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House of Representatives  
Parliament House  
Canberra ACT 2600  
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Assistant Minister for Mental Health and Suicide Prevention  
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Canberra ACT 2600  
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6 August 2024

Dear Ministers

**RE: National Meeting of Health Ministers and Mental Health Ministers - 16 August 2024**

In the lead up to the National Meeting of Health Ministers and Mental Health Ministers on 16 August 2024, I am writing to you about the need to address the gap in psychosocial supports for people with severe and complex mental health conditions outside the National Disability Insurance Scheme (NDIS).

We write to you now to draw your attention to the **urgent matter of considering the National Report of Unmet Needs for people with severe and complex mental illness, and steering a national response with your State and Territory ministerial colleagues in line with the Report's findings.**

In particular we ask that you:

1. Release the National Unmet Needs Report publicly; and
  - 1.1. Engage with the mental health sector to co-design the steps and priorities for long-term, sustainable investment in new psychosocial support services to address the identified gaps.
  - 1.2. Engage with the mental health sector to co-produce contemporary and evidence-based service delivery models, with particular reference to Mental Health Australia's advice to government.
2. Commit funding **in the next budget cycle** to establish a genuinely national psychosocial support program to address the identified gaps in psychosocial support for people with severe and complex mental illness, based on the findings of the Unmet Needs Report.
  - 2.1. Establish Bi-lateral Agreements between the Commonwealth Government and each State/Territory Government to fund new psychosocial support services within the National Agreement on Mental Health and Suicide Prevention

- 2.2. Clarify the role of Foundational Supports for people outside the NDIS, in contributing to this gap.
- 2.3. Establish a coherent system that interlinks and coordinates all psychosocial support for people with severe and complex mental illness, including: psychosocial disability support within the NDIS; the existing Commonwealth and State/Territory psychosocial support programs; new psychosocial support services to be established under Bi-Lateral Agreements within the National Agreement on Mental Health and Suicide Prevention; and Foundational Supports.
- 2.4. Establish clear roles and responsibilities, and funding and commissioning arrangements, with the States and Territories, to ensure that this interlinked system of psychosocial supports is delivered with urgency, transparency and accountability.

It has been 30 years since Governments in Australia started closing Psychiatric Institutions. Governments promised that people living with severe and complex mental health conditions would be supported to live well and safely in their community. Today, 50% of that group of Australians is still missing out on support.

The National Unmet Needs Report will update the Productivity Commission's estimate of approximately 154,000 Australians with severe and complex mental illness who do not receive support from the National Disability Insurance Scheme (NDIS) or from other Commonwealth and State/Territory psychosocial programs. These members of our community are missing out on the community-based psychosocial supports they and their families and carers desperately need to improve their quality of life and be equally valued and respected.

Addressing this gap is a national Human Rights issue. Achieving better outcomes for *all* people with psychosocial disability ensures that Australia meets its obligations within the United Nations Convention on the Rights of People with Disability. It helps us achieve the inclusive and diverse community that Australians are proud to be known for, that values the potential and contributions of each person.

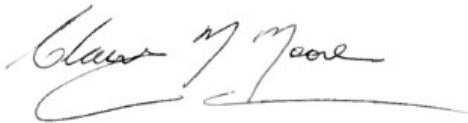
Without adequate psychosocial supports people with severe and complex mental illness will continue to experience:

- Shorter lives – on average, people with severe mental illness die up to 23 years earlier than the general population
- Attempts to take their own lives – approximately 50% of people with the most severe mental illness attempt suicide, compared to 3.7% of the general population
- Relationship breakdowns, loss of employment, homelessness, marginalisation and stigma, long stays in hospital, increased dependence on income support, loss of educational opportunities, and intersections with police and the justice system.

Funding for psychosocial supports outside of the NDIS has decreased drastically since its introduction and what remains is fragmented, inadequate and inequitable. The system channels people into emergency and hospital services, adding extra pressure to that system and in turn traumatising those involved.

MIFA's Chair Claire Moore and CEO Tony Stevenson request the opportunity to meet with you to discuss this issue at your earliest convenience.

Yours sincerely,



Claire Moore  
Chair  
Mental Illness Fellowship Australia



Tony Stevenson  
Chief Executive Officer  
Mental Illness Fellowship Australia