



# Budget Priority Submission

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## to the Tasmanian Government for the 2020-2021 State Budget

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# 1. Introduction

## 1.1 Mental health families & friends TASMANIA (formerly Mental Health Carers Tasmania)

Mental health families & Friends TASMANIA (MHFFTas) is a state-wide leader in the provision of mental health carer support, training, information and advocacy. We aim to improve the quality of life for the one in five Tasmanian families, friends, carers, and people living with mental health issues and mental illness. We define carers as people who provide unpaid physical, practical or emotional support to a family member, friend, neighbour, or colleague with mental ill health.

MHFFTas has a history of working with government and other stakeholders to achieve positive results for mental health carers. In recent times the organisation has:

- Worked with the Department of Premier and Cabinet towards the development of the Tasmanian Carer Policy;
- Secured the positive acknowledgement of the Department of Health and Human services (DHHS) for the insights revealed through the MHFFTas *Caring Voices Project* of 2015. MHFFTas plays an essential, pivotal role in the ongoing work related to this project by continuing to document the experiences of Tasmanian carers as well as their learning across a specific range of relevant topics. This work includes sound action-based recommendations, two of which are reflected in the proposals put forward in this submission;
- Provided Government agencies with access to carer and family representatives to advise and guide policy and service development;
- Conducted surveys and consultations with families and friends to engage with their lived experience of services in Tasmania

### Our vision

Families and friends of people affected by mental ill health are understood, respected, valued and supported to build their capacities and improve their quality of life.

### Our Mission

To promote and improve the wellbeing of families and friends of people affected by mental ill health through support and education.  
To provide systemic advocacy from a family and friends perspective drawing on lived experience to improve mental health services.

## 2. Request – Mental Health Family and Friend Peer Support Groups

MHFFTas is requesting funding to employ a full-time Family and Carer Engagement Project Officer to engage with families and friends of people with mental ill-health (carers, including “hidden carers”) to build a peer support network across the state. The cost of this proposal is an additional \$185,000 to the recurrent MHFFTas funding allocation.

The Tasmanian Government’s *Rethink Mental Health: A Long-Term Plan for Mental Health in Tasmania 2015-2025* shows clear commitment to families and carers of people with a mental illness, recognising that they “help consumers to recover and live well in the community” and also “help reduce episodes of acute illness and the need for hospital admissions”.<sup>1</sup> The Plan supports the community sector as appropriate for providing peer support, advocacy, and peak body representation for carers.

MHFFTas is proposing to set up Mental Health Family and Friends (Carer) Peer Support Groups which will meet regularly to provide support across the state to families and friends of people with a mental ill-health. MHFFTas will engage a Project Officer to work with MHFFTas to develop support groups that will meet regularly with people who share similar challenges across the Neighbourhood and Community Houses network. Research shows that these groups help improve resilience, self-efficacy, and social support, among other benefits, to work with to set up the support groups.

A significant part of this work will involve the recruitment and training of volunteer Peer Support Champions to lead the establishment and running of the support groups. These Champions, two in each Neighbourhood or Community House or other community venue taking part, will be trained and supported by MHFFTas. MHFFTas will deliver this support by providing information on mental health issues as requested by the Champions, arranging information sessions at group meetings as well as supporting the cost of delivery of the volunteer Peer Support Champions. MHFFTas will also work with the Local Community in all areas to extend the network of Mental Health Family and Friends (Carer) Peer Support Groups across the state. MHFFTas also proposes to utilise the existing network of tele video conferencing facilities around the state.

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<sup>1</sup> Tasmanian Department of Health and Human Services (2015), *Rethink Mental Health Better Mental Health and Wellbeing: A Long-Term Plan for Mental Health in Tasmania 2015-2025*, p. 6, [https://www.dhhs.tas.gov.au/\\_data/assets/pdf\\_file/0005/202496/DHHS\\_Rethink\\_Mental\\_Health\\_WEB.pdf](https://www.dhhs.tas.gov.au/_data/assets/pdf_file/0005/202496/DHHS_Rethink_Mental_Health_WEB.pdf)

### 3. Background

#### 3.1 The financial physical and mental cost of caring

An article from 2016 noted that “Australasian and international research indicates that family carers generally have poorer health and wellbeing than non-carers, especially if they have been providing long-term care for someone with severe mental illness. This can be emotionally, physically, and economically demanding and exhausting. Carers can experience distress and trauma associated with the advent of mental illness, and develop feelings of guilt, shame, anger, uncertainty, loss, and grief due to their loved one’s mental illness. Carers can also feel frustration on a regular basis related to behaviours and dilemmas of caring, and experience stigma, discrimination and isolation, including losing touch with friends, and other social costs as a result of their role.”<sup>2</sup> There are also the not inconsiderable issues of lost employment opportunities with low income as a result and reduced capacity to build superannuation.<sup>3</sup> On top of this:

- It is widely acknowledged that there is insufficient targeted support for carers of people with mental health issues, particularly those who are geographically isolated, socio-economically disadvantaged and from linguistically or culturally diverse backgrounds or other disadvantaged high-risk groups;
- Peer support and sharing of learned wisdom have been recognised by many families and carers as essential in their caring journey;
- People who have ‘been there’ have knowledge and expertise based on their own lived experience. Sharing this knowledge can help others to understand their own experience and move forward;
- Carer support groups can help to increase carers’ social connections, learning, and self-care. Carers have told us consistently that it can be hard to maintain relationships with family and friends when one is a mental health carer. Lack of family acceptance increases isolation for both carer and consumer;
- Many mental health carer supports are being withdrawn. For instance, the Commonwealth Mental Health Respite: Carer Support (MHR:CS) funding is being transferred to the NDIS. This is despite the fact that only a small number of people with psychosocial disability will be eligible for the NDIS and even those who are will require continuing support from their family or other informal carer.

A recent report, *The Economic Value of Informal Mental Health Caring in Australia*<sup>4</sup> provides the first known estimate of the economic value of informal mental health care in Australia. The results of this study show that informal mental health carers add significant economic value to the Australian mental health system, and that improvements to services for people with mental illness and their carers are warranted. One major finding of *The Economic Value of Informal Mental Health Caring in Australia* report is that carers appear to be filling in the gaps of consumer services in Australia. However, as outlined by one respondent, carers “often don’t have the skills to cope with someone who is unwell with mental illness” [Respondent 103].<sup>5</sup>

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<sup>2</sup> Yonas Mihtsuntu (2013), Reaching ‘hidden’ Carers through an integrated and collaborative service delivery model, *newparadigm* Autumn, pp. 15-19, <http://cmha.org.au/wp-content/uploads/2017/06/2013NewParadigmAutumn.pdf>

<sup>3</sup> Caring – a job & a half: Based on the stories of Mental Health Carers in Tasmania (2015), Mental Health Carers Tasmania, <https://mhfamilyfriendstas.org.au/wp-content/uploads/2017/03/2.-Caringajobahalf.pdf>

<sup>4</sup> Sandra Diminic, E Hielscher, Y Y Lee, M Harris, J Schess, J Kealton & Harvey Whiteford (2016), *The economic value of informal mental health caring in Australia: technical report*, Brisbane, The University of Queensland, [https://www.mindaustralia.org.au/sites/default/files/Mind\\_value\\_of\\_informal\\_caring\\_full\\_report.pdf](https://www.mindaustralia.org.au/sites/default/files/Mind_value_of_informal_caring_full_report.pdf)

<sup>5</sup> *The economic value of informal mental health caring in Australia: technical report*, p. 91.

### 3.2 The Government's key role

Delivering support to mental health families and friends should be a priority for all governments, as is providing services to ensure that mental health carers can continue to perform their role without significant financial disadvantage and psychosocial distress.<sup>6</sup> Even with NDIS packages, the NDIA recognises that many people with a psychosocial disability receive important support from their families and carers, and is working to support carers – whether or not they are family members - so that they can continue to provide care.

This work acknowledges that caring responsibilities exact a price and the identification and provision of support for families, friends and carers contributes positively to increasing the consumers' periods of wellness and reducing the incidence of relapse and hospitalisation.

Improving the quality of life of both carers and consumers impacts positively on physical and mental wellbeing. Supporting carers as well as consumers will help to avoid the negative impacts of reduced earning capability and loss of educational opportunities known to be experienced by carers, as well as helping to prevent substance use and possible involvement in the criminal justice system. All of these possible negative outcomes represent increased costs to government and increased distress to people living with mental ill health and their carers.

The proposed project will go a long way towards delivering the supports to Tasmanian mental health families and friends that the Tasmanian Government has committed to providing.

## 4. Funding

The State Budget provides critical opportunities to Government for recognising the role of Not-For-Profit (NGO) Community Services organisations (CSO) at the heart of our Tasmanian communities, and to address the growing inequality in our state. Against a backdrop of increasing demands for services and support and higher community expectations, as well as competition for funds, the Tasmanian community services sector needs sustainable measures from Government. These can include:

- Increasing certainty in government funding;
- Fostering innovation and collaborative partnerships among service providers, including Peak Bodies;
- Encouraging and supporting more effective and efficient organisations delivering better outcomes for our communities. This could include possible merging of like organisations;
- Extensively consulting with the sector Peak Bodies to work towards ways to benefit from emerging opportunities and respond to challenges and limitations.

## 5. Monitoring and Evaluation

The Project Officer will work with MHFFTas to design a systematic Monitoring and Evaluation Plan which will include indicators, targeted outputs and outcomes to:

- Track the progress of program implementation against pre-set targets and objectives; and
- Look at the relevance, effectiveness, efficiency and sustainability of an intervention. It will provide evidence of why targets and outcomes are or are not being achieved and addresses issues of causality.

The Monitoring and Evaluation Plan will include indicators, targeted outputs, and outcomes.

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<sup>6</sup> *The economic value of informal mental health caring in Australia: technical report*, p. xv.

## 6. Context

### 6.1 Relevant Legislation and Policies

#### Australian Government

In 2010, the Australian Government developed the National Carer Recognition Framework to “improve support for Carers and better recognise the vital social and economic contribution that Carers make to Australian Society.” The Framework comprises The Carer Recognition Act 2010 and the National Carer Strategy. The Act includes “the principle that Carers should have the same rights, choices and opportunities as other Australians, and requires Australian Public Service agencies with programs and policies directed to carers, or the people they care for, to consult with carers and report each year on what they have done to better support carers.” The National Carer Strategy contains a vision, an aim, and six priority areas for action: recognition and respect, information and access, economic security, services for carers, education and training, and health and wellbeing.<sup>7</sup>

#### Tasmanian Government

##### **Mental Health Act 2013**

Respecting and upholding the rights of consumers and carers is also vital. Tasmania introduced new mental health legislation in early 2014 (the Mental Health Act 2013). The Act recognises the rights of people with mental illness and also recognises the important role carers and family members play in the treatment of people with mental illness.<sup>8</sup>

##### **Tasmanian Carer Policy (2016 update) Department of Premier and Cabinet<sup>9</sup>**

The Government will work with carers, Carers Tasmania, and the non-government sector, as appropriate, in the development and implementation of these and other relevant initiatives (including mental health system reform) to ensure that carers’ voices are heard and reflected, and opportunities to improve the lives of carers are identified.

##### **Tasmanian Carer Action Plan 2017 – 2020 DPAC,<sup>10</sup>**

Carers are to be provided with relevant information and referred to appropriate services to assist them in their caring role. To the extent possible, carers are to be supported to enjoy optimum health, social and economic wellbeing, and access to educational and employment opportunities.

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<sup>7</sup> Caring in a world of government policies: Based on the stories of Mental Health Carers in Tasmania (2015), Mental Health Carers Tasmania, p.10, <https://mhfamilyfriendstas.org.au/wp-content/uploads/2017/03/3.-Caringinaworldofgovernmentpolicies.pdf>

<sup>8</sup> Caring in a world of government policies, p.16.

<sup>9</sup> Tasmanian Carer Policy (2016 update) Department of Premier and Cabinet, p.12, <http://documents.dpac.tas.gov.au/?a=377611>

<sup>10</sup> Tasmanian Carer Action Plan 2017 – 2020 (2017), Department of Premier and Cabinet, p.7, [http://www.dpac.tas.gov.au/data/assets/pdf\\_file/0009/360819/Tasmanian\\_Carers\\_Action\\_Plan\\_14\\_Dec\\_2017.pdf](http://www.dpac.tas.gov.au/data/assets/pdf_file/0009/360819/Tasmanian_Carers_Action_Plan_14_Dec_2017.pdf)

## 6.2 DHHS / MHFFTas Funding Agreement

The proposal for a full time a Project Officer to deliver a Peer Support program to contribute to and further enhance the evidence-based performance of MHFFTas against Key Performance Indicators (KPIs) within the DHHS/MHFFTas current funding agreement. These KPIs are used within our organisation as templates to guide and ensure a consistently high standard of service delivery. Of particular relevance to this Budget Priority Submission are:

- Identifying and facilitating collaborative partnerships between MHFFTas, government, and community organisations to enhance the representation of mental health carers' issues;
- Providing advice and making recommendations to management on developing and implementing effective and quality community engagement;
- Developing and promoting peer support initiatives in response to frequent and ongoing requests from carers; and
- Developing relationships with other stakeholders to achieve the best possible outcomes for families and carers of people with mental illness.

## 7. Supporting Documentation

MHFFTas Strategic Plan:

<https://www.mhfamiliesfriendstas.org.au/wp-content/uploads/2017/03/MHCTStrategicPlan2016-2020.pdf>

MHFFTas Operational Plan:

<https://mhfamiliesfriendstas.org.au/wp-content/uploads/2019/12/MHFFTas-Operational-Plan-2019-2020.pdf>

MHFFTas Annual Report 2018-19

<https://mhfamiliesfriendstas.org.au/wp-content/uploads/2019/11/Mental-Health-Families-and-Friends-Tasmania-Annual-Report-2018-2019.pdf>

MHFFTas Caring Voices Project 2015

<https://mhfamiliesfriendstas.org.au/wp-content/uploads/2017/05/Caring-Voices-Project-Overview.pdf>