IIMHL organises systems for leaders to share innovations, network and problem solve across countries and agencies. The overall aim is to promote mental health and well-being for everyone. This includes developing leaders who can create the best possible conditions for mental health in all sectors across the life-span. Equally, it includes developing leaders who can deliver the best possible outcomes for people who use mental health and addictions services and their families.

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.
IIMHL VIDEO
The Value of IIMHL from a Swedish Perspective
To view this short video:
https://www.youtube.com/watch?v=TT03ZMj8wqk

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IIMHL Feature - Australia

Turning to Online Peer Forums for Suicide and Self-Harm Support: “It does help having you guys”
beyondblue and Swinburne Social Innovation Research Institute
McCosker, Anthony and Hartup, Michael, 2018

This report maps the activity and characteristics of individuals who engage with beyondblue’s Suicidal thoughts and self-harm forum, one of twelve heavily subscribed forums hosted on the organisation’s website. This work provides an evidence base that can be used to maintain, improve and replicate these services to better reach people vulnerable to serious mental health risks. While people generally find it difficult to talk about suicide and the contexts that lead to it, this report shows that there is a deep need and great capacity for supportive conversations among peers, and these can be facilitated by online community platforms.
Other IIMHL Articles of Interest - Australia

Alcohol and Other Drug Treatment Services in Australia 2016–17
Australian Institute of Health and Welfare, June 2018

In 2016–17, 836 publicly-funded alcohol and other drug treatment services provided just over 200,000 treatment episodes to an estimated 127,000 clients.

The top four drugs that led clients to seek treatment were alcohol (32% of all treatment episodes), amphetamines (26%), cannabis (22%) and heroin (5%). The proportion of closed treatment episodes where clients were receiving treatment for amphetamines has more than doubled over the last 10 years, from 11% of treatment episodes in 2007–08 to 27% in 2016–17. Two-thirds (66%) of all clients receiving treatment in 2016–17 were male and the median age of clients remains at 33 years.

Managing Mental Health in the Australian Federal Police
Australian National Audit Office, March 2018

The objective of this audit was to examine the effectiveness of the Australian Federal Police in managing employee mental health.

The audit found that the AFP lacks a comprehensive and consolidated organisational health and wellbeing framework to enable effective management and support of employee mental health. While the AFP offers a variety of mental health support services, there is no evidence that these services are effective and they are not supported by sound governance, risk management, evaluation or an articulated business rationale. Any reform of the portfolio of services available should be made in the context of available data on employee access, areas of high stress and risk, gap analysis, organisational culture and employee preferences.

Overview of Aboriginal and Torres Strait Islander Health Status 2017
Australian Indigenous HealthInfoNet, June 2018

The main purpose of this publication is to provide a comprehensive summary of the current health status of Australia's Aboriginal and Torres Strait Islander people. It has been prepared by Australian Indigenous HealthInfoNet staff as part of our contribution to supporting those who work in the Aboriginal and Torres Strait Islander health sector. The Overview is a key element of the HealthInfoNet's commitment to authentic and engaged knowledge development and exchange.

Coronial Practice, Indigeneity and Suicide
International Journal of Environmental Research and Public Health
Gordon Tait, Belinda Carpenter, Stephanie Jowett, April 2018

All available data suggest that, like many other Indigenous peoples, Australian Aborigines are significantly more likely to kill themselves than are non-Aboriginal Australians. This statistical disparity is normally positioned an objective, ontological and undeniable social fact, a fact best explained as a function of endemic community disadvantage and disenfranchisement. This research explores the possibility that higher-than-normal Aboriginal suicide rates may also be a function of coronial decision-making practices.
This research is based upon in-depth interviews with 32 coroners from across Australia. To read in full:
http://apo.org.au/node/175846

**National Mental Health Service Planning Framework (NMHSPF)**
University of Queensland & New South Wales Ministry of Health & Queensland Health, 2018

The NMHSPF allows users to estimate need and expected demand for mental health care and the level and mix of mental health services required for a given population. The model draws on evidence and expert opinion to:

1. Estimate the prevalence of mental illness across all disorders within the Australian population, by severity;
2. Assign expected service demand rates to each severity level;
3. Break down the population with demand for services into 155 need groups based on age group, severity of disorder and complexity;
4. For each need group, outline the average types and quantities of services required over a 12-month period to provide adequate mental health care across bed-based, community clinical and psychosocial support services;
5. Describe the staffing, salary and operational parameters associated with different service types; and
6. Combine the above to produce benchmarks for the resources (e.g. beds, staff, dollars) and activity (e.g. service contacts, hours) required to deliver this adequate care to defined population.

The main product of the NMHSPF is the NMHSPF Planning Support Tool (PST), an Excel-based planning tool allowing users to generate benchmarks for a given population.
http://www.nmhspf.org.au/About%20the%20NMHSPF/

**Saving Lives. Saving Money: The case for better investment in Victorian mental health**
Mental Health Victoria. June 2018

Using a return on investment model, the report argues that increased funding will produce positive economic and social returns.

The *Saving Lives. Saving Money* report maps out the economic case for investing in Victoria’s mental health, backed by data from the Australian Institute of Health and Welfare, and independent investment analysis. It brings together not only mental health service providers, but police, unions, and clinicians who all agree that, without proper funding, Victoria will see increased demand and pressure on ambulance call-outs, police and criminal justice, emergency departments and public hospitals, and crisis services.

Priority areas identified include:

- youth and adult preventative services
- hospital beds
- suicide prevention
- access to housing.

**IIDL Features - Australia**

**Bringing the Good Life to Life - A series of articles**
The Good Life - What do we Mean by the Good Life?
Community Resource Unit

This article consists of a series of printed articles and videos that outline the principle ideas of what constitutes the good life for everyone. These principles cover issues of Being accepted an Valued; Relationships; A Place to Belong: Life in Community; Choice and Control, and Opportunity for Growth.


Getting Started - How to Bring the Good Life to Life
Community Resource Unit

This is a continuation of a series of articles and videos that provide advice and guidance to those wanting to understand how to get started in the development of truly person driven, person directed supports. It has a focus on Starting with Person; Holding high expectations; Holding a positive vision for what is possible; the Quality of Planning, and the Pursuit of Socially Valued Roles

Including Others, The Importance of Family and Friends
Community Resource Unit

In this continuation of their series on Bringing the Good Life to Life the Community Resource Unit present a series of articles and videos that emphasise the need for belonging and relationship if people are to have lives that are full, meaningful and inclusive. These articles focus on What Money Cannot Buy; the Role and Authority of Families; Friendships; Informal Support Networks and how it is Relationships that keep people Safe.
http://thegoodlife.cru.org.au/including-others/

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http://www1.iimhl.com/Join.asp

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