

Foreword

Following much consultation, the Fourth National Mental Health Plan (Fourth Plan) was released in 2009 as the first whole of government Mental Health Plan that actively engages stakeholders (government particularly) from non health sectors.

Research continues to support the social determinants of health concept where mental wellbeing is inextricably linked to other social issues such as housing, employment, finance and social connection. Unlike its predecessors, the Fourth Plan prescribes cooperative activity across sectors and Government services to jointly implement the objectives of the Plan.

Towards this end, the Australian Health Ministers' Conference (AHMC) agreed to establish a Cross Sectoral Working Group (CSWG) and invited representatives from key Ministerial Councils in non-health sectors to work with the Mental Health Standing Committee to implement the cross sectoral aspects of the Fourth Plan.

The Fourth Plan also made particular note of how mental health reform should be reported and measured. This First Progress Report represents the bridge between the traditional style of reporting mental health reform activity and the new version being developed currently to incorporate Fourth Plan implementation activity.

The mental health reform journey will require considerable time to fully realise the effects of change. The Mental Health Standing Committee (MHSC) identified the importance of transparency and offers this Report as an interim measure to publicly illustrate the scope of work under way in the first year of implementation.

The report indicates the diversity of work being progressed through various national committee structures relevant to their areas of expertise and the concurrent jurisdictional efforts to implement the objectives of the Fourth Plan. As this report illustrates, a substantial amount of underlying preparatory activity has been progressed to provide the foundations for other Fourth Plan activity.

The MHSC will now consider options for structuring and resourcing the implementation process and present Health Ministers with their recommendations in 2011. In light of the COAG discussions on mental health reform that are anticipated to occur in mid 2011, it is likely that the MHSC will incorporate the outcome of that process before providing its final advice to Health Ministers.

In the meantime, a number of actions will continue to progress ensuring that the Fourth Plan implementation process does not stagnate and those essential elements fundamental to the success of the remaining Fourth Plan actions are progressed.

Dr Aaron Groves
Chairperson
Mental Health Standing Committee