Welcome to the winter edition of the Head2Head magazine, which is dedicated on this occasion to promoting mental health issues in rural and remote Western Australia.

WA's growth in mining and resource development, and all of the related opportunities it has created, is a powerful magnet drawing people from other parts of Australia and overseas to start a new life here. The population over the past 12 months has grown by almost 82,000 people and this, combined with the sheer size of WA, presents our sector with unique and significant challenges.

Rural and remote communities often do well at connectedness but are vulnerable to socioeconomic disadvantage, reduced access to health services and a culture of stoicism that sometimes puts people off seeking help. Stigma, cultural issues, lack of appropriate services and the expense of delivering services in remote settings make it difficult to adequately address people's mental health needs solely through a mainstream clinical approach. As a result, people in rural and remote WA require a range of specialised mental health responses.

The Mental Health Commission is acutely aware that access to mental health services and support is inconsistent throughout WA. To remedy this, we are working with other government and non-government organisations to improve supports for people with mental health problems and illness in rural and remote areas.

In financial terms, the Commission allocated $76.4 million in 2012/13 to specialised mental health services in regional WA and in this edition we profile some of those wonderful services and supports. But there's still a significant way to go and that will be addressed in the 10 year Mental Health Services Plan which we expect to be finalised in the year ahead.

Some examples of recent initiatives in country WA include:

- The Statewide Specialist Aboriginal Mental Health Service (SSAHMS) for Aboriginal people with severe mental illness, which has a strong regional focus and is providing an additional 35 FTE in regional WA.
- The WA Suicide Prevention Strategy which has a strong emphasis on people living in regional areas and focuses on community and workplace based solutions to local issues.
- In the Kimberley region, a new 14 bed mental health inpatient service for Broome opened in 2012, followed in 2013 by 7 additional beds at Albany.
- In addition, sub acute services are planned for Broome (6 beds), Goldfields (6 beds), Bunbury (10 beds) and Karratha (6 beds). The Mental Health Commission has also contributed funding in partnership with the Drug and Alcohol Office for the operation of a new residential rehabilitation service in Kalgoorlie for men with mental health and drug and alcohol problems.
- Additional funding of $1.6 million per year for community based mental health youth services.
- Support for 25 country residents through the Individualised Community Living Initiative which has delivered accommodation and individually tailored services and supports.
- In 2013/14, the Commission provided funding of approximately $8.5m to NGOs providing services in rural and remote areas, of which, $1.5m relates to Component I and Component II sustainability funding.

Many challenges lie ahead but significant progress is being made. We are working closely with a wide range of government and non-government agencies, including people with mental illness, their carers and families as well as the general community to build a state where everyone works together to encourage and support people who experience mental health problems and mental illness to stay in the community, out of hospital and to live a meaningful life.

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Kimberley and Pilbara girls shine

While the Kimberley Girl program directly affects participants in the Kimberley and the Pilbara regions of WA, the impact that the Kimberley Girl story seems to be having on the nation as a whole is testament to its broad reaching success.

It’s not all ‘lights, camera, action’ on the Kimberley Girl stage. It’s also about new confidence, self pride and a realisation that the sky really is the limit.

This unique program, supported by the Mental Health Commission, celebrates the inner and outer beauty of young women in the North West. The program supports mental health promotion and the identification and prevention of mental illness among young Aboriginal women.

Kimberley Girl tour coordinator, Nommie Wade, said many young women turned up on the first day of the workshops with their guards up and heads down.

“I’ve seen so many girls with so many issues - broken homes, alcohol and substance abuse, domestic and physical violence. Some girls have been moving around from family to family because they don’t have a stable home. Some are young women in their 20’s with children also dealing with domestic violence issues,” she said.

Of the 260 participants that have been through the program, all have experienced or had to help a friend or family member deal with a mental health issue.

The program invites young Aboriginal women to participate in five days of professional development, deportment, grooming and modelling workshops. It also shifts them from a negative set of life choices onto another pathway that provides better opportunities and outcomes for themselves, their families and their community.

Kimberley Girl and Pilbara Girl are not just beauty pageants, they are programs of engagement, personal development and leadership training delivered through a pageant format.

The Kimberley Girl program was founded in 2004 by Goolarri Media and targets young Aboriginal women between the ages of 16 and 25. Structured workshops and showcase events address contemporary issues, help participants overcome the impact of social, economic and isolation disadvantages and bring the community together in a celebratory capacity.

In 2010, the Kimberley Girl program was expanded from its original base in Broome to Kununurra, Fitzroy Crossing and Roebourne broadening the existing program to reach more participants. This expansion was met with great success and now, in its 10th year, the program truly reflects the diverse culture, history and heritage of the beautiful and unique Kimberley region.

The program is also run in Port Hedland and Karratha. In 2012, 36 Kimberley and Pilbara women participated in a three day event and modelling competitions.

During the event, young Aboriginal women are supported to recognise intergenerational issues and given tools, skills and knowledge to become more resilient in the face of adversity. Workshops focus on nurturing individual skills and capabilities to improve confidence and self-esteem.

Not only are participants trained in make-up and hair, and taught to walk like a professional model while getting photographed, they also learn about issues such as sexual health, public speaking, dealing with adversity and self-criticism, and developing inner strength.

Associate Professor Ellie Rennie of Swinburne University of Technology in Melbourne explained the importance of informal conversations facilitated by the program. “It is in the informal moments of Kimberley Girl that life’s hardships are revealed. Once a girl’s bangles were removed from her arm exposing the fact that she had been self harming, a young woman revealed she had a drinking problem and asked for help, while another spoke of racism around the workplace.”

Former participants have featured at Western Australian Fashion Week, G’Day USA in Los Angeles, the National Museum of Australia in Canberra, Youth Leadership Programs throughout Australia and overseas, in fashion magazines and catalogues, as well as in short films and social media campaigns for Aboriginal youth. Participants have also won state and national awards for the leadership roles they play in their communities.

For more information about the program call Goolarri Media on 9195 5333, email reception@gme.com.au or visit www.goolarri.com.
Swimming through adversity

Born without her left forearm, Jessica Smith has conquered adversity and is now working to help others.

At birth, Jessica’s parents were advised to have their daughter fitted with a prosthetic arm in an attempt to create as normal childhood as possible for Jessica and to assist with her development. Ironically, this aide was the primary cause of the next devastating event in Jessica’s life. When she was just 18 months old, struggling to get used to the new prosthetic limb, Jessica accidently knocked some boiling water and suffered third degree burns to 13 per cent of her body.

As a child growing up Jessica says “I felt as though I simply wasn’t good enough and didn’t fit in. Low self-esteem and an inability to accept who I was, led to a decade long struggle with depression and eating disorders.”

“I felt so disconnected and isolated from everyone else around me. Every day I woke up feeling anxious and scared to face the world. I hated myself and scared to face the world. I hated myself and with professional help, I am now happier than ever. I feel free and content, and that brings me so much joy.”

Jessica now works proactively to promote positive body image and raise awareness of the importance of good mental health and the seriousness of eating disorders. She is now in recovery from her mental health issues and this is my proudest achievement. Unfortunately, I had to hit rock bottom before my life was able to something positive and constant in my life throughout those dark years. Swimming truly was my saving grace,” Jessica said.

“I am now in recovery from my mental health issues and this is my proudest achievement. Unfortunately, I had to hit rock bottom before my life was able to change, but thankfully with the support of my family and with professional help, I am now happier than ever. I feel free and content, and that brings me so much joy.”

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Growing up in rural NSW, Jessica felt there was a severe lack of services available to her at that time. She believes if she had been able to access services and resources earlier, her path would have been different. She now works closely with rural and remote communities and schools in the hope of generating more awareness for mental health issues.

Jessica recently launched a campaign titled Join the Revolution which is aimed at promoting awareness about positive body image and is focussed on creating a positive cultural change. Working closely with Australian organisations and government agencies, Jessica hopes to pave a positive path for future generations.

“Mental illness is real and the more we talk about it, the less daunting it is,” Jessica said.

For further information on Jessica visit www.jessicasmith.com.au.

Tertiary students go bush

A placement in a rural area gives tertiary students the opportunity to put theory into practice as it relates to mental health knowledge and skills in a way that can’t be found in the metropolitan area. And for some, a taste of this tree-change can be very appealing.

“I really wanted to do it, so I put my hand up for it. From a counselling perspective we were never going to get an opportunity to get a student placement in the metropolitan area. It is only the clinical psychologists who get that opportunity, and I wanted the experience as well,” said a psychology student.

But what makes for a successful student placement?

To answer this, the Combined Universities Centre for Rural Health participated in a national research project involving universities and vocational and technical colleges from across WA. Participants included students studying social work, nursing, psychology, occupational therapy, medicine, and non-clinical mental health, along with staff and rural mental health workers.

The research project found key themes that made for a beneficial and satisfying rural placement. Accommodation provided at no cost was a big factor as well as sufficient resources for students such as offce space and computer access and good coordination and communication between the mental health service and the university or vocational and educational training college.

“There are so many things going on, from a community health point of view, like a men’s shed, and community gardens, it just seems there is so much there to help the community. I found things that I did not even know we had in Perth,” said a fourth year occupational therapy student.

The push to promote the rural and remote mental health workforce doesn’t end with the research. The Mental Health Commission is offering scholarships for students working in regional and remote areas, as well as to enrolled nurses based in country areas who are interested in studying the Advanced Diploma of Nursing in Mental Health.

For more information contact Jacky Woods from West Coast Institute on 0413 068 616.
Northam recovery

Two years ago Emil was an alcoholic with mental health problems on the road to self-destruction. Today he has made good progress on the road to recovery, helped by a long stay at the drug and alcohol rehabilitation centre in Northam.

The Fresh Start Recovery Program provides an integrated care pathway to address the complex needs of individuals with both addictions and mental health problems.

The Northam Recovery Centre is a residential rehabilitation facility which caters for 24 men taking part in the naltrexone treatment program run by the Fresh Start Recovery Program. Individuals are treated with a naltrexone implant at the program’s Subiaco clinic before arriving at Northam.

Naltrexone implants block the effects of drugs (especially opioids) and eliminate cravings to use drugs for at least 200 days.

Fresh Start Mental Health Nurse Gary Anderson says having stable accommodation is very important for people to continue their recovery from alcohol and mental health issues. “Northam is available to men who have no other suitable residential options. Often they are estranged from their families and have isolated themselves from the community,” he says.

“Reintegration with the community is a large part of the rehabilitation program. Our purpose is to help people back into their social environment and to help them understand it takes time. We hope they will also be reconciled with their family and friends and even find work.”

Nurse Gary sees people suffering from personality disorders, anxiety, depression, drug induced psychosis and schizophrenia. He uses the recovery model of support which he believes looks beyond medication and the illness label to treat the whole person. As part of the program at Fresh Start, people also see addiction medicine specialists, in house GPs and counsellors.

Fresh Start Recovery Program recognises recovery is more likely with support of family and peers and encourages family members to attend treatment consultations.

Wherever possible the program aims to connect individuals with peer support workers. People have access to a personal recovery care plan which is developed with input from the individual and their family and/or support person.

“Emil spent more than 18 months at Northam learning how to live a life without alcohol. Like all individuals at Fresh Start he played his part in the daily routine of cleaning, shopping for groceries and cooking meals.”

“A highlight was developing a vegetable garden which flourished with tomatoes, honey dew melon, sweet potato, corn and more. It gave him a leadership role and was good therapy,” said Nurse Gary.

“I am back talking to my son and my mum,” said Emil. “I’ve turned a new leaf and have stopped punishing myself. I have spent time with counsellors getting my brain right and I now have a good outlook on life.”

To support individuals and their families, Fresh Start Recovery Program has recently partnered with the Busselton community to develop a respite and rehabilitation centre on land granted by the Busselton Council. A large group of local residents has joined a support network that aims to develop a facility to provide families and carers with a much needed break.

To find out more about Fresh Start visit www.freshstart.org.au or call 9381 1333.

For more information about drug and alcohol services or to learn about the effects of drugs and alcohol, visit Drug Aware at www.drugaware.com.au, Alcohol. Think Again at www.alcoholdrinkthinkagain.com.au or contact the Alcohol and Drug Information Service on 9442 5000 or 1800 198 024 (tollfree).

Secret Squirrel


Former Western Australian author, Jenny Middlemiss, who lived with a form of schizophrenia, opens her book with a discussion of the nature of wellbeing, illness and recovery. Readers are invited to think about their own life and how the choices they make determine who they are and what they are becoming.

Secret Squirrel Business is supported by the latest research in mental health and its wide ranging practical advice is extended by workshop exercises. By the end of the book, the readers have an array of tools to help them act from the authenticity of their own inner being, giving a solid platform from which to tackle life’s future struggles and challenges.

The book, which is available to people living in regional WA by free download or by contacting Ruah on 9485 3939, is beautifully illustrated by Roy Husdell and Michael Leunig, and includes photographs by Robert McFarlane.

There is a variety of stories that capture how different individuals have charted their way to recovery.

The book can be downloaded at www.secretsquirrelbusiness.com.au. The website also features a forum for discussion as well as moving personal video stories and information about services that can help in the recovery journey.
Program *Links* young offenders with mental health support

The Mental Health Commission, the first of its kind in Australia, has been pioneering new ways to support people experiencing mental illness since it was established in 2010. Finding new ways to support young people with mental health problems is at the heart of the Commission’s Mental Health 2020 Strategic Policy. One such initiative is the new mental health court diversion and support pilot project in the Perth Children’s Court.

Young people who appear in the Perth Children’s Court now have access to on-site mental health support when they need it. The mental health court diversion and support pilot project gives the President and Magistrates of the Perth Children’s Court access to a team of mental health specialists, including a clinical psychologist, a consultant psychiatrist, mental health nurses and support workers.

Called *Links*, the team is on-hand to provide assessments and reports to the Court, make referrals to appropriate services, and offer some clinical intervention.

While the pilot program is Perth-based, it will be evaluated to determine its success and potential future expansion to regional centres.

Psychologist Dr Kristy Downe, who is at the helm of the *Links* clinical team, said her team would develop tailored support plans for young offenders with mental health issues.

“This is a great opportunity to get involved with young people who have mental health problems and link them with appropriate services and supports that they need.”

“The program aims to divert young offenders from the criminal justice stream to ensure they receive necessary treatment as well as alternative sentencing options for those whose offences are the result of mental illness,” says Dr Downe.

One of the objectives of the *Links* program is to improve coordination and communication between criminal justice agencies and mental health service providers through the development of collaborative partnerships.

“Our role is not only to improve the mental health of children and young people in the court system and address their offending behaviour, but to also educate parents, carers, lawyers and support Magistrates in identifying mental health issues. Magistrates, who see children coming before them day in and day out, often have a good radar that something may be wrong. The team can help them better identify what the issues are in a particular case or how they could be better addressed,” Dr Downe says.

*Links* supports young people with serious emotional and mental health needs who appear before the Perth Children’s Court and links them with appropriate supports and treatment programs.

“In my opinion, the most positive outcome is having agencies working together to deliver better outcomes for children and adolescents with mental health problems, their families and carers,” she says.

*Links* is the result of the Mental Health Commission and the Department of the Attorney General working in partnership with the Department of Health, the Perth Children’s Court, the Department of Corrective Services and the Department of Child Protection.

“We can provide a service for those kids who need it most, improve family involvement in treatment programs, and enhance collaboration with service providers,” Dr Downe explains.

The program is the second component of the State Government’s $6.7 million mental health court diversion and support program and complements the adult program that commenced in March 2013.

It serves to give young people who appear in the Children’s Court a chance to address issues which may be contributing to their offending and lessen the chance of them coming back into contact with the criminal justice system.

This benefits not only the young people and their families but society as a whole.

For information contact the Mental Health Commission on 6272 1200 or Dr Downe at the Perth Children’s Court on 9218 4811.
Books prescribed for rural WA

Boab Health Services was recognised for its excellence in rural and remote mental health at the 2012 Mental Health Good Outcomes Awards.

People living in regional areas often face significant challenges to access appropriate and timely services as a result of geographical isolation.

Boab Health Services provide focused, evidence-based, psychological intervention and suicide prevention services in Broome, the Dampier Peninsula, Fitzroy Crossing, Derby, Halls Creek, Kununurra and Wyndham.

The service works closely with local GPs, Aboriginal Medical Services and government providers to give local people access to psychological therapies in some of the more remote and challenging environments within WA. By providing flexible and culturally appropriate services, with links to other support and services, Boab Health Services has improved the quality of life of local people who have experienced mental health issues, their carers and families. Previously unmet needs are now being met at no cost to the local people.

People at Boab Heath Services have the philosophy of going into communities, having extensive consultation and then working with individual communities to provide mental health services and community development activities.

One project they are currently involved with, in collaboration with the local libraries throughout the Kimberley, is the Books on Prescription program. The program allows specially chosen self-help books to be prescribed by mental health professionals. Once issued, the prescription can be exchanged for the book at the public libraries in Broome, Derby and Kununurra. The program is used by GPs, mental health professionals at Boab Health Services, and other health service providers in the Kimberley region.

There is evidence that the best self-help books can be highly effective in helping people with emotional challenges. Many practitioners regularly recommend particular books to individuals and soon get to know which of these books are most useful.

The use of self-help books is known as bibliotherapy, which uses a person’s relationship to the content of a book and other written words as a more creative form of therapy.

Bibliotherapy also has certain advantages over medication, including:

- higher patient acceptability
- more immediate effects than some (particularly antidepressant) medication
- no rebound effect when treatment comes to an end
- tendency to continued improvement over time
- lower relapse rates
- no appreciable adverse side effects
- no adverse reaction with medication or other forms of treatment.

The books provided through the program have been recommended by a panel of expert psychologists in the UK, with additional resources added by the Boab counselling team.

The majority of the books have been used in UK Books on Prescriptions programs for at least five years. Videos provided by beyondblue are also available through the program.

In winning the mental health good outcomes award for excellence in rural and remote mental health, Andy Williams from Boab Health Services said “winning the award has given our team recognition for the important work we do in remote primary mental health care and the positive impact of this work for the people of the Kimberley.”

For further information about this service visit www.boabhealth.com.au or call 9192 7888.

Healing Songs reveals the heart of the Wheatbelt

Community Arts Network WA is an exciting and dynamic organisation working towards positive social change through community arts and cultural development.

Over the last 28 years, CAN WA has been inspiring and mobilising WA communities who experience social disadvantage to creatively express their unique stories through a diversity of art mediums.

Since 2012, Noongar elders and community members from Kellerberrin and Quairading have been working with award winning Noongar singer-songwriter Gina Williams and musicians Guy Ghouse and David Hyams as part of CAN WA’s Healing Songs program.

The program brings Aboriginal elders and young people together to share stories about life, love and country. Through working with these musicians, the group developed new songs, honed their performance skills and co-created music to accompany pages of poetry. The resulting collection of original songs will be featured on an album to be released in 2013.

“A lot of things come to the surface and a lot of healing takes place. It’s been wonderful working with Guy and Gina and having the chance to get these songs and stories out. Now we’ve started, we don’t want to stop,” said Yolande Yarran, Healing Songs workshop participant.

Encouraging and facilitating the unearthing, telling and sharing of stories in Aboriginal communities is fundamental in Noongar culture and is essential in positively affirming Noongar cultural identity.

To read more about CAN WA’s programs go to www.canwa.com.au.
E-mental health – putting the spotlight on technology

When Aram Hosie, Director of Research and Public Affairs at the Inspire Foundation, delivered his keynote speech to the West Kimberley Youth Sector Conference, he did so from his office in Sydney. The sound and video quality were clear, and the audience was engaged. Here is a brief look at what he had to say.

Rapid advances in technology mean the difference between ‘actual’ and ‘virtual’ are breaking down and the potential to deliver face to face services across vast geographic distances is becoming a reality. Innovative web services provide opportunities not only to save money on airfares or accommodation for conference presenters, but also to transform future service provision.

In the past, providing appropriate and timely services to people living in regional and remote communities has been hampered by the tyranny of physical distance, difficulty recruiting and retaining appropriate staff, and access to transport, technologies and other infrastructure.

Over the past decade a range of factors have come together to create a health services environment in which web-based technologies offer promising opportunities for earlier and better management of common mental health problems.

Smart mobile phones now outstrip computers as the device most used by people to get online. Their relatively lower cost to purchase means more people are able to get online from almost anywhere.

The nature of the internet has also changed from static websites to a complex web of interconnected applications, devices and social networks. One of the fastest areas of growth is in self-monitoring health applications – tools that assist users to monitor and improve their physical and mental health.

And by 2015, the launch of two large satellites will ensure those living in remote parts of Australia will have access to the internet faster than many current connection speeds in the metropolitan area.

Work is already under way in this space. The $100 million Young and Well Cooperative Research Centre was established to investigate the potential of technology to support young people’s lives and how it can be used to improve the mental health and wellbeing of young people aged 12 to 25 years.

The centre unites young people with researchers, practitioners, innovators and policy-makers from over 70 partner organisations across the non-profit, academic, government and corporate sectors. The unique approach brings together young people with researchers and innovators in technology in a way that is collaborative and values-driven.

The opportunity exists to transform the way services are provided throughout Australia, ensuring that everyone, regardless of where they live, is able to access effective and equitable services and support.

For more information about Young and Well Cooperative Research Centre visit www.yawrcrc.org.au.

To get involved with Inspire Foundation visit www.inspire.org.au.

To access confidential, free, anonymous online counselling services for young people where you can chat, email or speak with qualified youth mental health professionals visit:

- eheadspace @ www.eheadspace.org.au
- Lifeline crisis support chat @ www.lifeline.org.au
- Australia’s leading online youth mental health service, accessed over 1.4 million times a year @ http://au.reachout.com

A strong partnership between two local services has seen mental health and drug and alcohol services grow significantly in Fitzroy Crossing.

Not that many years ago, Fitzroy Crossing and the fifty or so surrounding communities of the wider Fitzroy Valley area were serviced by visiting mental health and drug and alcohol staff members over three days each month.

In the heart of the Kimberley, framed by the vast flood plains of the Fitzroy River, the Valley is home to roughly 3,500 people, eighty per cent of whom are Aboriginal. With just three days to cover the area, servicing the needs of the scattered population was a challenge for the visiting staff members. But that was in 2007 and a lot has changed since then.

In an effort to plug the service delivery gaps, Nindilingarri Cultural Health Services and Kimberley Mental Health and Drug Services (KMHDS) started working together to better meet the needs of the West Kimberley region. The community wanted a holistic, culturally appropriate service and this was the solution.

Staff members from both services decided to co-locate, basing themselves at Nindilingarri’s premises in order to share information and resources. Together, they then successfully applied for funding that would allow additional staff members to be hired, in line with the community’s needs. But a lack of suitable housing for staff was holding them back.

Help came in the form of the Drug and Alcohol Office, which funded the construction of four residential units for Nindilingarri and KMHDS workers, which were completed in March this year.

“We now have a strong hub operating in Fitzroy Crossing with six full-time staff members including a mental health worker, three drug and alcohol workers, an Aboriginal mental health worker and one administration staff member,” Ms Diver said. “Three fly in fly out workers complement our team.”

Feedback from the communities regarding these services is excellent and they are proud of what staff members have achieved through hard work.

For more information about Nindilingarri Cultural Health Services visit www.nindilingarri.org.au. You can call 9193 0093 or email nindilingarri@nindilingarri.org.au if you have any concerns or questions, their friendly staff are happy to assist.

A partnership between Kimberley Mental Health and Drug Service (KMHDS) and Inspire Foundation, aimed at improving youth mental health. The opportunity for earlier and better management of common mental health problems through the use of web services has been realised.

The success of the partnership demonstrates the potential of technology to support young people’s lives and how it can be used to improve the mental health and wellbeing of young people aged 12 to 25 years.
Music to Open Your Mind plays to the crowd

Each year Music to Open Your Mind (MTOYM) attracts more than 2,000 people who enjoy a day listening to some of WA’s finest musical talent while learning about good mental health. This year Albany born Annabeth Bateman MC’d the event in Fremantle.

Now in its eighth year, the event uses music’s healing properties to bring the community together to raise awareness of mental health and support people with mental health problems and/or mental illness.

The 2013 line-up included local favourites Dilip n the Davs, the Justin Walshie Folk Machine, accomplished Irish fiddler Robert Zielinski, Phil Waldron and Wasamba. The event also featured art, craft and food stalls, free children’s activities and information about mental health issues and services.

Thirty mental health service providers held stalls at the event and more than 50 people, including South Metropolitan Health Service staff, supported the event as volunteers. This South Metropolitan Health Service initiative received the 2012 WA Health Award for Excellence in Health Promotion and Early Intervention, and has been nominated for the 2013 WA Premier’s Awards and a finalist in the 2013 Fremantle Business Awards for the Outstanding Community Event Award.

“More than 45 per cent of all Australians experience a mental health issue at some point in their life and we want to emphasise positive ways to manage this by showcasing some of the mental health supports and services available in our community” said Dr Elizabeth Moore, Executive Director of the Mental Health Strategy and Leadership Unit, South Metropolitan Health Service.

This is a unique campaign that is not replicated anywhere else in WA, proudly sponsored by the Mental Health Commission. Feedback showed people enjoyed the fun, creative and colourful community ambience. “I loved the atmosphere, the venue, the music, the community spirit and the welcome to country,” said one community member.

Mental Health Commission paves the way

A high quality mental health system ensures the rights of people with mental health problems and/or mental illness are protected and that they have access to high standards of contemporary treatment, supports and services.

The Mental Health Commission is committed to developing and implementing an integrated approach to quality assurance in services delivered by non-government organisations and public mental health services.

Currently, a quality framework is being developed for the non-government mental health sector in consultation with key stakeholders, including non-government organisations, individuals with lived experience of mental illness, families, carers and members of the public.

The purpose of the quality framework is to establish mechanisms to measure and report on the quality of services provided by non-government organisations across WA, including regional areas, against the Mental Health Outcome Statements and the current National Standards for Mental Health Services. These documents can be found on the Commission’s website at www.mentalhealth.wa.gov.au.

The objective of the quality framework is to build a culture of continuous service improvement within the non-government sector ensuring people with mental illness, their families and carers get high quality services and have a better quality of life.

The quality framework will include:

- annual self assessment completed by non-government organisations, including an annual continuous improvement plan
- improved reporting, tracking, management and investigation (as required) of notifiable incidents
- evaluations that will be conducted by a minimum of two independent evaluators that will include family members, carers and people mental illness.

Independent evaluators will assess service quality by seeking evidence through direct feedback, observations and documentation that actively support individuals, and/or their families and carers. These evaluations, which are to be conducted statewide, will help people achieve their personal goals and address the intent of each of the standards in practice.

Independent evaluators will then identify opportunities for service improvement in relation to providing quality outcomes focussed services and possibly required actions.

To become an independent evaluator you will need to apply through Tenders WA at www.tenders.wa.gov.au.

For more information contact Tammy Ford, Assistant Director, Sector Development on 6272 1200 or tammy.ford@mentalhealth.wa.gov.au.

Contact: Angela Piscitelli on 6466 7848 or via email angela.piscitelli@health.wa.gov.au.

To apply through Tenders WA at www.tenders.wa.gov.au.
GIVING BACK CAN MAKE YOU FEEL GOOD

Intent on giving back to his adopted country, Young Australian of the Year Akram Azimi uses his skills to help young people in remote and rural WA.

Arriving in Australia 13 years ago from Afghanistan, Akram Azimi has gone from being an ostracised refugee kid with no prospects, to head boy in his school, to becoming the 2013 Young Australian of the Year while studying a triple major at UWA.

In 2011, he co-founded a student-run initiative I am the Other to raise awareness about Aboriginal issues in universities. His philanthropic roles have included working with True Blue Dreaming, which helps disadvantaged remote Aboriginal communities. For the last six years, Akram has mentored young Aboriginal people in the Looma community of the Kimberley region, primary school students in the small farming community of Wyalkatchem and is a mentor to Special Olympics athletes.

"I give back because I realised how lucky I have been. I have been blessed with many things in life that I did not choose: an incredibly loving mum, a good family, a healthy body and becoming an Australian citizen. Although I have experienced material poverty, I have never been without love in my life," he said.

Akram had a life changing experience when he saw people who lacked everything and those living in extreme poverty. He realised he could either feel guilty or gratitude for the blessings in his life.

"I chose gratitude. I allowed it to fill my heart. And once your heart is full of gratitude, you cannot help but give back. I did not choose to be privileged but I can choose how to use that privilege."

"I now volunteer my time and energy towards eradicating polio and extreme poverty and fostering reconciliation. I understand fulfilment in life does not lie in the satisfaction of our desires or wants, but in the exercise of our obligations to our community."

"In a sense, my volunteering work is a deeply selfish exercise. I do it for myself because it gives me purpose and a sense of contentment that does not erode with time," said Akram.

One group that has touched his heart is the Aboriginal community of Looma. "The people are so generous with their time, food and stories. They made me feel at home, they helped me feel Australian for the first time."

"The red Kimberley dirt and its beautiful people opened my heart up and gradually I have began to see Australia through Aboriginal eyes. They mentored me; they believed in me and have helped me become who I am today."

Having travelled through many regions of WA, in both Aboriginal and non-Aboriginal communities, Akram has seen first hand the mental health issues facing those in rural and remote areas.

"Access to vital mental health services should not be contingent on where one lives," he said.

"As much as mental illness is a personal struggle, it also has profound social consequences. Mental illness not only affects the individual but also everyone in their social networks. And in small close-knit rural and remote communities, this can have a devastating and cascading effect," Akram noted.

To maintain his own mental health, Akram surrounds himself with good friends and tries to adopt a perspective of gratitude, focusing on what he has rather than what he lacks and trying to give back by being of service to his community.

"I give not because I am a good person but simply because it makes me feel good."

For Western Australian artist David Giles painting is an exploration and expression of the mystical and spiritual.

Since 2005, when he openly spoke about his mental illness, David has become a mental health advocate and a successful artist.

"I wanted to show that people with mental health issues can still be happy and successful."

Spells in and out of psychiatric hospitals, followed by a life of quiet desperation before he got appropriate help, has given David the foundation for his paintings. He has served as a program coordinator for Disability in the Arts, Desadvantage in the Arts Australia, he is an Ambassador for the Count Me In strategy of the Disability Services Commission and has made a major contribution to the Mental Health Commission's ten year strategic policy, Mental Health 2020, Making it personal and everybody's business.

Over the years David has won 20 art awards and held exhibitions in New York, Paris, Singapore, Sydney and Melbourne. He has been described as ‘one of Australia’s most exciting contemporary painters’ as well as a leader for his achievements, leadership and contribution to the community.

In 2010, David gave the Mental Health Commission permission to use his stunning artwork because he believes passionately in mental health reform. To date his work has been featured on the Commission’s website, corporate documents and publications.

Also featured on this edition’s cover is a piece David recently donated to the Commission, entitled Spring.

"Spring is a painting inspired by the concept of spring as renewal, hope, new beginnings, second chances. After every winter there is spring, new life, new growth. It was painted after a road trip through the wildflower regions of South West of WA," he said.

David currently runs the Freedom School Professional Development Program for practising and aspiring artists and has an art studio.

To find out about the program or to contact David visit his website at www.davidgilesartist.com.au.
In 2006, the National School Chaplaincy program was initiated by the Federal Government. Approximately 2,712 schools receive funding to employ chaplains who assist school counsellors and staff in the provision of wellbeing services, guidance on human relationships and support in cases of bereavement, family breakdown and other stressful situations.

In WA, YouthCARE coordinates in-school chaplaincy services for 578 public schools of which 190 are in regional areas.

“School chaplains deal with a wide range of issues, but most frequently with behaviour management and social relationship issues,” said Ms Karen Coetzee from YouthCARE. “They work with students, families and staff in the school community to encourage an understanding of the range of human experience including:

- social - strategic support and training is offered to students to develop leadership and citizenship skills
- emotional - the chaplain has conversations with individuals and groups experiencing personal or social difficulties enabling them to solve problems and adjust to change
- spiritual - the chaplain stimulates and challenges students to examine the big questions of life and meaning, helping them to formulate their own beliefs and values
- mental health - self esteem and social skill enhancing programs are provided to students that will enable them to participate more confidently.”

A mother recently shared the difference a chaplain made in their lives. “When my husband left us, we lost everything. I picked myself up and found a new home for the four of us. Days went by, tempers flared, tears flowed, spirits wore down and our faith diminished. My eldest needed help, support and guidance on acquiring some coping mechanisms. Our school chaplain was there for us. She listened. She visited. She resourced. She supported us. Two years later, my son is enjoying life and has regular contact with a mentor that the chaplain organised. The chaplain is our fairy godmother.”

“We hear stories like that all the time,” Ms Coetzee said. “Many staff members also say how grateful they were for the assistance of chaplains, particularly at those times when they needed to be teaching.”

Chaplains make a significant contribution to the wellbeing of students and teachers by providing an opportunity for students to talk about issues in a safe environment. They are also a place of referral for teachers of students who have emotional problems and by conducting events through which coping skills and behaviour management is taught.

Current chaplaincy vacancies for regional WA are listed on the YouthCARE website. If you are interested in becoming a chaplain or would like more information about YouthCARE’s chaplaincy program talk to your school support team, visit www.youthcare.org.au or call 9376 5000.

Rural in Reach The first of its kind in WA, the Rural in Reach program is a statewide program providing a range of health care and support services in remote and rural areas of WA.

Rural in Reach works in partnership with regional health centres and more than forty Community Resource Centres (CRCs) and all services are offered at no or low cost. CRCs are locally owned and operated centres that provide regional communities with access to technology, information and services.

The program is tailored to meet each community’s specific needs and aims to promote good health as being about overall wellbeing. Services are accessed by video link, using a secure internet connection to assure privacy and confidentiality.

The program is available to local service providers, individuals and families, with consideration given to the unique needs of Aboriginal, migrant and refugee families.

Rural in Reach provides information, support, counselling and scheduled community talks. These services can be based on medical health, alcohol and drugs, family and domestic violence, mental health, community development and Aboriginal family support.

One client said “I found myself having trouble dealing with several situations life had thrown at me and as I live remotely, I wasn’t sure which way to turn for help. At an appointment with the Women’s Health and Family Service during a trip to Perth, I learnt about the Rural in Reach (Program) from my doctor. She explained that it’s a service designed to help people like myself living in an isolated area who have very little help available to them. Once I got back home I found it easy enough to set up the video links on my laptop and even my iPad with the links and support I had been given. The face-to-face video-conferencing sessions are confidential and are like having my counsellor visit me in my home for our appointments. I find it really open and helpful being able to see my counsellor like this. I have been using this counselling service for six months now and would really recommend it. Not every day is a diamond but I am feeling more comfortable and secure in tackling situations, which is definitely helping me.”

As training can be difficult to access in rural and remote areas due to potential barriers such as geographical location or expense, on their website Rural in Reach also provides community talks on various topics through podcasts, including education and training sessions for professionals. The website also has recorded community talks, Westlink broadcasts and a counselling tab.

Accessing the Rural in Reach program is easy. Just visit your local participating Community Resource Centre or speak with a Rural in Reach Health Consultant by calling 1800 998 399. Information about the program can also be found online at www.ruralinreach.wdfs.org.au.
Helping young people to land on their feet

Hellen Roughley is expecting her mobile phone to ring at any minute. The Service Coordinator of the Salvation Army’s Crossroads West centre in Kalgoorlie-Boulder is expecting a call from a client who is due to give birth. Such is the rapport she has with the young people in care at the service. Hellen was asked to be the woman’s birthing partner and is nervously awaiting the call to drop what she is doing and dash to the hospital.

“I feel really honoured to have been asked,” said Hellen, who has been with the program for more than ten years. “And I’ll happily step in if they have little or no support from family or significant others.”

The Crossroads West centre that Hellen manages is a lifeline of sorts for many young people in the Goldfields region who find themselves separated from loved ones and in urgent need of a place to stay. Able to accommodate up to 12 people at a time, the centre is a short term accommodation service for young men and women aged 15 to 24 years. The average length of stay is about four to six weeks, with the maximum of three months.

“Young people can find themselves in crisis for a variety of reasons and there’s no typical client,” Hellen said. “Their family relationship may have broken down and they’ve been asked to leave the home, or they may have mental health or drug and alcohol issues. We also have clients referred to us by the justice system and the Department for Child Protection.”

Hellen and her staff work with people to improve troubled family relationships, develop their sense of identity and worth, and equip them with the sort of skills that will help them move forward in life.

“I love spending time with them, listening to their stories and talking with them, giving them support and encouragement,” she stated.

It’s in this respect that Crossroads West helps pave the way for young people and their families to embrace significant change in their lives and relationships.

“While they are here they can seek stable long-term accommodation, investigate schooling or employment options, and work on reuniting with their families if possible, which is the best outcome for everyone,” told Hellen.

In December 1998, the Salvation Army took over the management of the crisis accommodation shelter. Hellen and her team have since introduced an after-care program after identifying a need for ongoing support for clients who had left the service. This extra support can also be accessed by young people who have not stayed at the Crossroads West centre.

“We want to see all young people reach their full potential, despite the problems and pressures they face,” she concluded.

For information on Crossroads West call 93281600 or email tss@aus.salvationarmy.org. For information on Kalgoorlie-Boulder Youth Accommodation Service call 9091 1016. Full list of services is available at www.salvationarmy.org.au.

Hear our voices

A new program, created by Aboriginal people for Aboriginal people, has been in operation for the past year to help connect Aboriginal people and talk about mental health.

The Kimberley Empowerment, Healing and Leadership Program (KEHLP), funded by the Commission in conjunction with the Ministerial Council for Suicide Prevention, works to connect people with themselves, their family and their community.

Identifying the risk and protective factors that contribute to the social and emotional wellbeing of Aboriginal communities, and its opposite, community distress and suicide, requires an in-depth knowledge of the historic, cultural and economic risk factors at play in each community and are best known and understood by community residents themselves.

KEHLP developed out of a comprehensive research report, Hear our Voices, which included participatory research consultation with community members in Broome, Halls Creek and Beagle Bay along with a national and international wide program and literature review by professionals at the Telethon Institute of Child Health Research. The report found that Aboriginal communities had a clear desire to lead their own healing initiatives, based on the value of life, culture and community.

Since then, 12 programs based on three modules - self, family and community - have been delivered in Broome, Beagle Bay, One Arm Point, Fitzroy Crossing, Warmun, Wyndham, Kulumburu, Gibb River and Halls Creek.

The self module is the core of the program, developing awareness, identity, self-esteem, self confidence and determination of the individual. Individuals go through a journey of self discovery, strength and empowerment. The other two modules focus on issues and problem solving within families and the community.

The program’s success led to the development of a Train the Trainer component to better equip local communities to expand the program by preparing new trainers with critical training skills.

Samantha Gregory was one of the first to complete the KEHLP in Broome and later went on to complete Train the Trainer component. “This new knowledge has given me a positive outlook to my life and I feel there is much more I can do to be a better person for myself and my family,” Samantha said. “I feel really good after completing this program and I am going to achieve some great things, so keep watching me.”

Samantha has been a great success story as she was able to gain sessional employment delivering the program in Broome with the Kimberley Aboriginal Medical Services Council in their Social and Emotional Wellbeing unit. This opened up new doors and shortly after, Samantha secured a full-time position with another organisation. Samantha is also negotiating new opportunities for program delivery to the internal clients of the new organisation.

According to the Program Developer and Manager Cheryl Dunkley, there are many wonderful success stories. “What started as a drop in the ocean has turned into a ripple and in time when more Aboriginal people join the journey our ripple will turn into a wave that will become a tsunami of positive change that impacts many lives.”

Mental Health Commission is dedicated to enhancing the planning and delivery of services to Aboriginal people and people living in regional WA, which is detailed in the ten year strategic policy Mental Health 2020: Making it personal and everybody’s business.

The State Specialist Aboriginal Mental Health Service (SSAMHS) is a key component in the Commission’s commitment to this area. SSAMHS provides specialist clinical interventions to Aboriginal people with severe and persistent mental illnesses across the State and the Commission is responsible for the ongoing development and implementation of the program.

For a detailed list of services and supports for Aboriginal people visit:

For further information about Kimberley Aboriginal Medical Services Council visit www.kamsc.org.au.
Help for employees gets mental health on the right track

Free and confidential employee assistance programs have an important role to play in creating a healthy, functional and well supported workforce.

Many of us will have spotted the employee assistance program (EAP) brochures dotted around our workplaces, strategically placed in lunch rooms and staff meeting hubs. For employees with mental health issues, the leaflets of information are a crucial link to a supportive yet independent ear.

According to a research paper by American psychologists Roger F Peters and Teresa Firth, industrial involvement in mental wellness programs have a long history, with the earliest programs aimed at combating issues with alcohol.

During the 18th century it was common practice to supply workers with alcohol to encourage them to work harder. By the 19th century, workers in most occupations drank on the job. And by the 1940s, the employer's misguided efforts had created many alcoholics. So programs were introduced to help workers reduce their consumption of alcohol.

Today’s EAP model has come a long way since those early days. In practical terms, an employee whose employer provides an EAP is entitled to a set number of free professional counselling sessions each year.

Information and education, and referrals to other professionals or agencies, are also typically offered. The goal is that these brief intervention services will help staff members to continue to work to their best capacity.

In WA, the challenge for the EAP model lies in the size of our expansive state.

“The distance issue we have is constantly being addressed,” Dorothy Lavell, Director of Oars Across the Waters and WA representative for the Employee Assistance Providers Association of Australia (EAPPA), said.

It is with companies such as Ms Lavell’s and other WA Employee Assistance Providers, that employers engage to provide employee assistance programs for their staff.

“Larger regional towns will usually have a local EAP provider but there is a big variation in regional centres and the services available. Some providers will have employees living in regional centres and other providers will contract people who are in private practice in those regional centres to help the employer assistance provider. And a lot of providers now fly in EAP teams if it’s necessary,” said Ms Lavell.

But this fly in fly out option can also present problems, explained Ms Lavell, whose company specialises in management counselling and team intervention.

“For example, if a counsellor is based on a mining site, people might hesitate to go to a counselling session because they might see it as a breach of their confidentiality. Many providers will take that into account and do their best to arrange for sessions to be held off site and not where people might feel compromised,” she said.

“Technology such as Skype, which allows face-to-face interaction via a computer or laptop, is also used by a limited number of providers,” Ms Lavell added.

What many people don’t know is that assistance can also extend to immediate family members that live in the same house as the employee.

As an example, Ms Lavell explained most employers would realise that a staff member’s work performance could potentially be impacted by difficulties they were experiencing with their teenage son or daughter at home.

“Employers understand that if they support the child or the teenager, then the parent will have more capacity to engage at work,” she said.

“I strongly believe that employee assistance programs have an essential role in Australia’s overall mental health strategy.”

EAPs can benefit all levels of staff, according to Ms Lavell. “Support is often facilitated when managers take up the service and then promote it to other people by saying they found it helpful,” she stated.

Ms Lavell also pointed to high profile men who have admitted to having mental health issues.

“We had former WA Premier Geoff Gallop, who announced his resignation from the State’s top job in 2006 citing his struggle with depression as a factor. Former Victorian Premier Jeff Kennett, who is now chairman of beyondblue, and WA’s Under Treasurer Tim Marney have also talked openly about their mental health issues and the support they need. I think these examples are really help others to see that counselling can be helpful.”

The Employee Assistance Professional Association (EAPAA) of Australasia is the Peak Australasian Body representing provider and user members that supply Employee Assistance Programs in the workplace.

To find a provider in your area visit www.eapaa.org.au/index.php/providers/provider_wa
Getting help at school
In WA, every student from kindergarten to Year 12 has access to psychologists who can help children and young people succeed academically, socially, behaviourally and emotionally.

School psychologists work closely with teachers, the school administration, parents and other professionals to create safe, healthy and supportive learning environments that strengthen connections between home, school and the community for all students. They provide services for young people on an individual, face-to-face basis, as well as providing services for groups of young people.

Chris Gostelow, Manager of the School Psychology Service with the Department of Education and member of the Ministerial Council on Suicide Prevention, said school psychologists are superb at networking with other agencies and referring young people to other service providers in the school setting and outside of school.

“At the primary school level school psychologists can be accessed through the school principal,” Chris said. “Secondary age students can directly access school psychologists and organise to meet with them in person. Sometimes students will see the school psychologist in pairs or groups, while other times it could be teachers or other school staff who request some sort of assistance or support for students.”

“There is a range of things school psychologists can help young people with including relationships with peers, bullying and concerns regarding the behaviour of their peers, as well as issues at school or home. They can also help with more serious issues such as depression, anxiety, eating disorders, self harm, fears and phobias,” Chris stated.

“There are more than 300 school psychologists working in WA’s public and non-government school system. They are qualified to deal with children with mental health problems and can connect them with appropriate mental health services. Parents and students are able to engage with these services directly through their school.”

In 2012, the Commission and the Ministerial Council for Suicide Prevention provided $200,000 in funding to the Department of Health for a dedicated school psychologist that will work with schools to identify children at risk and link them into services and supports they need.

If you or someone you know needs help with mental health, talk to your school psychologist. Alternatively, the best place to start is your local GP. A range of mental health professionals can also help. Check out the back page of this publication for contact numbers or mental health services and supports.

Steps towards building a suicide safer Nannup

OneLife and the Nannup Community Resource Centre have formed a partnership to raise awareness and prevent suicide. This has only been possible with the support of the Nannup community.

As part of Nannup’s OneLife suicide prevention project a community barbecue was co-hosted by OneLife and the Nannup Cricket Club. The guest speaker was Glen Mitchell, a former sports commentator and writer who has experienced mental illness in the past. Glen spoke about suicide prevention and mental health issues to more than 60 locals, which was a great turn out for Nannup.

An important partnership has been developed with Nannup District High School through its Principal, Felicity Dear AM. School staff and students involvement in R U OK Day 2012 activities was a catalyst for school staff participating in Livingwork suicideTALK and safeTALK training. The students themselves learned not only to ask the question R U OK? but to follow it up with ‘if not, you can tell someone.’

The relationship with the school has continued with students creating artwork and projects around the One Day Ride, which is part of the Black Dog Ride organisation that works to raise awareness of depression and money for mental health services. The students’ work was displayed in the Nannup Town Hall as part of the 2013 Ride’s morning tea stop for the 760 riders who came into the town. One rider commented on the Ride’s Facebook page “Great idea to get them thinking while they are young. Not forgetting the fact there are up and coming riders in schools to keep the message going in the future.”

Stories in the local newspaper about mental health and suicide prevention help to reduce the stigma associated with these issues and boost a persons likelihood of seeking help.

The ability to continue to provide Livingworks, safeTALK, suicideTALK, ASIST and ASIST TuneUp training in Nannup during 2013 will increase community awareness and confidence in dealing with the issue of suicide. One participant praised the training saying “whatever the eventual outcome in any personal story, I would sincerely recommend training to everyone as a valuable resource for increasing human wellbeing.”

OneLife and the Nannup Community Resource Centre have been able to utilise strong relationships with other South West communities to promote training and events throughout the greater South West area.

For more information about Nannup’s OneLife Suicide Prevention Project contact Cate Stevenson on 9756 3022 at the Nannup Community Resource Centre or email onelife.nannup@westnet.com.au.

To get involved in events or training in your area visit www.onelifewa.com.au or call 9325 6644.

An extensive list of mental health service and supports can be found at the Mental Health Commission’s website at www.mentalhealth.wa.gov.au.
Ride leads regional expansion

The Hawaiian Ride for Youth is an annual event that has been running for 11 years, seeing cyclists ride from Albany to Perth to raise money for Youth Focus and raise awareness of the issues surrounding youth suicide.

An integral part of the Hawaiian Ride for Youth are the school stops along the 700 kilometre journey to deliver presentations, information and resources about mental health. This year’s ride involved presentations at 15 schools including Albany, Busselton, Bunbury, Manjimup, Bridgetown and Collie. The school visits are coordinated by the team at Youth Focus over a 6 month period prior to the event. There is considerable communication and pre-event visits between their team and each school. This process is aimed at gathering a deeper understanding of what mental health issues and trends are being experienced at each school so that the presentations during the ride are relevant and topical. Importantly, the data and information is shared with the leaders of Youth Focus’ services team who follow up with the schools to offer the appropriate level of additional support where required. Last year, an additional peloton was added due to the number of riders participating, allowing riders to travel via an inland route, as well as the traditional coastal route. This facilitated engagement with more schools than ever before and has led to the development of ongoing relationships and support structures.

The 2013 Hawaiian Ride for Youth identified that the new regions added to the ride are in high need of youth mental health services. As a result of ongoing consultation with schools visited, Youth Focus is in the process of offering service support to new areas with further expansion to follow. The riders form an emotional attachment to the communities and schools they visit and there is a clear mandate from them to support these schools. The money raised from the Ride and the development of relationships allows better service delivery for those in need living in regional areas. Although Youth Focus services are free to access, it is expensive to operate an outreach service to regional schools, which makes fundraising events like the Hawaiian Ride for Youth an essential part of the work they do.

Broome’s Mabu Liyan

Broome’s mental health unit – Mabu Liyan - is WA’s most remote mental health unit. This 14 bed specialist mental health inpatient unit has resulted in a decrease in the number of patients needing to be transferred to Perth from the remote north of WA.

The Broome Mental Health Unit is the only acute psychiatric facility north of Joondalup and since it opened there has been a significant reduction in transfers to metropolitan psychiatric hospitals from the Kimberley.

In the recent three month period there was only one case that required specialist medical treatment as well as psychiatric care that could not be provided in Broome. For the same three month period the previous year, there were 12 transfers to Perth from the Kimberley. This means less stress for patients and families because the need for travel to Perth is reduced.

Of the patients presenting to the unit 80 per cent are Aboriginal, who say they feel more secure when they are able to have a yarn with a person who comes from the same background as them.

Commissioner for Mental Health Eddie Bartnik said finding new ways to support Aboriginal people in WA is one of the Commission’s priorities. “We are working together with the Department of Health and other government and non-government service providers to deliver culturally appropriate services, thereby closing the gap in the mainstream mental health system and, in the context of Aboriginal engagement with services, addressing inadequacies of the traditional medical model,” he said.

The Mental Health Commission has also committed $22.47 million over four years (2009-13) to fund a statewide mental health service for Aboriginal people with severe and persistent mental illnesses.

The Kimberley Mental Health and Drug Service is at the corner of Anne and Robinson Streets, Broome.

Phone: (08) 9194 2640
Email: kmhdsclinic.reception@health.wa.gov.au
Website: www.health.wa.gov.au.
Albany’s Bad Joke Friday

How do porcupines hug? Answer: Very carefully, of course!

What do you decide to do in a year 11 human biology class? Answer: Jason Addis decided he would create an idea to improve people’s wellbeing.

What started out as a simple idea turned into an online presence to share a laugh, as well as raise awareness for mental health and young people.

Bad Joke Friday is a simple concept of telling bad jokes on Fridays. “The theory behind it is that there is so much negativity and seriousness in society, and we want to change things. By telling jokes you create a positive and happy environment - laughter is the best medicine,” Jason Addis said. Jason is from Albany and was attending North Albany Senior High School when the idea took off.

“A mate thought it would be a funny idea to tell a single joke every Friday. I joined in on the gig but it turned out my jokes were really, really, really bad. I then decided to start telling bad jokes in other classes and suddenly it became a thing.”

In 2012, Jason spoke at the Fairground conference of the Youth Affairs Council of WA and ever since that day in human biology class the bad jokes have continued to come every Friday.

To find out more information and get involved visit www.badjokefriday.com, follow Bad Joke Friday on Twitter and join their Facebook page at www.facebook.com/pages/Bad-Joke-friday

For more information about headspace in Albany visit www.headspace.org.au

To find out more information about the Youth Affairs Council of WA visit www.yacwa.org.au

St John of God Health Care is increasing its commitment to research across a wide range of medical, surgical and mental health fields with the aim of improving patient outcomes and to enhance clinical outcomes. We achieve this by undertaking transitional research, principally in the specialties of oncology, nursing and mental health, addressing areas lacking in useful research data including postnatal depression and post-traumatic stress disorder.

In particular, St John of God Health Care is dedicated to advancing research in the field of Perinatal Mental Health. This research provides us with important information about the nature of anxiety, depression, bipolar disorder and other emotional health issues experienced during pregnancy and following birth. The Perinatal and Women’s Mental Health Unit at our Burwood hospital in NSW was established in 2009 and is led by Professor Marie-Paule Austin, in partnership with St John of God Health Care and the University of New South Wales. Research conducted by Professor Austin and her team will deliver important information about factors that underpin the mental health of women and impact on the family environment in the early years of life. The research aims to inform the development of evidence-based interventions and to promote and improve mental health outcomes for women and their families.

In WA, the major mental health initiatives we operate are within our Social Outreach and Advocacy program, though we also offer a diverse range of specialised psychiatric programs on an inpatient, day patient and outpatient basis through our private hospitals in NSW and Victoria.

At St John of God Murdoch Hospital a study into post-natal screening for anxiety and depression is being conducted, which aims to identify women at risk of anxiety and depression in the post-natal period and trial a new referral pathway that will ensure women receive appropriate and timely psychosocial support. The Raphael Centre, based at St John of God Subiaco Hospital, is developing a robust research program with the recent appointment of a research nurse. The projects currently underway include evaluation of our therapeutic treatment programs, investigation into various factors that impact on perinatal and infant mental health and a qualitative study into the experience of neonatal nurses in the Neonatal Intensive Care Unit. A partnership with WA Perinatal Mental Health Unit has also been formed to implement and evaluate a primary care support program for new mothers that was developed at the Raphael Centre.

For more information on our research projects or our mental health services visit our website: www.sjog.org.au

Our community-based mental health services in WA include:

• Raphael Centres in Subiaco and Murdoch
  – specialist perinatal and infant mental health services

• Murdoch Community Mental Health
  – adult counselling and outreach work for young people and families

• Drug and Alcohol Withdrawal Network (DAWN)
  – helping people reduce or stop their drug and/or alcohol use in their own homes

• South West Community Drug Service Team
  – services across the southwest to reduce the harm associated with alcohol and other drugs

Shall I put the kettle on? Answer: You think it will suit you?
If you or someone you know needs help with mental health, the best place to start is your local GP or call after hours GP Helpline on 1800 022 222. A range of other mental health professionals can also help.

If you feel someone is at risk of harm or in an emergency call 000.

For mental health emergency assessment, support and referral call Mental Health Emergency Response Line (MHERL)

- **MHERL metro** - 1300 555 788
- **MHERL Peel** - 1800 676 822
- **RuralLink** - 1800 552 002

Alternatively, go to your nearest public hospital emergency department.

If you need someone to talk to contact:

- **Crisis Care Helpline** - 1800 199 008
- **Kids Help Line** - 1800 551 800
- **Lifeline** - 13 11 14 or online chat at www.lifeline.org.au
- **Suicide Call Back Service** - 1300 659 467
- **Youthbeyondblue** 1300 224 636
- **Men’s Line Australia** - 1300 789 978
- **headspace** - www.headspace.org.au
- **Reach Out** - au.reachout.com
- **Youth Focus** - www.youthfocus.com.au

For a detailed list of mental health services and supports visit the Mental Health Commission’s website at www.mentalhealth.wa.gov.au