# → The New Normal





Guaranteeing place-based and person-centred Mental Health Access, Equity and Education for all Australians

This is the first Federal election since the release of the Productivity Commission's 2020 inquiry report on Mental Health. The Report recommended place-based solutions and increased coordination of funding between our State and Federal Governments.

The pandemic has had impacts on the mental health and wellbeing of all Australians. But for Tasmanians, through our unique social, economic, and geographical challenges, those impacts have been particularly significant. With these unique challenges come unique opportunities.

"I don't have \$200 spare to pay up front for my ongoing psychiatrist appointments, and even after the rebate, \$90 is a massive amount to be out of pocket!" - De-arne

The strength of Tasmania's communities, combined with our care and compassion for each other, puts us in a position to be mental health and wellbeing leaders, and demonstrate to the rest of Australia what can be achieved if we invest in the mental health and wellbeing of our people, no matter where we live, work or play.

"I knew I needed help, but I was worried about what my friends and family would think, and that I'd become a burden on them." – James

As we look towards the future it is time for all sides of politics to demonstrate their commitment to our mental health and wellbeing with appropriate funding, resources, and long-term vision.

"I go into hospital for a lengthy stay, get better, and am then sent home to relapse until I'm able to access the help and support I need in my community." – Danielle The Mental Health Council of Tasmania calls on political leaders to:

- Commit to and progress the work already underway driving national mental health, suicide prevention and stigma reduction reform across Australia.
- Respect each jurisdiction's deep and inherent understanding of their own region's mental health and suicide prevention needs.
- Fund place-based, personcentred, equitable and affordable mental health care for every Australian, regardless of their circumstances and location.
- Prioritise comprehensive statebased mapping of services and demand for psychosocial supports outside the NDIS, as outlined in the National Agreement.

## → What Tasmanians need



#### 1. LOCALISED AND SCALABLE MENTAL HEALTH LITERACY AND STIGMA REDUCTION INITIATIVES

The National Mental Health and Suicide Prevention Agreement commits to:

'reducing stigma and discrimination for those affected by mental ill-health by responding proactively and providing leadership when stigma or discrimination is seen, by empowering consumers and carers to speak about the impacts of stigma and discrimination, and by contributing to promotion and normalisation of help seeking'

MHCT acknowledges the damaging and dangerous impacts of stigma and discrimination in relation to mental health and wellbeing, mental illness and suicide, and supports strategies to reduce these impacts wherever they arise in the community.

MHCT and its members support place-based and person-centred collaboration with individuals, workforces and communities to codesign and implement a locally led response that encourages safe and respectful mental health literacy education to support the reduction of stigma.

That is why we strongly urge the Federal Government to invest in a campaign that assists people to better understand and take ownership over their own mental health through education, while encouraging them to seek help and support early through targeted initiatives to reduce stigma.



With our unique and varied geography and demography, Tasmania is the perfect state to develop and champion a stigma reduction and mental health literacy campaign that is scalable, transferable and tailorable. The Federal Government must prioritise this literacy and stigma reduction initiative to ensure people are empowered with the skills and knowledge they need to help them stay well and live healthy, happy and productive lives.

#### 2. ACCESS TO AFFORDABLE MENTAL HEALTH SERVICES

In January 2022, the Commonwealth Government removed a 50% loading (Item 288) that was used for some rural psychiatric services. The removal of this loading has resulted in providers no longer bulk-billing their patients for their services, as they are faced with the choice to absorb the costs previously covered by the loading themselves, or pass these costs onto the consumer, making many psychiatric services no longer affordable for Tasmanians. This MBS item number was claimed over 8000 times in Tasmania in 2021.

The Commonwealth Government's decision to amend and remove such items from the Medicare Benefits Scheme disproportionately impacts Australians living in regional, rural and remote locations. Given Tasmania's exclusively regional population, the impact on the state's already heavily burdened and fragmented mental health system, and

the fair and equitable delivery of services is significant. Tasmanians are being unfairly disadvantaged and disproportionately impacted by the cessation of MBS Item 288 and other proposed MBS changes.

In addition, economic barriers are accumulating for consumers, including the cost of living and an increase in medicine prices due to recent changes to the Pharmaceutical Benefits Scheme (PBS).



Item 288 on the Medicare Benefits Scheme (MBS) should be immediately reinstated and any further changes to the MBS system be person-centred, equitable and affordable for every Australian, regardless of their circumstances and location.

### 3. SUPPORTS FOR PEOPLE TO RECOVER AND LIVE WELL IN THEIR COMMUNITY

It's imperative that all Tasmanians living with a psychosocial disability, have access to a full range of services that support improving quality of life and full participation in the community.

Many Tasmanians who do not meet the eligibility criteria for the NDIS, do not have capacity, or have made the decision not to apply, still rely on some level of longer-term, ongoing supports and services to meet their needs. These supports are in danger of disappearing if the Federal Government does not commit to fund the community-based programs and services that many people rely on to live well.



The Federal Government must ensure people are not left behind, acknowledge the current shortfall in funding for people who fall outside of the NDIS, and commit to adequately fund, community-based psychosocial supports and services that people need to ensure full participation in their community.