

Time Out Houses a VISIONARY Investment

The Queensland Alliance, Youth and Family Service (YFS) Logan, and a collaborative of four community organisations in Cairns led by Aftercare, welcomed the Queensland Government's \$6.4M announcement to fund two 'Time Out' houses for young people with mental illness. Disability Services Minister Annastacia Palaszczuk confirmed, "Over the next three years, the initiative will support over 100 Far North Queenslanders aged between 18 and 25."

CEO of the Queensland Alliance, Jeff Cheverton, said it was a visionary investment in the future of Queensland's mental health system. "This initiative demonstrates the Queensland Government has listened – Time Out Houses will eventually pay for themselves, providing young people under 25 with somewhere safe, friendly and welcoming to go when they first experience mental illness, preventing hospitalisation and an often traumatic experience for families," Mr Cheverton said.

The service will be provided in Logan by YFS in partnership with their local division of general practice (South East Primary Health Care Network). It will also be provided in Cairns by a collaborative of Centacare Cairns, youthlink, Far North Queensland Division of General Practice, and Aftercare. YFS CEO, Cath Bartolo, said,

"It's great to be able to work on and evaluate an innovative project concerning early intervention, and develop the concept as it continues to evolve and meet the needs of young people and their families."

The Time Out House services will be staffed 24 hours a day, seven days a week by two support workers. Aftercare Executive Director John Malone focused on the long-term benefits in stating, "Outreach workers will be available to support people for up to three months after they leave the program – this is an important ongoing service aimed at sustaining young people's health and wellbeing."

Mr Cheverton said the Queensland Government's investment in early intervention was a 'far-sighted' initiative. "Mental health services in Queensland have traditionally focused on the acutely unwell, offering hospital-based care with some case management follow up post-discharge," he said.

"Overseas, people with mental illness are being treated in services that are smaller, welcoming, friendly and safe – more like backpacker style accommodation than clinical services. This has resulted in cost-savings and better health outcomes. It's great to see this innovation established in Queensland."

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Queensland
Alliance

Altering States welcomes contributions from all our readers. Please submit articles of up to 500 words to admin@qldalliance.org.au

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UNITED



CEO Jeff Cheverton

Adventures in Wonderland?

The newly released film *Alice in Wonderland*, directed by Tim Burton, is attracting record-breaking audiences in cinemas around Queensland and globally. Different to the book, the film places the Mad Hatter – played by Johnny Depp – as a central character. For once I would like to shift our attention from the action of mental health policy change and budget priorities – reports of which you will find in this newsletter – to the issue of cultural representations of mental illness.

Research by Otto Wahl in the United States has identified that one in four G-rated films includes characters with mental illness, and overwhelmingly these characters are depicted as dangerous and violent. Yet statistics show only a very small percentage of people with mental illness commit violent acts. On the rare occasion that someone with mental illness does commit a shocking and violent act, there is focused media attention. This media focus on rare violent events contributes to widely-held negative stereotypes of mental illness in our society. As a result many people with mental health problems keep their experiences secret, for fear of negative responses from their friends, work colleagues and family.

The Queensland Alliance along with our

members advocate strongly for public campaigns which promote positive images of people with mental illness to balance the negative portrayal we often see in popular culture. While this film invokes a number of stereotypes about madness, it also reminds us that people with mental illness contribute extraordinary creativity, drive and passion.

Author of *Alice in Wonderland*, Charles Lutwidge Dodgson, writing under the pseudonym Lewis Carroll, allegedly suffered from epilepsy and some form of neurological condition. Tim Burton cast Stephen Fry as the voice of the Cheshire Cat in the film. Stephen Fry openly discloses his history of bipolar disorder and has campaigned strongly in the UK for greater acceptance and eradication of discrimination against people with mental illness.

I've heard many and diverse responses from people with lived experience to the representation of the "Mad Hatter" character in the film. He is presented with a disheveled appearance, and as strange and unusual. While the Mad Hatter speaks in riddles and his speech sounds sometimes nonsensical, it is easy to discern his ultimate meaning. The audience is encouraged to

empathise and admire this character. The character displays loyalty, commitment, reliability and of course an ability to love and be loved. In short, here we have a representation of someone with a mental illness as completely human – with no more or less failings than anyone else – and whose quirkiness is positively valued.

The entire film is made in the style of artistic nonsense, but the lessons for "the real world" remain obvious. *Alice* encourages us to "Imagine at least six impossible things before breakfast". It is in the imagining of impossible things that creativity is born. If we don't envisage a world other than how it currently is, we will never change it.

While *Alice's Adventures in Wonderland* is a children's fantasy, it is also biting satire. The film is sending positive messages to all who watch it about the humanity of people who may experience a mental illness. Portraying people with mental illness as dangerous: now that's crazy! We need more films like this that capture a large general audience, generate discussion on mental health and provide more positive representations.

Pre Budget Submission 2010/11

What do you need funded?

Treasurer Andrew Fraser met with Queensland Alliance CEO Jeff Cheverton and State Councillors (pictured) to discuss the Pre Budget Submission in February. We are all very aware of the consequences of inadequate funding. Telling your personal and organisational stories to politicians is one of the most powerful lobby tools we have. The Queensland Alliance has developed a Lobby Kit including a simple letter template that you can use to write to your local member and let them know what you believe should be funded in this year's budget.

What are our priorities?

A survey of all members in October 2009 demonstrated overwhelming support for the following three priorities:

1. Increase community-managed support services to enable recovery. This support can prevent people needing acute care services, and also enables early discharge.
2. Invest in social inclusion campaigns: these campaigns increase the informal support available and create long-term cost-savings for government.
3. Fund sector development recurrently to enable organisational development, coordination of existing services and position the sector for future growth.

This Pre Budget Submission recommends an additional \$23.7M recurrent funding in 2010/11, comprised of:

- \$20M support services for recovery;
- \$1.2M social inclusion; and
- \$3M sector development.

Commitment to a long term program of investment will significantly increase the efficiency of the overall mental health system, ensuring more people access services, and get access to services when they first need them.

Together we are stronger.

Access your Pre Budget Submission Lobby Kit on our website (www.qldalliance.org.au) in the News section.



L–R: Jeff Cheverton; Jackie Doyle; the Honourable Andrew Fraser MP Treasurer, Minister for Employment and Economic Development; and Kerry Staines.

Letter from

Roxon



RECEIVED 30 NOV 2009

**THE HON NICOLA ROXON MP
MINISTER FOR HEALTH AND AGEING**

Mr Jeff Cheverton
Executive Director
Queensland Alliance
PO Box 919
SPRING HILL QLD 4000

Dear Mr Cheverton

I refer to your meeting with the Prime Minister, the Hon Kevin Rudd MP, at the Beenleigh Community Cabinet Meeting in June 2009, to discuss your research concerning international campaigns on social inclusion and anti-discrimination. The Prime Minister has forwarded your papers to my office for consideration. I understand that you have also discussed your research with my adviser, Dr Meredith Arcus, in a recent telephone conversation and have presented your findings to representatives within my Department.

As you may be aware, the Fourth National Mental Health Plan was endorsed by the Australian Health Ministers' Conference on 4 September 2009. The Fourth Plan aims to improve mental health services for all Australians, provides a national framework for action over the next five years and is due to be launched in November 2009.

The first priority area of the Plan is social inclusion and recovery, and as such, the papers that you have provided for our consideration, *Assessing the Economic Impact of Initiatives to Reduce Stigma*, and *Global Madness – A Journey of Policy Influence, Fundraising and Social Inclusion in New Zealand, USA, Canada and the UK*, are timely.

One of the actions in this priority area is for a sustained and comprehensive national stigma reduction strategy to improve community and service understanding and attitudes. The success of international campaigns focused on challenging discrimination and stigma associated with mental illness, such as the 'See Me' campaign in Scotland and the 'Like Minds' campaign in New Zealand, and consideration of these working examples, will be beneficial to the development of this strategy.

The National Health and Hospitals Reform Commission Report also highlighted that social exclusion is a significant contributing factor to, and often the consequence of, mental illness. Any future activities in stigma reduction and anti-discrimination will build on the already significant investment by Government toward these activities, through such initiatives as *beyondblue*, *Mindframe* and *StigmaWatch*, and will continue to be underpinned by close working relationships with the mental health sector.

I appreciate you bringing these papers to the Government's attention.

Yours sincerely

NICOLA ROXON

26 NOV 2009

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from the president

Cathy O'Toole, President, Queensland Alliance State Council

Welcome to a new and exciting year in the Mental Health Community Sector. I am pleased to introduce myself as the new President of the Queensland Alliance State Council.

I would like to thank Noel Muller, the former President for his contribution to the Queensland Alliance and the Mental Health Community Sector over the past two years. Noel is very committed to working with all stakeholders to bring about positive change in the mental health system and as such has made a significant impact as President. I am sure that his commitment will be evident as he continues as a member of State Council.

I feel privileged to have been elected to the position of President and I look forward to working with the members of the Council during 2010 to continue our work on improving mental health services in Queensland. On page 6 of this publication you will find information about each of the Council members.

The Mental Health Community Sector is entering an exciting time; this is supported by the Productivity Commission Report, released in January 2010. This is the first formal document that has reported the contribution of the Not For Profit sector in a clear and measurable way. The Pre Budget Submission 2010/11 produced by the Queensland Alliance, also clearly

articulates the work of the Alliance members in the Not For Profit sector. These two documents are compelling evidence when advocating for enhanced funding and support from political parties and government departments, and I would encourage you to use both when lobbying your local members, especially in this federal election year.

On a national level, the Mental Health Community Sector has appeared as a strong voice for the federal government. This is evidenced by the newly formed Community Mental Health Australia (CMHA) and the Mental Health Council of Australia (MHCA), as both are strong lobbying voices. The Queensland Alliance holds membership with both organisations. This enables the Queensland Alliance to bring its members' views and issues of concern to a national platform.

As CEO of Advance Employment Inc., a Not For Profit Mental Health Community organisation in Townsville, I am very aware of the regional issues that are impacted by the geographical constraints within Queensland. I believe that all Queenslanders are well represented on the State Council currently.

I am proud to say that the State Council of the Queensland Alliance is currently very focused on making great choices and I look forward to working with you in the coming year.

STATE

Introducing 2010 Queensland Alliance



Cathy O'Toole (President)

Cathy is the Manager of Advance Employment Inc. a Disability Employment Network (DEN) provider specialising in assisting people with mental health issues into open and meaningful employment. She

is passionate about social justice issues and committed to promoting, encouraging and supporting people with mental health issues to achieve a meaningful and fulfilling place in community via employment. Cathy has worked in the mental health area for six years, with a strong background in vocational education and training.



Noel Muller (Vice President)

Noel has been an active member of a Consumer Advisory Group for the past nine years. He has represented consumer rights and issues at a local, state and more recently national level at many different forums. Through his

involvement with a number of groups and the consumer health network/movement, Noel has gained a deep understanding of mental health and disability, both in the local community and broader Australian context. Noel has served on the Queensland Alliance State Council since 2002.



Kerry Staines (Treasurer)

Kerry has been employed within the community sector for the past 18 years, working with youth through to the elderly. She is currently the Manager of a service on the Sunshine Coast that provides accommodation

and support to individuals living with a mental illness. Kerry has strong working relationships with other service providers, both Government and non-Government and she attends regular network meetings. Kerry is committed to promoting independence where appropriate and valued status for all individuals.



Clare Guilfoyle

As State Director Community Health for a large Community Care service, Clare has responsibility for the strategic management of Community Mental Health Services throughout Queensland. With this

experience Clare has a good understanding of the issues faced by many member organisations. Clare has a strong belief that community mental health services should be available to all in need in the place where people live.



Mary-Anne Bowyer

After 26 years working in NGO community care organisations, Mary-Anne is passionate about and has a strong belief in the capacity of communities to facilitate recovery and well being with people with mental

illness and psychiatric disability. Mary-Anne has experience in direct client services, middle and senior management roles as well as representation in State and Federal Government steering committees and advisory panels.

COUNCIL

State Council Members



Jude Bugeja

Jude has worked in community based NGO mental health services both in Queensland and Victoria for 19 years. Jude is committed to advocate with, and for, the sector including people from culturally and linguistically diverse backgrounds. Jude is currently the Manager of the Brook RED Centre, an inner Brisbane Peer Support Service that has developed a peer support framework. This framework is reflected in the organisations governance and day to day practices.



Dorothy Dunne

Based in Cairns, Dorothy has spent the past 13 years as the Manager of Worklink Inc, part of the Disability Employment Network (DEN) which assists individuals who have experienced a mental health condition to find and maintain employment. Dorothy has grown the organisation to become a significant service provider in the Cairns community, which also delivers an education for employers. She holds a Graduate Certificate in Health (Community Mental Health) and a Certificate IV in Business (Frontline Management).



Christian Grieves

For the past nine years Christian has been the CEO of the Mackay Division of General Practice. The Division supports 120 GPs and the 150,000 people who live in Central East Queensland. As CEO, Christian has

responsibility for 40 fantastic staff, who deliver an incredible array of innovative health services, and the agency is one of the biggest employers of allied health professionals in Central Queensland. Under his leadership, the Division is continuing its dynamic growth and is set to become the biggest local NGO provider of mental health services in Central Queensland. The Division currently employs seven psychologists and three mental health nurses who work in collaboration with local GPs.



Jackie Doyle

Jackie has had extensive experience in the social services and community mental health, both in England and Australia. Since 1999 Jackie has been employed by FSG Australia and oversees all the mental health programs in three different regions. FSG has a well developed team of staff on the Gold Coast based at Burleigh. Programs include P300, HASP, ALSP a guest house resident support program, children and families program and brokerage. Having great enthusiasm for mental health and having worked over three different regions, Jackie is aware of the different issues in these areas and will strive to put forward these gaps to the Government members when opportunities arise.

2010

Alliance in the

NEWS

The *Maryborough Herald* and the *Gympie Times* were the first media mentions for the Queensland Alliance in 2010, in January. Bauple's Judith Courtice shocked people when she announced she would be becoming a calendar girl, Miss November actually. But they needn't have felt any concern because Judith had decided to share her story in the annual *Share Your Story* calendar produced by the Department of Communities. Judith credited the Queensland Alliance, along with her friends and family, as helping her to "turn her life around" following her experience of Post Traumatic Stress Disorder.

Queensland Alliance CEO Jeff Cheverton was also interviewed by the media about turning his life around – from a young boy growing up in the suburbs of Brisbane to lobbying Federal Health Minister Nicola Roxon for \$45 million over three years for a national advertising campaign to break the stigma of mental illness. "(Mental illness) is one of our last taboos," he said in the *Courier Mail* on 23 January (pictured).

The launch of resource *Mental Health Works* by Worklink and the Queensland Alliance in Cairns attracted coverage from WIN TV news, ABC Far North Queensland radio and was also reported on by the *Courier Mail*. You can read more about the *Mental Health Works* resource, on page 17.

Shining light on dark pl

Jeff Cheverton speaks up for those who have no voice, writes **Fran Metcalf**



JEFF Cheverton thought he knew disadvantage. The youngest of seven children, he grew up in a Housing Commission home at Chermiside on Brisbane's northside.

It was a happy childhood, but not a lavish one, and he was stunned when he arrived at university to discover people his own age wearing brand label fashion and driving cars. "I just couldn't imagine it," he says. "I mean my parents wouldn't buy me a bicycle let alone a car."

But it was just the beginning of Cheverton's awakening.

The fact he was one of only seven students in his first year studying law at the University of Queensland to not attend a private high school led him to search for his own kind.

He found them in the student union where he became an activist for human rights issues and was embroiled in a bitter campus battle that ended in left wing radio station Triple-Zed being evicted and Cheverton being ousted as editor of the university newspaper, *Semper*.

Nevertheless, he graduated in 1989 with degrees in law and French and after a stint teaching English in the Champagne region he returned home and took a job at Queensland Advocacy, a human rights organisation for people with disabilities.

It was here that Cheverton's life work was conceived.

"I discovered this whole new world of disadvantaged people," he says.

"I mean there were some Aboriginal people at uni and gay and lesbians and human rights issues but I had never come across people with disabilities.

"I suddenly realised we kept disabled people out. There were so many times that I went to go somewhere with people in wheelchairs and couldn't because we couldn't get in... even footpaths were bad.

"I was outraged. I was in my early 20s and I was quite born again."

Now aged 42, the Cheverton sipping a cappuccino in a Fortitude Valley bistro is a wiser one than the red-haired rebel of his youth but the

fire in his belly is burning just as bright. These days, Cheverton is chief executive officer of the Queensland Alliance, the state's peak body for the mental health community sector.

With more than 240 members needing a voice in a sector traditionally shunned, underfunded and neglected, Cheverton's quest is certainly a big one.

"When I think of lobbyists, I usually think of professionals who get paid to represent financial interests," he says.

"But there are a whole bunch of lobbyists like me – advocates for disadvantaged groups like the homeless, the young, those with disabilities and people with mental illness."

It's been a long and winding road but Cheverton says he's finally found his dream job.

The Wavell State High School boy has worked for several government and not-for-profit organisations including stints at a disability housing organisation, the Brisbane Youth Service and the Queensland Council of Social Services.

He's also managed to squeeze in a couple more degrees – one in business and another in social policy – and in 2007 was awarded a Churchill Fellowship to research fundraising for mental health advocacy in the US, Canada, NZ and the UK.

He returned with a plan and has been lobbying federal Health Minister Nicola Roxon for \$45 million over three years for a national advertising campaign with a grassroots education component to break the stigma of mental illness.

"Advertising has some effect but it's only when someone with a mental illness turns up at your local school fete or Lions Club dinner that people actually change their attitudes," he says. "We are hoping to see something funded in the federal Budget."

Despite a growing awareness about mental health and \$2 billion in funding by the Howard government in 2006, Cheverton says many Australians remain ignorant.

It's one of our last taboos, he says.

"It's still one of those things people don't want to talk about."

Do you often miss mental health programs in the media, for example Australian of the Year Pat Mc Gorry on SBS' *Insight* in February? The Queensland Alliance regularly posts links to transcripts and audio for mental health programs the day after they air. Visit www.qldalliance.org.au

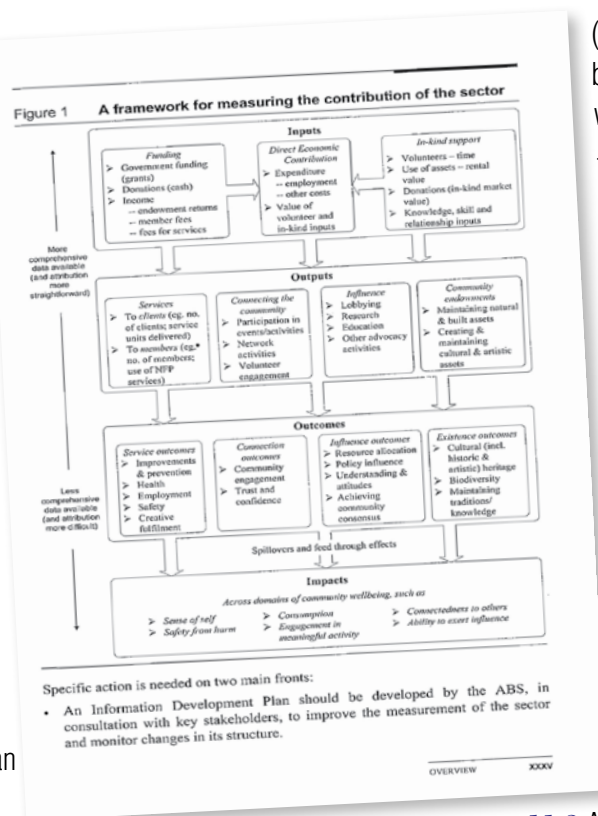
CONTRIBUTION OF THE

not for profit sector

Productivity Commission Research Report, January 2010

A report has been released showing that Not For Profit (NFP) organisations' very existence has a direct impact on the mental health and wellbeing of Australians. Contribution of the NFP sector was produced as a draft research report in October 2009, and finalised this January 2010 following public consultation. Over 300 organisations made submissions including Queensland Alliance members, Drug Arm Australasia and the Australian Red Cross.

The report, undertaken by the Productivity Commission and tasked by the Australian Government, sought to examine ways to improve the efficiency and effectiveness of the sector. It also creates a framework for measuring the contribution of the sector



(see Figure 1). Relationships between Government, business and the NFP sector were examined, along with the effects of NFP tax concessions.

The report produces a range of recommendations, among them these excerpts:

5.4 The Australian Government should provide funding for the establishment of a Centre for Community Service Effectiveness to promote 'best practice' approaches to evaluation, with an initial focus on the evaluation of Government funded community services.

10.2 In order to ensure that NFPs can sustain their workforces, and as wages are a major factor in the successful recruitment and retention of staff, Australian governments purchasing community services need to base funding on relevant market wages for equivalent positions.

11.3 Australian governments funding service provision or making grants should respect the independence of funded organisations and not impose conditions associated with the general operations of the funded organisation, beyond those essential to ensure the delivery of agreed funding outcomes.

You can view the full report at:
www.pc.gov.au/projects/study/not-for-profit

DATE CLAIMER

Stigma, Discrimination and Social Inclusion: Luncheon 23 April

Hosted by the Queensland Alliance, come along and hear Robert Fitzgerald speak about the Productivity Commission's research, and witness the launch of the literature review, 'Stigma, Discrimination and Social Inclusion', which looks into the research around international social inclusion campaigns.

PEER Worker TRAINING

Gaynor Ellis, Senior Program Officer Community Mental Health Branch



Shery Mead and Chris Hansen were in Queensland for three weeks in February and March, presenting

a range of peer training courses for the Community Mental Health Branch, Department of Communities, and the Brook RED Centre in Highgate Hill. Brook RED is the first organisation to be funded under the Consumer Operated Services Program, administered through the Community Mental Health Branch.

Shery and Chris have developed the five day Intentional Peer Support (IPS) training course which is now offered in countries such as the United States, the United Kingdom and New Zealand. In August 2008 Chris provided the first five day training course in Brisbane. In early 2009, Shery and Chris offered training courses in both Brisbane and Melbourne, including a two day training for managers in understanding peer support work, and a co-supervision workshop for peer workers who had already completed the five day training and were now implementing IPS in their work.

On their current training visit, Shery and Chris are providing the first “Train the Trainer” course to a group of 13 peer workers (11 from Queensland and 2 from Victoria) – equipping them with the skills to deliver IPS training, through a five day intensive course. All participants in this course have attended a previous five day IPS course, have attended co-supervision training, and have worked in the field for a period of twelve months, putting their previous learning into practice.

Shery and Chris are also providing training to the Brook RED Centre in co-supervision and crisis work. During their final week in Queensland before departing to New Zealand, Shery and Chris will present another five day IPS training on the Sunshine Coast. This training attracted 40 applications from peer workers/volunteers in the mental health community sector, for 25 places.

INTERNATIONAL PEER SUPPORT TRAINING:

A Peer Support Worker Perspective



Adrian

My name is Adrian and I am employed as a Peer Support Worker at the Brook RED Centre. I would like to share my experience of this centre and the Intentional Peer Support approach (Shery Mead US) the centre has embraced.

This a snapshot of my life experience five years ago. I was living in England and experienced a relationship break up with the mother of my young son; I had no family or close friends there.

As result I wasn't getting much sleep and when I did sleep I would wake up in a cold sweat about where my life was headed. I became increasingly isolated and started believing that people were talking about me in code with taxis and billboards and TV were aimed at me in code or another reality. My father ended up organising a trip home for me (out of concern) when I identified that I wasn't working very much and that my head and body were really struggling. Upon return to Australia I had my first experience of the public mental health service.

I was told by one Doctor that as I had been unemployed for 18 months and had a mental illness that I shouldn't hold out much hope of gaining meaningful employment and that I should consider the Disability pension as a permanent part of my life.

My first experience of the centre started about four years ago, I came on a visit from an acute unit when I was nearing discharge. After being discharged I felt lost and alone and really only spent time with clinical services and my family. Most of my day involved sleeping.

I decided that being alone for most of the day was getting frustrating and boring and I went to Brook RED. It was late in the day and people were winding up but were really friendly and welcoming and treated me as a person and weren't focused on my 'diagnosis'.

I meet people there that seemed to understand and respect my experience without making assumptions about what I could or couldn't do. I made a conscious decision at this stage that I wanted to be the person that could be there for my son (who incidentally was the first person that recognised that I was not travelling so well).

Over time I started getting up earlier so that I could attend some of the activities offered. I became more involved and enrolled at TAFE to complete a Cert IV in Mental Health with some other people from the centre and felt part of a community and that I had something to offer others.

Positions for Peer Support Workers became available and I applied and was successful through an interview to be offered a position as a Peer Support Worker.

I took part in a 5 day Intentional Peer Support (IPS) training with Chris Hansen (Shery Mead & Associates) about two years ago and have had the opportunity to put into practice on a daily basis what I have discovered. IPS has provided a solid framework for my work and life. I enjoy working with people to develop mutual relationships that is an alternative to traditional practices. I like that it is a learning and growing process and the focus is on what happened to you rather than what is wrong with you.

I think very differently about the future and my capabilities. I visited my son in Ireland late last year and maintain a healthy relationship with him and am looking forward to the opportunity to be part of developing a Consumer Operated Service that will be opening in the near future.

Scoping Study

to Inform the Establishment of a New Peak National Mental Health Consumer Organisation

Draft Final Report Released January 2010

Consultations for the National Scoping Project, a project funded by the Department of Health and Ageing, were conducted throughout the second half of 2009. A strong desire was voiced for a new national mental health consumer organisation which is independent, has a national focus, and is grounded in both grass roots and organisational experience and knowledge.

This draft report builds on the earlier discussion paper and presents the ideas, preferences and areas of consensus which emerged throughout the Project. Importantly, it outlines an approach to organisational development which foreshadows a strong, viable and accountable organisation based on good governance principles and reflecting the need for an organisation which

can deliver for and with mental health consumers nationwide.

The report describes a fully mature organisation that will take a number of years to emerge. During the time of its emergence it will need to devote substantial energies to the processes of consumer engagement; relationship building with the community, government and others; the establishment of exploitable opportunities for action through new funding streams and the establishment of expertise; and importantly, on strategies which enable it to demonstrate a competence to deliver.

The stages through which a new and effective organisation must progress will include an initial establishment phase in which the organisational essentials

such as a membership base, governance and legal arrangements, policies and procedures, initial operational priorities, staffing and infrastructure are created and bedded down. Following this, it can be envisaged that the organisation will need to review and further establish strategic priorities over a longer-term time frame. The organisation will need time to develop the ways to deliver on its objectives, further build its membership base and expand and exploit its relationships with others. In essence, an organisation which aims for continuous improvement will always be looking for the next step in keeping itself focussed on reaching its full potential.

Feedback is welcomed and the full report can be downloaded from the project website at: www.crazelateralsolutions.com

SECTOR LEADERS

The Queensland Alliance, the Community Services Skilling Plan (Department of Education and Training) and the Department of Communities are working together to roll out the Community Mental Health Leadership Program.

This program is designed to develop the leadership capacity of 30 managers in small to medium sized organisations, delivering mental health services across Queensland. Those attending include Mainstream Community Service Mackay, Depression Support Network Toowoomba and Connections Caboolture.

The program offers a rare opportunity for managers of Community Mental Health organisations to come together and talk about issues, share resources and develop solutions

EMERGE

to common problems. It will support managers in the sector to complete a Leadership Skill Set, from the Diploma of Community Services Coordination, whilst providing the opportunity to establish a peer support focused community of practice.

The program includes two 2-day and one 3-day face to face workshops from May to September with experienced sector leaders providing mentoring support and guidance to participants. Queensland University of Technology is conducting a formal evaluation of the project.

For more information contact Melody Edwardson, Sector Development Manager on 07 3832 2600 or melody@qldalliance.org.au

Diploma

OF MANAGEMENT STRENGTHENS Community Mental Health Organisations

During 2009, nine representatives of the Queensland Alliance, Queensland Shelter and Queensland Injectors Health Network (QIHN) undertook a Diploma of Management. Marnie Charlton, Charlton Solutions, was engaged to develop and deliver a unique professional development program for the management team at Queensland Alliance and partner organisations. The program was based on a recognised training program but unique to the needs of the participant group.

The benefits of a recognised qualification were desirable to all participants and the Diploma of Management comprised of the best unit selection for their needs. In line with the Business Services training package of 2007, the following program was designed and delivered – Diploma of Management BSB51107.

Units Completed

- Ensure team effectiveness
- Manage personal work priorities and professional development
- Develop a workplace learning environment
- Manage people performance
- Manage projects
- Manage performance management systems
- Recruit, select and induct staff
- Make a presentation

The Diploma of Management can be undertaken by a manager or middle manager and assists to develop an understanding of the dynamics and principles underlying effective functioning of work groups, as well as the necessary skills to competently function within small and/or large organisations. While participants found the course added considerably to their workload, the assessment was structured so that it could be incorporated into projects they were already undertaking in the workplace.



L–R: Louise Villanova, Charlene Turner, Jeff Cheverton, Melody Edwardson, Catherine Smith, Marnie Charlton, Geoff Manu, Kate Cowmeadow and Toni Brearley. Absent: Geoff Davey

WORKING TOGETHER

for Improved Consumer Outcomes

Rockhampton Mental Health Interagency Community of Practice

The Rockhampton Mental Health Interagency Community of Practice is a whole of sector network, focussed on improving outcomes for consumers and their families by making best use of the resources already available within the community.

The need for the group was identified at the Rockhampton Mental Health Action Day held in August 2009. The first meeting was conducted on the 27th of November, the same year. The group is inclusive of all types of mental health community workers. Stakeholders include consumers, Indigenous and non-Indigenous mental health support services; Queensland Government Mental Health; Disability and Education agencies; accommodation providers; employment agencies; the police; and those involved in supporting people exiting correctional services.

At the establishment meeting it was agreed that for the first 12 months the

group would be hosted by Centacare Rockhampton, and the facilitation and coordination be provided by Victoria Homer, a Centacare staff member. Additional support is provided by a Queensland Alliance sector development worker. A Terms of Reference (ToR) that underpins the Community of Practice (COP) approach of the group was also adopted.

Etienne Wegner, one of the founders of the approach notes that: "Communities of Practice are groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly."

The COP approach has received very positive feedback from workers who are time poor and need to see outcomes achieved for time spent at meetings. Attendance at meetings averages around 20 and has been as high as 33. Meetings are held monthly and the original

1.5 hours has been extended to 2 hours to allow more time for scenario discussion.

Outside of the meeting framework a broadcast email approach has also been used to quickly ascertain what organisations could rapidly meet the urgent needs of a very complex consumer. This linked the consumer to extensive support services much sooner than would have been possible under the traditional 'phone-around' process.

The Rockhampton Interagency Community of Practice Group provides an environment where people learn by applying the approaches discussed during the scenario sessions and build on the relationships and connections made during the meetings.

For more information contact Queensland Alliance Rockhampton Sector Development Worker, Sandy Paton on (07) 3832 2600 or sandy@qldalliance.org.au

Going the Distance:

Recovery Support Groups

Recovery Support Groups give people who have developed eating disorders an opportunity to meet with others who have recovered.

Recovery is a journey and often not a fixed end point and so sharing our stories and strategies can be useful for individuals, regardless of where they are in their recovery journey. The Recovery Support Group is an informal group driven by what the participants want to ask and share, and is supported by group facilitators.



The perspective of an Eating Disorders Association (EDA) Support Group attendee (f, 26yrs)

“What I like about support groups: I like the idea of growing together as a group – sharing things – learning that we’re not alone and that we can get through this. Also that each of us is unique. I think that they can be vital for those that may not have a lot of money to seek other types of support, as generally they are little to no cost... they are a great help, as they are a non judgmental group, eg. doctors – it’s their priority for their patients to get better – rather than sharing stories of hope an encouragement. I think that these groups are good at taking the focus off all the scary, nasty, mean stuff and providing some hope instead. I also like how it encourages social behaviours.”

The Eating Disorders Association (EDA) runs a range of support groups, some of which are free, in Brisbane and the Gold and Sunshine Coasts, as well as Toowoomba.

You can find more information on the website www.eda.org.au or register your interest by contacting the EDA on **(07) 3394 3661** or email admin@eda.org.au

Peak Profile

Ethnic Communities Council of Queensland

The Ethnic Communities Council of Queensland (ECCQ) was established in 1976 to represent the interests of the many people from culturally and linguistically diverse backgrounds (CALD) who are part of the broad social community of Queensland, and to promote multiculturalism. It is a Not For Profit, community-based State peak organisation. ECCQ contributes to national policy and debate on all matters concerning ethnic communities and multiculturalism through its affiliation with the Canberra-based Federation of Ethnic Communities Councils of Australia (FECCA).

ECCQ's Mission is to ensure "that all people from diverse cultural and linguistic backgrounds have equal access to services and can fully participate in all aspects of a cohesive and harmonious Queensland".

Activities and services encompass advocacy; community development initiatives; state-wide health programs; support groups; cross cultural training;

multicultural policy development and research; and a resource and reference library.

ECCQ is a member of The Queensland Accessing Interpreters Working Group that advocates for the need to improve access to interpreter services for state-funded community agencies. Funding for interpreter services was not available for most state-funded services in Queensland from 2005–2007 when the Commonwealth Government removed TIS (Translating and Interpreting Service) fee exemptions to services other than those funded federally. ECCQ supports this campaign as being critical in enabling people from culturally and linguistically diverse backgrounds to have equal access to community services.

For more information about ECCQ visit: www.eccq.com.au

To access information about Fee Free Access to Interpreting Services visit: <http://www.switc.org.au>.



EMPLOY TECHNIQUES

for **A Mentally Healthy workplace**

***Mental Health Works*, a DVD based resource for employers and Disability Employment Network providers, was launched nationwide on Thursday 28 January in Cairns. The *Mental Health Works* resource addresses misconceptions or stigmas surrounding mental health issues and perceived burden for employers.**

Worklink Cairns, who were responsible for the launch, provide employment services that are free of charge to both job seekers and employers. CEO Dorothy Dunne said, “A mentally healthy workplace benefits employees and employers – let’s listen to the voices of experience in *Mental Health Works*.”

Mental Health Works contains the voices of employers and employees who have experienced mental health issues, including that of Catherine Smith. “It’s exciting that a resource is being created to encourage inclusion and understanding of people with a lived experience of mental health issues,” Ms Smith said.

CEO of the Queensland Alliance, peak body for Mental Health in Queensland, Jeff Cheverton said the question was often raised, ‘But why would I want to hire someone with a mental illness?’ His response is, “You probably already do. Almost half of us will experience mental illness at some time in our lives”.

Mental Health Works is funded by the Department of Education, Employment and Workplace Relations (DEEWR). To access the full *Mental Health Works* resource online go to: www.qldalliance.org.au/mental-health-works.shtml or visit the Jobs section of the Queensland Alliance website (www.qldalliance.org.au).

Pictured:
Jim Turnour MP
Catherine Smith
Dorothy Dunne





NOTICE

HAPPINESS & ITS CAUSES



The world's largest forum on human happiness. How are we to work, teach our children, care for others, contribute to society and create a life of happiness and well-being? Each year, over 2,000 people from all walks of life meet at Happiness & Its Causes to examine the big issues of life. The conference brings together the world's top psychologists, scientists, philosophers and thinkers to explain practical strategies to enhance the happiness of yourself and others.

Happiness & Its Causes, now in its fifth amazing year, is a conference like no other. Many have hailed it as a life-changing experience.

Contact: +61 2 8719 5118 or
conferences@vajrayana.com.au
www.happinessanditscauses.com.au

PLAYBACK THEATRE



Playback is an international improvisational form of theatre based on personal stories. Performances and workshops are held regularly.

Workshops are currently available, developed for people 'on the margins'. People with disabilities and mental health issues are encouraged to apply. AUSLAN interpreters are also available: register early to book.

See what Playback is all about at a Playback Theatre Performance on April 16.

(Register your name beforehand for gold coin entry.)

Facilitated by Red Thread Stories: we assist people to share and listen to stories and develop their creativity. Visit:

www.redthreadstories.com.au

Contact Jen Barrkman by phone or SMS 0405110955 or jen@barrkman.com

FREE suicide prevention resources for the mental health sector



Living Is For Everyone (LIFE) is an initiative of the Commonwealth Government Department of Health and Ageing's National Suicide Prevention Strategy (NSPS). The LIFE resources are designed for any one working with people at risk of suicide.

LIFE is offering Queensland Alliance members a free 1GB USB stick, preloaded with LIFE resources. To receive your USB stick email rees@crisissupport.org.au with 'Queensland Alliance' in the subject line along with your name, organisation and postal address in the message. The LIFE documents can also be downloaded or ordered in print form for free from the LIFE website: www.livingisforeveryone.com.au

For more information contact LIFE Communications on 03 8371 2831 or email life@crisissupport.org.au

BOARD



Mind & Its Potential

Explore the amazing potential of your mind! Science is only just beginning to understand the extraordinary capacity of the brain to change and develop.

The implications for how we learn, work and care for one another are profound. Mind & Its Potential is your opportunity to hear the world's top scientists, psychologists and philosophers explain how to apply the new science of the brain in education, medicine, business and your life.

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www.mindanditspotential.com.au/

Workforce Innovation



The Health and Community Services Workforce Council Inc. invites you to join them at their inaugural Workforce Innovation Conference, at the Hilton Hotel, Brisbane – 20 and 21 May 2010.

The WORKFORCE INNOVATION CONFERENCE offers an opportunity to showcase research and the practice of workforce development and innovation in our two rapidly growing industries.

The WORKFORCE INNOVATION AWARDS intend to develop an understanding of the importance of workforce innovation, planning, management and development across the health and community services industries. Nominations for the Awards close on Friday 3 April. The winners will be announced at an Awards Dinner on 20 May 2010 as part of the Workforce Innovation Conference.

www.workforceinnovation.org.au

THE ART OF CONVERSATION

Offered in Brisbane on 3 September 2010 and Sydney on 15 July 2010. At completion of workshop participants will have a greater awareness of how to:

- apply the recovery approach
- communicate with clients, carers and colleagues to create optimal outcomes
- apply effective conflict resolution strategies
- identify and respond to different types of preferred communication styles
- work equitable with people from culturally and linguistically diverse backgrounds.

Contact: Lara Denman 0414 32 0404
or info@wetraining.net



SOCIAL INCLUSION: WHAT'S OUT THERE

Did You Know?

Most OECD countries have run social inclusion (anti-discrimination campaigns) on mental illness. Australia is the only English speaking OECD nation not to run such a campaign. There are more than 40 articles about social inclusion research available on our website.

For more Social Inclusion research visit:

www.qldalliance.org.au/resources/social_inclusion.shtml

Cost of depression among adults in England in 2000

The cost of depression in the UK was estimated at \$3.5 billion almost a decade ago. The shift to community-based management for depression alongside the availability of more accurate data have allowed these estimates to be revised. Aim: to calculate the total cost of depression in adults in England during 2000.

Christine M. Thomas and Stephen Morris
British Journal of Psychiatry (2003), 183, 514-519.

Count Me In!

Inclusion: societies that foster belonging and improve health

This paper is part of a project conducted by the Ontario Prevention Clearinghouse (OPC) during the winter of 2005–2006. The central project activity was a series of six day-long Count Me In! community forums on inclusion.

The Employment Experiences of People with Experience of Mental Illness: Literature Review

Written for the Mental Health Foundation of New Zealand by Chloë Duncan and Debbie Peterson, this report aims to provide detailed information about the issues surrounding employment of people with experience of mental illness, and to highlight issues for policy makers and mechanisms that employers can use to support people.

Attitudes of Mental Health Professionals Toward People With Schizophrenia and Major Depression

Several studies reveal poor knowledge about mental illness in the general population and stigmatizing attitudes toward people with mental illness.

However, it is unknown whether mental health professionals hold fewer stigmatizing attitudes than the general population. A survey was conducted of the attitudes of mental health professionals and members of the public toward mental illness.

Carlos Nordt, Wulf Rossler and Christoph Lauber
Schizophrenia Bulletin vol. 32 no. 4 pp. 709–714, 2006

GLOBAL MADNESS:

A Journey of Policy Influence, Fundraising and Social Inclusion in New Zealand, USA, Canada and the UK

Discrimination against people with psychiatric diagnoses is recognised as a priority issue in all English-speaking OECD countries. Half of us will experience significant mental distress during our lives. Madness is a fully human experience. National social inclusion campaigns on mental health exist in Scotland, England, New Zealand, USA and Canada. Reducing discrimination promotes everybody's mental health, increases economic prosperity, encourages people to seek support, and promotes recovery. In Australia health consumers have identified discrimination as the single largest barrier to recovery.

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Queensland Alliance

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