MENTAL HEALTH carers voice

2025 Survey Report Card and Roadmap



CarersACT

Overview

This report captures the experiences of **166 mental health carers in the ACT.** It highlights a clear gap between policy commitments and everyday practice. While recent reforms have strengthened expectations to recognise and include carers, this is not consistently reflected in service delivery.

The issue is not a lack of policy, but inconsistent implementation.

Why this matters

Mental health carers play a vital role in supporting safety, recovery and care, but their value extends beyond the support they provide.

Carers' own wellbeing matters. When carers are not consistently recognised, included and supported, it can contribute to distress, burnout and poorer outcomes across the system.



What we heard

Carer inclusion is inconsistent

Despite clear legislative and policy expectations, carer inclusion is not consistently applied and often depends on **individual staff, teams or services.**

29% of mental health carers report they are never included as partners in care.



Around **25%** report being excluded from services, often due to service practices or procedural barriers.

Breakdowns in inclusion were most common during care transitions:

52% not contacted at admission to hospital or another service.

59% not involved in discharge planning.

18% Only 18% received adequate discharge notice.

Mental health carers are often expected to manage ongoing care without information or involvement in decision-making.

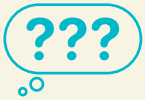
Workforce and system barriers limit engagement

Mental health carers feel that understanding and appreciation of their roles is low among professionals.

Understanding of mental health carer roles:

11% report strong professional understanding.

35% report low professional understanding.



Confusion around privacy and information sharing limits carer inclusion.

Experiences are shaped by relational, structural and capability barriers across services.

Carer wellbeing is overlooked

Mental health carers are a vital part of the mental health system, but their own needs and wellbeing are not always recognised or addressed.

Only **22%** report their wellbeing is considered in care planning.

Nearly half report their needs are rarely or never considered.

32% identify emotional strain as their primary challenge.

Just **30%** are encouraged to seek support.

What we heard

Safety risks are common and cumulative

Mental health carers are managing complex safety risks without consistent support, or inclusion in care planning.

Nearly **40%** report feeling unsafe in the last 2 years.

Long-term mental health carers (6+ years) are **twice as likely to feel unsafe** (≈50% vs 24%).

The impact of caring is often long-term rather than single events, with risk building over months or years.

System fragmentation increases pressure

When services do not work well together, mental health carers are often left to navigate the system on behalf of the person they care for, adding to their responsibilities and stress.

79% navigate multiple systems (rising to 92% for carers of children), including the NDIS, housing, Centrelink and education which are poorly integrated and difficult to navigate.

22% travel interstate for care, indicating gaps in local availability.

What works

Mental health carers consistently identify what helps them provide effective support:

- Clear, timely information and communication
- Meaningful inclusion in care and decision making
- Respectful and compassionate engagement from services
- Practical support to navigate the mental health system.

Many of the changes mental health carers are seeking are achievable within existing systems through consistent carer-inclusive practice.



Roadmap for change

The policies and commitments needed to support carers already exist. The challenge is to translate these existing commitments into consistent, everyday practice.

Change requires shared effort across:

- Government
- Services
- Mental Health Peak bodies
- Community partners
- Mental Health Carers

Make carer inclusion consistent across all phases of care

Addresses:
Exclusion, inconsistent practice, and gaps during transitions

Actions:

- Embed clear expectations of carer inclusion in commissioning and service standards
- Make carer involvement a routine part of admission, discharge and crisis planning
- Support safe and routine information sharing between services, consumers, and carers
- Ensure care are culturally safe and responsive to diverse communities.

Recognise carer safety and wellbeing as a system responsibility

Addresses:
Burnout, emotional strain, safety risks, system reliance

Actions:

- Consider carer wellbeing in routine care planning
- Share responsibility for coordination and crisis response
- Improve navigation and reduce administrative burden
- Strengthen coordination across systems (NDIS, housing, income support).

Strengthen workforce capability for inclusive practice

Addresses:
Low understanding, inconsistent communication, uncertainty around consent and privacy

Actions:

- Build workforce confidence in partnering with carers
- Provide practical guidance on consent, privacy, and family-inclusive care
- Embed carer-inclusive practice in supervision and governance
- Deliver lived experience-informed training.

How change will happen

The changes needed can be supported through systems and processes that already exist, including:

- Commissioning and service agreements
- Clinical governance and quality improvement systems
- Workforce development and supervision
- Use of carer experience data
- Partnership with MHCV and lived experience leadership.

How we will know it's working

- Mental health carers report consistent inclusion at admission, discharge, and crisis points
- Staff are confident and supported to work in partnership with mental health carers
- Mental health carers report reduced burnout and improved wellbeing
- Services provide a more consistent experience for carers across the system
- Mental health carer feedback is routinely collected and used to inform improvement.

What success will look like

Short Term:

- Clearer expectations for carer inclusion
- More consistent, safe, and accountable practice
- Earlier recognition of stress, risk, and emotional labour.

Medium Term:

- Predictable inclusion of carers at key points of care
- Improved carer wellbeing and capacity to continue caring
- More reliable system performance
- Stronger accountability and use of carer data.

Long Term:

A system that:

- Consistently delivers on existing commitments to carers
- Recognises carers as partners in care and individuals with their own needs
- Uses lived experience and data to drive continuous improvement
- Is safer, more equitable, and sustainable.



Supported by

ACT Government