

## North Coast NSW

*“Beds do not mean people health” – participant quote.*

### Key themes

Analysis for the North Coast region utilised written notes from two consultations in Kempsey (attended by around 54 people) and Ballina (attended by around 48 people) with photos of the butcher’s paper also available for Ballina. From the materials available the following key themes were distilled:

- Stigma, reduced stigma, societal change view, media and public health campaigns to be improved, destigmatising and demystifying mental health issues
- Peer workforce, peer led services, more lived experience peer workers
- Well educated and informed workforce, mental health worker training, more support for all workers in mental health system, workforce strategies, improved professional development, self-care, recruit good people
- Funding, short funding cycles, competitive tendering processes, funding responding to needs of the community, funding allocations
- Infrastructure, transport, appropriate housing, long-term, affordable housing, community hubs, stable housing

In addition, the following key themes emerged in response to the questions: what is working well, what are the challenges, and what are the priorities?

What is working well?	Qualifiers/examples
Peer work	Peer worker program; Staff with lived experience/peer workers - now recognising lived experience of staff members
Collaboration	Home visits; Community based points of contact; Partnerships with NGOs; Carers groups; Support groups; Collaborative relationships between government and community sector
Stigma	Decrease in stigma, high profile people talking about it; More positive reporting in the media
Trauma informed care	
Community engagement	Building a resilient community; Community will for acceptance and change; Safe community
Co-design	Increased design processes for co-design

<b>What are the challenges?</b>	<b>Qualifiers/examples</b>
Infrastructure	Stable housing; Need for housing support; Transport
Isolation	Outreach to isolated people is needed; Rural areas facing distinct challenges; Access to services is challenging
NDIS	Access and assessment; Out of pocket expenses; Services won't engage until an approved plan
Funding	Short funding cycles; Competitive tendering processes; Funding responding to needs of the community; Funding allocations
Training	Lack of training of GPs; Lack of training for ED staff on managing acute presentations; Lack of training for people with lived experience
Workforce	Lack of paediatricians; Lack of child psychiatry; Lack of GP services; Staffing gaps; Workforce skills shortage; Lack of counsellors; Staff burn out; Ageing workforce

<b>What are the priorities?</b>	<b>Qualifiers/examples</b>
Well educated and informed workforce	Mental health worker training; More support for all workers in mental health system; Workforce strategies, improved professional development, self-care; Recruit good people
Removing stigma	Reduced stigma; Societal change view; Media and public health campaigns to be improved; Destigmatising and demystifying mental health issues
Improved infrastructure	Transport; Appropriate housing, long-term; Affordable housing; Community hubs; Stable housing
Children and youth services	Increase specialist children's services; More school-based education; Services go to kids in their environment; Early intervention for young people and children
Funding	More strategic increase in funding; Waiting times for lifeline; Transition for funding change; Funding for emergency services; Funding commitments that reach beyond funding cycles; Funding for peer support, community care, research
Peer work	Peer led services; Peer support embedded in neighbourhood services; Peer support for youth; More peer workers; More lived experience peer workers



The Mental Health Commission of NSW acknowledges the contribution of The Australian Institute of Health and Welfare (AIHW), who were engaged to conduct a qualitative data analysis for the mid-term review of *Living Well*.