



On**YOUR**side

Delivering A Vision for Change



Decades of mismanagement and underfunding of mental health services have left us with a system of care that does not meet the needs of the people who depend on it. In 2017, mental health accounted for just 6.4% of the overall health budget and saw a paltry increase of just 1.8% on its 2016 spend, well below what was necessary to implement reforms and barely enough to maintain the previous year's performance.

Bed numbers have dropped by 85% in 30 years, while staffing levels have dropped on average by 20%. There are 800 less staff than before the economic crash and only 53% of Child and Adolescent Mental Health posts are filled. Ireland has the 4th highest teen suicide rate in the EU/OECD and cases of self-harm were 9% higher in 2015 when compared to 2007.

Severely distressed and at risk people are left with no choice but turn to A&E's and Garda Stations as no 24/7 service exists. This is totally unacceptable. For decades, mental health funding has been too low. Funding levels must see a significant annual increase until it reaches a minimum of 8.24% of overall health spending as recommended in A Vision for Change (AVfC).

Sinn Féin's fully costed alternative Budget 2018 proposals include an additional funding package of €51.23m for mental health services and care providing for increases in staff levels in line with AVfC recommendations whilst working towards the development of 24/7 crisis interventions services, and increased access to primary care counselling services.

Towards 24/7 Crisis Intervention Services (€20m)

Community mental health services need to gradually switch from the current weekday/daytime hours to a model which is flexible to the needs of those who depend on it. This requires the services to move to a seven day

week roster with a Community Mental Health professional available through the weekend and additional crisis houses must also be established. Priority should be placed on delivery in areas with higher rates of suicide and self-harm.

Establish 12 additional Child and Adolescent Mental Health (CAMHS) Teams (€8.91m)

Over 2,400 children and young people are awaiting assessment by CAMHS. While many may have been better served by a functioning primary care counselling service, they have nowhere else to go. A Vision for Change recommended 2 teams per 100,000 head of population which would mean at least 95 based on current population figures yet currently there are just 67. We would also increase the number of posts for Nurses working with general settings and

A&E to find appropriate treatment for those at risk of suicide. There is also an urgent need to reopen the 11 CAMHS beds in Cherry Orchard Hospital that were closed in 2017 and increase the number of CAMHS beds overall as recommended by A Vision for Change. Urgent government action is required to reopen those beds and to maximise CAMHS bed capacity in existing units within guidelines for staffing and safe and good practice.

30 Additional Mental Health and Intellectual Disability Nurse positions (€1.49m)

Provide additional support to those who have a mental health issue and intellectual disability to ensure they receive the best care for their specific needs. These roles assist in early

identification of developing problems, as well as advice and liaison services. This helps to avoid crises and protect the independence of the person.

Triple the budget for counselling in primary care (€7.5m)

Early intervention through Primary Care is key to successful mental health outcomes. This is not only better for the patient who is treated in their

community but is much more cost effective for the service if hospitalisation or long term care is avoided.

Fund counselling and other mental health services for people currently in Direct Provision (€1m)

Provide additional hours through primary care in areas with Direct Provision Centres for people

who have experienced trauma before and during seeking refuge in Ireland.

Five Additional Suicide Crisis Assessment Nurses (€0.33 million)

A 60% increase in the number of posts for Nurses working within general settings and A&E

to find appropriate treatment for those at risk of suicide.

Prioritising addiction and dual-diagnosis (€12m)

Addiction is a public health issue. The problem of addiction requires effective strategies designed to reduce social, community and individual harm. It is a problem that has particularly affected marginalised communities experiencing wide spread social and economic deprivation. Drugs, alcohol and gambling addiction adversely affects all aspects of a community's life. Most significantly, drug addiction has resulted in the death of thousands of people across the country.

Despite this, over the last number of years, there has been a reduction in the expenditure and allocations directly attributable to drugs programmes. The resulting cumulative cuts have had a negative impact on service provision. There now needs to be significant investment to restore existing services or develop new services particularly aimed at reducing harm caused by drug use and which will safeguard the health of drug users.

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