

Productivity Commission Inquiry into Mental Health

Submission by GROW

# Grow



## mental wellness program

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## Introduction

For more than 60 years, Grow has facilitated the establishment and on-going success of peer led mutual help groups and residential rehabilitation services across Australia. We were pioneers in the lived experience movement that has changed lives.

The value of peer support programs to individuals, health services and society as a whole is well demonstrated in research around the world (Burke, Pyle, & Machin, 2018; Finn, Bishop, & Sparrow, 2009; "Grow in America," ; Repper & Carter, 2011). While self-help, peer support groups are not for everyone, a meta-analysis concludes that for people who do participate, they have beneficial effects on recovery (Markowitz, 2015).

This submission will demonstrate the value of Grow's programs in providing cost effective support for people to recover and maintain good mental health and, support further investment in Grow and the model.

It will argue the current structures that channel public funding for mental health and wellbeing to non-government organisations are costly and ineffective. These structures undermine the ability of organisations to extend their reach to help people maintain good mental health and wellbeing beyond the health system and has a major impact on transaction costs.

Finally, it will illustrate the challenges associated with the development and implementation of innovative programs within these structures using the new e-grow program as an example.

## About Grow

Grow is a national organisation that supports people who have experienced or are experiencing mental illness, in their personal growth and development. Grow Programs help people to help themselves, to overcome obstacles and to live a life full of meaning, hope and optimism.

Grow's origins are best described by its founder Con Keogh OAM (1975):

*GROW is an international community mental health movement. It began in Sydney, Australia, in April 1957, when a number of former mental patients, who had discovered the enormous benefit of organised mutual help while attending meetings of Alcohol Anonymous, began to meet on their own to work more directly on their problems of rehabilitation after mental breakdown. They resolved that they would try to preserve their experience and record whatever they found successful or helpful for their recovery.*

*Their groups were, in fact, first known as Recovery Groups.*

Grow programs are directly informed by consumer experience, ensuring our peer group programs are evidence-based and relevant. We are proud to be a community of excellence in consumer engagement, mutual help and peer support. Our mission is to *enable people and communities to grow, recover and maintain good mental health.*

Grow is a Company Limited by Guarantee and registered with the ACNC.

## Programs and clients

Approximately 1,200 people attend a Grow program every month. Ages range upwards from 18 with 65% being between 35 and 64. The Grow program caters for people from all backgrounds. While 42% identify as Christians, 33% indicate that they have no religion.

People who come to Grow are not asked about a mental health diagnosis. From our survey results, it is clear they range across the spectrum with three-quarters reporting depression or anxiety, one in five post-traumatic stress disorder or bipolar disorder, and about 15% with personality disorder or schizophrenia.

Grow provides the following programs:

Grow Mutual Support Group Program for recovery and maintenance of mental health

- In person and video conference groups. All Grow groups use a cycle of continuous improvement. They do this through a weekly evidence-based evaluation framework where participants self-evaluate the performance of the group. This empowers participants to take personal responsibility for the success of the groups, and exercise leadership in their recovery.

Grow Residential Rehabilitation and Recovery Services

- The Grow Residential Rehabilitation program has been successfully providing a structured rehabilitation service for people with coexisting drug, alcohol and mental health issues for over 30 years. The program offers individuals with personalised support by adopting a holistic and stepped care approach towards treatment. The prime focus of the program is for individuals to beat an addiction and work through mental illness in a long term supported residential setting. The Grow Program is the foundation with the goal to have all participants transition to a healthier and happier lifestyle. The program is resourced through a combination of government funding and residents' contributions.
- Grow young adults - facilitated peer support program for early intervention and recovery
  - Young Adults attend for a shorter period than the general Grow groups. In the young adults' groups, young adults are equipped with the skills they require to self-activate and navigate their problems. Once they have developed these life skills they tend to move on and apply them. Additionally, the young adults tend to quickly build a peer community, so they don't require formalised groups for community interactions.
- Grow carers - facilitated peer support program for good mental health of carers
  - In person, video conference and online forum – the funding for this work will cease next year as the funding is transitioned into the NDIS. As it is not an ongoing program, the focus of these groups is supporting carers to stay well and talk with peers.
- Get Growing Schools Program - 10 week facilitated peer groups program for early intervention and prevention of mental illness
  - This program has an evidence base and was developed using the Grow principles and making them more accessible to a youth audience. The program has had such positive outcomes in the Northern Territory that we have had unprecedented demand for the program in schools. We are unable to meet the demand for the program in the Northern Territory with our current funding. The Get Growing Schools program is mapped against the National Curriculum and helps to satisfy learning outcomes. The program is also evaluated by its consumers.
- Grow prisons - facilitated peer support program for recovery and good mental health

## Grow programs make economic sense

The Grow Program is supported by substantial evidence of the recovery of the personal testimony of members. In our 2018 annual survey, participants reported that because of their involvement in Grow:

- 80% reduced their hospitalisation
- 44% reduced their need for medication
- 42% received help to gain employment
- 75% reduced their need for professional help

Recent reports point to the rapid and concerning increase in the use of anti-psychotic drugs among Australian children with a 24% increase in the number of children aged 17 or under prescribed antipsychotics between 2013-14 and 2017-18 compared with a 5% increase in population growth (Magarey, 2018). These drugs can cause obesity, diabetes, brain impairments and movement disorders (Christoph & Carlson, 2006). Programs that help people reduce their reliance on medications must be supported.

Grow receives most of its funding from State governments. In 2018/19 this funding totalled approximately \$4Million which translates to an average of \$300 per person attending Grow per month. Compared with an average cost per patient day in a public hospital in Australia of over \$1,000 and average cost per patient day for residential mental health services of over \$400 (AIHW, 2019), it is clear that if participation in a Grow program can keep a person well and living in their own home for even a month, then there are substantial savings to government. For those who recover and maintain or regain employment, the economic benefits are even greater.

Importantly our data shows that most people heard about Grow from friends and 98% of survey respondents would refer others to Grow. Referrals rarely come from GPs or health services. It is therefore essential that our funding base allows us to strengthen and extend our reach directly to people who need help irrespective of where they live or the referral habits of their local health services.

Greater support for programs like Grow that offer structured peer-support programs *will enhance social inclusion and participation and enhance employment outcomes*, key issues identified in the Commission's issues paper.

## Transaction costs in a devolved system

Grow programs were initially funded through block grants by State Health departments. As the health system has become more complex, the number of funding agreements has increased, as have the accountability requirements around those agreements. While the importance of local decision making and links between public health providers and community providers are acknowledged, the move to devolution has brought with it a considerable transactional cost. Even if this administrative overhead was fully costed into the funding agreements, it is argued that this may not be the best use of those funds.

Grow currently has 13 State funding agreements with 85 performance indicators. The trend to devolution is likely to increase this complexity with some States already moving to contracting at the Local Health District (LHD) rather than the State level.

There are 156 LHDs and 31 PHNs across Australia that potentially provide funding to mental health community and early intervention/prevention services. Without national incentives to have contracts with the same specifications and performance reporting, community organisations that have a national footprint like Grow, face a future where they are overwhelmed by contract administration if their service is to be available across the country.

Because people come to us from referrals from friends, it is argued that it would be more cost effective for Grow to spend money on promoting and increasing access to its services to all Australians, irrespective of geographic boundaries. Funding agreements at the jurisdictional or national level will support this giving greater value for money.

*Staff stress and turnover*, another of the issues highlighted in the Commission's paper, is a further unintended consequence of the changing approach to funding. While some jurisdictions are now moving to longer term contracts, Grow has a number of contracts that are reviewed from year to year providing no security of employment for staff.

### e-Grow

In 2015, Grow established the eGrow project with funding support from the Queensland Mental Health Commission to investigate a strategy for Grow's mutual help groups to be delivered effectively using videoconferencing. We partnered with the University of Queensland to ensure a robust formative evaluation methodology that would provide clear evidence of how online peer support groups could enable the same level of recovery as a face to face group (Centre for Online Health, 2019).

Two groups were established in Queensland by the end of 2016, a further group in Victoria in 2017 and negotiations are underway to establish a number of groups in Western Australia.

The following comments are from members participating in the evaluation attest to the value of the groups:

- *You don't feel so alone*
- *I was feeling suicidal, I didn't want to go travelling or do anything. Being able to go online, in my own home, was an option that was suitable for me*
- *Knowing no matter how far away you are, how remote you are, someone cares*
- *I think the opportunity to participate in a group, where otherwise there is no group is profound*

The cost of mobile data has been a challenge in delivering this service as has intermittent access in some regional areas.

Our organisation envisions a future for e-Grow that is national rather than being bound by State based funding. A more national approach would support a future that provides support to both geographically and socially isolated Australians. Grow's recent efforts and success with E-Grow, and the direct engagement with consumers, demonstrates that greater use of technology can deliver quality consumer focused interventions and social support.

### Conclusion

Peer-support programs such as those provided by Grow improve and save lives and help people with mental health problems to recover, engage and contribute to the community and to the economy. Participation in Grow's programs reduce people's dependence on expensive medical interventions, and help them to re-engage in community, education and work.

To maintain and expand access to these programs, non-government organisations in general, and Grow in particular, need greater access to national funding pools and to greater certainty of funding. This will reduce transactional costs and ensure that a greater proportion of resources are directed to improving lives, delivering social supports rather than over-administration.

With increasing use of technology, program development is best achieved at a national and/or jurisdictional level. The ongoing continued devolution of funding hampers the capacity of organisations like Grow to access the necessary resources to design new programs that can be adapted across Australia or to roll them out nationwide rather than region by region.

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