



WAAMH

**Western Australian Association
for Mental Health**

14 June 2016

Sent by electronic mail:

Dear

I write to present the Western Australian Association for Mental Health (WAAMH) 2016 election platform. To improve citizenship and enable a good life for people with mental health issues, we need to maintain ensure mental health has the focus and status that it deserves. To achieve this, we need a long-term, cross-party commitment with a focus on the following objectives:

- A reduction in national suicide rates
- Improvements in the physical health of people with a mental illness
- An increase in employment rates for mental health consumers and carers
- Improvements in mental health consumer and carer participation and choice
- Maintaining current overall levels of investment in mental health, while ensuring that capacity to deliver services is not reduced.

Information in support of our platform can be found below. All Western Australian candidates are being approached with the same request.

Mental health reform is not finished. In fact, we have only just begun a journey of many years.

The most recent review of Australia's mental health system was undertaken by the National Mental Health Commission (NHMC) and delivered in November 2014. WAAMH broadly supports the recommendations of the Commission's review.

We are living in a period of unprecedented change in the mental health landscape with significant reforms having a substantial impact on people who live with mental illness, their carers and service providers. These reforms are occurring against a backdrop of three successive years in which mental health providers have dealt with a series of short-term funding extensions, pending the outcomes of the NMHC review and National Disability Insurance Scheme roll out plans, and this has diminished the capacity of the sector to respond to rapid change.

Following the election, a newly formed ***government must take urgent concrete action to give certainty to those who experience mental illness, and those who care for them and provide them with services and programs.***

A vision for change

In the lead-up to the 2016 election, we seek your renewed commitment to the reform journey. The NMHC recognised significant improvements can be made within current resources. While no one argues against the

need for greater investment, it is also clear our current investments are not always directed to the right places. We are looking to a newly elected Government to provide national leadership to guide this process.

That is why we now seek your public commitment to adopt, and from 2018, publicly report every two years, Australia's progress on these key issues:

1. **A reduction in the national suicide rate by 10% by 2020 and 50% by 2026, compared to 2014 levels**

There were 2,864 deaths due to suicide in 2014. This equates to an average of 7.8 deaths by suicide in Australia each day. In addition, around 60,000 people attempt suicide each year. More people die by suicide than on our roads.

2. **A reduction in the mortality gap for people with a mental illness**

People living with mental illness are three times more likely to have cardiovascular or respiratory diseases, and twice as likely to have diabetes. People with severe mental illness die an estimated 20 years earlier than the general population.

3. **An increase in the proportion of mental health consumers and carers in employment**

People with severe mental illness are three times more likely to be unemployed or not in the labour force, compared to people without mental health conditions. People must have access to evidence based supported employment services such as Individual Placement and Support.

4. **An increase in mental health consumer and carer participation and choice in national policy design and implementation**

Consumers and carers are the experts in what services work for them, and meaningful involvement of people with lived experience should be at the heart of service design, delivery and evaluation. Consumers and carers must be involved in decisions that affect them from services available locally to the development of national policy. This is especially the case for vulnerable groups such as Aboriginal and Torres Strait Islander peoples, CaLD, LGBTIQ and intellectual disabled.

5. **Maintain, at a minimum, overall investment in mental health, with measures that support full reinvestment of cost efficiencies and savings back into mental health programs and services**

The NMHC adopted a principle that there should be "no net reduction in overall investment in mental health." This includes a recommendation for significant increases in spending on prevention, early intervention and community-based services, with this investment leading to savings in downstream expenditures.

We seek your commitment to these goals by Friday 24 June 2016. We intend to publish all responses received on our website and in our broader communications to members and the public. I would welcome the opportunity to discuss these issues further.

Sincerely



Rod Astbury

CEO

About WAAMH

Western Australian Association for Mental Health (WAAMH) was incorporated in 1966 and is the peak body representing the community-managed mental health sector in WA. With around 150 organisational and individual members, its vision is 'as a human right, every one of us who experiences mental health issues has the resources and support needed to recover, lead a good life and contribute as active citizens.' WAAMH advocates for effective public policy on mental health issues, delivers workforce training and development and promotes positive attitudes to mental health and recovery. Further information on WAAMH can be found at waamh.org.au