Mental Health Network Update

April 2021

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Dear Mental Health Network members

There have been a number of exciting things happening in the Mental Health Network that I would like to share with you. I have already sent you information out about the **National Research Translation Centre to Implement Mental Health Care at Scale in Primary Care and Community Settings (ALIVE)**. The ACI and the Mental Health Network are partnering on this fabulous initiative.

The National Research Translation Centre to Implement Mental Health Care at Scale in Primary Care and Community Settings (ALIVE) marks a new era in mental health care across Australia. The funding ($10M) was announced 16th March 2021 for five years from the National Health and Medical Research Council [(NHMRC) Special Initiative in Mental Health (SIMH)](#)

The SIMH called for "innovative, high quality implementation research to improve health outcomes and outlooks for people living with mental illness." It suggested that, "the centre will operate as a virtual network across Australia, coordinated by a single institution acting as an administrative hub".

The University of Melbourne welcomes the opportunity to be the administrative hub for the network and to support the SIMH call for "a multidisciplinary and nationally focused team to establish a national centre for innovation in mental health care as a collaborative network across Australia."

See the [Website](#) for more information about how you can get involved.

The other exciting news is that the ACI Co-design toolkit website has now been completed - please see the links to check this out.

[ACI co-design toolkit](#)

[Working with consumers](#)

COVID-19 Mental Health Community of Practice Update

For the latest information regarding COVID-19 please see the [Risk Monitoring Dashboard, COVID Weekly Report](#) and attached MH-TRACE Report. For more clinical guidance and resources, together with details on the communities of practice please go to the [website.](#)

The COVID-19 Critical Intelligence Unit has completed a rapid evidence check on models or care for children and young people with mental health issues as a result of the COVID-19 pandemic. [Read the report here](#).

News

- The [Royal Commission into Victoria's Mental Health System final report](#) has been released.

- The NSW Government's re-write of forensic mental health laws to help boost community safety has now come into force, [read the media release](#).

- The Mental Health Commission of Canada is set to inquire, inspire, and improve in their new 10-year strategic plan [Answering the Call: Strategic Plan 2021 - 2031](#) that aims at transformational change in Canada's mental health landscape.

Focus: international mental health and wellbeing plans

Information from three countries about their plans for mental health and wellbeing is outlined below:

- the Ministry of Health in Aotearoa/New Zealand has updated its former Mental Wellbeing Plan to incorporate COVID-19 factors

- the Scottish Government has made mental health and wellbeing a priority in the pandemic

- the Netherlands has published research looking at the effects of the pandemic and ways that this country can be better prepared for the future.

Aotearoa/New Zealand

Ministry of Health: Kia Kaha, Kia Mâia, Kia Ora Aotearoa: COVID-19 Psychosocial and Mental Wellbeing Plan

December 2020

The mental wellbeing framework has a vision of: Pae ora (healthy futures): An equitable and thriving Aotearoa in which mental wellbeing is promoted and protected.

Pae ora is a holistic concept that includes the following interconnected elements:

- Mauri ora – healthy individuals: taha tinana (physical health), taha wairua (spiritual wellbeing) and taha hinengaro (mental wellbeing) are important interconnected elements of mauri ora. Protecting our mental wellbeing is essential for all of us, as is equitable access to effective mental wellbeing support when needed.

- Whânau ora – healthy families: whânau are integral to our wellbeing. We all need to belong, to share, to feel cared for, and to have close relationships. This can apply beyond blood-ties, for instance in rainbow communities, where whânau may be interpreted more widely than people with genealogical links.

- Wai ora – healthy environments: the communities and wider environments in which we live, learn, work and play need to be safe and support mental wellbeing. All people should be able to easily and equitably access social supports, including education, housing and income support**.**

This vision and its connected elements are consistent with Whakamaua: Mâori Health Action Plan 2020–2025, which outlines an approach to achieving pae ora.

The path to ensuring wellbeing for Mâori provides a platform for all people in Aotearoa New Zealand to live with good health and wellbeing. To realise the vision, the 12 to 18-month goal is ensuring people are able to build and sustain mental wellbeing so that they can adapt and thrive during the response to, and recovery from COVID-19.

[Read the Kia Kaha, Kia Mâia, Kia Ora Aotearoa: COVID-19 Psychosocial and Mental Wellbeing Plan – December 2020](#)

Scotland

Scottish Government: Coronavirus (COVID-19): mental health - transition and recovery plan

2020

This plan outlines the Scottish Government's response to the mental health impacts of Covid-19. It addresses the challenges that the pandemic has had, and will continue to have, on the population's mental health.

As we learn to live with the pandemic, they have committed to continue to support good mental health and wellbeing, to help people manage their own mental health, and to build their emotional resilience. They want to ensure that people get the right support, at the right time, and in the right setting – this includes when mental illness does occur. They stress that they will support mental health recovery in a way that is personal to each individual's journey, and which focuses on their rights.

The plan restates the need to create and protect an environment which promotes the right to good mental health, and we will embed human rights, equality, dignity, and the voice of lived experience at the heart of our approach.

Read the Coronavirus (COVID-19): mental health - transition and recovery plan

The Netherlands

National Institute for Health and Environment: Ministry of Health Welfare and Sport - Mental Health: The Public Health Foresight Study

January 2021

The Public Health Foresight Study shows the effects of the corona crisis have a greater impact on vulnerable groups in society, such as lower-educated adults, young people, the elderly and people with underlying health problems. This not only concerns the direct, immediate consequences but also the indirect, future consequences.

The direct consequences of the coronavirus are huge, in the Netherlands and elsewhere. Mortality from COVID-19 will probably be in the top three causes of death in 2020. The burden of disease is five times higher than with normal seasonal flu. Without the coronavirus measures that were implemented, the burden of disease from COVID-19 would have been even higher. It should be noted that the second wave of COVID-19 has not been incorporated into these figures yet. The indirect effects of COVID-19 are also significant: access to regular health care has (temporarily) been limited, lifestyles have changed, and social life has been impoverished as a result of coronavirus measures.

Better prepared for the future

The results of this foresight study paint a picture of a society that has been hit hard at all levels by the coronavirus pandemic. Being better prepared for the future calls for:

- Greater commitment to integrated prevention.
- Consideration of chronic illnesses as well as infectious diseases.
- More insight into mental health.
- More intensive cross-domain cooperation

[Read about how COVID-19 consequences impact vulnerable groups more in the long term](#).

An [infographic from Centre for Global Health Inequalities Research (CHAIN)](#) at the Norwegian University for Science and Technology (NTNU) shows emerging evidence suggests that COVID-19 is experienced unequally, with higher rates of infection and mortality among the most disadvantaged communities: it is not a socially neutral disease.

Mental Health Research

Floods leave a legacy of mental health problems — and disadvantaged people are often hardest hit
After parts of NSW has been met with floods and several evacuated, it is important to recognise the mental health impacts of floods. Research evidence shows that the long-term impacts on mental health can be profound and it is often the most disadvantaged populations that are hardest hit.
[Read about it in The Conversation](#)

Emerging Minds - Highlights in Child Mental Health Research: January 2021
The monthly research summary provides a selection of recently released papers, systematic reviews, and meta-analyses related to infant and child mental health.
[Read the summary here](#)

Rapid Design and Delivery of an Experience-Based Co-designed Mobile App to Support the Mental Health Needs of Health Care Workers Affected by the COVID-19 Pandemic: Impact Evaluation Protocol
The COVID-19 pandemic has highlighted the importance of health care workers' mental health and well-being for the successful function of the health care system. This impact evaluation examines the rapid design, development, and implementation of the RMHive app and its impact on mental health outcomes for health care workers.
[Read the article here](#)

Prevalence of adverse childhood experiences among individuals aged 45 to 85 years: a cross-sectional analysis of the Canadian Longitudinal Study on Aging
McMaster University, 2021

New research from McMaster University has found that roughly three in every five Canadian adults aged 45 to 85 have been exposed to childhood abuse, neglect, intimate partner violence or other household adversity. Adverse childhood experiences were highly prevalent across all demographic groups with substantial heterogeneity in the distribution among the middle and older age population. The high prevalence of ACEs and their potential negative consequences on health and well-being emphasize the need to develop and promote trauma-informed care to assist individuals affected by ACEs.
[Read the article here](#)

Experience of emergency department use among persons with a history of adverse childhood experiences
BMC Health Services Research, 2021

People with high ACE scores have, on average, lower levels of distress tolerance and poorer emotional regulation. This can lead to difficult interactions in healthcare settings, which may have an impact on access to and receipt of appropriate and acceptable patient-centred care. This in turn may impact health outcomes, further exacerbating health inequities among groups affected by historical and current trauma and adversity. As such, this study sought to [1] explore the experience of Emergency Department (ED) utilization among a group of ED users with high ACE scores, and [2] examine whether their care experience either included a trauma-informed approach or seemed to indicate that one might be beneficial.
Read the article here

"I learned that I have a voice in my future": Summary, Findings, and Recommendations of The Virginia Supported Decision-Making Pilot Project
The Arc of Northern Virginia (The Arc) and The Burton Blatt Institute at Syracuse University (BBI), 2021

This report will first provide background information and foundational research on Supported Decision-Making (SDM) as an alternative to guardianship and a way to increase self-determination and enhance quality of life for people with disabilities.
Read the report here

Get Involved
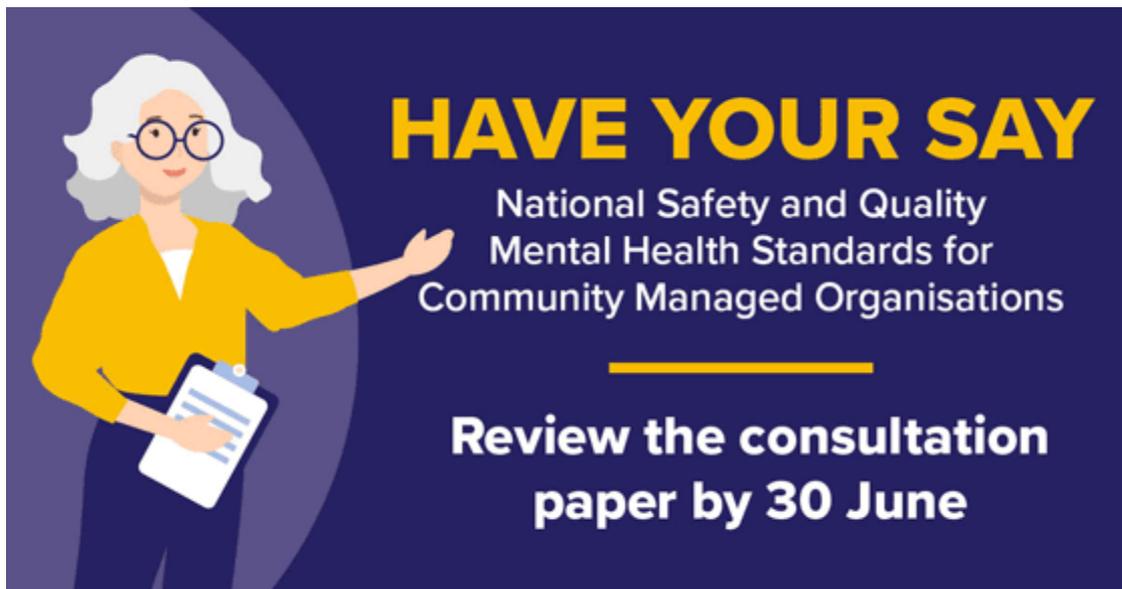
The Australian Commission on Safety and Quality in Health Care has released the National Safety and Quality Mental Health (NSQHS) Standards for Community Managed Organisations (CMOs) – consultation paper.

The Commission is seeking input from community managed organisations, consumers, carers, clinicians, service providers and other stakeholders working in this area to inform the most appropriate approach to develop the NSQMH Standards for CMOs.

Feedback can be provided via an online survey, written submission or participation in a focus group.

The Commission is holding a series of information webinars and online focus groups between April and June 2021. The focus groups will be facilitated by Dr Peggy Brown AO, Senior Clinical Advisor, and David McGrath, Executive Lead, Mental Health Standards, and will give stakeholders an opportunity to discuss the consultation paper, provide feedback and ask questions.

Find out more on the Commission website.

Register to attend an information webinar or focus group.

The consultation is open until midnight (AEST) on Wednesday 30 June 2021.

Education and Training

23 April 2021
Ageism in health care
"What Can You Expect at Your Age?!" – an investigation of recent experiences of age discrimination by older adults accessing health care. The report, released by Health Consumers NSW and the Older Women's Network NSW is the result of an 18-month investigation into older people's experience of health care in NSW. A webinar at 10:30am on 23 April will further explore the issues raised in the report.
Read the report and register for the webinar

Resources

This co-design toolkit, developed by the Agency for Clinical Innovation is a practical resource for health services to adopt a co-design approach, enabling consumers to become equal partners in the improvement process for health services.

New resources from Emerging Minds:

- Reframing Children's Mental Health - a communications toolkit - for child mental health experts and organisations who communicate about children's mental health.
- Practice guide: How to help parents find the right parenting support for them – to assist practitioners talking with parents about sources of parenting information and support.
- Podcast: Working with children with high sensitivity - clinical psychologist Rachel Samson on schema therapy and understandings of attachment to help parents and children.

Online Mental Health Support

BEING Supported 1800 151 151

Beyond Blue 1300 22 4636

Butterfly Foundation 1800 334 673

Kids Helpline 1800 55 1800

Lifeline 13 11 14

Mensline 1300 789 978

Mental Health Line 1800 011 511

Mindspot 1800 61 44 34

Parent Line 1300 1300 52

Q-Life 1800 184 527

Suicide Call Back Service 1300 659 467

WayAhead Directory | mental health and community services directory

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