



Australian Health Care Reform Alliance

C/- PO Box 280 Deakin West ACT 2600 ABN 64 051 645 674
www.healthreform.org.au

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Alliance calls for Genuine Change in Mental Health

The Australian Health Care Reform Alliance (AHCRA) today joined the current chorus of voices to radically restructure the mental health system.

“Why aren’t governments concerned that people with serious mental illnesses have significantly lower life expectancy, up to 20 years less than the general population? Yet many Australians miss out on the care they need” said Tony McBride, Chair of AHCRA.

“Governments across all jurisdictions need to wake up to this reality and double the funding needed to create an integrated and effective system in which Australia’s dedicated, but often hamstrung, health practitioners can work. There are far too many dangerous gaps in mental health and suicide prevention.”

Suicide remains the leading cause of death for Australians aged between 15 and 44 years, and people with mental illness also suffer worse physical health and greater rates of chronic disease. Research also shows they tend to receive less preventive and ongoing care for these illnesses.

Sebastian Rosenberg, Senior Lecturer at the Brain and Mind Research Institute at the University of Sydney and AHCRA Executive member said that governments drastically underfund what is currently a fragmented and inequitable system despite the fact that poor mental health is something that directly affects almost half of all Australians during their life, and indirectly their family members, friends or colleagues. “Mental illness is primarily a young person’s problem. So unlike many physical illnesses, around 75% of all mental illnesses manifest before the age of 24 years. Failure to properly address mental health problems as they emerge can mean lifelong disability”.

Although Australia has produced a ‘wheelbarrow-full’ of high quality mental health policies and strategies, AHCRA agrees with the National Mental Health Commission that Australia’s mental health system is still heavily over-focussed on hospital/institution-based acute care. “There has been a major deinstitutionalisation process over the last 20 years but without sufficient investment in community-based mental health services to support people, to enable them to manage their illnesses and live well in the community, people affected are working at this with one-hand tied behind their back. In Australia community-based service provision accounts for only around 8% of total mental health spending compared to 28% in New Zealand,” Mr Rosenberg said.

AHCRA has outlined a range of short, medium and long-term strategies to create a more effective mental health care sector that can reshape the health system to be more equitable and sustainable. In the short term, we need to:

- Draw on the work of the Commission in relation to gaps, inefficiencies and areas of duplication in the planning and governance of mental health services and programs between federal and state, public and private and the hospital and community sectors;
- An immediate boost in funding for mental health, focussed on community-based services;
- Articulate a realistic set of outcome measures and targets for mental health services and programs which work at the local and regional level; and

