



MENTAL HEALTH NGO SUBSECTOR COMMISSIONING: FEEDBACK PAPER

Older Persons

June 2023

ACT Commissioning for Outcomes
2022- 2024

WE KNOW

The ACT, like much of Australia, has an ageing population. By comparing the census results for the ACT from 2011 to 2021 we can see that the proportion of older people, defined as people over the age of 65, has grown from 10.7% of the population in 2011 to 13.7% in 2021. This is an increase of approximately 24,000 older people. Older people in the ACT also have the highest average life expectancy in the country, which is reflective of an overall high standard of health and wellbeing for older people in the ACT¹.

However, increased life expectancy, and the growing ageing population, continues to intensify demand on the aged care, healthcare and social support systems that support the needs of older people. Outside of these services, there is also need for an environment that supports wellbeing and allows older people to live active and productive lives. This includes the provision of mental health care and support for older people across a number of settings, including community mental health NGO services.

Mental Health for older people is complex and is influenced by a number of mental, physical, social, economic and environmental determinants. Older people can experience poor mental health as a result of: increased chances of chronic disease and disability; changes in socioeconomic circumstances that can occur after retirement; and the social and emotional challenges associated with ageing¹.

Despite this, research indicates that there are a range of factors that can act as barriers to appropriate mental health care for older people, which add to the complexity of this sector. These Barriers include¹:

- A lack of specific services in the mental health sector for older adults
- The prioritisation of physical health care above any mental health concerns
- Poor mental health literacy
- Stigma associated with mental illness.

Beyond the immediate effects of mental illness, we also know that untreated mental health concerns can lead to poorer physical and mental health outcomes. This is particularly true in older age where it can lead to increased hospital admissions and earlier admissions to residential aged care facilities.²

Questions: Which of these barriers, or others you can identify, are the biggest barriers for:
a) Older people to access and engage with NGO services; and
b) NGO services to provide sensitive and age appropriate care for older people?

The Royal Commission into Victoria's Mental Health System noted that while older people are referred to as one population group, this cohort is made up a large group of individuals with very different needs. It also includes people who have aged with mental illness and those who have developed mental illness late in life. The Royal Commission also acknowledged some markers of older adulthood that cause feelings of loss and grief, including increased psychological distress, social isolation or loneliness. These life changes may include:

- Retirement and the associated loss of an income and valued social role
- Loss of loved ones
- Loss of physical health and independence.

While these changes may be seen as part of normal ageing, normalising poor mental health for older people as a result of these can impact the likelihood of older people to seek help for their mental health. As evidence of this, research suggests that healthcare professionals and older people who view depression as a normal consequence of ageing are less likely to pay attention to or seek help for poor mental health respectively². This highlights the importance of mental health education and promotion.

Question: What should the priorities be for mental health education, prevention and promotion for older people?
Question: How can community NGO services engage or reach older people who may not recognise their mental health needs?

POLICY AND FRAMEWORK DOCUMENTS

Recognising the importance of mental health for older people, the Office for Mental Health and Wellbeing has created *Towards our Vision: Re-envisioning Older Persons Mental Health and Wellbeing in the ACT Strategy 2022-2026*¹. This strategy outlines 25 actions across three priority areas, including building mentally healthy communities for all Canberrans, enhancing lives and experiences of Canberrans with mental illness and improving structural and system capacity to respond to the needs of older Canberrans requiring mental health care.

The 'Towards our Vision: Re-envisioning Older Persons Mental Health and Wellbeing in the ACT Strategy 2022-2026' outlines outcomes that the ACT Government intends to achieve for older Canberrans and their mental health. These are:

1. Keeping older Canberrans mentally healthy;
2. Supporting the needs of older Canberrans with mental health issues and their carers and families; and
3. Supplementing the mental health and wellbeing of older people in the aged care system.

However, this Strategy also exists alongside a number of policies, frameworks and guides that relate to or promote the mental health of older people. These documents include:

National

- Royal Commission into the Quality and Safety of Aged Care³;
- Aged Care Diversity Framework⁴;
- National Strategic Framework for Chronic Conditions⁵;
- A national framework for recovery-oriented mental health services⁶;
- National Safety and Quality Health Service Standards⁷;
- National Safety and Quality Mental Health Standards for Community Managed Organisations⁸;
- Mental Health Statement of Rights and Responsibilities⁹;
- National Mental Health and Suicide Prevention Agreement¹⁰.

Australian Capital Territory

- Towards our Vision: Re-envisioning Older Persons Mental Health and Wellbeing in the ACT Strategy 2022-2026¹³;
- Canberra's Age-Friendly City Plan 2020-2024¹²;
- Age-Friendly Canberra – A Vision for our City¹³;
- Accessible, Accountable, Sustainable: A Framework for the ACT Public Health System 2020-2030¹⁴;
- Capital of Equality Strategy: Action Plans¹⁵;
- ACT Wellbeing Framework 2020¹⁶.

DESIGN CONSIDERATIONS

In this Mental Health Commissioning process, the team wants to identify the specific characteristics or design of mental health NGO services that can best support the needs of older people in the ACT. In doing so, we will be supporting community services to be as person-centred and representative as possible.

The Commissioning team have compiled a number of broader service design questions as part of the Design phase that can help us to assess what NGO services should look like to effectively support the mental health of older people. Options for this include:

Lived Experience Workers

Lived experience workers are staff within a service that provide peer support and advocacy to service users, including carers. They are employed to provide their lived experience to service users and provide a

unique perspective for people who access mental health services. Lived experience workers are highly valued in the mental health sector, largely due to this perspective, but also because their role, knowledge and skills vary from other staff members, such as clinicians, psychologists and allied health professionals.

Question: What services should use lived experience workers and how would this directly support older people?

Social Connection

As highlighted by the Victorian Royal Commission, there are a number of community initiatives across Australia, such as men's sheds and neighbourhood houses, that are aimed at building social connection and preventing social isolation and loneliness for older people. These services can also be used to increase awareness of, and reduce stigma surrounding, mental illness for older people.

Question: Of the options listed in this section, or any others you can identify, what are your top priorities for the design of community NGO services to support older people?

POTENTIAL OUTCOMES

Through Commissioning there are a number of Principles in the Blueprint that we expect all services to achieve. Alongside these, there will be a number of outcomes that will drive service delivery and reporting.

Noting this a broad group with varying cultural identities, belief systems, and languages, it is important to recognise outcomes that have impacts for older people. These may be used in commissioning or future work as the sector becomes more accessible.

Question: What do we need to measure to make sure we have the right services and supports for older people, and that those services and supports are having a positive impact on people's lives? For example, measures could include:

- A reduction in stigma for older people; and
- Increased social connection for older people who may be experiencing loneliness.

Question: What challenges do NGO services have for recording and measuring data relating to older people?

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TERMS, ACRONYMS AND DEFINITIONS

Acronyms:

ACTHD ACT Health Directorate

NGO Non-Government Organisation

CHN Capital Health Network

CHS Canberra Health Services

MHJHADS Canberra Health Services Mental Health, Justice Health, Alcohol & Drug Services

PHN Primary Health Network



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