Moving From Engagement to Partnership

Following years of public hearings and written submissions, Victoria's Royal Commission into Mental Health handed down sixty-five recommendations in February 2022. These recommendations cited a broken and fragmented system, which tended to operate from a place of crisis and failed to provide holistic, adequate and timely support to those experiencing mental distress and/or addiction and their families/supporters/carers/kin.

The need for the mental health system to undergo a complete rebuild was recognised, and a new way of engaging and collaborating with all stakeholders within the sector was required. As a result, the Victorian Department of Health (The Department) sought out recommendations on how the mental health system can move from an engagement to a partnership approach.

This document summarises the findings regarding **Self-determination** from fourteen community conversations inviting perspectives from people with lived experience of mental distress (LE) and/or alcohol and other substance addiction (AOD); families, supporters, and carers of those directly experiencing these challenges (FSC); and people working within the sector (Lived Experience Department, Community Peaks and Agencies). Some conversation participants additionally identified as a Young Person (YP), as part of the LGBTQ community, or having a Culturally and Linguistically Diverse (CALD) background. The framework for discussion and analysis was developed by First Nations people, using a First Nations partnership lens.

Self-determination

A partnership recognises that "we are better together" (FSC). There is a "*need to involve everyone and not exclude people [in order] to get to [the] best outcome*" (FSC).

For partnerships to be truly equal, self-determination and autonomy of each of the partners is critical. Within a mental health and AOD context, this necessitates individualised approaches, increased choice, and a recognition and valuing of dignity of risk.

> *The person is not at the 'side', but they are taking the steps, not the worker. (CALD)*
>
> *Trust to do our own thing. (YP)*
>
> *Partnership provides flexibility by acknowledging the way a person's individual traits inform their care requirements and can change over time. (FSC)*
>
> *Choice about how I participate e.g., neurodivergent inclusive spaces that provide a choice of colour sticker to indicate how you want to participate… in a way that is comfortable. (LGBTQ)*
>
> *Respecting that people will make their own decisions. (LE)*

Individualised planning with frequent reviews. (FSC)

There is recognition that considerable change would be required to get to a truly self-determining partnership arrangement. Who is involved, how projects are led, and the structures in place to support partnership would all require review.

> *[To be an equal partner] structural changes are needed. (FSC)*
>
> *[there needs to be an…] amalgamation of people with lived experience across different sectors then invite bureaucrats into our world - having our own table and showing the depth of compassion. (LE AOD)*
>
> *Way knowledge is shared needs to change - sharing to support person in caring role without questioning the persons caring capacity - adding tools without tearing person down. (FSC)*
>
> *Empower lived experience staff to initiate and lead their own projects. (LE)*

Self-determination – First Nations perspectives

…how people choose to collectively organise themselves, to manage their own affairs, share power and responsibilities, decide for themselves what kind of society they want for their future, implement First Nations needs in the process, and provide the power and authority back to community…

Almost all participants spoke about the notion of self-determination, in implicit and explicit ways. Many agreed that this terminology was historically rooted in community but was adopted by governments as a buzzword without understanding its practical applications, and overall, many felt that by acknowledging all elements of the proposed First Nations Partnership Lens, and what is required at a macro and micro level, during these discrete partnership phases, will go some way to ground the project in self-determination.

One person expanded on this idea further and felt that self-determination is more than just a sentiment shared or an optional add in, its deeply actionable, and how First Nations move through the world. They elaborated, 'an ideal partnership should be based on strong relationships, understanding each other's needs and expectations, and being grounded in sovereignty and self-determination. Partnerships need strong conflict resolution and robust, honest conversations, an ongoing learning and reflective process.' They also went on to provide a useful anecdote: 'A worker for Just Reinvest went to the community of Burke for 10 years. She goes to community four times per year and knows what her board needs. She takes the burden off them. She is showing up and doing the work – sharing power and equal or weighted towards self-determination and

sovereignty.’ In this manner, self-determination and power sharing have a direct relationship with one another.

> *Partnership can be meaningful or not, respectful, ideally, it’s about sharing power and respecting self-determination. Respecting our ways of governance and our timelines. First Nations ways of doing things, knowledge wisdom and values we bring.*
>
> *We need holistic health, my ancestors were practicing this health, I didn’t know it and I would love to.*
>
> *Listen to us, we know what works for our communities. Let’s bring both systems of knowledge together and work alongside each other.*