

Mental Health Consumers and the Disability Support Pension

A New System for Better Employment and Social Outcomes – Australian Welfare Reform

I am writing on behalf of mental health consumers in Tasmania to provide information and advice on the potential impacts and proposed solutions for the issues raised within the above report.

Background to Flourish

Flourish Mental Health Action In Our Hands Inc. is an independent organisation which aims to further the interests and needs of mental health consumers in Tasmania.

Flourish seeks to provide a strong voice for the views of mental health consumers in Tasmania, develop people's capacity to participate meaningfully in society, and experience fair access to quality services which reflect their needs.

The organisation is administered by an Executive Officer and an elected Board. Flourish is supported by three Regional Advisory Groups; South, North, and North West.

These regional advisory groups are comprised of consumers who meet regularly to discuss various issues of concern for mental health consumers at the national, state, and local levels. Flourish is funded by the Department Of Health and Human Services.

Mental Health Consumer Response to the Report

Mental health consumers across Tasmania, especially those on a Disability Support Pension (DSP), have expressed concerns to Flourish in relation to changes the Disability Support Pension proposed by the recently released McClure Report on Australia's social security system.

"Welfare expert Patrick McClure's interim report on Australia's social security system calls for sweeping changes, including collapsing 20 income support payments into just four, quarantining the disability support pension for people with a permanent incapacity..." Mercury Newspaper, 30/6/14.

Flourish recognises that a review of the social security system, such as outlined in the *A New System for Better Employment and Social Outcomes Report* (the Report) can be supported on economic grounds. However, it is important that the full economic and social impacts of such a report are fully tested prior to the adoption of its recommendations.

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To provide appropriate advice Flourish has undertaken three actions. They are:

- It has received input from mental health consumers through its networks;
- It has convened a joint forum with the Mental Health Council of Tasmania, Tasmanian Council for Social Services and Mental Health Carers Tasmania; and
- It has developed case studies to identify particular impacts on specific consumers.

As part of the process we note that the increase of people on aged pensions is not addressed in this review, and therefore a significant segment of people on welfare and their needs are not dealt with equitably in this process.

The major issues for Flourish are:

- The six week timeframe for consultation has limited the capacity for an adequate economic and social assessment of the impact of the recommendations on mental health consumers;
- The language of the report, in particular references to lifters and leaners, has not recognised the genuine barriers to employment that exists for people with mental health challenges;
- The report would benefit from a more thorough economic assessment of the adequacy of the pension to meet consumer needs and in particular the impact of the indexation changes on the real value of the disability support pension over time;
- The use of funds management systems for pension recipients does not recognise the capability of many consumers to effectively manage their finances to meet their lifestyle needs;
- Further effort is needed to support people with a mental health challenge to engage in a productive life through employment. Most people with a diagnosed mental health disability in our community, and who are on a DSP, want to work. The nature of their disability, combined with the episodic nature of their disability, and the social stigma around mental illness, often prevents them acquiring even part time or casual work regardless of what skills and experience they have;
- *Building community capacity* is an essential element to reviewing the welfare system. We do need to continue to invest in communities and people's resilience to support the mental health and associated social and economic needs of many people in Australia;
- The Federal Government needs to understand that for many people on the DSP with mental health conditions, the benefit provides the opportunity for recovery where they often can become independent and move into the workforce.
- The Federal Government needs also to consider that the assessment of the economic impact of the proposed changes could be in the shifting of costs from one sector to another. For example, people with mental health conditions are prone to anxiety and could lead to exacerbating more serious mental health symptoms. Denying or reducing people's income through untargeted welfare reform may lead to more people becoming unwell for longer periods of time, and therefore costing the tax payer more in the health system as opposed to the welfare system;
- Mental health assessment and diagnosis is impacted by the episodic nature of the person's mental health. It is difficult for many health professionals to ascertain if a person's disability is permanent or not, and this is very true for episodic nature of mental health conditions. It is very easy to point out that someone with a mental health condition, who has been well

for up to six months, or longer, can and should work, and therefore not be reliant on welfare. But at any given point in time, it is conceivable that that same person, through no fault of their own, may suddenly, or progressively, suffer a debilitating relapse in their mental health status; a relapse which may last from hours to weeks to months, and which is not an uncommon event, as anyone in the mental health arena can testify;

- Government decisions regarding the changes to the welfare system supporting vulnerable people, such as those with a mental health disability, should be based on appropriate and independent economic and social research based evidence. This should include both macro-economic impacts of policy across all relevant sectors including the health system as well as the social impacts on the community and individuals.
- To improve employment prospects for people with mental health challenges the federal government should be assisting employers and the community to positively engage and work in partnership with people with mental health conditions to form employment pathways. Only then employment, education and training opportunities are a viable option for mental health consumers to get and maintain long term employment, and reduce their reliance on the welfare system.
- The Federal Government will need to consider the re-assessment measures required to ensure that pensions can be accessed to allow people to continue to be supported in their recovery.

Some solutions proposed at the community forum included:

- Mental health consumers need assistance to choose an appropriate career path as inappropriate career paths are stressful and depressing.
- Provide support for study including keeping the Pension Education Supplement.
- Work with education providers to ensure mental health consumers have chosen the right educational pathway and are coping with the stress of study.
- Provide flexible training options that are responsive to employers' needs.
- Increase employer support and incentives to take on people with a disability including mental health conditions.
- Request Business to create more jobs to enable a pathway from welfare dependence to employment – not unemployment.
- Increased support for carers and families of people with mental health conditions.
- Have a humane approach to welfare reform, based on knowledge of people's needs, to support people's recovery of mental ill health rather than undermining their wellbeing.
- Show compassion and insight and work with mental health consumers in welfare reform now, and into the future.

There are two case studies provided below that demonstrate the individualistic and episodic nature of mental health conditions and the illness' impact on a person gaining and retaining work and education:

Case Study 1

I am a female, sixty years of age, and I currently receive a Centrelink Disability Support Pension from the federal government as a result of being formally diagnosed with a bona fide DSM recognised mental illness, which even with medication and twice weekly therapy sessions with a specialist psychiatrist, can, and does, cause me to become incapacitated episodically.

I am currently studying at university, and during the last semester (Feb-June 2014) I was seriously unwell and suicidal as a direct result of my mental illness and thus missed eight of the thirteen weeks of study.

Furthermore, after graduating from university, I want to work, and I want to work for as long as I am able, however, because of my advanced age, the stigma around mental illness, the unreliability of my mental health in terms of being available to work at any given time, I doubt there would be many businesses prepared to employ me, even on a casual basis.

Case Study 2

I am a 42 year old woman who became severely mentally unwell whilst working as a high school teacher in 2002.

I started to receive the disability support pension in 2003.

From 2003 until 2009 I had approximately 30 hospitalizations.

I was diagnosed in 2009 and was then able to start my recovery journey.

I currently study 2 nights a week and work approximately one day per week. I am trying my hardest to rehabilitate but it's not an easy process.

I still need assistance.

Restricting the pension to those with a more permanent impairment makes no sense to me. If that happened the stress would make me go backwards.

Your government says it wants people to earn or learn. I am trying to do both!! I need support and encouragement to reach my goals.

I would like to work more too and hopefully in the future I can in the future with the right support.

In closing I would like to urge this government to consider the human cost of its decisions.

In conclusion, Flourish Mental Health Action In Our Hands Inc. strongly suggests that the Federal Government ensures that people with mental health conditions are not re-stigmatised and discriminated in its review of the welfare system in Australia.

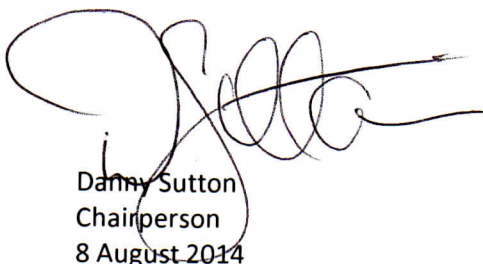
Mental health consumers who are on the Disability Support Pension require the support that the Pension provides – even though it is a low income for anyone to survive on.

Recognition of the episodic and deeply debilitating nature of mental illness, and the requirement for independent research based evidence for assessment and determination of welfare benefits, are vital to making the right changes in Australia's welfare system.

Keep the needs of people with mental health conditions at the forefront of any change and we will have a better welfare system in Australia.

It would be appreciated if you could provide your support for addressing the above issues and in considering the proposed solutions.

Yours sincerely



Danny Sutton
Chairperson
8 August 2014