Carers NSW comments on future directions of the Mental Health in Multicultural Australia Project

Carers NSW would like to thank Mental Health Australia for the opportunity to contribute to the future directions of the MHiMA project. Carers NSW believes there should continue to be a strong voice for multicultural mental health in Australia, and we are keen for the project to continue to lead the sector in addressing CALD mental health. As the peak organisation for carers in NSW we believe the project should have a strong focus on engaging with and addressing the needs of carers of people with a mental illness from culturally and linguistically diverse (CALD) backgrounds, as well as multicultural carers of all kinds who are likely to be experiencing challenges with their mental health as a result of their caring role.

The most recent Survey of Disability, Ageing and Carers indicated that about 179 100 carers in NSW are born in a non-main English speaking country, and 114 700 carers in NSW speak a language other than English as their main language at home. CALD carers also represented a significant proportion of the Carers NSW 2014 Carer Survey sample, with approximately 1 in 5 carer respondents identified as being from a CALD background. More than one in four of these CALD carers were caring for multiple people, and over 40% of CALD carers from the survey spent more than 70 hours caring, showing the significant role that caring plays in the lives of these carers.

Carers have been identified as being particularly likely to experience challenges to their physical and mental health, financial stress, social isolation and burnout. Carers from CALD backgrounds may experience particular issues in their caring role, which Carers NSW believes the MHiMA project has the capacity to consider and address.

One of our main concerns is that many CALD carers do not identify with terms such as ‘carer’ or ‘respite’, and are therefore less likely to be seeking or receiving services to support them in their caring role. Stigma associated with mental illness in CALD communities can add a further layer of invisibility to carers, and represents another barrier to service access and other networks of support. Our 2014 Carer Survey findings showed that CALD carers did not feel as well supported in social spheres, and by family and friends, as did other carers.

Another key finding of the survey was that CALD carers were more likely to experience elevated levels of psychological distress (Figure 4), which could be associated with a lack of support.
The results in Figure 4 demonstrate the significant levels of psychological distress experienced by all carers, but highlight the importance of focusing on CALD carers in mental health settings.

A focus on multicultural carers is particularly important at a time when systems, services and supports for carers in the mental health, disability and carer support sectors are subject to significant reform. These reforms include the roll out of the National Disability Insurance Scheme, the delivery of mental health services through Primary Health Networks, and the development of an Integrated Plan for Carer Support Services. These reforms have created uncertainty for consumers and carers, community groups and service providers, but also offer an opportunity to improve how we support carers from diverse backgrounds, including those caring for people with a mental illness. Many of the supports available to consumers and carers will be delivered through the community sector, and Carers NSW believes that MHIMA is well placed to expand its focus beyond the acute sector in order to influence and shape these reforms to be inclusive and supportive of mental health consumers and carers from multicultural backgrounds.

Carers NSW also supports efforts towards ensuring the MHIMA project engages and empowers CALD carers. We believe CALD carers should be offered a range of opportunities for involvement in the project with varying levels of time and commitment. Carers often have considerable demands on their time and may be limited in the amount of time that they can spend away from the care recipient. Many carers have unpredictable caring responsibilities, and at times may need to withdraw from a commitment at short notice, particularly due to changes in the health of the care recipient, or the availability of alternative care arrangements. In this case proxy carer representatives should be appointed to minimise the pressure of participation on individual carers.
and to ensure that the carer perspective is represented at all times. Carers NSW would also like to emphasise that resources are required to enable members of the community to meaningfully engage in these activities. In particular, there is a need to reimburse carers for the respite care expenses associated with attending training, meetings and other events.

Thank you once again for the opportunity to comment on this project, and we look forward to the ongoing development of the MHiMA Project.

Yours sincerely,

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CEO
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3 Ibid.
4 Ibid.
5 Ibid.