Mental illness. It’s a hidden undercurrent running through societies around the world, and there are as many approaches to treating and understanding it as there are cultures.

In Australia, around 20 per cent of the population will suffer from a mental illness in a given year. It is considered by many to be one of the country’s greatest social issues, and it draws considerable attention from activists, employers, families and governments. An industry of skilled mental health practitioners and civil society organisations is active in the country.

In 2009, the Fiji Government had developed a mental health decree which promoted the decentralisation of mental health services. As a result of this decree, in 2010 AVI’s then Fiji Country Manager, Leo Buckles, identified mental health as a key area in Fiji that Australian volunteers could contribute to.

There are a number of challenges to mental health service provision in Fiji. One challenge is the stigma applied to mental illness by many Fijian people who believe that mental illness is caused by a curse or sin. Another concern is the lack of skilled mental health staff, especially doctors.

Another is the vast geographical area of Fiji and the remoteness of much of its population, making provision of services very difficult. Lack of transport for mental health staff amplifies the problem. There are also ongoing problems with the reliable supply of psychotropic drugs. Patients are frequently unable to access the medication prescribed to them.

But the tide is turning on one key challenge: the focus on improved mental health services by the Fijian Ministry of Health and Medical Services.

In 2013, following a reported rise in depression and anxiety in the Pacific, the Government of Fiji worked to improve the region’s first mental health facility, the Suva-based St Giles Psychiatric Hospital, and stress management wards were opened in Fiji’s three divisional hospitals in Lautoka, Labasa and Suva. St Giles now provides counselling services, community psychiatric nursing, occupational therapy, day care facilities, forensic assessments and pharmaceuticals. These services were also made more widely available through the divisional hospitals.

Fiji’s new Health Minister, Mr Jone Usamate, and Assistant Minister, Mrs Veena Bhatnagar, have been increasing the nation’s dialogue about mental health issues in the media and advocating for improved mental health services.

Complementing the advocacy are some new and powerful mental health programs. The most significant is the decentralisation of services from the specialist hospital, St Giles, to community based services offered by primary health staff. This includes training approximately 1500 doctors and nurses in mental health knowledge and skills.

Equally impressive is the establishment of the Mental Health Unit in the National Wellness Centre. This has meant a shift in focus to emotional wellbeing rather than solely mental illness. A third activity is workplace wellness programs. Training in the workplace is being offered to staff about stress management and support of staff and colleagues. There is also a move to introduce psychosocial rehabilitation programs.

Fiji’s current Country Manager for AVI, Kiji Faktaufon, has continued the emphasis on posting Australian volunteer assignments in the mental health sector. Six Australian volunteers are currently placed with mental health service providers in Fiji. Their assignments are funded by the Australian Government as part of the Australian Volunteers for International Development (AVID) program.

Australian volunteer Michael Beechey is working as a mental health nurse and says he has seen significant changes in attitudes towards mental health – at both the national and regional level – over the twelve months he has been in country. “The leaders are really keen to see changes occur and seem to be getting much more interested in what we’re doing. The support for the work of my counterparts is really good, and they’ve even allocated...
Another nurse to help out which is really great,” he said.

“They run suicide prevention workshops, mental health education and drug awareness campaigns. Much of what I’ve done here has been advocacy for them with the ‘higher ups’, an extra pair of hands and a little bit of education and support,” he said.

The national mental health advisor, Dr Jane Andrews, with the support of Australian volunteer Ron Sharkey, is currently working with the regional mental health service divisions in designing and facilitating the World Health Organisation’s Mental Health Gap (mhGAP) training. The training is designed to equip community health care practitioners with skills to identify support and treatment options for people with mental health issues. More than 300 primary health care staff have been trained in mhGAP to date.

In his role as national mental health coordinator, Sharkey has also been involved in the drafting of the National Mental Health and Suicide Prevention Policy, which was endorsed by the Ministry of Health and Medical Services.

“The policy establishes community mental health teams as focal points of mental health services with most care being delivered by frontline healthcare staff,” he said. Australian volunteers have also been involved in drafting the National Clinical Referral and Discharge Pathways which have been accepted by community mental health teams in the country’s three regional divisions.

“I think the volunteers in mental health have contributed greatly to raising the profile of mental health in Fiji. There is now a Policy and Plan in place and there is an ongoing roll out of mental health education to primary health staff,” Sharkey said.

Mental health related support systems available in Fiji include Lifeline Fiji, the Fiji Alliance for Mental Health, Youth Champs 4 Mental Health, Empower Pacific Counselling Services, the Psychiatric Survivors Association and the Hope Health Centre.

References
1 SANE Australia, Facts and Figures about Mental Illness, [online], available at www.sane.org/information/factsheets-podcasts/204-facts-and-figures-about-mental-illness