation CALD communities and both the metropolitan and rural areas of NSW are seeing growth in new and emerging communities. Community-based care needs to address the diverse and changing needs of the Australian population.

c Progress towards implementing the recommendations of *A national approach to mental health – from crisis to community*

We will briefly comment here on the contribution of the Transcultural Mental Health Centre over the past 12 months to some of the recommendations as they relate to people from CALD communities.

Recommendation 10 Telephone helpline

▪ *24-Hour Counselling Service*

The Transcultural Mental Health Centre can set up a 24-Hour Crisis Line within an hour's notice of a traumatic event. It has been used immediately following the September 11 and Bali terrorist attacks, the Boxing Day Tsunami in South East Asia and the 2006 conflict in the Middle East.

The helpline offers free, counselling and emotional support for individuals, children and families in 50 languages and operates seven days a week.

Recommendation 13 Consumer Involvement

▪ *CALD Consumer Project*

A CALD consumer project officer and three part-time CALD consumer contractors were employed in 2006. A training manual, orientation program and employment policy for the contractors have been prepared and implemented.

A focus on identifying the role that culture can play in assisting recovery from mental illness has led to the development of the Shared stories project which is collecting recovery stories from CALD consumers to be published on the internet and in book form. Analysis of these stories in 2007 will inform the development of further consumer initiatives to decrease stigma and improve understanding of helpful recovery practices for CALD consumers.

These workers also provide a consumer perspective when reviewing proposed legislation, policy initiatives or planned projects at the Transcultural Mental Health Centre. They also represent the Centre as consumer spokespersons and participate on a range of committees.

Recommendation 14 Performance indicators

- *Clinical Evaluation*

The Transcultural Mental Health Centre is finalising a major evaluation of its Clinical Consultation and Assessment Service. The service employs 160 bilingual mental health clinicians working in 55 languages on a sessional basis to provide clinical assessment, care planning, consultation and brief therapeutic and educational intervention for clients of CALD background.

Initial results show that consumers respond positively to speaking to clinicians in their own language.

Recommendation 33 Postgraduate programs

- *Clinical Supervision Program*

While not a post-graduate program this unique program provides important professional development for bilingual workers. Ten clinical supervision groups in various locations in the Sydney metropolitan area, Wollongong and Queanbeyan, are attended by Transcultural Mental Health Centre sessional clinicians, bilingual counsellors and mainstream health, mental health and welfare workers.

The program was expanded in 2006-2007 to include specialist Family Therapy groups in Wollongong and Queanbeyan.

The program has also developed models for multicultural clinical supervision in rural NSW.

Recommendation 34 Allied health placements

- *Psychology Intern Program*

The TMHC Psychology Intern Program is a self-funded program. It is the only known Psychology Intern program in NSW to have as a primary focus the training of Psychology interns to work effectively with clients from non-English speaking as well as English-speaking backgrounds. Its aims are to:

- provide the supervision needed by four-year Psychology graduates (interns) before they can obtain full registration with the NSW Psychologists Registration Board.
- train interns to work effectively with clients from non-English speaking as well as English-speaking backgrounds.

The program provides training and supervision for each intern for a two-year period. It is ongoing, with new interns joining at the beginning of each year.

In the period from July 2006 to June 2007 six new interns joined the program and five interns completed the program.

Recommendation 47 Carers

- *CALD Carer Support Program*

Carer support groups are currently meeting monthly across Sydney in the following languages: Arabic, Farsi, Greek, Khmer, Korean, Maltese, Mandarin, Spanish, Tagalog, Turkish and Vietnamese, Hindi and Macedonian.

The Program provides culturally and linguistically appropriate support groups and education sessions for CALD carers; increases carers' access to mental health services and other relevant support services available in the community; encourages informal networking amongst carers for peer support and increases community awareness and understanding about mental illness, through the delivery of mental health promotion activities aimed at reducing the stigma associated with mental illness.

Recommendation 51 Children and Adolescents

- *CALD Children and Adolescents Program*

In partnership with the Children's Hospital at Westmead the Transcultural Mental Health Centre is piloting and evaluating a cultural consultation model of care, with two year funding from NSW Health, Centre for Mental Health. The Project has been set up to: enhance the awareness and understanding of clinicians about cultural and language issues and available resources; identify barriers for families of CALD backgrounds to access mental health services and to develop appropriate strategies to improve access to mental health services by families of CALD backgrounds.

The project also aims to enhance the resilience of CALD children through community development and mental health promotion initiatives, which are sensitive to their cultural values, practices and language.

A radio campaign on multicultural children and family mental health issues was aired In November 2006. This campaign is a partnership initiative between TMHC, SBS, and the Diversity Health Institute Clearinghouse. This campaign comprises a four-part series in ten languages (Arabic, Cantonese, Dinka, English, Farsi, Filipino, Greek, Hindi, Khmer, Korean, Mandarin, Samoan, Spanish, Turkish, Vietnamese).

- *Youth Mental Health Project*

In response to adolescent mental health needs the TMHC's Youth Mental Health Project has been working in collaboration with community organizations, health and mental health services and the education sector to improve the mental health status of young people from CALD backgrounds living in NSW. The project has developed mental health promotion initiatives for young people from CALD that promote understanding and recognition of mental health issues within a multicultural society and enhance-help seeking behaviours.

In partnership with the Schizophrenia Fellowship of NSW and Mental Illness Education Australia (NSW) the project coordinated the 2007 Young Writers' Competition (TransSCRIBE), launched during Youth Week in 2007. The Competition was open to young people aged 12-19 years across NSW from public, private and independent high schools.

The Transcultural Youth Mental Health Network (TransCEND) is a forum for information sharing, networking and discussion. The network coordinates forums to update knowledge in the area of CALD youth mental health issues.

Recommendation 66 Dual diagnosis

- *Co-morbidity Initiative*

The Co-morbidity Initiative, funded by NSW Health, is a statewide service providing triage, clinical consultation, assessment and referral services to people from CALD communities who experience health problems arising from their substance abuse and concurrent mental health difficulties.

This new initiative is based on the brokerage model of the Transcultural Mental Health Centre Clinical Service and represents an expansion of the service's capacity to provide effective, culturally informed primary responses to issues of co-morbidity. The existing pool of clinicians will be expanded by the recruitment of bilingual specialist drug and alcohol clinicians.

The Co-morbidity initiative will improve patient outcomes where culture is a significant factor in patient readiness and capacity to engage in treatment and it will also draw into treatment people who may be 'hard-to-reach' due to their marginalisation within their own and mainstream communities.

This new service will develop a wide range of innovative community development and education initiatives aimed at increasing awareness of social issues related to co-morbidity including cultural differences, education and family dynamics among people from CALD backgrounds. The service will provide leadership and participate in partnership projects to build

capacity with CALD communities, as well as build capacity within related agencies and services.

Recommendation 75 Older people

- *CALD Older People and Mental Health Project*

The Project, funded for two years by NSW Health, aims to enhance access to mental health services for older people from CALD backgrounds, and to improve mental health outcomes.

A needs analysis has been carried out to identify 1) which agencies older people from CALD backgrounds access when they have mental health issues 2) the type of services they receive 3) the training needs of service providers working with older people from CALD backgrounds.

A four-part radio program on health and wellbeing of older people was aired on SBS in Seniors Week in the following languages: Arabic, Croatian, English, Greek, Indonesian (Bahasa), Italian; Mandarin, Polish; Spanish, Tagalog, Vietnamese.

Recommendation 78 Culturally appropriate assessment protocols

- *Mental Health Outcomes and Assessment Tools (MH-OAT) Project*

Funding was received in 2006 from NSW Health, Centre for Mental Health to review MH-OAT and make recommendations to ensure that clinical assessment and measurement of outcomes is achieved with processes, guidelines and instruments that are culturally accurate, acceptable to the community, and meaningful to consumers and carers.

The key deliverables at the end of this 18 month Project include: the production of concrete addenda and revisions, and practical recommendations for further development of MH-OAT to enhance its use with consumers from CALD backgrounds.

The project will adopt strategies for implementing the recommendations from the project and promoting the use of the Multicultural MH-OAT with consumers from CALD backgrounds.

Recommendation 79 Partnerships

- *Program and Project Partnerships*

TMHC has developed a wide range of partnerships with government and non-government organisations such as Divisions of General Practice, The Schizophrenia Fellowship, Mental Illness Education Australia, Immigrant Women Health Services, Mt Druitt Hospital, TAFE, the Royal Prince Alfred Pain Management Centre and the Centre for Rural and Remote Mental Health, Drug and Alcohol Multicultural Education Centre.

- *TMHC Clinical Consultation and Assessment Service*
Advice, information and support is provided for people of CALD backgrounds who experience mental health problems. Assessments, counselling, individuals, family and group psycho education are provided through bilingual sessional psychologists, social workers, mental health nurses, occupational therapists and psychiatrists.

The Clinical Service now contracts 160 sessional clinicians covering 55 community languages.

Data regarding standard measures is routinely collected and entered into the MH-OAT database.

THE CCAS also provides contracted clinical services to the Multicultural Problem Gambling Service.

- *Rural and Remote Outreach*
The Clinical Service has been providing outreach services to regional NSW since 2002. In 2006-2007 the outreach service continued to service the greater southern area, in Queanbeyan (for the Macedonian community) and Griffith (for the Italian and Afghani communities).

The outreach service aims to enhance the availability of the Clinical Service to people of CALD background in selected parts of NSW. Griffith is an appropriate area for the outreach service due to many factors including the size of CALD population, local needs and viability of basing TMHC sessional clinicians at a suitable organization on one day per month.

- *Partnerships with the Area Division of GPs*
The GP project aims to increase the skills and confidence of GPs in the assessment and management of mental health problems with a focus on patients from CALD. It works in partnership with Area Divisions of General Practice and with mainstream mental health services to raise awareness of mental health issues for people from culturally diverse backgrounds.

Recommendation 80 Translated mental health information

- *Multilingual and Culturally Appropriate Materials*
The TMHC in partnership with the Diversity Health Institute Clearinghouse develops and distributes high quality resources aimed to promote the mental health of CALD communities and individuals through multilingual and culturally appropriate materials in response to community education needs.

In the 2006/2007 period a series of Wellbeing booklets were launched on *Promoting wellbeing, Stress and stress management* and *Problem solving and goal setting* were translated into eight community languages: Arabic; Chinese; Farsi; German; Greek; Italian; Spanish and Vietnamese. *A good night's sleep* was translated into: Arabic; Chinese; Greek; Italian and Maltese.

Recommendation 82 Rural and Remote

- *Transcultural Rural and Remote Project*

This project is a new access and equity initiative funded for four years by NSW Health, Centre for Mental Health, for CALD populations living in rural, regional and remote NSW. The project is a collaborative initiative of TMHC and the Centre for Rural and Remote Mental Health, Orange.

The project seeks to develop, pilot and evaluate models of best practice in rural and remote locations. The Project has set a number of partnerships with four AHSs to set up field liaison officers in Griffith, Coffs Harbour, Tamworth and Dubbo.

In the 2006-2007 period this project has worked with local partners in Orange, Griffith, Coffs Harbour, Tamworth and Dubbo to develop capacity in rural and remote areas to: enhance the social inclusion of CALD populations; identify and overcome barriers to access to mental health services for CALD populations; ensure equity in service provision of mental health services to CALD consumers, their carers and families; extend the reach of existing TMHC projects and activities and ensure the sustainability of the project's initiatives.

Community consultations have been conducted with rural communities, stakeholders and key organizations / service providers.

d Identifying any possible remaining gaps or shortfalls in funding and the range of services available for people with a mental illness

Despite considerable efforts in NSW over the past decade in improving access to mental health services for people from CALD communities, the issue of culture and mental health still requires further attention.

Cultural issues need to be integrated into every level of mental health care, from the training of medical and allied health staff, to early intervention, promotion and prevention, to research and evaluation, to consumers and carers, and to whole-of-lifespan issues. This can often be achieved with minimal resources and yet can

generate considerable savings over time by ensuring that everyone can access quality mental health information and care.

Established in 1993, the Transcultural Mental Health Centre has mainly received short-term NSW and Commonwealth government funding and limited recurrent funding. Much non-recurrent funding will expire within two years yet the demand for the Centre's services has steadily grown due to demographic changes in NSW.

According to the 2006 Census 23.8% of the NSW population was born overseas compared to 22.5% in 1991. In Sydney the figure rises to 31.7% and in some areas the figure is even higher: 49% in Fairfield/Liverpool and 44% in Canterbury/Bankstown⁵.

In NSW those who speak a language other than English at home have increased from 18.8% in 1996 to 19.9% in 2001 and 21.3% in 2006. In Sydney in 2006 almost one-third of the population (31.4%) speaks a language other than English at home, up from 29.2% in 2001 and 27.3% in 1996⁶.

As a consequence it is important that the Centre's current projects are refunded and that consideration be given to the following areas where gaps in service provision and funding remain.

Expansion of role of Clinical Service

An evaluation of the Transcultural Mental Health Centre's Clinical Consultation and Assessment Service, which has had over 13,500 referrals since it was founded in 1994, has shown that it has been increasingly called on to provide short-term counselling and therapy for people with anxiety disorders, depression and other mental health presentations. In part this reflects the long waiting lists at some specialist mental health services and the cultural and linguistic barriers faced by some CALD clients in accessing health and mental health services, particularly for counselling and short-term therapy.

These changes have been reflected in a steady increase in referrals to the Clinical Service, which more than tripled from 592 in 1994-95 to 2004 in 2006-2007. In the same period the number of contracted bilingual clinicians rose from 112 to 160. These referrals are coming from an increasingly diverse group of consumers with an increasing demand for services from new and emerging communities.

There is an increase in self referrals, referrals from rural and remote areas, and referrals from non-health sources. This means that for an increasing number of consumers their contact with the Clinical Services is their only contact with a mental health service.

Initially the Clinical Service primarily focused on working with adults but it now deals clients across the lifespan and increasingly complex cases.

Short-term counselling for CALD clients

Funding should be made available to the Transcultural Mental Health Centre Clinical Consultation and Assessment Service to cover increased demand, growing diversity of referrals and the increase in complexity of cases.

Group Supervision

The increasing number of sessional clinicians and the development of specialist areas such as children, older people and co-morbidity means that the current group supervision program will have to be expanded into individual supervision and mentoring. The need for transcultural supervision is not limited to sessional clinicians at TMHC but also applies to a range of other clinicians such as school counselors and mainstream mental health workers working with CALD clients.

Rural and Remote Outreach

The existing outreach services need to be extended into new areas of NSW and also offer clinical supervision in those areas.

Older people

Some CALD communities are ageing faster than the general population and in 2011 close to a quarter of the over 70 population in NSW will be from a CALD background.

Cultural competency training packages need to be developed for psycho-geriatric health services, aged and community care services and multicultural agencies. This should include a focus on the impact of older people's migration experiences and settlement. A protocol should be developed for the assessment, treatment and referral for CALD older people, their carers and their families.

Consumers

Consumers need to be involved with the planning and delivery of mental health services. Funding is needed for consumer consultants and to develop training programs aimed at CALD consumers and for the publication of consumer stories.

Carers

An evaluation of existing CALD carer support groups have shown they play an important role and need to be expanded to include other communities.

Suicide prevention

The Transcultural Mental Health Centre has developed a framework for cross-cultural suicide prevention⁷ but currently has no funding for projects in this area.

31 July 2007

References

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- ³ National Mental Health Strategy, *Framework for the implementation of the National Mental Health Plan 2003-2008 in multicultural Australia*. Commonwealth of Australia, Canberra, 2004.
- ⁴ Senate Select Committee on Mental Health, *A national approach to mental health – from crisis to community: First report*, March 2006.
- ⁵ Community Relations Commission for a Multicultural NSW, *The people of NSW* (http://www.crc.nsw.gov.au/statistics/nsw_overview.htm)
- ⁶ Australian Bureau of Statistics, *2006 Census Tables: Language spoken at home by sex for time series*.
- ⁷ N Dusevic, P Baume, A Malak, *Cross-cultural suicide prevention: A framework*, Transcultural Mental Health Centre and NSW Health, Centre for Mental Health, Sydney, 2002.