



Submission

Tasmanian Government 2017-18 State Budget

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CONTENTS

Introduction	3
Submission in Brief.....	5
Strategic Action 1: The Mental Health Promotion Community Alliance	7
Strategic Action 2: Mental Health Promotion Resource Advisory Group	8
Strategic Action 3: Mental Health Promotion and Stigma Reduction Initiative....	8
Strategic Action 4: Tasmanian Mental Health Service Directory – Navigation Tool	9
Outcomes of Mental Health Promotion and Stigma Reduction Strategy:	10
Evaluation.....	11
Approximate Investment Required to Implement the Strategy.....	12
Appendix – Evidence to support strategy.....	13

Introduction

The Mental Health Council of Tasmania

The Mental Health Council of Tasmania (MHCT) is a member based peak body. We represent and promote the interests of community managed mental health services and have a strong commitment to enabling better mental health and wellbeing outcomes for every Tasmanian.

Our purpose

Improving mental health for all Tasmanians.

Our vision

All Tasmanians have awareness of and value their mental health and wellbeing.

Our role:

- **Provide leadership** by advocating for continuous improvement across all facets of mental health and mental health services.
- **Provide trusted advice** to our members and decision makers to enable a robust and sustainable mental health system.
- **Be a collective, representative voice** to ensure future sustainability of the sector, the community and the MHCT.
- **Form and support strong networks** and collaboration to support sector development and capacity building.
- **Promote the reduction of stigma** and champion mental health awareness and the value of good mental health.
- **Influence policy development and implementation** in the interests of our members and the needs of the broader population.

Intentions of the Budget Priority Submission

The Mental Health Council of Tasmania (MHCT) is proposing a Tasmanian Mental Health Promotion and Stigma Reduction strategy to respond to the 'Rethink Mental Health Better Mental Health and Wellbeing: A Long-Term Plan for Mental Health in Tasmania 2015-2025' reform directions. MHCT further believes that the strategy will enable Tasmania to act on Priority Area 6 of the Fifth National Mental Health Plan, stigma and discrimination reduction,¹ and initiatives 16 and 18 of the 'Healthy Tasmania: Five Year Strategic Plan' for preventative health. These initiatives commit the Tasmanian Government to increasing health literacy by championing prevention, and empowering and connecting people and services, through mapping preventative health activities and ensuring this information is readily accessible.

¹ Department of Health (2016), 'Fifth National Mental Health Plan (Draft for Consultation)', Australian Government, p. 51.

The Rethink Mental Health Plan has articulated a strong focus on promotion, prevention and early intervention (PPEI), and MHCT believes there is an urgent need for further action in these priority areas to ensure their success. Mental health is a concern for all Tasmanians whether they live with illnesses themselves, or support family, friends or colleagues with a mental health condition. Between 9 and 12% of the Australian population have a mild mental health condition; 4-6% have a moderate condition; and 2-3% live with severe mental illness, with respect to diagnosis and the intensity and duration of symptoms. This suggests more than 15,000 Tasmanians live with severe mental illness.² Not only is there a need for further supports in place to assist those Tasmanians, there is an obligation upon the Tasmanian community to shift our thinking toward preventing illness in the first place.

Through this submission, MHCT will provide a strategy that will implement a coordinated, evidence-based, whole of population approach to PPEI. There is a clear focus on severe and complex mental illness, as stigma and discrimination reduction programmes have, to date, focussed primarily on depression, anxiety, and suicide prevention. This has left an urgent and unmet need for addressing stigma and discrimination for people with complex illnesses. All Tasmanians should value and understand the need to maintain their mental health at every stage of life. This is discussed further in the Appendix dealing with the evidence base for these proposals.

Outlined below is the specific reform directions this strategy will respond to:

Rethink Reform Direction 1: Supporting Tasmanians to maximise their mental health and wellbeing, particularly in its stated objective ‘To take action to build the capacity of Tasmanians to find, understand and use health information to maximise their mental health and wellbeing.’

Rethink Reform Direction 2: A Greater Emphasis on Promotion of Positive Mental Health, Prevention of Mental Health Problems and Early Intervention.

Rethink Reform Direction 3: Take action to reduce stigma in the community in relation to mental ill-health, particularly through the **Short term strategy:** Adapt and adopt social marketing / awareness / education campaigns for Tasmania.³

Rethink Reform Direction 4: An Integrated Tasmanian Mental Health System. Our goal is a seamless and integrated mental health system that provides support in the right place and at the right time and with clear signposts about where to get help, particularly through the **Medium Term Strategy:** Develop a detailed service directory of all mental health services and related support services including key contact details and referral pathways/criteria, including mental health related training organisations.⁴

² Primary Health Tasmania (2016), ‘Mental Health Commissioning: Intentions 2016-2017’, p. 16.

³ Mental Health, Alcohol and Drug Directorate (2015), ‘Rethink Mental Health: Better Mental Health and Wellbeing’, Tasmanian Government, p. 30.

⁴ Ibid, p. 34

Submission in Brief

Proposal: Tasmanian Mental Health Promotion and Stigma Reduction Strategy

By implementing this strategy Tasmanians will have an increased understanding about how to talk and communicate about mental health and mental illness. There will be greater access and exposure to mental health prevention and promotion campaigns and more Tasmanians will recognise the risk signs and know how to intervene.

Public, primary and community mental health services will have a better understanding of the services available in Tasmania, how they interconnect and how their clients will benefit. Individuals and families will have the means to increase their understanding of conditions, service pathways and options that will ensure a greater recovery and informed choice.

There are four key actions of the strategy as outlined below:

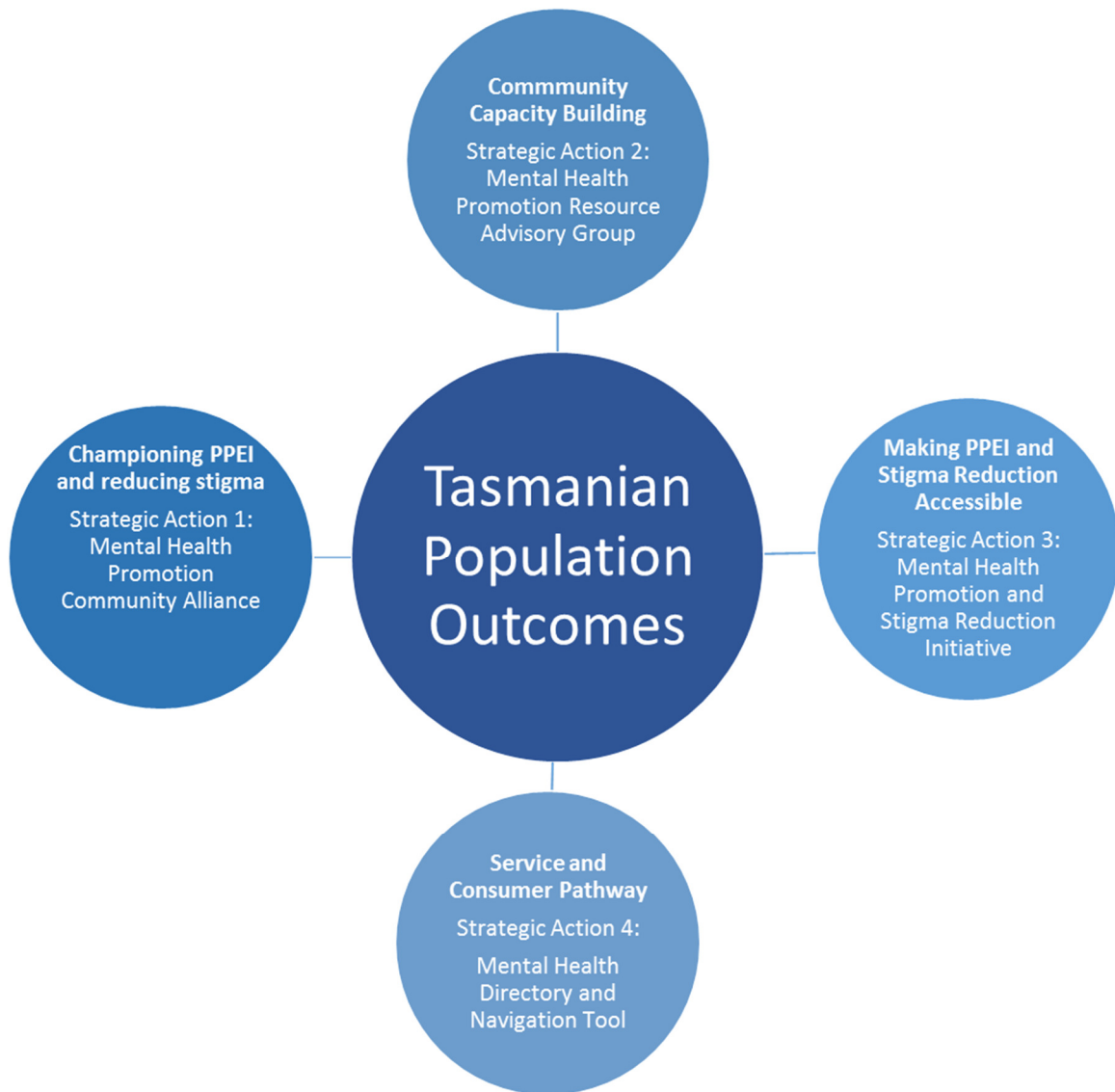
Strategic Action 1: Increase understanding of mental health and the range of promotion and prevention activities occurring within Tasmanian communities. Develop and establish a Mental Health Promotion Community Alliance (MHPCA) to coordinate and emphasise best practice in mental health promotion, prevention and early intervention (PPEI) initiatives, including for people with severe and complex mental illness.

Strategic Action 2: Establish a central resource to provide information relating to mental health and mental illness and online guidance in regards to how PPEI can be adopted into a range of environments. MHCT will engage national organisations to provide an overarching guidance advisory role to the Mental Health Promotion Community Alliance (MHPCA). The Mental Health Promotion Resource Advisory Group (MHPRAG) will be comprised of representatives from leading organisations such as SANE Australia, Mindframe, beyondblue, headspace and Mental Health First Aid.

Strategic Action 3: A champions program to empower groups and individuals wanting to engage in PPEI and stigma reduction. The advisory group will provide resources and guidance to enable the MHPCA to perform a functional role in promoting and adopting stigma reduction initiatives and increasing the capacity of existing mental health promotion programmes. The initial focus would be to develop a strategy for reducing stigma and discrimination around complex and severe mental illness.

Strategic Action 4: Health professionals and individuals will have access to information regarding services and the capacity to navigate individualised recovery pathways. Working in conjunction with key stakeholders and the Alliance, MHCT will develop a Tasmanian mental health specific service directory. The directory will need to go beyond providing listings of various mental health services, rather performing a key function in providing Tasmanians with a way to navigate the mental health system at every stage of need; from entering the system to those already utilising services and needing guidance on additional supports.

Proposed Structure of Mental Health Promotion and Stigma Reduction Strategy



Strategic Action 1: The Mental Health Promotion Community Alliance

The establishment of the Mental Health Promotion Community Alliance (MHPCA) will enable a wide range of stakeholders across the Tasmanian community so as to reflect a coordinated, targeted and integrated approach to mental health promotion, prevention and early intervention (PPEI).

In acknowledgement of the existing work that many organisations and community groups are doing in this area, the Alliance is an opportunity to expand upon best practice in PPEI and ensure that all programmes are evidence-based. This initiative will harness the good intent that exists in workplaces, schools and communities across Tasmania to reduce stigma and develop a greater understanding and acceptance towards mental health and mental illness. A concerted effort is required especially in the case of complex mental illness, so that programmes build genuine understanding, empathy, and sensitivity, and actively seek to reduce stigma and discrimination in the community.⁵ Establishing a central, easily accessible depository of guidelines, resources and programs will enable a coordinated, consistent and safe approach to increasing mental health literacy across our population.

MHCT recognises that for the Mental Health Promotion and Stigma Reduction Strategy to have real impact on the Tasmanian community there is a need to bring representatives from all facets of the community together as a collective entity.

The Mental Health Promotion Community Alliance would be open to, but not limited to, the following stakeholder groups:

- Consumers and carers
- Tasmanian mental health service providers
- GPs, psychiatrists and other clinicians
- Broader community service sector representatives from housing, health, alcohol and drugs
- Health Promotion South/North Primary Health Tasmania
- LGAT
- School principals, school associations.
- Government - DHHS, MHADD, DoE, DoJ, THS, Worksafe Tasmania.
- Tasmanian Suicide Prevention Community Network (TSPCN)
- Media
- Neighbourhood Houses and other community groups
- TCCI or other leaders in business

Features of this work will include; a comprehensive engagement and communication strategy to ensure alliance members are kept abreast of current and emerging practice, innovative approaches and research and evaluation; guidance and direction to champion PPEI in their specific areas of the

⁵ See [Appendix](#)

community; and access to training or professional development opportunities to enable the skills and knowledge base required to champion PPEI in an effective, safe and well-structured manner.

Strategic Action 2: Mental Health Promotion Resource Advisory Group

MHCT recognises the need to ensure that experts in the field of mental health promotion and stigma reduction are consistently consulted to ensure they are kept up with best practice in this area.

In an effort to not re-invent work that is well recognised nationally, MHCT sees an opportunity for the formation of a Mental Health Promotion Resource Advisory Group (MHPRAG). Each organisation that will be invited to be a part of the MHPRAG has its own strengths in either PPEI or stigma reduction and will provide guidance and expertise to the members of the Alliance.

In order for the Alliance to effectively coordinate and disseminate PPEI resources and programmes across Tasmania, the MHPRAG will provide those resources and direction in an advisory capacity to the Alliance.

The MHPRAG will be comprised of but not limited to:

- SANE Australia
- Mindframe/ Hunter Institute for Mental Health
- beyondblue
- headspace
- Other leaders in the field i.e. Act-Belong-Commit, Reach Out (potentially involved in an ad-hoc as needed basis)
- Mental health training providers

Features of this work will include; collating and developing mechanisms for alliance members to have access to information, resources, programmes and guidelines relevant to mental health promotion and stigma reduction; forum and workshop opportunities, informing national and state learning in this area; and the capacity to pilot and develop new work in Tasmania.

Strategic Action 3: Mental Health Promotion and Stigma Reduction Initiative

In order to achieve the Short Term Strategy as indicated in reform direction 3 of the Rethink Mental Health Plan, 'Adapt and adopt social marketing / awareness / education campaigns for Tasmania,'⁶there is a need to create a centralised point of contact for those activities.

Whilst a blanket approach to streamlining campaigns and other PPEI activities is not feasible, ensuring greater access for Tasmanians and a strong focus on evidence-based approaches that are well evaluated is entirely achievable.

⁶ Mental Health, Alcohol and Drug Directorate, Op Cit, p. 18

As indicated, MHCT is proposing that the MHPCA, once established, convene a working party to provide a functional role in developing the mechanisms to highlight and coordinate best practice in PPEI in Tasmania.

Features of this work will include; developing or expanding Tasmanian specific campaigns and programmes that meet needs and eliminate gaps in PPEI and stigma reduction; targeted initiatives to reduce stigma around complex and severe mental illness; an extended PPEI focus beyond Mental Health Week in Tasmania; establishing a Mental Health Awards programme to highlight best practice across a range of categories and sectors within the Tasmanian community; and establishing a network of mental health promotion champions to disseminate resources and implement programmes within their organisations and community networks.

Strategic Action 4: Tasmanian Mental Health Service Directory – Navigation Tool

MHCT is aware that there are service directories either already live or in development to assist Tasmanians to access information about mental health services. In order to directly respond to the specific Medium Term Strategy in the Rethink Mental Health plan, “Develop a detailed service directory of all mental health services and related support services including key contact details and referral pathways/criteria, including mental health related training organisations,”⁷ MHCT believes any website will need to extend beyond a simple directory.

The mental health system is complex and diverse across Tasmania. People cycle in and out of acute care and community services and require different psychosocial supports depending on need. At other times, people spend extended periods in facilities and services inappropriate to their needs because clinicians are unsure of appropriate referrals, and what services and pathways already exist in the sector. What is required is a navigation tool equipping individuals and families to move through the system in a way that simplifies these complexities, and to inform individual care plans. The tool will similarly empower the Tasmanian Health Service and clinicians to guide clients efficiently and effectively, to place them on appropriate pathways, and to ensure they have continuity of support.

This site will be specific to Tasmanian mental health services, and provide details to the relevant point of entry to the system and information regarding the referral pathways for each service as well as how to access other appropriate supports depending on level of need. Essentially the directory will be less of a list of services and more of a pathway to guide individuals through what is likely an already confusing and complex time in their lives.

The navigation tool will be a platform that complements the existing strategy to create a more integrated system that is person-centred. Individuals and their families will have the capacity to see, via the site, an interactive map of the mental health sector across the entire spectrum of care.

⁷ Mental Health, Alcohol and Drug Directorate (2015), Ibid, p. 34.

Working within this more integrated pathway will allow for a smoother transition into stepped models of care.⁸

This initiative has strong support from mental health services and community managed organisations as they have expressed as an urgent priority the need to construct a single, unified interface that provides service information that incorporates multiple models of care into a client-centred pathway.⁹

Key concepts to develop the Navigation Tool:

Intuitive

The directory needs to be intuitive and provide clear pathways for those who know what they are looking for and those who don't know where to start.

Accessible

It needs to be accessible to those who have low levels of general literacy, computer literacy and mental health literacy.

Easy to navigate

A site that is intuitive, accessible and easy to navigate - minimal scrolling, limited tabs and no more than 3 clicks to get to what you need should be the benchmark.

Features of this work will include; reviewing existing directories and navigation style pathways; consultation and focus groups with stakeholders and the wider community; site testing, with focus groups at various stages; coordination with service providers allowing them to market their service within the site and keep the information accurate and relevant; establishing processes to review, update and maintain the site.

Outcomes of Mental Health Promotion and Stigma Reduction Strategy:

The proposed strategy incorporating each of the four Strategic Actions is intended to have the following outcomes:

- The Mental Health Promotion Community Alliance is able to represent a broad range of sectors and groups within the Tasmanian community.
- The Alliance works cohesively to increase the prominence of PPEI engagement in Tasmania.
- The Alliance is demonstrating best practice in PPEI, particularly in communications and campaign strategies.
- The Tasmanian community is provided with and has access to programmes, resources and information that will improve overall mental health, awareness, understanding, and prevent illness.

⁸See [Appendix](#)

⁹ Mental Health Council of Tasmania and Andrew Hollo (2016), 'A New Mental Health System What Now,' <http://www.mhct.org/wp-content/uploads/2016/12/Andrew-Hollo-All-Slides-MHCT-Seminar.pdf>

- The Tasmanian community values their mental health and understands how to maintain it.
- There is reduced stigma and discrimination within the Tasmanian community for people experiencing mental illness, including complex and severe mental illnesses.
- Tasmanians accessing mental health services or wanting to learn more about services available will have the ability to do so with relative ease.
- All mental health service providers have the platform to promote their service to Tasmanians.

Evaluation

Outlined below is a suggested plan of evaluation processes for each strategic action.

MHCT recommends that it will be necessary to work in close consultation with the state government on an evaluation strategy and in particular representatives from the Mental Health Alcohol and Drug Directorate and Population Health. This close working relationship will ensure that appropriate measures, methodology and success indicators are established.

Strategic Action 1: The Mental Health Promotion Community Alliance

The MHPCA will provide, via MHCT, reports on progress and activities to the Rethink Mental Health Steering Committee.

Success indicators will be established within the Alliance via the Terms of Reference.

Members of the Alliance will have the opportunity to review their involvement and provide evaluation of the administration of the group via an annual survey.

Strategic Action 2: Mental Health Promotion Resource Advisory Group

Members of the Advisory Group will have the opportunity to review their involvement and provide evaluation of the administration of the group via a yearly survey.

Strategic Action 3: Mental Health Promotion and Stigma Reduction Initiative

Internal evaluation of the initiative will be conducted by MHCT and provided as part of their reporting requirements to funding bodies.

External evaluation will be required initially at the 6 month and 12 month milestones, with ongoing external evaluation to directly assess the success of the initiative via a population-based survey within a variety of demographics within the Tasmanian community. This will assess the improved awareness of mental health within the community, the understanding around maintaining mental health and the reduction of stigma. Ongoing data collection will measure the increased number and reach of mental health promotion activities and events and the uptake of specific programs and resources.

As part of Strategic Actions 1 – 3 evaluation processes, a feasibility and ongoing sustainability strategy will need to be developed.

Strategic Action 4: Tasmanian Mental Health Service Directory – Navigation Tool

Internal evaluation of the initiative will be conducted by MHCT and provided as part of their reporting requirements to funding bodies.

Evaluation will need to include ongoing mapping of existing services and the continuity of services to ensure the navigation tool is best representing the mental health sector and meeting the needs of consumers.

Focus groups, including consumers and carers already within mental health services will provide evaluation from concept to design, testing, launch and ongoing maintenance.

External professional evaluation will be required at the 6 month and 12 month milestones, after the launch of the site.

Approximate Investment Required to Implement the Strategy

<p>\$120,000 Establishment fund Years 1-2</p>	<ul style="list-style-type: none"> • Environmental scan - national and international examples/features • Design, develop and build of websites • Focus groups - including website testing • Consultations - to establish contributor networks and processes • Project and admin officer - .5 FTE
<p>\$160,000 Annual investment (to be reviewed after 3 years)</p>	<ul style="list-style-type: none"> • Project Officer - 1 FTE • Mental health awards program • Alliance learning and development program (meetings, forums) • Communications strategy - social media, Alliance engagement, marketing and promotion • Consumer and carer consultations • Training fund - to ensure continuous upskilling of alliance members and communities
<p>\$80,000 Impact Evaluation Actions 1 and 3 Year 3</p>	<ul style="list-style-type: none"> • Establish benchmarks in year 1 • Design evaluation methodology and outcomes • Alliance review - increase in activities, communications, adoption of best practice • Community review - increase in awareness and mental health literacy, understanding of mental health, mental illness and risk management (what to do) • Population survey
<p>TOTAL INVESTMENT Year 1 \$220,000 Year 2 \$220,000 Year 3 \$200,000</p>	

Appendix – Evidence base of the strategy.

The Mental Health Council of Tasmania, as a peak body, makes its submission after consultations with its members, and within the larger direction of reform in mental health by the Tasmanian and Commonwealth governments. The submission is made with reference to the Fifth National Mental Health Plan (FNMHP), in its draft form, the Rethink plan of the Tasmanian Government, for 2015 through 2025, and the Key Directions and Priorities 2016-2019 document produced by MHCT after a forum held with the Community Managed Mental Health (CMMH) sector and with policymakers. These reports converge on common areas of improvement for policy and service delivery, and have guided the development of the initiatives proposed herein.

Mental health promotion and stigma reduction

Stigma and discrimination challenge all those living with mental illness. MHCT has developed Strategic Actions 1,2 and 3 to build capacity in the sector to challenge stigma, to broaden the remit of conventional programmes, and to unite best practice and evidence-based resources with a broad platform for disseminating these vital messages. As a sector, and as a community, great strides have been made in challenging stigma, and the transition towards awareness, compassion, and understanding for those living with mental illness has been hard-won, after decades of advocacy and support. These successes are, however, not enjoyed equally, and emergent understanding of mild-moderate anxiety and depression has not been matched by compassion towards those living with severe and complex mental illness. The FNMHP identifies this as Action 19, and states that governments “... will broaden their efforts to reduce stigma and discrimination to include a focus on people with severe mental illness” and that this is “a shared endeavour between governments, consumers and carers, community groups and key organisations.”¹⁰ The emphasis on promotion, prevention and early intervention (PPEI) and combating stigma within Rethink likewise does not exclude those living with severe and complex mental illness. A genuine commitment to improving the lives of all Tasmanians means accepting the shared responsibility to challenge stigma, discrimination and disadvantage for all those living with mental illness.

Rethink’s Reform Direction 3 commits the Tasmanian Government, and the sector in Tasmania, to addressing stigma and mental illness. As acknowledged and supported by a review of the literature, the “flawed beliefs, prejudice, and stereotypes” which remain in the community, and are enshrined in policy and practice in government, education, and private businesses, can even “lead people with mental illness and their families to self-stigmatise” and can “result in poorer mental health outcomes, an increased risk of mental illness and can contribute to low levels of service utilisation.”¹¹ This challenge is heightened as we place greater emphasis on the stigma afflicting those living with complex and severe illnesses. People living these conditions face greater adversity in the depth of

¹⁰ Department of Health (2016), Op Cit, p. 52.

¹¹ Mental Health, Alcohol and Drug Directorate (2015), Op Cit, p. 18.

negative community attitudes, and themselves occupy a vulnerable position; poor understanding, ignorance, and accommodations for severe mental illness persist in the community, and the broader awareness of depression, anxiety, and even suicide often still leaves people with complex conditions invisible.¹² It is incumbent on the Tasmanian Government to act, and to develop a robust response to Rethink, as an expression of the unmet needs of people living with mental illness in Tasmania.

The initiatives proposed in this submission seeks to build capacity in community, government, education, and industry to challenge stigma and be inclusive towards all those living with mental illness. Building the capacity of people within a variety of sectors across the Tasmanian community to act as champions for all those living with mental illness, including severe and complex illnesses, is a key part of our proposed response to Reform Directions 1 and 2 under Rethink. This means shifting attitudes, starting informed conversations, and building empathy and compassion; it means collaboration and coordination between all levels of government, public service providers, the CMMH sector, clinicians, employers, educators, the wider community sector, and the media. It means leadership, which should be assumed by the Tasmanian Government and by MHCT, with a full commitment to accountability and outcomes.

Similar frameworks and PPEI strategies have been established in mental health and other sectors both in Australia and internationally. For example, in Philadelphia in the United States the 'Healthy Minds Philly' initiative combines PPEI resources, training, screen and service information into one centralised location.¹³ This model demonstrates the need for coordination through effective communication and providing a cohesive strategy that can unite the community to maintain and support their mental health.

The Hunter Institute of Mental Health has devised a 'Prevention First' PPEI strategy that highlights the need to, "Provide education to the community on the signs and symptoms of the full range of mental illnesses ...to enhance early help-seeking... Build the capacity of teachers, managers and supervisors, sporting coaches, emergency services and other community gatekeepers to identify the early signs of mental ill-health and pathways to support... [and] Foster partnerships across government, non-government and primary care service providers, to ensure effective pathways between agencies and services for people needing assessment or support."¹⁴

MHCT's proposed strategy draws from the expertise of leaders in mental health across the world and acknowledges the need to tailor our PPEI and stigma reduction strategy to the specific needs of Tasmanians.

Service accessibility, pathways, and the stepped model of care

The mental health system in Tasmania is complex, and is underpinned by a heterogeneous mix of funding arrangements, provider types, and clinical and non-clinical approaches. This creates numerous entry and exit points, unpredictable costs, and a vastly complex network of referral pathways and

¹² Department of Health (2016), Op Cit, p. 53.

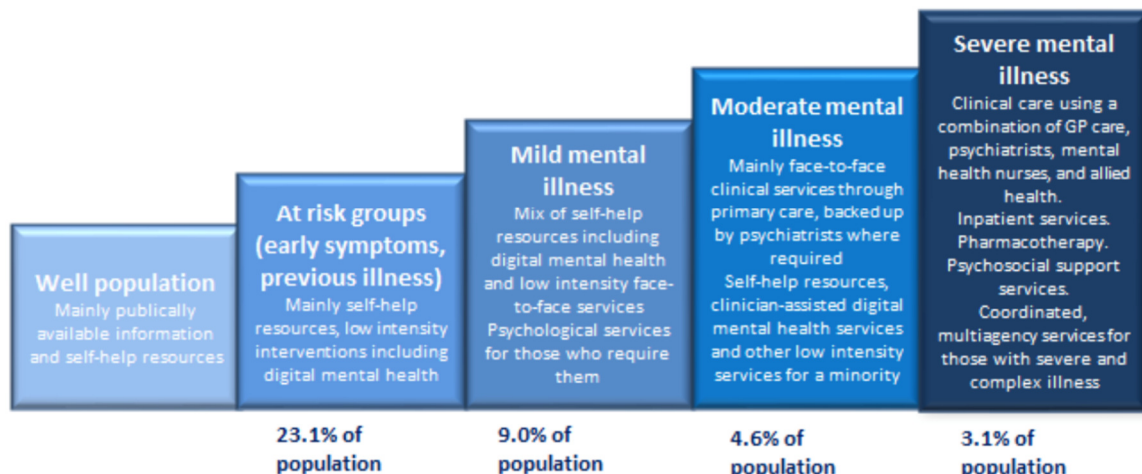
¹³ City of Philadelphia Department of Behavioral Health and Intellectual disAbility Services (2016), 'Healthy Minds Philly,' <http://healthymindsphilly.org/>

¹⁴ Hunter Institute of Mental Health (2015). Prevention First: A Prevention and Promotion Framework for Mental Health. Newcastle, Australia, p. 26.

requirements. As a consequence, it also creates many opportunities for people living with mental illness to fall out of care, or to receive care inappropriate for their needs. Strategic Action 4 was developed to empower people with mental illness, carers, and the sector to navigate these pathways, and to reduce the risk of clients receiving inadequate or inappropriate care. Accessible, timely and accurate information is needed to underpin any genuinely person-centred model of care. What has historically decided one person’s set of options is often opaque, and predicated more on a given service provider’s network or established practices than on an honest and current assessment of a client’s needs, and the services available.

Government at all levels has undertaken to challenge this status quo, and to endorse a person-centred model of care. Specific policy shifts have already imposed this on some parts of the sector, such as the NDIS, but an inadequate effort has been made to provide clients with accurate information about the breadth of service providers available to them, and the entry, exit and transition pathways. The FNMHP refers to stepped levels of care as one way to conceptualise these pathways.

Figure 3: Mental health stepped care levels of need and services



Fifth National Mental Health Plan p. 23, adapted from the Australian Government Response to Contributing Lives, Thriving Communities.

This is not only a cross-sectional framework; clients transition between steps, transition between service providers, and transition between service types and mixes of services, as their needs change themselves. By providing accessible, intelligible, and accurate information on services, entry and exit points, and transition pathways available, people living with mental illness will be empowered to have a greater voice in their own care. Clients will also be empowered to seek services and referrals, if the pathways provided by clinicians or upon discharge from residential care are inadequate or inappropriate.

The Australian Government has committed to developing a digital mental health gateway in its Response to the Contributing Lives, Thriving Communities review.¹⁵ MHCT envisions this work as

¹⁵ Department of Health (2015), ‘Australian Government Response to Contributing Lives, Thriving Communities – Review of Mental Health Programmes and Services’, Australian Government, pp. 12-13.

separate and complementary to this project, especially in that the Commonwealth proposal has an explicit focus on “self-guided and clinician-moderated digital mental health services, particularly for depression and anxiety.” MHCT’s proposed Strategic Action 4 is intended to make the breadth of services available to people with mental illness, including severe and complex mental illness, accessible and navigable, and to encourage and facilitate appropriate pathways and gateways into and between services. The proposed Navigation Tool will harness the digital mental health gateway when it is in place to integrate digital mental health within its scope, but will importantly provide specialised information about Tasmanian providers and face-to-face services.

Rethink makes reference in Reform Direction 1 to the need to provide information and support so that Tasmanians can access the care and services that will maximise their well-being and support their recovery. The complexity of the system as it exists places a responsibility on the sector and governments to smooth pathways for clients, and to provide up-to-date and accessible information that is appropriate to their needs. Without this information, the benefits promised by increased mobility and choice within the sector, and by Rethink, will instead lead to inadequate care, or even heightened disadvantage.