

**SUBMISSION TO THE CALL FOR COMMENTS ON THE DRAFT NATIONAL CHILD MENTAL
HEALTH AND WELL-BEING STRATEGY**

PREPARED BY: Professor Stuart Kinner

Head, Justice Health Unit, The University of Melbourne

Group Leader, Justice Health, Murdoch Children's Research Institute

s.kinner@unimelb.edu.au / 0416 389 103

DATE: 15th March 2021

Thank you for the opportunity to provide brief comments on the draft Strategy. The Justice Health Unit at The University of Melbourne and Murdoch Children's Research Institute has world-leading expertise in the health (including mental health) of justice-involved children, adolescents, and adults. More information about our Unit is available here: <https://mispgh.unimelb.edu.au/centres-institutes/centre-for-health-equity/research-group/justice-health-unit>.

Informed by our collective expertise and experience, we respectfully offer the following:

1. Under Objective 2.4 the draft Strategy argues that "Priority access should be given to at-risk cohorts, including children in State care or in contact with the justice system." This is of course sensible and equitable, and we wholeheartedly support this.
2. The draft Strategy also calls for expanded access to Medicare item numbers for case conferencing (2.2) and telehealth (2.3), in addition to Better Access, given the importance of these services to delivering coordinated mental healthcare to all young people. Again, this is sensible and we support this recommendation.
3. However, despite the National Mental Health Commission having recently acknowledged the need to better incorporate the mental health needs of justice-involved people into its Strategies and Plans, there is no reference to the fact that young people in youth justice detention are excluded from Medicare, and as such have *no access* to MBS-subsidised mental healthcare, including Better Access.
4. It is now widely recognised that this exclusion is both harmful and discriminatory. The NT Royal Commission into Protection and Detention of Children in the Northern Territory recommended ending this exclusion in the NT (Recommendation 15.4), and more recently the Australian Child Rights Taskforce recommended ending this exclusion nationally, as part of its routine reporting to the United Nations (The Children's Report, Recommendation 65).
5. Accordingly, we respectfully recommend that the Commission amend the draft Strategy to:
 - a. Note that despite the very high rates of mental health problems among detained youth, around half of whom are Indigenous, young people in detention are uniquely excluded from Medicare-subsidised mental health care (and MBS-subsidised primary care, which is a barrier to developing a mental healthcare plan).
 - b. Express the view that this exclusion is both discriminatory and harmful.
 - c. Note that a mechanism exists for granting an exemption to this exclusion, under S19(2) of the *Health Insurance Act 1973 (Cwlth)*, and that similar exemptions have been granted previously in instances of demonstrable inequity.^{1,2,3}
 - d. Recommend that Minister Greg Hunt grant an exemption under S19(2) of the *Health Insurance Act 1973 (Cwlth)*, to permit claiming of Medicare subsidies for healthcare delivered to young people in detention throughout Australia.

We were gratified to note the repeated reference in the draft Strategy to a need for improved data sharing, including between the justice and health sectors. We note that data sharing is important for at least two reasons:

1. For service providers: To facilitate continuity of care between community and custody, for young people who are detained.
2. For researchers: To permit rigorous, independent examination of mental health outcomes, and of system performance.

References

1. Cumming C, Kinner SA, Preen D. Closing the gap in Indigenous health: Why section 19(2) of the Health Insurance Act 1973 matters [Letter to the Editor]. *Medical Journal of Australia*. 2016;205(6):283.
2. Cumming C, Kinner S, Preen D, Larsen A-C. In sickness and in prison: the case for removing the Medicare exclusion for Australian prisoners. *Journal of Law and Medicine*. 2018;26(1):140-58.
3. Plueckhahn T, Kinner SA, Sutherland G, Butler T. Are some more equal than others? Challenging the basis for prisoners' exclusion from Medicare. *Medical Journal of Australia*. 2015;203(9):359-61.