

Volume 14, 8 December 2014

Publisher: Igitur publishing

URL: <http://www.ijic.org>

Cite this as: Int J Integr Care 2014; WCIC Conf Suppl; [URN:NBN:NL:UI:10-1-116657](https://nbn-resolving.org/urn:nbn:nl:ui:10-1-116657)

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Conference Abstract

Developing a 'whole of person, whole of life course, whole of system' strategy for integrated mental health

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Abstract

Mental health encompasses a wide range of issues that emerge across people's life course from birth through old age. From a life-course perspective recognising and responding early and appropriately has the potential to substantially reduce the life-time burden of mental illness on health, social participation and employment. Each stage across the life course represents a unique continuum of influences that either promote wellbeing or increase the risk and burden of mental ill-health. Yet to date most policies and strategies in mental health succeed only in addressing aspects of this continuum, thereby perpetuating fragmentation and silos in the organisation and integration of the capability across agencies, services and those of people their friends, family and carers.

In 2012 of the Mental Health Commission of New South Wales was established as an independent body that has statutory responsibility for mental health reform within the state. Its first responsibility was to develop a strategic plan for the system of mental health in NSW. The Commission's remit was to consider the whole person; recognising that a person's mental illness does not define them. The strategic plan was directed to consider physical health, housing, employment, education, social participation and a range of other issues central to people's lives as part of a whole of government, whole of system approach to integration of reform efforts in the state.

The Commission requested a team drawn from Synergia (a health consultancy) and University of Sydney to support the strategy development process and develop a reform agenda based on a 'whole of person, whole of life course, whole of system' approach. The approach used elements of system theory to provide an integrated policy development framework and 'co-design' methods to provide a participatory co-development process. Over 2000 people directly contributed to the development process integrating the insight and understanding of consumers, families, diverse professional practice domains, services and agencies.

An innovative method was used to develop both the strategic plan and lay the foundation for a 'reform implementation tool-kit'. This involved the development of eight 'journeys' to describe the spectrum of mental wellbeing and mental ill-health across the life-course.

The eight journeys take a whole of population view, seeking to describe the major areas of need that would account for 80 – 90% of all morbidity and service demand. Each journey was created around one or more archetypal stories of the lived experience of people and families within the

journey. Expert 'journey groups', including consumers as experts, collaborated to think through the system issues and the opportunities to provide more effective, integrated responses across the pathways within each journey. The key areas of impact and influence from each journey then formed the heart of the state wide, whole of government strategic plan.

The result has been one of the few comprehensive, integrated mental health strategies developed so far. The next stage of application is now underway to use the journey maps to support local level service development and integration, to co-develop a reform toolkit for people centred integrated system development.

Keywords

mental health; strategy; collaboration; co-design
