

December 2021

Hello to our community of families and friends.

In August 2021, I introduced you to our Mental Health Families and Friends Tasmania (MHFFTas) CEO Communique; an opportunity for me to share the advocacy activities of our organisation with you. We spoke about systemic advocacy and mental health and alcohol and drug (AOD) reform in Tasmania (here's our [August Communique](#)).

This month, I would like to introduce you to some of the mental health reform work happening between the State and Federal Government. I'd also like to talk about the language we use, and share some examples of our advocacy in action.

Rethink 2020

Last time, we spoke about AOD and mental health reform at the state level. I mentioned that state mental health reform had been occurring since 2015 and began with the Tasmanian Government's *Rethink Mental Health 2015-2025 Plan* (a ten-year plan to improve our mental health services).

This month, I would like to highlight some of the national reform we have seen in the mental health sector. In 2017, the Australian Government released the *Fifth National Mental Health and Suicide Prevention Plan* (the [Fifth Plan](#)) which represented a commitment from all governments in Australia to work together to plan and deliver services to support mental health and suicide prevention. Following the release of the *Fifth Plan*, the Australian and Tasmanian Governments decided to work together to review the original *Rethink Mental Health 2015-2025 Plan* to make sure mental health reform in Tasmania was on track. The outcome of this review was an updated document called the [Rethink 2020 Plan](#).

The *Rethink 2020 Plan* reports on the progress made on the original *Rethink Mental Health 2015-2025 Plan* and updates the Plan's reform directions to include priorities from the *Fifth Plan*, the Tasmanian Mental Health Reform Program (we spoke about this program in August – read more [here](#)) and the National Disability Insurance Scheme. Priorities within the new *Rethink 2020 Plan* include integration, preventative health promotion, stigma reduction, peer workforce growth, and a transition from hospital to community-based care.

Since 2020, the Tasmanian and the Australian Government have been working together to put these priorities and reform directions into action. What is important about this reform activity is that the peak bodies representing mental health in Tasmania ([MHFFTas](#) – mental health families and friends, the [Mental Health Council of Tasmania](#) – service providers, and [Flourish Tasmania](#) – mental health consumers) were all included in the review process. This means that our organisation had the opportunity to share information and stories with state and federal government decision makers about what is important to families and friends in Tasmania.

For mental health families and friends, the *Rethink 2020 Plan* represents positive change. We can see this in the language

the document uses and the advocacy opportunities the reform directions provide us. For example, MHFFTas will be involved in the review of the *Mental Health Consumer and Carer Participation Framework* for Tasmania. This framework looks at how the Tasmanian Government can bring people from the community together who want to work with mental health services to promote recovery and mental wellbeing (you can read it [here](#)). (As we enter a new stage of reform in the AOD sector, we look forward to supporting something similar in the AOD space too!). We will be in touch when the review process starts to hear your views.

Our language

I'd like to talk about the language we see in our reform environment because it is a useful way of telling us whether our advocacy is working. When we see a shift in language within our communities, we know that a change has occurred.

In 2019, our community told us that the term 'families and friends' best described their role as an informal support person. This is because it described their relationship with the person they supported. They told us that it was their relationship with a person which was often the reason why they supported someone in the first place. We think that it's important to use the terms that our community members relate to, so that they know that the help we provide is for them. So, since 2019, we have used this language in our advocacy work.

When you look at the *Rethink 2020 Plan*, you might notice the terms 'mental health families and friends' or 'family members, friends and unpaid carers'. This language is new for our mental health sector and represents an important shift in the understanding that decision makers have about the role of an informal support person, that is, the role of a family member or a friend. Language shifts like this tell us that our decision makers are listening.

Upcoming advocacy

I will finish this month by sharing some of the upcoming advocacy opportunities I am looking forward to. In the months to come, MHFFTas will represent you on:

- The *Mental Health Act 2013* (Tas) Review Implementation Steering Committee.
- The Roy Fagan Centre Older Persons Mental Health Service Review Project Steering Committee.
- An advisory group to steer a two-year project conducted by Monash University and Bapcare into the mental health of young people in Tasmania.

I will provide you with an update on each of these activities when we next speak. In the meantime, I wish you well.

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