

28th April 2005

Submission to the Senate Inquiry into Mental Health Services 2005

The Mental Illness Fellowship North Queensland Inc is a community based, not for profit organisation, which has been supporting families and people living with mental illness in this region since 1986. Started as a 'grassroots' organisation by families and enlightened professionals to provide information, housing and support, the Fellowship has developed into a leading mental health body, acknowledged locally and nationally for its innovative program development, high quality service provision, strong advocacy and dedication to achieving positive outcomes for all those affected by mental illness.

The Fellowship developed an innovative rural outreach program in 1994 in which professional mental health staff and individuals who lived with mental illness (consumers) travelled throughout North Queensland providing:

- a.. workshops to families and workers to increase understanding and skills in managing the broad range of mental illness issues
- b.. face to face counselling for families and individuals with mental illness
- c.. community development support and information so that communities could identify and respond to their own mental health needs
- d.. community awareness activities to increase mental health literacy
- e.. mental health education to high school, targeting the vulnerable grades 10 through 12, demystifying mental illness, identifying stressors, risk factors and local supports.

The rural program was backed by a 1800 freecall supportive counselling and information service provided in part by those travelling with the program, thereby maintaining links, and in part by other professional mental health staff working with the Fellowship.

In 1996 the program received an international award for excellence from the Commonwealth Secretariat in London.

At the height of the program's operations in 1999, 1833 calls were taken on the 1800 number (average 150 per month), 32 NQ communities visited providing 114 talks/workshops to 935 participants. 97 face to face family supports were provided (104 individuals), 28 high schools received a visit, with 2153 students and teachers gaining information about mental health and mental illness.

Funding restrictions over subsequent years meant the program slowly died, despite vigorous attempts from the organisation and from our communities to access state and federal funding to maintain and expand the service, which eventually ceased operation completely in 2004.

In 2001, the Fellowship identified the desperate needs of parents living with a mental illness and parents with children with ADD, ADHD and Conduct Disorder (often families are coping with both situations) and responded by developing a specialised parenting and support program with parents, educationalists and mental health professionals. This initiative, called "Learners Permits for Parents" is supportive, nurturing and enduring, recognising that serious mental illness often spans a lifetime as does parenting.

Based on high quality research, the program was piloted through two x 6 week education programs and proved more successful with this 'difficult' client group than the Triple P parenting programs heavily funded by both state and federal governments. Yet we have been unable to secure funding to maintain this project. All activities are voluntary or self funded but it is slowly moving out across Qld as desperate families and workers search for something better and more sustainable than the funded programs. But progress is slow because of the lack

of funding. Results from pre and post testing however, continue to show impressive results.

Unfortunately, we have been unable to source funding for the parents support group which is designed to maintain learning, support and parenting development, so essential if the positive outcomes of the education program are to continue over the developmental years of childhood, through adolescence and into adulthood.

Over the years, many similar innovations have been developed by the Fellowship. Demand for our services of support, counselling, housing, rehabilitation, education and information continues to increase. Costs continue to rise. But funding has not kept pace with either. In real terms funding to the Fellowship, which is largely from Qld Health has declined. In 1998, we employed 6 full time staff. In 2005 we have four part time staff. But our 'outputs' are higher than ever, especially in counselling, housing and education. How do we do it? Through only employing professionals with a commitment to people and families with mental illness, who recognise the value and need for our service and who are willing to work twice the hours for half the pay as their government employed peers. We also survive though using more and more volunteers, often people with mental illness experiences, who see volunteering as part of their recovery process. But this too has a cost, both financial and emotional that is not funded.

The situation is totally unsustainable.

As an organisation we are vulnerable to the government inspired corporatisation of health and welfare services. Large national bodies, often without experience in mental health are taking over service delivery. The notion that they can 'buy in' expertise has not translated into quality service delivery. Instead, specialised services have slid into generalised services and lost their expertise. If this trend continues, the outcome will be services which fail to respond to the needs of local communities or individuals.

The Mental Illness Fellowship North Queensland Inc has responded to the needs of local communities for almost 20 years. It has been a leader in initiating the programmed involvement of families in the assessment, treatment and rehabilitation of their loved ones. It has championed the bio-psychosocial model of care, the development of consumer advisory groups, employment and housing programs, family support, support for the children of people with mental illness, responses to people with mental illness involved in the criminal justice system and forensic mental health care and community awareness and involvement and much more.

It is local groups like the Fellowship who raise the issues and tell the stories for those who cannot. And in the mental health area, most people cannot. Without locally based organisations like the Fellowship, many of the reforms of the last 10 - 20 years are unlikely to have occurred.

Yet we fear for our future, and the future of other regionally based mental health organisations. We have formed a number of strategic partnerships with other service providers but this may not be enough. Queensland Health's tendering and contracting processes are moving us towards becoming a pseudo arm of the Health Department with all the responsibilities and restrictions and non of the benefits. We risk losing our ability to respond quickly and effectively to local needs. We risk losing our ability to use our initiative and creativity.

The national mental health budget is totally inadequate at 7% of the total health budget. Other similar countries provide up to 30% of their health budget to mental health. Whilst the agreed best practice model of care for people with

mental illness encompasses biological, psychological and social aspects, 91% of mental health funding goes into the biological (medical) care.

90% of people with mental illness live in the community, so it makes sense to adequately support the community sector when allocating funding. It is well known that the community sector, (organisations like the Fellowship) gain better outcomes and are more efficient than large government bureaucracies.

We would like to see the mental health budget increased to 15% of the total health budget within 5 years and an increase in psychosocial rehabilitation funding to 15% of the total mental health budget. We would like to see funding increase to organisations like the Fellowship, to replicate our innovative parenting program which benefits not only the parents but helps to increase the resilience of the children of parents with mental illness. We would like to see federal government provide ongoing funding to the successful programs it pilots.

Funding for mental health has been eroding over a number of years. Huge amounts of federal government money disappear through state government administration. What eventually filters down to the grassroots is pathetic. Australia and Australians are not getting value for money from their taxes. Accountability and transparency should not be a mantra only for us in the community sector. Every dollar should be traceable from source to service. We would like to see the federal government insist on states being accountable for their mental health dollars. Perhaps then we would see an end to the constant whittling away of our funding and growth in services that assist people towards recovery of their lives and mental wellbeing.

Yours sincerely

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