



From the IIMHL and IIDL Update List

Welcome to this bi-monthly edition of Update for 15 September 2016.

IIMHL and IIDL aim to improve client outcomes through leadership development in the mental health, addiction and disability sectors.

Update allows the rapid transfer of new knowledge through sharing information about upcoming Leadership Exchanges, as well as key national documents, training and webinars.

Please feel free to share this e-bulletin with others and we would be delighted if you would join us on Facebook.

Registration and Match Selection Open

IIMHL / IIDL Leadership Exchange 2017

Theme: Contributing Lives, Thriving Communities
27th February to 3rd March 2017

To register and select your match:

<http://www.iimhl.com/iimhl-leadership-exchange-2017-sydney>

To book accommodation:

http://www.hilton.com/en/hi/groups/personalized/S/SYDHITW-GIIMH-20170226/index.jhtml?WT.mc_id=POG

Each country has an allocation of places,
so waiting lists may start if the allocation is reached early.

In this issue:

- IIMHL Feature Article - Australia
 - [Physical Health and Mental Wellbeing: Evidence guide](#)
- Other IIMHL Articles of Interest - Australia
 - [Shared Perspectives on Authentic Co-design: Putting consumers and carers at the centre of mental health reform, 2016](#)

- [Not a Label. More than a Diagnosis: Personality Disorder: Exploring the lived experiences of ACT women and service providers](#)
- [Interventions for Parents and Families: The evidence for improving physical health and wellbeing outcomes for children](#)
- [What Use Is a Diagnosis?](#)
- [Picture This: How Australians picture mental illness, 2016](#)
- [Commissioning Primary Health Care: An evidence base for best practice investment in chronic disease at the primary-acute interface](#)
- **IIDL Feature Article - Australia**
 - [NDIS is a Game Changer Full of Opportunities](#)

[TheMHS Summer Forum: Thursday 23 - Friday 24 February, 2017](#)

The Mercure, Sydney, Australia

Choice, Control and Citizenship in a Changing Mental Health System

IIMHL Feature - Australia

Physical Health and Mental Wellbeing: Evidence guide

Mental Health Commission of NSW (2016)

The Guide discusses the evidence for comprehensive lifestyle interventions to help improve the physical health of consumers living with severe mental illness. It provides evidence from proven strategies to improve access to physical health services, as well as health promotion, prevention and early intervention for people with coexisting mental and physical health Mental Health Commission of NSW Physical health and mental wellbeing: evidence guide issues.

Although there are significant physical health issues in people with mental health issues, (e.g. anxiety, depression, eating disorders and traumatic stress disorders) this Guide focuses only on the physical health of those with severe mental illness, specifically bipolar affective disorder, schizophrenia and other psychotic illnesses.

Australian and international literature, including clinical trials, systematic reviews and position statements, in addition to grey literature (unpublished academic literature) was reviewed to gather evidence and identify best practice initiatives, frameworks, policies and models. Evidence was collated and assessed to identify not only the currency of evidence but also its applicability, feasibility and potential for practical implementation in NSW.

<http://nswmentalhealthcommission.com.au/sites/default/files/publication-documents/Physical%20health%20and%20wellbeing%20-%20final%208%20Apr%202016%20WEB.pdf>

Other IIMHL Articles of Interest - Australia

Shared Perspectives on Authentic Co-design: Putting consumers and carers at the centre of mental health reform, 2016

An outcome of the Co-design Initiative

The Co-Design Shared Perspectives report provides a framework for the implementation of co-design projects in mental health. It provides an introduction to the principles and practices of co-design. The report aims to help groups and organisations to adopt a co-design approach in all aspects of mental health service from the system level to service provision and daily practice. It is relevant to anyone who is interested in using authentic co-design practices to deliver improved mental health outcomes for all stakeholders.

<https://auspwn.files.wordpress.com/2016/05/codesign-shared-perspectives-report-vf1-5-040616.pdf>

Not a Label. More than a Diagnosis: Personality Disorder: Exploring the lived experiences of ACT women and service providers

Women's Centre for Health Matters Inc. 2016

“This research investigated the experiences of women with lived experiences of being diagnosed or labelled with Borderline Personality Disorder in the ACT and the experiences of service providers who helped and supported them.”

The aim was to explore:

Experiences working with women with BPD including: perceived needs of women; confidence working with women and responses to displays of BPD behaviour;

- Identify ways service providers could be supported in their work with women;
- Experiences with stigma around BPD;
- BPD understanding, knowledge and training; and
- What is working? What is not?

<http://www.wchm.org.au/wp-content/uploads/2015/02/Not-a-Label.-More-than-a-Diagnosis-Borderline-Personality-Disorder-Exploring-the-Lived-Experiences-of-ACT-Women-and-Service-Providers.pdf>

Interventions for Parents and Families: The evidence for improving physical health and wellbeing outcomes for children

The Benevolent Society, 2016

Parents and the family and home environment play a central role in the early learning and development of infants and children (1, 2). A range of interventions exist to support parents and families, particularly in situations where the family is vulnerable and/or where the infant or child may be at risk of delays in learning or development. The first five years of life present a critical window of opportunity for learning and development (3) and they lay the foundation for preparedness for learning and readiness for school (4). The purpose of this Evidence Brief is to describe the extent to which interventions for parents and families can improve child physical health and wellbeing outcomes.

This brief draws on evidence from systematic reviews, which provide the most comprehensive assessment of the evidence.

http://apo.org.au/files/Resource/evidence_brief-interventions_for_improving_physical_health_and_wellbeing_outcomes.pdf

What Use Is a Diagnosis?

SANE Australia

2016

People can have mixed reactions after receiving a diagnosis. The range of emotions experienced can include relief, confusion, fear, embarrassment, grief or empowerment. This is normal.

Many people ask whether diagnosis is a helpful part of recovery. So we've listed some of the positive and negative outcomes many people experience.

<https://www.sane.org/media-centre/the-sane-blog/1830-what-use-is-a-diagnosis>

Picture This: How Australians picture mental illness, 2016

SANE Australia

In 2015 SANE Australia asked Australians how they wanted mental illness to be represented in a short online survey. Getty Images provided six photographs from their iStock by Getty Images collection and researchers at SANE developed a set of questions to accompany them. The survey images were chosen to represent types of images commonly used to accompany news or information about mental illness online. Participants were asked to rate these images on fairness and accuracy. SANE wanted to determine whether or not the participants felt the existing images used in the media were misrepresenting mental illness.

https://gallery.mailchimp.com/c4f6b2fca0e12e49c424dea9f/files/Picture_this_how_Australians_picture_mental_illness_SANE_2016.pdf

Commissioning Primary Health Care: An evidence base for best practice investment in chronic disease at the primary-acute interface

An Evidence Check rapid review brokered by the Sax Institute for the NSW Ministry of Health, August 2015

This systematic review was undertaken for the NSW Ministry of Health to assist them in building an evidence base to address the following question:

What forms of commissioning will support best value investment for primary care, with a particular focus on the primary-acute interface and chronic disease management?

Conclusions were:

The unique features of the Australian health system need to be considered in adapting overseas experience with commissioning. The following need to be considered: pooled funds, commissioning for value and integration. Models of commissioning to meet the needs of individuals, groups or populations are feasible

but will require the development of trust and capacity between commissioners and providers of services, as well as government and non-government funders

http://apo.org.au/files/Resource/commissioning-primary-health-care_1.pdf

IIDL Feature - Australia

NDIS is a Game Changer Full of Opportunities

Graham Innes

The NDIS is continuing to change the way in which Australians understand the roles and contributions of people with disabilities. This article speaks to how communities within Australia will be impacted by this change.

Hundreds of thousands more jobs will be created across the country in support roles for the scheme. Many people with disabilities will move off welfare and into work. At present there is a 30 percentage point gap between the overall population who participate in the workforce at about 83 per cent and the 53 per cent of people with disabilities in the work force. If just a third of that gap move off welfare and into work, the economy will benefit to the tune of \$25 billion.

It's a reminder that the way support is provided needs to continue to change.

<http://www.canberratimes.com.au/comment/ndis-is-a-game-changer-20160713-gg4ome.html>

Fran Silvestri

President & CEO, IIMHL & IIDL

fran@iimhl.com

General enquiries about this Update or for other IIMHL information please contact Erin Geaney at erin@iimhl.com.

Join IIMHL / IIDL

Any leader in mental health, addiction and disability services can join IIMHL or IIDL free by using this link: <http://www1.iimhl.com/Join.asp>

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