



**Mental Health
18th February 2009**

Mrs PENFOLD (Flinders): The treatment of those diagnosed with mental illness has changed dramatically over the past few decades. Mental health is now talked about openly and some sufferers willingly admit to their problems and their need for treatment; however, many do not. It is very hard for families to have children born with a mental disability and just as hard to see those who develop one later in life from disease or accident. The medical understanding and treatment of mental illness is better than at any other time in our history and should continue to improve as we all become more aware of the complex issues that cause mental illness.

This is a positive change that is to be commended. As a society, we need to accept that mental health is an important component of the total health of each of us and, therefore, of our communities. It may be things as simple as a child being frightened when left alone in a strange place, bullying, the aftermath of the recent fires, or something as severe as a person who is unable to function in everyday life who is delusional but unaware that their reality is not the reality of those around them.

The major disaster of the Victorian bushfires has brought mental health to the forefront of the public consciousness. The distress of the fires will continue for many years and, in some cases, for a lifetime for these people. We, on the Eyre Peninsula, are still seeing the effects of the Tulka and Wangary fires, with the recent Port Lincoln and Victorian fires having reopened the mental wounds.

I am constantly angered and dismayed at this government's neglect of those who reside outside the metropolitan boundaries of Adelaide, particularly the neglect of children who do not come under the adult mental health system but a separate system that has no resident workers that I am aware of in my whole electorate. We need mental health facilities and professionals, possibly even more than city folk because of the added stresses of isolation, distance and the lack of many things such as the mobile phone and computer services that city people can take for granted.

I am concerned about the government's fanciful and ill-considered plans for mental health inpatient services now provided by Glenside. I sincerely hope that any suggestion to move the hospital to a proposed location near Mobilong Prison has been well and truly killed and buried. The support of family and friends is a significant aid in the treatment of mental illness. It beggars belief that the government would move residential treatment to a site that is impossible to get to for most South Australians. Therefore, the mooted redevelopment of the Glenside site is of paramount importance to all South Australians.

The recommendations from the Select Committee on the Proposed Sale and Redevelopment of the Glenside Hospital Site emphasise the lack of understanding this government has for its responsibility to govern for all South Australians. I trust the minister and her colleagues will take note of the considered and common-sense recommendations.

The state government's cuts to rural and regional country hospitals brings an urgency to the treatment of country mental health patients. In October 2007, the then minister for mental health and substance abuse said that psychiatrists and general practitioners would be able to order the detention of mental health patients under proposed new mental health laws so that country hospitals could provide secure care for up to seven days. However, the minister failed to explain that it is regional hospitals rather than country hospitals that will have this type of facility.

Some people will have to travel 400 kilometres or more to access this type of treatment, and the reality is that treatment for some will remain the impossibility that it is now.

Some accommodation at Glenside could be purpose-built for people who are currently in the penal system as an outcome of mental health issues that cannot be (and have not been) addressed. The government's 'rack 'em, pack 'em and stack 'em' policy may give the minister a warm glow, but it does nothing for the long-term treatment of criminals with mental health issues in this state. All but a few will eventually return to society. Sound mental health treatment will ensure that a large proportion do not reoffend.

I was contacted by the distressed family of a young local person who was imprisoned at the Port Lincoln Prison until he could be assessed by appropriate mental health professionals who had to come from Adelaide. The delivery of mental health services is concentrated in the Adelaide metropolitan region, effectively ignoring rural and regional South Australia—about one-third of the state's population—leading to odd decisions such as the deployment of a person at Port Lincoln as half-time arts officer for Eyre Peninsula and half-time mental health project officer for Southern Eyre Peninsula, presumably covering half of Eyre Peninsula and probably without any funding or consideration for cost in time and money of covering this huge area.

This woman's background training and experience has enabled her to make positive inroads into what is a very curious combination of duties that are, in some ways, complementary. While we need more mental health workers in regional South Australia, I acknowledge that it is impossible for sufficient health professionals and specialists in the various mental health fields to be living and working in selected sites in rural and regional South Australia. Hence, Glenside provides a central site for the efficient and effective delivery of services.

A central site such as Glenside is an issue of social justice so that patients and their family and friends from across the state can have reasonable access, for example, for a person flying or driving to visit a patient. The support of family and friends is a vital aspect of treatment and recovery. It would be beneficial if some accommodation for country families were available on site, similar to Greenhill Lodge for cancer patients, and I understand that there is room for this at Glenside.

South Australia should aim for world's best practice that would be recognised nationally and internationally. Paying patients from other states and overseas may choose such a place for treatment. For instance, the Western Australian footballer Ben Cousins went to the United States of America for treatment for his drug problem. The diagnosis and treatment of all facets of health has advanced infinitely in recent years. We do not know what the future holds, and this is especially true for the treatment of mental health.

A drug culture has developed in our society with more and more evidence of the long-term irreversible effect of drugs such as cannabis which were previously thought to have no detrimental mental health effects. All illicit drugs are detrimental to the mental health of a person, but the effects on young people and the shocking deterioration in behaviour and honesty experienced by their families is distressing to listen to. Violence towards family members necessitating police being called in is very common and a great concern.

I heard of a woman in her 20s who would not go to a social event until she had popped a pill. These people all need mental health treatment. When we get to the stage where we admit this freely and openly, we will have made considerable advances in the 'health' part of mental health, but we are nowhere near that stage yet. Families are seeking help from their local member of parliament because they do not know where else they can go to try to get help for their children.

Our mental health workers and facilities for treatment must be easily accessible and available to all sectors of our state. Alcoholism is now recognised as a mental as well as physical disease, but it is not so long ago that the town drunk was believed to be unredeemable and was treated as just a blot on the landscape. Great advances in the treatment of alcoholics were made in this state when a doctor who was an alcoholic successfully turned to abstinence. He used his experience and knowledge to turn around medical treatment. Many of these people had formerly been incarcerated in mental institutions because they were considered hopeless.

The society we live in today is vastly different to any period in history. However, through modern media we are bombarded every day with scenes of violence and death, flood, fire and famine, and the notion that the world is in

crisis through climate change and that we may possibly face being wiped off the planet. This triggers mental problems in some people that we are presently unable to cope with, particularly those who have been through similar traumas.

It is ironic that, at the same time as the government is building a monument to itself in the new Mike Rann hospital, it is reducing mental services to a point that will take the state backwards for decades. This is happening at a time when mental health is being recognised more and more as a component of physical health. Postnatal depression is a case in point. New mothers used to be told to snap out of it. It is now realised that a woman in that condition cannot just snap out of it.

School counsellors are needed. We also need people in our remote locations, where substance abuse and petrol sniffing can be treated at an early stage. Mental health is recognised as an illness, and it is also recognised that it affects children as well as adults. We need trained contact persons at the coalface so that illnesses can be treated early, thus preventing an escalation into more destructive and socially unacceptable actions and behaviours. We also need to secure central facilities with accommodation for families, for those who need it.

I will now quote Dr Fleming from Tumby Bay. An article from the Port Lincoln Times in August last year illustrates the problems that we are seeing on Eyre Peninsula. It states:

Tumby Bay GP Graham Fleming said the 'backbone' of psychiatric care in rural areas is being increasingly undertaken by GPs. Dr Fleming said a lack of psychiatric care for children and adults on Eyre Peninsula is a worrying concern. '50 per cent of mental illnesses begins in children,'... 'We are never ever going to have enough child and adult psychiatrists, there's no training,'... 'We need a system whereby the kids that have got the problems can be identified early. Now we're just waiting for them to fall off the tree.'

Dr Fleming said most rural areas are understaffed, and Eyre Peninsula is no different. He said the state government's mental health system is in disarray, and prisons are now the 'new mental health hospitals'.

Dr Fleming said the federal government has 'handed out a lot of money' to allow GPs to learn basic mental health skills, however, there is no one to come here and deliver the skills.

'It is a matter of delivering training to GPs to be skilled enough to work in a mental health area,'... 'Most of the mental health load is managed by GPs and that's going to keep happening. The mental health system in our state is in a state of collapse.'

Dr Fleming said that what is desperately needed is a team of mental health workers, bridging the gap between GPs, psychiatrists and patients. 'The issue is that we have a very good hard-working team in Port Lincoln, but they are just overwhelmed,'... 'The workers who are in the area are working flat out, and doing fantastic jobs. My criticism is against the system, who can't support the people here.' He said the division has supplied two counsellors to Lower Eyre that is filling the basic needs for the counselling side.

However, Dr Fleming said there is a high rotation of mental health workers on Eyre Peninsula because the workload forces some to eventually take stress leave. 'The reason they leave is because they get swamped and overwhelmed,' he said. 'Their workloads are astronomical.'

This was followed by a letter to the editor the following week. It states:

After reading Dr Fleming's article in the Times on August 14, I felt compelled to respond.

I am in full support with what Dr Fleming is saying.

As a person who has 'been there done that', I feel for the GPs on Eyre Peninsula and the mental health services, with the increasing amount of people becoming mentally unwell, and the lack of availability to access psychiatrists and psychologists.

I am a community member, not attached to any organisation but am constantly called upon to assist people in mental health crisis in my own time.

We don't only need social workers, mental health nurses, psychiatrists, psychologists, we need female psychologists to deal with the traumas people experience as children and for children who experience trauma, before they enter the adult mental health system (some people feel more comfortable speaking to a female than a male, and we should have a choice).

I know from my own experience, most of my traumas happened in childhood and young adolescence, but I was never diagnosed until middle age as having mental health issues. I was able to recover thanks to Dr Elaine Skinner who was a resident psychiatrist years ago, but we no longer have that privilege.

I agree that the mental health services are understaffed and overloaded, which is the reason the retention rate of professional staff is difficult.

I feel we should not be sending our people to Adelaide for psychiatric care. They are isolated from their families, friends and any support networks the people have, which I believe adds to the person's stress.

I also believe everybody has a right to quality of care, in particular, when they need to see a psychiatrist their appointments should not be cut short due to the number of clients the psychiatrist needs to see in the short time they are here as visiting psychiatrists.

If one in five adults do get mental illness then there must be about 4,400 on the Eyre Peninsula who have had, who have or who will have a mental illness. I hope this bill will help those people and their loved ones, as well as those who live near the cities.

Mental Health, Regional Communities 14 March 2007

The following questions were asked in the Upper House in relation to mental health and the appointment of general counsellors in some drought affected areas but not Eyre Peninsula.

The Hon. S.G. WADE: I seek leave to make a brief explanation before asking the Minister for Mental Health and Substance Abuse questions about mental health services for Eyre Peninsula. Leave granted.

The Hon. S.G. WADE: I refer to the minister's answer yesterday to the Hon. I.K. Hunter (see question below) advising that two rural community counsellor positions have been appointed. The need for combined counselling services, I am advised, is significant on Eyre Peninsula where seven district councils have been accepted for federal government exceptional circumstances funding. Eyre Peninsula is already disadvantaged with a low per capita ratio of doctors and mental health services and staff are already well below those enjoyed by other South Australians. My questions are:

1. Will the counsellors referred to yesterday provide integrated counselling—that is, including financial counselling?
2. Are the positions funded by drought funding or are they supported by recurrent mental health funding?
3. Considering the stress in Eyre Peninsula and its remoteness from Adelaide, will the minister consider appointing a rural community counsellor to Eyre Peninsula?

The Hon. G.E. GAGO (Minister for Mental Health and Substance Abuse): I think it is important to say, first, how aggressive the Rann government's response has been to the needs of people in country areas in relation to the impact of the drought. We have put together a drought task force to provide advice and give special attention, planning and direction to a drought response. Country Health SA has been working closely with locally based house workers in identifying a range of strategies and practical resources intended to assist farmers who are experiencing difficulty. I remind members that Country Health SA has a network of arrangements

where local people meet to discuss and identify issues and work through solutions. Mental health, consumer and care advisory groups exist in many areas of the state. These groups act as a conduit and they are supported and encouraged by local mental health teams.

A general alert has also been issued regarding the need to be aware of the effect that the drought may have on individuals and their families. There has also been a range of issues such as those I mentioned yesterday: the reprint of a support book entitled 'Taking Care of Yourself and Your Family' and a CD-ROM package of material to assist farmers and other country people. There is also the drought hotline of which I have reminded people. That hotline provides not only farm management and financial advice and referral but also mental health counselling services, particularly referral services. That service is available to each individual and it is just at the end of a telephone line.

As I said, 1 600 copies of 'Taking Care of Yourself and Your Family' and a plethora of literature has been circulated reminding people of what their local services are and where they can be accessed. Amongst that suite of measures is the two counsellor positions that I announced yesterday. They are specialist mental health support workers. They will provide on the ground counselling services from the local mental health service facility as well as going out to people's homes. They are there to assist and add to the services already available but, as I said, they will provide direct counselling services as well. I understand that they are on a one-year contract of employment and, as I said, we will monitor that in relation to—
The Hon. R.D. Lawson interjecting: **The Hon. G.E. GAGO:** If members bothered to listen, they might hear the rest of my answer. We continue to monitor the needs of country people. We will assess and adjust our services according to their needs and we will continue to review those particular positions.

I also remind members that, as part of the Stepping Up initiative and the Rann government's commitment to rebuilding our mental health services, eight nurse practitioner positions will be allocated to country services. We have not yet made a decision as to where those positions will be located, but they will be based on population needs, so obviously the large rural centres are more likely to receive those services. Again, I advise that additional mental health services will be provided to communities. I also remind members that, as part of that package, a number of intermediate care beds will be placed in rural centres as well. This will be the first of this type of service available in country areas. This initiative is also part of our commitment to reform.

So, not only have a number of initiatives been rolled out to regional centres to assist people to cope with the pressures of the drought but also a number of initiatives are in the pipeline. I am reminded also that, as part of our GP Shared Care and Healthy Young Minds commitments made by the government in its last budget, something like 56 specialist mental health support positions will be made available, and I believe that just over 20 of those positions, if I recall correctly, will be placed in rural and regional centres. For example, specialist mental health services will be placed in regional GP surgeries to assist with specialist mental health services and the Healthy Young Minds positions will be targeted at early intervention and detection of mental health issues amongst our young people. As I have said, a wide range of initiatives have been planned, including improving our mental health services to regional centres.

The Hon. J.M.A. LENSINK: I have a supplementary question. Given that nine councils on Eyre Peninsula have been granted exceptional assistance and there is a very low proportion of GPs on Eyre Peninsula, which of those services the minister has outlined are aimed specifically at Eyre Peninsula.

The Hon. G.E. GAGO: As I stated in my original answer, we have not as yet designated locations for many of those positions, but they will be population based. So, quite clearly, those large regional centres have a greater chance of receiving those services.

The Hon. J.S.L. DAWKINS: I have a supplementary question. Will the minister indicate that strong consideration will be given to making Port Lincoln one of those population centres where those positions will be based?

The Hon. G.E. GAGO: Port Lincoln is one of our largest regional centres, so I would imagine that it is likely to attract significant services. I think Port Lincoln already has a specialist mental team of nine, if I recall correctly, which provides services to the local Port Lincoln community, as well as outreach services. I can only reiterate that the government's responsibility is not just to a few but to all South Australians who are suffering from the consequences of the drought. A large number of people in communities have been severely impacted on by the effects of the drought, and the Rann government intends to ensure that all those communities' needs are met in the best possible way.

The Hon. T.J. STEPHENS: I have a supplementary question. The minister stated that 56 positions were announced in the last budget. Given that we are now six months down the track, how many of those positions have been filled and why has the minister not made a decision about where those positions will be located?

The Hon. G.E. GAGO: I do not have the details in front of me, but I believe that at least some of those positions have been advertised and are in the process of being filled.

The Hon. I.K. HUNTER: I seek leave to make a brief explanation before asking the Minister for Mental Health a question about services in country South Australia. Leave granted.

The Hon. I.K. HUNTER: Mr President, people in rural and regional South Australia are a tough breed—as you demonstrate to the chamber every day. However, not all of us who hail from the country are superhuman. The drought the state is now experiencing can cause severe stress for rural communities, and isolation can significantly add to this. Will the minister inform the chamber what the government is doing to improve access to mental health care in the rural and remote regions of South Australia?

The Hon. G.E. GAGO (Minister for Mental Health and Substance Abuse): I thank the honourable member for his question and for his ongoing interest in this important policy area, and I am pleased to inform the council of yet another initiative to bolster mental health services in regional and rural South Australia.

Mid North and South-East residents experiencing hardship because of the drought will now have greater access to personal and family support with the creation of two new rural community counsellor positions. The new positions will augment existing community health services in the Mid North and the South-East, with a specific focus on mental health. We all know that farming is a very tough business at the best of times, but in a drought the financial and emotional demands placed on rural families can sometimes be overwhelming. Based at Booleroo and Bordertown, these positions recognise that people need support and advice that is locally-based and easy to access and so the service is flexible, allowing people to organise visits by the counsellors at home or on the farm to fit in with the busy schedules that people in rural communities often have.

This is the latest in a range of measures to be announced by the Rann government that are designed to boost mental health assistance in regional South Australia, and I am pleased that we are continuing to improve services in the bush. In addition to these new counsellors, last week I also announced that a new interactive self-help package, entitled 'Managing the Pressures of Farming', would be made available throughout the state. A total of 16 000 packages are being produced, and these will provide people on the land with an easy to use CD-ROM, a handbook, and a web resource that they can use in their own home when they need it. In conjunction with Beyond Blue, we are also committing to yet another reprint of the popular book *Taking Care of Yourself and Your Family*. This book has been applauded in rural communities and was written specifically as a self-help guide to assist with the stresses and strains that people on the land often experience.

Distance should not be a barrier to any South Australian accessing quality mental health services, and these new counsellors, as well as other measures announced recently, go some way towards addressing that issue. The state government also recently approved funding to extend the drought hotline number for assistance to 30 June 2008 as our response to the Social Inclusion Board *Stepping Up* report. It also includes 30 new intermediate care beds in country hospitals and places for eight mental health nurse practitioners in regional centres over the next four years. This is part of the government's \$43.6 million statewide commitment announced last month as a first step in revolutionising mental health care in South Australia, which represents the most ambitious reform agenda ever seen in this state.

The Hon. J.M.A. LENSINK: I have a supplementary question. Can the minister comment on whether there has been an increase in demand for mental health services in country regions?

The Hon. G.E. GAGO: We have placed a lot of extra services into country areas, and we know that these services are being utilised. They are extra services and they are being utilised well, so that indicates that people are using more services. As I mentioned, we have the hotline number that has now been further extended, and this not only provides practical farming management and financial information but also has a mental health referral system attached. I understand that includes a direct line to a counsellor who can assist with the matter there and then or, if need be, that counsellor can refer the person to local mental health services.

In addition, and as I have said, this is the second or third reprint of the book that has been (I understand) applauded and well-used by rural communities and other services. Yes, the increased services that we are providing to country areas are being utilised, and the feedback is that they are greatly appreciated and that they are provided in a timely and fitting way.