AMSANT Incorporated ICN 8253 | ABN 26 263 401 676 Level 1 Moonta House |43 Mitchell St NT 0800 Postal Address - GPO Box 1624 Darwin NT 0801



31st May 2024 Att: Senior Policy Officer Mental Health, Alcohol and Other Drugs Branch PO Box 40596 Casuarina NT 0811

Email: MHAct Review.DoH@nt.gov.au

To Whom it may concern,

RE: AMSANT submission to the Mental Health and Related Services Act 1998 Review.

The Aboriginal Medical Services Alliance Northern Territory (AMSANT) is the peak body for Aboriginal Community Controlled Health Services (ACCHSs) in the Northern Territory. AMSANT advocates for the health and wellbeing of Aboriginal people through culturally informed, comprehensive primary health care.

In 2022, AMSANT contributed significantly to the consultation report on the Mental Health and Related Services Act (MHRSA), providing insights into the needs and challenges faced by Aboriginal communities and their ACCHSs.

This response, to the Exposure Draft of the Mental Health Bill 2024, provides detailed feedback aimed at enhancing the Bill's effectiveness and ensuring it meets the needs of Aboriginal communities in the Northern Territory. AMSANT has focused on four specific questions in its' response. These questions address the clarity of the guiding principles, the protection of patient rights, the incorporation of culturally appropriate practices, and the practical implementation of the Bill.

AMSANT response to the Mental Health Bill 2024

1. General Principles and Objectives.

Question 01: Are the guiding principles of the Mental Health Bill 2024 clear and comprehensive? How well do they address the needs and rights of individuals with mental health issues?

AMSANT supports the need for clear and unequivocal principles without caveats such as "where possible". The caveats used in the Mental Health Bill 2024 contain conditional language that weakens these principles. The Bill should remove such caveats to ensure all guiding principles are explicit and direct.

Recommendation: Strengthen the clarity and directness of the Bill's guiding principles to ensure they effectively address the needs and rights of individuals with mental health issues.

2. Rights of Individuals.

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Question 02: Does the Bill adequately protect the rights and autonomy of individuals receiving mental health care? Are there any specific rights that should be strengthened or added?

While the Bill presumes capacity and requires decision-specific consent, AMSANT suggests more explicit definitions and safeguards are needed.

Recommendation: Enhance protections for patient rights by including clearer definitions of capacity and informed consent, and ensure these rights are upheld in all interactions.

3. Cultural Appropriateness.

Question 03: How effectively does the Bill incorporate culturally appropriate practices, particularly for Aboriginal and Torres Strait Islander communities? What improvements can be made?

AMSANT calls for the Bill to mandate recognition of Social and Emotional Wellbeing (SEWB) and integrate trauma informed cultural practices, including the use of traditional healers. The Mental Health Bill 2024 emphasises cultural safety but could better mandate these aspects.

Recommendation: Include explicit mandates for cultural appropriateness, such as recognising traditional healing practices and ensuring SEWB frameworks are incorporated in all care and treatment plans.

4. Implementation and Practical Application.

Question 04: What are the potential challenges in the practical implementation of the Bill? How can these challenges be addressed to ensure effective application in diverse settings, including remote areas?

AMSANT highlights the need for workforce development to support career pathways for Aboriginal health practitioners and address racism in healthcare. The Bill supports a culturally competent workforce but lacks specific language on these pathways.

- Use of Interpreters: The Bill requires interpreters, but AMSANT emphasises the need for mandatory use and the recording of alternative arrangements when interpreters are unavailable.
- Integration of Services: AMSANT stresses the importance of integrating primary health care and community-based services with hospital care, which the Bill does not fully address.
- **Monitoring and Review:** AMSANT recommends a sunset clause for regular reviews of the Act, which is not specified in the Bill.





• **Recommendation:** Address potential implementation challenges by investing in workforce development, mandating the use of interpreters, improving service integration, and including provisions for regular review and continuous improvement of the Act.

Support for ATSI Mental Health Workers and Interpreters:

AMSANT strongly supports the use of Aboriginal and Torres Strait Islander mental health workers and interpreters to ensure culturally appropriate care. These roles are crucial for effective communication and the provision of culturally safe services.

However, AMSANT recognises that without adequate funding and training, the implementation of these roles is not feasible. The government must provide sufficient resources to recruit, train, and retain Aboriginal and Torres Strait Islander mental health workers and interpreters to ensure the Bill's provisions can be effectively realised.

These changes will help ensure the Bill meets the needs of all individuals, particularly Aboriginal and Torres Strait Islander communities, and aligns with the comprehensive, culturally informed approach advocated by AMSANT.

Yours sincerely,

Dr John Paterson

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