



Government of Western Australia
Mental Health Commission

MULTICULTURAL SUB NETWORK

Date: 21 October 2020
Location: Anita Clayton Centre and via Microsoft Teams
Attendees: Dr Aesen Thambiran, GP, Sub-Network sponsoring agency representative (Co-Chair)
Dr Bernadette Wright, Clinical Psychologist, Primary Health Services (Co-Chair)
Carla Patterson, Mental Health Commission (MHC) Liaison Representative
Elaine Collins, Carer Advocate
Iren Hunyadi, Consumer Advocate
Fiad Pariagh, WA Country Health Service Representative
Jose Ciciliamma, Service Provider
Leanne Mirabella, Social Worker
Manjit Kaur, Consumer Advocate
Paige Cabbage, Secretariat
Ruth Lopez, Senior Policy Officer, Cultural Diversity Unit, Department of Health
Wendy Rose, Chief Executive Officer, Ethnic Disability Advocacy Centre

A presentation about the Young People's Priority Framework was provided as an agenda item at the meeting. The following discussion points were raised:

- There are gaps and a lack of available services under the National Disability Insurance Scheme (NDIS) system in providing positive behavioural support plans for young people with disability and autism in particular.
- A lack of disability support services for young people was noted.
- There was discussion about a lack of awareness or recognition by families of young people with a mental illness that something is wrong. There is a need for health services to engage families and raise awareness in order for suitable mental health care to be given.
- It was identified that families' resistance to accessing treatment may be related to imposition of mainstream values without sensitivity to cultural belief systems.
- It was noted that families often change providers causing difficulties with ongoing engagement.

Supplementary information was also provided to the MHC by the sub-network:

- There is a lack of trained professionals in positive behaviour support for young people and children (that address significant behaviours and mental health issues) with waitlists in most services being up to three months for assessment and intervention.
- There are significant issues for young people's mental health and wellbeing who also present with a disability. Especially with the change over onto the NDIS system. Young people with a significant disability were on block funding grants beforehand and have all been required to transition onto NDIS plans.

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- The NDIS planners in WA vary, with many not understanding psychosocial and mental health issues and making recommendations and decisions about funding without appropriate qualifications and experience.
- The review of plans can sometimes take so long that there is a significant gap in plans being renewed and then commenced. Some children may then deteriorate in relation to their mental health and behaviours as a result of the extensive gap in service each year (which can be as long as three months or more).
- The NDIS system in WA doesn't see the co-occurring nature of mental health issues and disability and treat them as separate under the NDIS funding model. Despite there being a lot research indicating there is a higher prevalence of mental health issues with young people with a disability. This needs to be changed at a policy and implementation level – that both conditions are recognised to be co-existing and therefore included in a holistic NDIS plan.
- Although the NDIS has a lot of benefits, it has created silos and barriers to young people with mental health and disability challenges, and these are even more prevalent in population groups where people are from a Culturally and Linguistically Diverse background where language and cultural issues prevent many families from accessing appropriate supports and services, especially in the area of assisting families and young people apply for funding through the NDIS.

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