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**MENTAL HEALTH
LIVED EXPERIENCE
TASMANIA**

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Re: Mental Health and Suicide Prevention Agreement Review

Submission for feedback on the National and Bilateral Mental Health and Suicide Prevention Agreements. The Final Review is to assess the effectiveness of programs and services delivered under the Agreements, as well as assess the way governments work to achieve the goals of the Agreements.

Mental Health Lived Experience Tasmania (MHLET) fully supports both the National Mental Health and Suicide Prevention Agreements, Tasmanian Bilateral Agreement on Mental Health and Suicide prevention, and any other means that work to improve the mental health and reduce suicide for all Australians.

MHLET notes that, while some time remains before the conclusion of the Agreements in 2026, it is unclear whether proposed implementations from the Tasmanian Bilateral Schedule will be achieved or if any data on their efficacy will be available by that time. However, MHLET has noted areas of concern within the Agreements and has provided feedback and recommendations that will serve to create improvements in future iterations.

Recommendations:

1. Consultations

MHLET is concerned with the little time provided by the Productivity Commission to provide feedback on the Mental Health and Suicide Prevention Agreements; with consideration to the complexity of the issues raised within the Agreements, severe time constraints have left minimal to no opportunities MHLET to consult with consumer groups on this issue.

Recommendation: MHLET recommends that, in future, for any sought feedback a minimum period of six weeks be provided to allow for Lived Experience bodies to consult with members. This is especially pertinent when seeking feedback on matters relating to consumer experience.

2. Lived Experience Co-Design

MHLET's consultations with consumers with lived experience note the apparent absence of co-design of the Agreements. The Agreements do not clearly state that any consultation was undertaken with mental health consumers regarding their needs or priorities of mental health services and delivery improvements. Further, despite the Tasmanian Bilateral Agreement stating that implementation of the Schedule will be "informed by the lived experience of consumers and carers", aside from a generalised summary in the 2022-2023 Annual National Progress Report, any specific data relating to any consultations undertaken is not available and/or accessible.

Recommendation: MHLET recommends National and Bilateral Mental Health and Suicide Prevention Agreements are co-designed with individuals with lived experience of mental ill-health. Care must be taken to ensure inclusion of the lived experience voice when designing services targeted to specific groups, including (but not limited to) Aboriginal and Torres Strait Island peoples, youth, and people living in regional and remote areas.

Further, the design or modification of mental health and suicide prevention services and their implementation, as per the State Bilateral Schedules, is informed by lived experience of mental health consumers and carers. Any data relating to the inclusion of lived experience contributions be fully transparent and accessible to the public; however, if public access risks compromising privacy and/or confidentiality agreements, data be provided to all lived experience peak bodies instead.

3. Lived Experience Funding

MHLET is the lead lived experience and advocacy organisation of individuals with lived experience of mental ill-health and psychosocial disability in Tasmania. As such, MHLET promotes the inclusion of lived experience in all levels of the National and Bilateral Mental Health and Suicide Prevention Agreements, including design and implementation processes for new and modified mental health and suicide prevention services across Tasmania.

Recommendation: MHLET continues to endorse a quarantining of a portion of all funding to ensure the inclusion of lived experience and co-design of future National and Bilateral Mental Health and Suicide Prevention Agreements. Further, a quarantine of funding for co-design and lived experience consultation embedded across all stages of planning, service implementation, and evaluation. Ensuring that all service providers continue to include lived experience in their design and delivery will ensure best outcomes for Australian consumers.

4. Performance and Reporting

The Tasmanian Bilateral Schedule outlines reporting requirements for the proposed implementations, however, regular updates are not stated as required. The 2022-2023 Annual National Progress Report provides summary data but does not provide comprehensive on progress reports against the implementations.

Beyond any user experience of the new and/or modified mental health and suicide prevention services, there is scarce information about their efficacy. Therefore, from the perspective of the public, this review is almost solely reliant on user experience and personal anecdotes, rather than any data against any performance indicators, as little data is available to the public.

Recommendation: Annual reports for each State's Bilateral Schedule to be available to the public, showing full progress reports against each of the proposed implementations. Individual implementation updates should be available twice per year, be fully transparent, and show projected milestones and completion.

As stated in *Recommendation 1.*, if future reviews require consumer feedback, appropriate time must be allocated to lived experience peak bodies to conduct extensive consultations with their member base.

MHLET continues to advocate for the people of Tasmania with lived experience of mental ill-health and anticipates the completion of the proposed implementations from the Bilateral Schedule. MHLET welcomes any progression towards better mental health for all Australians.

Yours sincerely

Tash Smyth
CEO