

Recovered Lives with Hope: A Complete Resource Manual Outlining the Better Management of the Mentally Ill Within Policy, Guidelines and Initiative Main-Frames

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THE OBJECTIVES OF THE AUSTRALIAN PEER SUPPORT COMMUNITY

Primary Objectives

The primary objective of the Australian Peer Support Mandate and the community it represents is to build a value based body of evidence. Guiding policy and legislation by researching alternative methods of delivering mental health services through the use of surveys, peer forums, open conferences and meetings relative to the great need of providing better outcomes for those experiencing mental health issues ensuring their treatment options and outcomes are relevant and suitable to each individual consumers particular needs and/or requirements at the time and that such are being met.

In accordance with the 'World Health Organizations Report 2001' in regards to "formulating policies designed to improve the mental health of populations" (Murthys et al., 2001), to therefore provide such suitable outcomes to address mental health in Australia and raise the standards of treatment options and suitable sustainable recovered futures for the mentally ill and improving the wellbeing of the Australian population.

By enabling a universal sharing of information via these particularly essential forums to gauge the direction of Peer Support and how the Mental Health Community, Criminal Justice System, Homeless Services, Welfare System, Education System, Armed Services, Wellness Services and the Peer Support Community Organizations, inclusive of PHamns, may work together as one to provide a comprehensive united service. Thereby not confining and isolating members' of such Communities and also those Mental Health Consumers, Families, Community Providers and Mental Health Service providers alike.

Furthermore there is a great need to gauge by measurement the well-being and wellness of the broader general community as a measurable quantification and quality of well-being throughout a broad spectrum and demographic, whether it be in educational institutions, at work, at play or on the sporting field.

Thereby surveying and gauging a perspective of the wider communities a gauge of wellness and general well-being of the populace. To then address such issues gathered around the mental health of all Australians to raise a standard of awareness of such communities to consider their mental health, socio-economic wellbeing and/or social, emotional well-being.

To utilize a standardized measuring system and component to then gauge such a perspective, gathered around wellness and well-being of the general populace raising all Australians and First Nationals to a wiser, healthier and more mindful nation.

By moving away from the 'Gross Domestic Product' of the nation and towards a 'Well-being and Wellness Code' of a general wider

audience therefore rebuilding communities on the road to recovery whilst remaining mindful of each our own mental health needs and/or requirements. Therefore raising the standard of awareness of all Australians in regards to mental illness and mental health whilst minimalizing stigmatism and the negative impact of a diagnosis of a mental illness.

Raising Global awareness and connectivity as being a Global shift away from hopelessness to hope empowered by a unification of Global well-being and Global wellness and thereby raising the standard of how mental health is regarded in Australia and building towards a healthier community holistically, whilst remaining mindful of our existing Mental Health System and the needs to change.

Gathering around mental health as no longer being a therapeutic model of diagnosis, therapy and medication and shifting towards education, community support and community engagement processes gathered around well-being and remaining well for the long-term.

For all Australians to take up the mantle of well-being and wellness for all concerned thereby reducing the negative impact of mental illness and raising the standard of treatment options and/or treatment outcomes for those who may experience and/or suffer from a mental illness.

And also in an extension of the primary objective of the Australian Peer Support Mandate in regards to the recovery of individuals experiencing and suffering from a mental illness there is a great need for the Mental Health System and the Mental Health Communities alike, inclusive of Peer Support, to rally around the Criminal Justice System.

Due to there being such a large population of prison inmates suffering from a lived mental health issue (Forsythe & Gaffney, 2012) and the need for the system to change by moving away from rehabilitation within prison facilities towards a more holistic support model, such as Peer Support gathered around addressing criminal behaviour as a complex health issue relative to mental illness, drug addiction, alcoholism and a life-time of trauma.

In that we holistically may address mental illness within all prison facilities and within the broader community due to a large percentile of prison inmates and re-offending convicted criminals, male and female, suffering daily from a mental illness.

And due to thus are repeat offenders and non-remorseful institutionalized individuals, whose mental health needs and requirements are not being addressed, with such illnesses and re-offending issues stemming from traumatic experiences as children and continuing throughout the lifetime of such individuals due to the neglect of their mental health issues in regards to their alcoholism, drug addictions and traumatic experiences going untreated.

By utilizing the tools of recovery such as gentle guidance, Hope, reflection, story-telling and role-modelling of each our own individual roles and the many hats we utilize every day in having an active voice and essential experience in each our own individual recovery of when, where, how and what may be useful to aide ourselves and

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others experiencing similar life experiences by being immersed into a multi-skilled and multi-tooled recovery based community.

By involving other sectors in regards to maintaining the wellbeing of the peoples and multi-various communities of this land and therefore linking together such sectors in great respect for the roles each individually plays in maintaining systems of governance (Murthys et al., 2001).

To allow a broad spectrum of sharing throughout all prison facilities to facilitate recovery altruistically via Peer Support and such models of Peer Support, thereby encouraging such particular individuals to choose to do the right thing and remain rehabilitated within the community for the long term with re-offending not an issue and not to be considered as an option, which also complies with the 'The World Health Report 2001', which encourages community based support "to ensure that some of the protective functions of the asylum are fully provided in the community and the negative aspects of the institutions are not perpetuated" (Murthys et al., 2001) as being essential to maintain care in the community and recover without the need to attend Mental Health Prisons nor Gaols alike.

Who may re-integrate within the community and become of value to the community and contribute to the greater good and thereby minimize the negative impact of their mental illnesses whereas imprisonment and re-offending is no longer a probability nor likely.

To hand over the keys of recovery, rehabilitation and abstinence at all times reflecting on Hope to empower such individuals to remain clean and in an active state of wellbeing whilst remaining mindful of each individuals particular life's journey and their individual strengths.

In that we may raise such a particularly shattered community towards well-being and remaining well for the long-term and always remaining ever mindful of each their own individual needs and requirements in regards to the legality of such choices and consequences of their behaviour.

To then enable a greater sharing from recovered addicts and alcoholics, ex-convicted criminals and rehabilitated ex-inmates to then become role models of each their own recovery and rehabilitation therefore reflecting and empowering their own community and thereby raising much needed awareness within such facilities and communities that recovery and rehabilitation is possible and more than achievable for the long term.

And furthermore there is a great need to encourage, fund and endorse a communal sharing in-house throughout all Mental Health and Gaol Facilities in Queensland and throughout relative States and Territories in regards to providing and designing natural environmental settings, nature strips and nature settings designed specifically to visually stimulate and empower such particularly disenfranchised individuals with Hope at times when Hope seems to be absent.

Designing such settings based upon Peer Support models of recovery guided dialogue, Mural and Captured Art, designed to be a moving, living, document of Art and creating characters in Mural as ambassadors, role models, representatives and advocates of Peer Support interacting with peer participants or fully rehabilitated individuals within their communities with Hope.

Thereby complying with 'World Health Organization Standards' in regards to social environments by simply stating that, "If", "social environment is favourable, it contributes to recovery and integration", and furthermore goes on to state that environments, "if negative can reinforce stigma and discrimination" (Murthys et al., 2001).

Therefore implementing such legislation to reinforce such strategies to reduce stigma and discrimination and reinforce the

environments conducive to recovery and wellbeing throughout all Mental Health and Prison Institutions to inspire in-patients and inmate prisoners towards the road to recovery and thereby opening safe and honest dialogue in regards to recovery activation whilst an inpatient or inmate. Handing them Hope and the ability to obtain resilience and bounce back after times of great stress.

Giving patients or inmates the chance to connect within such environs with other inmates or patients, to open up safe and honest dialogue throughout all Mental Health or Gaol Facilities giving individuals a treasured experience that by being placed into a Mental Health or Gaol Facility is not the end of the world and by sharing their individual stories of a lived kind they may break down barriers within such communities that it is not so un-common a place to do so therefore endorsing a common goal of sharing the lives and eyes of recovery, initiating change at the most basest of levels.

And also that these particular safe spaces may become places where Hope is felt and shared most, between patients, peers or inmates and empowering these such individuals with the means to open honest and safe communication with Peer Support workers, PHamns, NGO's, Wellness Officers', Mental Health Professionals, Homeless Representatives' or Prison Personnel on a more personal level in house.

Encouraging all parties to share their experiences in utilizing reflective story-telling of each their own individual lives and stories to share, thus of which may be of use for these particularly disenfranchised individuals.

Encouraging a greater sharing to then take a hold of such communities in that together as one they may traverse the road to recovery guided by a common thread of Hope and empowered through positive action to remain well neither re-offending nor being incarcerated or hospitalized, for the long term whilst working on resolving problems slowly and effectively utilizing each their own wellness Tools and Toolbox, Toolkits.

In order to gain from Strengths, Abilities, Talents and positive traits they exhibit with Peer Support Professionals, PHamns, NGO's, Wellness Facilitators', Mental Health Professionals, Prison Personnel and Health Professionals alike, Peer Participants, Family and Friends thereby being able to remain in the community without re-offending nor being stigmatized by their lived mental health issues whilst still being able to engage in their everyday affairs.

Therefore mental illness is to be addressed as a complex issue and that the greater community may no longer create barriers for these particularly disadvantaged individuals by dramatizing that an admission into a Mental Health Facility is the end.

Thereby opening up dialogue within the greater community in knowing that approximately 1 in 2 peoples suffer daily from a mental illness (Australian Bureau of Statistics, 2009) and approximately 1 in 4 peoples have suffered at one time from a mental illness and have fully recovered or have experienced the negative impact of some-one who does suffer from a lived mental health issue and/or illness daily.

To build awareness in the community that mental illness is not isolated to the criminally insane and the further disempowerment of those particular individuals with whom at some time in their lives may need the specialized care within a Mental Health Facility in order to begin the healing processes to recover well and remain well for the long-term must stop.

The treatment and recovery of such individuals are to be considered as journeys of many pathways towards self-discovery, self-realization and the inner searching of the heart. As such further stigmatization, fear-mongering in regards to the treatment of those who may at some time suffer from a lived illness, shame blaming in the media and discrimination must cease as we all may experience

a lived mental health experience and/or lived mental illness at one point in time in our lives.

And so as such communicating to a wider audience that mental illness is not simply isolated to the very few but a greater population. With mental health issues on the rise and if such issues are not addressed from a communal community perspective gathered around wellbeing as a code to live and breathe by then such illnesses and issues will manifest in young children ever-more increasingly impacting negatively upon such young minds.

In these ever changing times there is a great need in addressing such issues by educating and treating an individual as a complete and whole person and in doing so we are also educating and treating the Families, the Community and the Greater population and Nation as a whole learning together as Partners in Recovery as one gathered under a common banner of Hope.

Therefore we as role models may be as representatives of Partners in Recovery holistically and gently guiding such individuals towards a healthier, recovered futures without re-offending reducing the duration and chance of institutionalization within a Mental Health Facility or Prison Facility and lessening the strain on an already over-strained Criminal Justice System.

Secondary Objectives

The secondary objective of the Australian Peer Support Mandate is to re-instate advocacy rights which is value based and not guided by political agendas.

Furthermore by creating suitable outcomes in partnering between doctors and mental health patients inclusive of all levels of the Mental Health Community, Carers, Peer Support Community, PHamns Community, NGO services, Homeless Services and Family bearing a light on the need for each individual patient and their rights to be ensured. Thereby providing the best possible treatment and/or outcomes to be achieved and also by reducing stigmatism and the negative impact of such a diagnosis.

To give individual patient choice and advocacy by partnering between treating teams and all levels of treatments inclusive of Family will provide a more resplendent system of governance for those experiencing mental health issues and/or mental illness and their Families (Murthys et al., 2001).

Also in that by being and remaining as advocates as Partners in Recovery, In reaching and In reach services into Mental Health Facilities, Gaol Facilities and wards as Non-Governmental Organizational Support Workers or NGOs is essential and therefore to be encouraged and funded in order to support those particular peer support participants as inpatients and/or inmate prisoners, will then greatly provide better outcomes for such individuals seeking admission voluntarily or otherwise being imprisoned or placed into a Mental Health Facility involuntarily.

In that there is a great need for such individuals to remain supported whilst an inpatient or inmate and to keep in mind that by being role-models we are role-modelling by example within such facilities that recovery is possible.

So as to encourage voluntary activation of other inpatients or inmates into a recovery based community such as Peer Support to then seek activation into Peer Support gathered around wellness, rehabilitation, recovery, Hope and remaining well for the long-term as being the primary goal and main concern for the Peer Support Community as a whole.

That by being placed into a Mental Health Facility or Gaol Facility does not further negatively impact nor stigmatize such individuals any further and allows the healing processes to begin gathered around Hope, Empowerment, Education, Connectivity and Recovery.

In that Policy, Legislation and funding should be implemented in regards to such NGOs then being placed and/or allowed access to all Mental Health Facilities and Gaols thereby supporting such a disadvantaged community holistically to remain well for the long-term therefore increasing life's duration and experiences of those particular individuals.

By remaining mindful at all times of the great need to support such a community in knowing they may have very little insight into their treatment options, ongoing rehabilitation, outcomes, plans and wellness due to the challenges facing them to be admitted into a Mental Health Facility or Gaol.

To ensure their rights and treatment options, outcomes and plans of wellness, rehabilitation and recovery are suitable to each their own needs in that they are making informed consented decisions relating to their each own individual needs and requirements whilst an inpatient or prison inmate.

That their rights are being maintained and upheld in regards to transparency of all parties inclusive of Peer Support Representatives, PHamns, NGOs, Wellness Officers' and other Mental Health Professionals or Prison Personnel guiding individuals gently towards recovery and rehabilitation without further stigmatism nor further impacting negatively upon their already fragile minds, bodies and spirits.

In that Peer Support NGOs, Wellness Officers' nor any Mental Health Professional or Prison Personnel Representatives may neither undermine such individuals by maintaining ethics and integrity at all times whilst altruistically guiding them upon the path of rehabilitation, recovery and wellness with Hope.

That recovery, rehabilitation, Hope and wellbeing is the goal of all those who suffer from or experience imprisonment or a lived mental health issue and/or illness and by utilizing the tools of recovery such as Peer Support, PHamns, NGO Support, Case Management(Clinical and/or otherwise), Personnel Support, Wellness Facilitators' and the support of Mental Health Professionals in great understanding that recovery is possible and more than achievable for the long-term by remaining supported and connected to Peer Support, Case Management, Co-Facilitators', Mental Health Professionals and Family.

That by rallying in support of those within Mental Health Facilities and also Prisons and Gaols, whether they are Peer Support Participants, inpatients or otherwise prisoners, will greatly reduce re-offending behaviour, stigmatism, shame and further negative impact of each their own lived mental health issues and/or illnesses with Hope that full rehabilitation and recovery is possible and more than achievable for the long term with wellbeing and without re-offending as being paramount to such individuals.

And also as such encouraging, endorsing and funding a new age navigating multi-skilled and multi-tooled position to guide and steer peer support participants via gentle guidance utilizing valuable navigating knowledge of the sometimes overwhelming facets and parts of the system.

Guiding peer participants and giving such participants the tools to do likewise thereby handing them the keys to then act for themselves in the community holistically handing them valuable tools to guide themselves through the multi-faceted parts of the system, reducing the challenges facing such peers and enabling them to navigate the system with more efficiency.

To give peer participants such tools through a Peer Help and mentor navigator support worker position(PHAMNS) to actively engage with peer participants and steer them through such myriad parts of the system such as Centrelink, governmental organizations and/or other organizations or companies to access such services with more efficiency and lessen impact from not knowing what, how and

where they may go to or what they may do in order to live more productively whilst suffering from a mental health issue and/or illness.

Thereby guiding, directing and steering peer participants holistically on the road to recovery to then be able to act for themselves in the community with efficiency and lessening the negative impact of further admission and/or suffering in silence due to the challenges facing them every day in regards to their inability to guide themselves through the sometimes overwhelming parts of the multi-faceted system, remaining Partners in Recovery altruistically.

To also create legislation and suitable policies in regards to the needs of the most disenfranchised, disadvantaged and impoverished members of the community, such as the homelessness community, by legislating against bullying and/or stand-over tactics of the wider communities inclusive of the Law Enforcement Agencies throughout the land.

To provide funding and endorse a new-age multi-tooled position and working job capacity such as a 'Wellness Facilitating Officer/s' to engage with such homeless members of the community thereby acting as guides, role-models and advocates gently guiding and steering such individuals towards being housed and remaining housed for the long-term whilst actively engaged in their wellness tools to then receive pay and provide for themselves whilst remaining on the streets.

To also facilitate recovery of such individuals as they may suffer from a lived mental health issue and/or illness due to the circumstances and reasons being behind why they are not housed and negatively impacted by such homelessness thereby creating opportunities for such individuals in knowing that all peoples may experience poverty and/or homelessness at one point in time in life.

Therefore addressing Homelessness as complex issues relating to unemployment, low educational levels of achievement, deprivation and Poverty of which is widespread throughout poorer countries but also is quite proportionate in Australia and therefore must be addressed in that data shows that 'common mental disorders are about twice as frequent among the poor as among the rich' (Murthys et al., 2001).

To create a 'Wellness Force' inclusive of Law Enforcement Agencies such as 'Liaisons Wellness Officer/s' in order to empower such individuals to maintain hope and actively engage in each their own wellness tools thereby facilitating change in the most harshest of environments whilst remaining mindful and ever-aware that such individuals just want a fair go.

Giving value to 'Mental Health Resources' (Murthys et al., 2001) in creating such working roles, titles and job capacities to engage with community members and be of value to those individuals experiencing Homelessness issues and/or the negative results of being Homeless such as a lived mental illness.

To also encourage such individuals to voluntarily activate themselves into Peer Support and to then raise their standard of wellness and well-being, becoming housed and remaining housed, in an active state of recovery and their ongoing sustainable futures for the long term.

Fostering friendships and raising awareness in the community in regards to the accountability of the homeless community as being essential as a core element of Hope that by keeping to the value of the law of the land they, said individuals may not be incarcerated within Prison or Gaol Facilities and also out of hospital without the likelihood that hospitalization is probable nor likely.

Thereby sustaining suitable recovered and housed futures for the most impoverished community through-out this great land in that their well-being and the wellness of the entire nation is of utmost

highest concern and regards to the Peer Support Communities, Mental Health Communities, Law Enforcement Agencies and all communities alike.

To also engage with all community members in regards to facilitating wellness and gauge a measurement and perspective of the entire nation and their individual wellness and ongoing sustainability within the community and the communities they are a part of.

Gently guiding and steering all peoples through-out this wonderful land onwards ever onwards towards wellness and wellbeing as a united front gathered under Hope and the sustainable recovered futures of all individuals.

To be and act as gentle guides, protectors and liberators of this great nation and gently guide all individuals towards the path of recovery and/or being housed, protectors against heckling and mocking, stand-over tactics and bullying within the community, in educational institutions, workplace environments, on the playing field as spectators or participants, within the peer support community and/or on social media or otherwise the media and the internet.

Hereby legislating against such a culture of mocking and heckling, bullying and stand-over tactics which authorizes the consent for those individuals they then euthanize by association to gain the associated forced suicide upon such individuals they deem fit to traumatize by such behaviour and therefore such traumatized individuals are to be protected from such heckling and mockery by legislating against such behaviour to then add such legislation to the Constitutional Writ of Association of the Law of the Land and the Governing Bodies and collective legislators of the Commonwealth Government of Australia.

Thereby discouraging and outlawing such behaviour in the media and/or on social media platforms and monitoring such behaviour to then keep the wellbeing of the nation in highest regards and utmost concern.

Providing also a manageable illness and diagnosis in order to facilitate the recovery and ceasing of such behaviour by placing such legislation within the Mental Health Act through-out all States and Territories, Nationally.

By creating a new age diagnosis of a 'Mockling Disorder' in order to facilitate change in the community in regards to how we as a people and nation view such behaviour and thereby creating suitable pathways and outcomes for recovery.

By utilizing Peer Support models of recovery and allowing such individuals to then open up and share their stories of why they act in such a manner in thereby facilitating the full recovery of a peoples and community gathered around mocking and heckling of their peers regardless of their position of status and/or authority.

To protect the aims of the community and implementing change through-out the nation and peoples thereof.

Thereby utilizing the 'Wellness Force' to assist in the development of the community as a whole monitoring such behaviour as unacceptable and liable to prosecution and a diagnosis of mental illness and furthermore discouraging the use of such behaviour by Law Enforcement Agencies not to do so as such.

To give the power back to the people of the multi-various communities they represent by restoring order and wellness, whilst encouraging mindfulness of others needs in giving to each other and activating the voices of the peoples and communities, all communities inclusive, to take a stand for the most disadvantaged communities thereby protecting the rights of those individuals who may experience a lived mental health issue and/or illness within Mental Health Facilities or within the community, inmates within the prison criminal justice community or ex-prisoners, recovered

alcoholics and recovered addicts, the homeless community and all communities and peoples alike.

Empowering them with Hope that full recovery is possible and self-sustaining, self-management of each their own lived experience can be constantly checked, kept in order and maintained for the long term by the sustaining of each their own individual community treatment orders.

Thereby raising a standard for such individuals to partner with Family, friends, Mental Health Professionals and the community alike giving Hope to others as role-models and holding Hope whilst engaged in each their own individual wellness tools and the many roles and many hats they utilize daily.

Therefore raising themselves into the community engagement processes and raising the standard of awareness in the community as role-models that recovery is possible whilst maintaining their high energy lifestyles.

Giving Hope to all peoples and shoring up the broken hearted by reflecting their life's experiences of what was useful in times of distress, how their individual lives were maintained and supported in such hours of great need, where they could go to for support and help in such times and the reflection of the eyes and lives of recovery story-telling in obtaining new eyes and new lives to live and see with.

Therefore we as a people, a nation, a community and fraternity of many cultures, multi-various denominations and origins and the many Families this great nation represents may remain focused around well-being, centred around mindfulness and the giving and receiving of Hope in order to restore Hope and shift away from a culture of hopelessness and the deterioration of society into gloom.

Furthermore as such endorsing and encouraging self-advocacy rights of those experiencing a lived mental health issue and/or illness to ensure better outcomes in regards and respect to medication, treatment, orders and/or hospitalization.

Thereby partnering with treating teams, Mental Health Professionals and Clinical Case Management as consumers to ensure their rights, treatment options, outcomes and overall well-being are ensured and maintained for the long term as being crucial in recovery.

Also there is a great need to rally around those individuals whom experience high amounts of trauma daily and have been mal-diagnosed with Schizophrenia to thereby encourage and endorse a value unto 'Family Advocacy' and such 'Family Advocates' to step forward to therefore ascertain the truth to such a mal-diagnosis.

To liberate those individuals experiencing more than normal volumes of trauma due to the projection of sufferings from Family members binding such individuals and their hands into captivity into Mental Health Facilities and/or Gaol Facilities and thereby encouraging the ongoing trauma, hospitalization, institutionalization and stigmatizing of such and said individuals to continue which of course must cease.

Placing them in bondage unto themselves in that the truth such traumatized individuals maintain throughout treatment and care may be revealed as truth and therefore freeing and liberating such individuals by encouraging 'Family Advocates' to step forward during 'Round Table' talks thereby effectuating change for such individuals to recover well from being ill-treated and ill-cared for whilst in the care of treating teams and/or Doctors.

In that such Family generational patterns and traits are to blame and as such no longer to be allowed thereby giving those such individuals whom have been mal-diagnosed with Schizophrenia a

voice and silencing them no more in that they suffer daily with Post Traumatic Stress Disorder and to treat such as Schizophrenics must not continue and must stop.

To open the hearts and minds of the land to treat and care for such individuals as a complete and whole person in keeping such individuals needs and requirements in highest and utmost concern and regard for their topsy turvy lifestyles in that they maintain high energy roles and exhibit such strengths, talents, gifts and abilities of very bright individuals.

To not undermine such individuals any further treating and caring for such minds regardless of family members struggling to contain, traumatize further, silence, hospitalize nor institutionalize such individuals and thereby would like to encourage all treating teams through-out this land to seek higher ground and encourage 'Family Advocacy' and such 'Family Advocates' to step forward and oust fellow Family members.

Thereby ousting them from maintaining their lies to continue in traumatizing and negatively impacting upon such fragile individuals knowing they, said individuals have maintained their truth and as such said Family members desire to keep their fellow siblings in bondage and captivity to themselves.

To seek and find such 'Family Advocates' and empowering them that it is okay to do so and that no repercussions will result from such ousting of fellow Family members and therefore allow the healing process to take place.

To give such talented individuals a voice and not silence them any further nor negatively impacting upon their already shattered souls any longer thereby opening up the heart of Hope through gentle guidance, personal and reflective story-telling, having and holding Hope, connectivity, community engagement processes and the empowering of the Arts.

Therefore would like to endorse, encourage and empower 'Family Advocacy' for such individuals to be freed, liberated and not mal-diagnosed any further whether it is a mal-diagnosis of Schizophrenia or otherwise an incorrect diagnosis of mental illness other than that which is truthfully impacting upon such fragile minds.

Sustaining their well-being for the long term and remaining out of hospital within the community on various orders and levels of treatment voluntarily on voluntary treatment orders. Enabling such disenfranchised individual's to obtain a sustainable recovery with long term non-admission in mind whilst being mindful of their individual needs and desires to recover fully and remain well given their turbulent minds, emotions, lives and state of affairs.

In that by determining a 'Family Advocate' to step forward and oust those family members traumatizing their fellow siblings and/or children in providing 'Family Advocacy' initiatives relative to the need to encourage 'Round Table' talks that we at all times consider the overall wellness, wellbeing and recovery of the entire Family unit by facilitating the recovery of the entire Family dynamic holistically and whole as one.

In order to treat the bullies of traumatizing such individuals and perpetrating lies and/or inflicting pain upon these such individuals therefore caring for and treating the entire family to then promote the healing of Families onwards ever onwards towards the path to recovery.

Neither isolating either in that the communities of the many Families, siblings and children they represent are at stake for the Family dynamic has already degraded and has been dismantled and by keeping the interests of the nation in highest regards and respect is to restore the Family unit inclusive of all Family members and the communities they represent.

In order to heal all Families and place their feet onwards ever

onwards towards the path of recovery whilst remaining ever-mindful of each individuals particular needs and/or requirements whilst also being mindful that not all things are possible to do and thereby endorse such use of 'Family Advocacy' and 'Round Table' talks initiative.

Therefore allowing all levels of the Mental Health Community, Doctors, Psychiatrists, Psychologists, Clinical Case Management, Peer Support Management, Wellness Representatives', NGO Representatives', Homeless Service Providers, PHamns Representatives', General Practitioners, Consumers, Carers, and Family to grow as one so as to educate both sides and break down barriers between the different factions of the Mental Health Community and Consumers, Carers and Family networks thereby providing a better service delivery and improving the care of patients whether it be as inpatients in a Mental Health Facility or in the community on various levels of treatment and/or treatment orders voluntarily and/or otherwise.

Tertiary Objectives

The tertiary objective of the Australian Peer Support Mandate is to activate change by providing a level playing field of action by legislating against discrimination in the workplace, on the sporting field, at play, within educational institutions and the wider community by educating all sectors of the community and outlawing such behaviour.

Therefore initiating change at all levels of the community where as we may collectively develop awareness of the needs of these particularly challenged individuals as being valuable community members within all levels of the community thereby breaking down the barriers of isolation and stigmatism widely experienced by those who have a mental illness.

Furthermore providing a level playing field of legislation outlawing and discouraging the locking and sealing of locked and sealed wards in the public sector of Mental Health Facilities to then reflect the Private sector and no longer endorse such behaviour and so forth unlock and unseal such facilities.

To then give full sway to the comings and goings of such particular inpatients in lock-down facilities to come and go at will enabling such rights for these particularly institutionalized individuals to then fulfil work obligations, to themselves where possible and also engage in the wider community without duress nor false arrest.

To encourage connectivity to work obligations, community involvement, commitments to themselves and the pursuit of friends and family to come and go at will, within reasonable operational hours, to therefore satisfy U.N Charter and Principles 15-16 (Office of the United Nations High Commissioner for Human Rights Geneva, Switzerland, 1991) in great respect and regard for Mental Health Facilities and the patients therein to be ensured and their rights to be upheld at all times.

Therefore complying with Human Rights Charters in regards to such false detainment and false arrest of such a particularly disenfranchised people and reflecting such false arrest and detainment as being outlandish, out-dated and an affront against the Human Rights Mandate, thereby is to be outlawed in regards to a "a person not being deprived of his or her liberty except in accordance with procedures established by Law" (Victorian Parliament, Victorian Current Acts, 2006), as it is not a criminal offence to be diagnosed with a mental illness.

This legislation is essential in regulating such outlandish behaviour and outlawing such as being therefore reprimanding as it is not a crime to be diagnosed with a mental illness and as such locking and sealing wards in the public sector alone does not reflect

the overall holistic view of mental illness as it is not a punishable offense by imprisonment within Mental Health Facilities such as Hospital and so forth is unlawful.

Thereby reflecting the public and private sectors upon each other and maintaining thus at all levels of Government and Private enterprise/s altruistically and not deterring from the common theme that a diagnosis of a lived mental health issue and/or illness is a journey of recovery and self-discovery.

Giving the power back to such an institutionalized and disenfranchised community ensuring their rights and freedoms are then maintained and upheld at all times. And therefore will not undermine the community by taking away the liberties and freedoms of such individuals.

These objectives are essential to allow all community members as a whole to grow unitedly as one in understanding that all people may experience a lived mental illness at one point in time in their lives and thereby reduce the negative impact on these such individual's as they are at most risk to themselves due to the challenges they must face every day.

THE AIMS OF THE AUSTRALIAN PEER SUPPORT COMMUNITY

Primary Aims

The primary aim of the Australian Peer Support Mandate is to represent unto the Peer Support Community as a reflection of ourselves as such that the Peer Support Community Representative Organizations and the Peer Support Facilitating Officers and volunteers, role model recovery holistically.

And that such Peer Support Representative Organizations provide services determining the full recovery of those experiencing a lived mental health issue and/or mental illness.

By developing 'Community Mental Health Services' in accordance with 'The World Health Report 2001' which outlines the effectiveness of such community based services as being essential in "providing comprehensive and locally based treatment and care which is readily accessible to patients and Family" (Murthys et al., 2001) therefore encouraging such individuals to choose voluntarily to activate themselves through community care services with Hope.

By providing holistic care outside of Hospital within the community on various levels of treatments and community based care treatment orders reducing strain on the Mental Health System and encouraging such individuals experiencing mental health issues to recover well from the diagnosis of a lived mental illness.

That re-admission is not to be encouraged and as such is not to be recommended as a primary option and that as a whole such relative Peer Support Facilitating Officers reflect on each their own roles with participants that sustaining ongoing self-management in the community of each our own lived mental health experience/s is achievable for the long term and also as being paramount.

That we as a community, philosophy and service unit unitedly reflect on our ongoing roles, community involvement, pursuits, engagements, lifestyle and/or employment in reflection of the many hats we utilize every day. That we do not put ourselves nor our peer supported participants at risk of re-admission into a Mental Health Facility.

As ambassadors and representatives we will not undermine the Peer Support Community in that such representatives may bring about an empowerment of themselves and the community they represent and thereby continue to sustain themselves and such participants in full self-management roles within the community

on various voluntary orders in compliance with 'The World Health Report 2001' (Murthys et al., 2001).

Whereby we may address such a disenfranchised and disempowered community and empower them with Hope utilizing Peer Support Models of recovery of which complies with community care as outlined by the 'World Health Report 2001', that simply states, "In contrast, community care is about the empowerment of people with mental and behavioural disorders" (Murthys et al., 2001).

To raise such a proportionate community on the road to recovery, rehabilitation and abstinence by offering Peer Support as a pathway to rehabilitation whether it is within prison facilities or within the general community on various criminal justice orders and/or levels of punishment voluntarily

Long-term non-admission is possible therefore by not undermining our aims as a fully self-managed community and also as such role-modelling recovery within ourselves holistically, the Peer Support Community Organizations, Peer Support Facilitators and the community they represent in that full recovery is possible and full self-sustaining management of each our own mental illness/es and the recovered sustainability of the community we represent and support as being paramount.

Encouraging other community members experiencing a lived mental health issue and/or illness to be engaged into the capacity of a Peer Support Recovery Activation voluntarily through support by engaging in effective communication and shared mutual experiences through story-telling with the empowerment of Hope.

Full recovery is possible empowering those peer supported participants through Hope and connecting with a network of community members and Peer Support Facilitating Officers.

Raising awareness of the value of Peer Support in that it is maintained and represented by the Peer Support Community Organizations and the relative Peer Support Facilitators as being ambassadors, advocates, role models and representatives of the Peer Support Community with recovery in mind whilst being mindful of each peer supported participant and their needs, current situation, state of mind and/or affairs.

Furthermore as ambassadors, advocates, representatives and role models such Peer Support Facilitators and Representatives may transpose Peer Support Models of recovery across the Prison Criminal Justice System and aim holistically to engage with prison inmates and encourage them to engage in Peer Support and remain out of Gaol and rehabilitated without the likelihood of re-imprisonment nor re-offending to be a possibility nor to be considered nor likely.

In that Peer Support Facilitating Officers and Representatives may sustain such individuals lives with recovery and rehabilitation in mind that such individuals may remain well and become fully recovered ex-criminals, ex-addicts and ex-prisoners within the community for the long term by role-modelling the keys of recovery such as holistic support, connectivity, community engagement processes, empowerment of Hope and the embracing of the Arts.

Therefore reflecting upon such individuals journeys regardless of such circumstances surrounding such individuals lives thereby encouraging them to activate themselves into Peer Support as peer supported participants to then gain Hope and obtain resilience and bounce back easily in times of great stress and great need without the need to re-offend as they may suffer from a lived mental health issue due to why they are criminals, addicts and imprisoned.

Reflecting on their roles as Peer Support Facilitating Officers to empower those experiencing a lived mental health issue and/or illness with Hope in that full recovery and sustainability in self-management roles inclusive of their mental health experiences

and illnesses may be supported by the community network and engagements thereof.

To then also advocate if necessary for those peer supported participants whilst in admission into a Mental Health Facility or in the community on community based orders and/or treatment orders to provide suitable outcomes for such individuals thereby maintaining accountability of treating teams, Doctors and Mental Health Professionals alike to then treat such individuals as humanely as possible.

Giving and handing over the keys of recovery to such peer participants to do so as such accordingly the best they can do to remain well and recover well for the long term.

Also providing such participants with the skills and ability to self-advocate with treating teams, Doctors and Mental Health Professionals in regards to medication, hospitalization and treatment orders in great respect for each individual peer participants particular needs and/or requirements at the time so as to obtain the best possible treatment and/or outcomes to be achieved.

Handing over the keys of recovery and Hope to such peer participants to then activate themselves into the recovery processes thereby engaging in each their own lives with renewed stamina and desire to remain well and fully recover for the long term, educating such individuals via Peer Support Models of recovery of engagement and connectivity to Peer Support, family, friends and Mental Health Professionals alike to thereby manage each their own lived illnesses with self-advocacy in mind therefore partnering in recovery and sustaining each their own individual lives in the community on various treatment orders for the long term.

By also engaging and encouraging entrance value on the active roles participants model through interaction with their Peer Support Facilitating Officers in regards to their individual talents, gifts, strengths (not weaknesses), attributes and abilities relative to their personal stories they have in each their own understandings of each their own experience/s and therefore raising such peer supported participants into the capacity to engage in recovery.

In order to utilize effective planning of each their own wellness and recovery in sustaining and creating a 'Wellness Recovery Action Plan' or WRAP manual inclusive of wellness toolbox toolkits and tools. In order to remain well and out of hospital, recover well in self-sustaining, self-managing roles by creating such tools through each their own connectivity to either the Arts, community engagement process and/or connectivity to Family, friends and/or social groups relative to maintaining each their own well-being for the long term thereby obtaining and holding onto Hope in order to gain resilience and bounce back in times of great stress and/or need.

To encourage active participation in the Arts and thereby crafting and/or creating of such a medium in ownership of thus to then receive pay, increase their skill basis, educate themselves further, gain experience and recover well utilizing the use of such artistic expression such as Theatre, Drama, Dance, Music, Creative Writing, Arts and Crafts and also the use of eastern treatment options such as Mindfulness, Yoga, Faldenkrais, Gentle Exercises, Meditation Exercises, Relaxation Exercises, Eastern Medicine such as, Energy Healing, Light Acupuncture, Neuro-Tapping, Bone Alignment, Reiki and Aromatherapy, Tai Chi, Qui gong, the Martial Arts and Traditional and/or Eastern Philosophies.

Providing suitable outcomes for those individuals with mental illness as then thereby shoring up the broken hearted of those peer supported participants through gentle reflection and personal empowerment of Hope to give peer participants new eyes and lives to live and see with by actively engaging with such individuals that have experienced great hardship, homelessness, hopelessness and heartbreak due to the challenges facing them daily.

In that they may be empowered by a connection to the embodiment of love and Hope surrounding such individuals to overcome such heartache and loneliness due to suffering in silence and not having any-one to engage with. Giving and handing them Hope in times when Hope seems to be absent and gently guiding such individuals towards remaining well and recovering well fully.

Providing each supported participant with new possibilities and/or opportunities to explore new horizons of perception and understandings previously not experienced by them and therefore activating themselves into the community engagement processes and involvement as being of value and contributing to the greater community enabling each supported participant to gain new insights of themselves and thereby maintaining each their own individual recovery holistically for the long term. Reflecting on each their own individual lives and continuing in the sustainability of each their own individual recoveries with Hope.

Measuring progress due to the challenges overcome and the breaking down of barriers surrounding them in order for them to grow and maintain themselves in the community engagement process thereof.

Thereby obtaining full self-management rights within the community in - respect to their own lived mental health issues and/ or illnesses and maintaining such for the long term, becoming a fully self-sufficiently managed community member of each their own mental illnesses within the community for the long term.

To encourage each supported participant to engage in each their own independent living lifestyles whilst being mindful in understanding that Peer Support, as a whole, does not view vulnerability of these particularly bright individual's as a weakness but as strength.

Encouraging them to always reach out and connect to the community they are being supported by and not allowing these particularly bright individuals to then suffer due to their own inability to reach out to their Community Peer Supported Facilitation Officers and/ or fellow participants for support.

Whilst maintaining accountability in that by remaining non-judgemental of peer participants that all Peer Support Representatives and Facilitators do not cross boundaries and maintain such boundaries at all times by respecting the rights and wishes of such participants to do so as they deem fit to do whilst reflecting on such participants to continue in maintaining each their own wellness tools and toolkit toolboxes with wellbeing in mind whether or not they are being supported by their community organization and so will not interfere with the needs of such independently dynamic individuals as they are particularly bright, talented, gifted and highly intelligent individuals.

Therefore the challenges and barriers that they are continuously facing every day may be diminished by a connection to the community engagement processes and the support thereof in knowing these particularly bright individuals have a need for independence thereby such Peer Support Facilitation officers must remain ever mindful of such individuals wishes to live accordingly to how they feel fit and well to do so.

This therefore does not negatively impact upon their own ability to access services and/or the essentials of life being self-sufficiently managed community members to therefore continue in maintaining their independent life-styles whilst being guided to be supported by their Peer Supported Community Facilitators and community network of each their own fellow participants relative to the roles that they are engaged in.

This enables the self-sufficiently managed community member

to engage fully within their roles, engagements, commitments and obligations towards themselves and the community that they are engaged in.

Encouraging them to raise themselves into the role of a Peer Support Facilitation Officer to then be engaged within the community engagement processes and involvement thereby work as representatives, advocates, role models and ambassadors of what Peer Support represents raising the standard of the understandings, experiences and lifestyles of such individuals who are at most risk of harm (to themselves and others) due to their own misunderstandings of their inability to act for themselves within the community.

Raising conscious awareness of the need to support these and all individuals seeking Peer Support voluntarily to facilitate recovery holistically thereby satisfying our primary aim in respects to the objectives and aims outlined herein.

Secondary Aims

The secondary aim is that by role-modelling recovery holistically that we as role models, ambassadors, advocates and representatives of the Peer Support Community altruistically role-model recovery from each our own individual experience by encouraging a healthy mind and healthy body attitude.

Restoring value to mental health treatment plans of recovery by endorsing and encouraging positive mental health as “conversely, physical health is recognized as considerably influencing mental health and wellbeing” (Murthys et al., 2001) as ‘The World Health Organization Constitution’ states that health is defined as “not merely the absence of disease or infirmity”, but rather “a complete physical, mental and social wellbeing” (Murthys et al., 2001).

Therefore reflecting on each our own individual roles and pathways to recovery empowering those peer supported community participants with Hope.

Using gentle guidance in self-care techniques by not being judgemental of each particular participants, attitudes, beliefs, values, principles and lifestyles whilst bringing a light of Hope that as role-models, ambassadors, advocates and representatives of each our own lived mental health experiences in reflection of each our own individual recoveries and values based on each our own principles and attitudes whilst being mindful of each peer-supported participants, current state of mind, health, beliefs, attitudes and lifestyles is essential in communicating Hope and holding onto Hope expressed from an objective viewpoint to facilitate recovery and ongoing self-management in the community.

Encouraging those peer supported participants to do likewise and share their reflective stories and in doing so they are sharing their lives and knowledge of how, when, where and what may be useful for these particularly at risk individuals to continue to grow.

Thereby progress may be achieved by reflecting on each our own experiences to engage in self-care techniques, by being kind to ourselves and others, non-judgemental of ourselves and others and finally loving ourselves and others within the Peer Support Community and also the wider community alike.

Reflecting on each our own roles towards each individual peer supported participant and meeting them holistically where they are currently at in their lives satisfying our primary aim by role-modelling recovery holistically.

Satisfying our secondary aim by using gentle guidance and encouragement that is not based on any psychological models, guiding each peer supported participant to raise their standard of living, knowledge, learning and understanding by continuing to grow as one giving each peer supported participant new eyes and lives to live and see with.

Tertiary Aims

The tertiary aim is to reflect on our own connections to fellow peers, friends, family, professionals and other community members as being essential to recovery from mental illness. This connectivity reflection is essential to empower Hope in each peer supported participants need to feel connected and thereby contributing to the greater good and greater whole.

Remaining connected and in touch with the value of recovery in mind satisfies our primary aim by role-modelling recovery being strength based and holistic support relative to each participant and each their own individual journeys and the stories they have to tell.

Satisfying our secondary aim to meet each participant holistically where they are currently at in their lives to gauge a direction of each participants steering and needs at the moment regardless of what current circumstances surround such individuals breaking down barriers and providing opportunities and possibilities for further improvement and progress.

We satisfy our tertiary aim by reducing the negative impact of isolation thereby raising the awareness of each individual and their community involvement whilst remaining connected to family, friends, fellow peers and professionals.

THE OUTCOMES OF THE AUSTRALIAN PEER SUPPORT COMMUNITY

Primary Outcomes

And so forth as such the primary outcome of the Australian Peer Support Mandate is to raise the standard of living and life experience of those we support. To then recognize alcohol, tobacco and other substance abuse as being a health issue mainly whilst respecting its' social and criminal implications by holistically reflecting the need for a healthy mind, healthy body attitude in order to not just increase the experience of life but also the duration of life of the community we support.

In great respect for the need to lower mortality rates of those experiencing a lived mental health issue and/or illness and raise the standard of awareness within the greater community and the issue of the need to rally around mental health as being related to a culture of alcohol, tobacco and other substance abuse.

In that the nature of such a culture is an impact on relapse due to its' uncontrollable nature and effects thereof thereby raising such a disenfranchised people on the road to recovery as being health motivated and that recovery unitedly as a community is possible.

That Peer Support and relative Mental Health Communities altruistically recognize the cultural diversity of this land and so forth the original indigenous land owners as having a voice and perspective as being essential in regards to the need to lower mortality rates within their own communities in relation to alcohol, tobacco and other substance abuse. So as to grow and partner unitedly with the Peer Support Community as Partners in Recovery. And so forth raising life experience and duration of such communities unitedly that we may holistically reflect on our own recovery and the recovery of the Indigenous Community as a whole guiding gently such First Nationals onwards towards the road to recovery.

To engage with all Indigenous Aboriginal First National Australians experiencing and/or suffering from a lived mental health issue and/or illness to actively participate in Peer Support in that these particular minority groups may then be supported through each their own individual journeys of recovery and the stories they have to tell.

Thereby engaging the diverse nature of this land to actively

reflect on such roles of a culture of addiction as being no longer a social issue and then addressing such a culture of addiction as becoming a health issue which affects all peoples in the community covering all demographics across a broad spectrum whereby we recognize the need to support such a community.

Whether they are substance, alcohol or tobacco users themselves or are negatively impacted by others and their relative use of such addictive substances. And thereby educate the public sector in regards to a healthy habitual culture with healthy lifestyles raising the standard of life and duration of life in regards to those experiencing a lived mental health issue and also the wider community alike.

Breaking down the level of challenges and barriers surrounding each particular participant reducing impact due to the isolation of loneliness in relation to alcohol, tobacco and other substance abuse by meeting each participant where they are currently at in each their own individual lives.

Furthermore there is a great need to address the gambling issue affecting those sufferers of a lived mental health issue and/or mental illness. In recognizing also that due to a proportionate population of Australians and First Nationals embracing a culture of addiction, whether it is Alcohol, Tobacco and/or other substance abuse that such a culture of addiction is part and parcel to blame for creating a culture of gambling addicts and destabilising the socio-economic stability of the nation due to the hopeless nature of such a culture and the risk of impoverishment, death, suicide or homelessness.

In knowing that by creating such a culture of gambling addicts by legislating for the implementation of gambling casinos and the availability of gambling venues through-out the land created such a culture and therefore we must address the issues that have arisen by providing suitable outcomes relative to the needs to address such a proportionate rise in gambling and the nature of such a culture of addiction that has grown from such negligent legislation undermining the peoples and communities of Australia and therefore create suitable pathways in order to recover from gambling and the nature of a culture of addiction affecting this nation.

Especially by empowering those whom suffer at times or daily with a lived mental health issue and/or mental illness due to such a disenfranchised people being bombarded with messages and information relating to each their own individual needs in maintaining socio-economic stability and status as being part of their ongoing treatment.

Of which such messages are ever present in society and such a disenfranchised peoples as the Mental Health Community find little to no peace nor Hope in regards to raising themselves from poverty and maintaining their topsy turvy lifestyles and therefore turn to such means to raise themselves from poverty and liberate themselves which of course is futile and thereby exacerbates the deterioration and spiralling of such a people into hopeless acts not beneficial to each their own mental health.

Therefore there is a great need to link the Mental Health System with the Gambling Counselling Hotlines Services and Relationships Australia in partnership to reduce the need for such a people and all Australians to turn to gambling as a means of providing for themselves and raising themselves out of poverty which can only be achieved by slowly working on resolving everyday issues with hope and resilience gradually raising themselves from such circumstances over time by remaining stable in each their own individual affairs socially and/or economically.

To offer Peer Support as a means to combat such issues in the community gathered around a culture of addiction and slowly generating the ongoing recovery and stability of the peoples and communities of this nation as remaining centred and focused on

sustaining wellbeing inclusive of the socio-economic issues that are ever present in the Mental Health Community and society alike.

To also provide a means of open dialogue in the media on television or on the radio, social media and/or internet in regards to discussing the need to maintain healthy socio-economic values of resplendent nature thereby gently guiding all Australians to maintaining socio-economic stability and the ongoing progress towards remaining mindful of each our own individual monies and/or pays regardless of the circumstances involving our lives.

Giving Hope to the peoples and communities of this nation inclusive of the Mental Health Community in regards to how we view a culture of addiction and discussing openly the needs to shift away from such a culture and move towards wellness and wellbeing empowered by Hope and resilience to therefore ensure that we may sustain each our own individual lives for the long term without having to resort to such a culture of addiction and therefore provide suitable management and outcomes for the peoples and communities of this nation.

In knowing that such a culture of addiction is responsible for the spiral of society into hopelessness and suicide, poverty, homelessness and the ill management of our monies and mental health issues.

Therefore encouraging a connection to Counselling Services, Mental Health Professionals and Peer Support Organizations to then open up and share lived experiences of a culture of addiction and the management of our affairs with Hope and growth, thereby breaking down barriers such as poverty and socio-economic destabilisation of the peoples and communities of Australia.

In knowing also of the damaging effects such a culture of addiction has on the Indigenous First Nationals and Multi-cultural communities of this nation and the needs to address such a culture from a community perspective by always reflecting on the need to reduce such systemic issues and increase prosperity, stability and wellness through-out the land.

And also in that all Indigenous First Nationals of this land live by the “Two Law” system, ‘Aboriginal Lore and European Law’ (Lane, Ayre, Phillips & William, 2014). and due to this and in great respect for thus, endorse the rights of all Aboriginals to be ensured as having an active and essential voice for change and recovery thereby educating their communities holistically in regards to mental health.

To then guide the Mental Health System and educate such Mental Health Communities, such as Peer Support and Mental Health Professionals alike in regards to the “Two Law System” governing the original land owners of this land, due to the history of oppression of these particular people.

For Mental Health Professionals and Peer Support workers to be informed and armed with the knowledge of such a “Two Law System” and then manage Aboriginal Communities based around well-being and remaining well altruistically.

To then bear a light of Hope upon their individual communities to engage in active involvement in recovery and teach their communities to rally around those particular individuals living with a mental health issue and/or illness and to support them holistically.

In understanding that as role models Peer Support and relative community organizations at all times uphold all dealings with all Aboriginal Communities to always remain mindful of their history before and after colonization. To not discriminate, further oppress nor negatively impact upon such indigenous communities to suit political agendas and personal attainment, to gather around Aboriginal Lore and educate the wider community and Mental Health Communities alike inclusive of Peer Support.

To remain Partners in Recovery holistically guiding all Indigenous Australians through-out this wonderful land onwards

ever onwards towards a healthier mind, body and spirit whilst being mindful ourselves of their traditions, rituals and beliefs as they are the ancestral traditional owners of this land and as such are due the respect and dignity comforted for such a people whom their land was stolen and encouraged the implementation of legislation.

Such legislation around education and discourse of better managing their communities, of which we have failed them so far.

Also there is a great need to gauge a multi-cultural perspective of the viewpoints of a vast knowledge of multi-cultural communities in regards to how they view mental illness and mental health issues.

In that by gauging such a perspective Peer Support may better assist and treat those individuals within these particular communities in regards to addressing their mental health issues and/or illnesses.

In that as a community, peoples and nation we are repairing the minds, bodies and hearts of such individuals, and as one we are repairing communities on the road to recovery and inclusiveness of all peoples.

By bridging the great divide between cultures we may then bridge the gap between all individuals whilst remaining mindful of each individual and their racial, cultural and denominational origins and provide holistic support and treatment thereof.

And as we are custodians of this great land, we are custodians of the hearts, minds and bodies of the peoples of this land and the nations that gather here. To repair the damage to all communities in regards to their mental health issues and thereby we are repairing the division between communities by coming together as a united community under the banner of hope in the recovery of each their own individual mental health issues.

And so therefore are remaining as Partners in Recovery guiding all peoples on the road to recovery whilst repairing communities so as the division between peoples may be reduced.

Opening the heart of the land and the peoples of it to remain ever mindful of the mental health of each community and therefore would like to encourage a broader sharing of open dialogue, open forums, open meetings and open conferences to discuss the mental health of the diverse multi-cultural perspectives of this land.

To then address issues such as reducing the negative impact of a diagnosis of a mental illness and therefore educating all communities around shame and stigmatism often experienced by those who suffer with a lived mental health issue and/or illness every day.

To give Hope to all communities that we may remain united in our efforts to better treat mental illness and provide better options for those who do suffer and/or experience mental illness at one point in time in their lives.

That we may grow together as one greater community guided as a diverse people, nature and land as a whole. And by connecting communities we are connecting families and lives by a common core thread which is the well-being of the nation, in that by gaining a multicultural perspective on mental health issues we may ascertain insight into the homelessness problem affecting such communities inclusive of the Peer Support Community and the Mental Health Community alike.

Whereby we may address homelessness by a paradigm shift of more means less services to provide suitable housing requirements not based upon the Gross Domestic Product of the company nor organization to keep such services honest with integrity and reputability in highest regards in dire need to keep such a disadvantaged, disenfranchised community onwards towards the path of recovery.

In that they, said companies, do not undermine the Mental Health Community by simply providing housing which is non-conductive

to recovery and thereby negatively impacting upon their tenants by placing them in dangerous, unsafe environs to make a large profit from such a community.

In that the well-being and safety of all tenants is kept in highest esteem and therefore remaining ever-mindful of their tenants needs and facilitating change to recover fully from a lived mental health issue and/or illness.

And so as such would like to encourage all housing companies to take into full account the 'Wellness Code' and to then implement thus through-out their individual organizations as a code of conduct ethically, to at all times treat those individuals with a lived mental health issue and/or illness with the dignity they deserve.

Thereby we as a nation may gather together to address such a homelessness issue and the mental health of such a disproportionate community in that we all may contribute to the overall well-being of the nation as one.

Providing better services not based solely upon profit nor undermining the well-being of the most disenfranchised people and the community they represent.

To also provide a one-stop information service and drop in centres for the homelessness issues affecting our nation particularly in regards to the Mental Health System and also on a wider broader spectrum to effect change in the most positive of manner, addressing homelessness as a social and health issue to then support such a community holistically on the road to recovery from a lived mental health issue and/or illness or otherwise drug addiction, alcoholism, gambling problems, Family issues and/or breakdown, isolation, social injustice and/or criminal justice orders.

To keep the well-being of the nation in highest regards and esteem to always address such issues altruistically whilst guiding the general population to remain ever mindful of the homelessness problem and their needs to be housed accordingly.

Giving such a community a voice active for change in these ever turbulent times and thereby ascertaining a perspective of such a community. In that unitedly as a nation we may all travel the path of wellness and well-being as a code and lifestyle becoming Partners in Recovery as active voices for change.

To also repair the minds, hearts and bodies of the youth and provide better opportunities for the recovery and ongoing success as successful emerging adults. In that the young are the future leaders of this nation and to neglect their mental health issues is too undermine ourselves and the future of this nation.

To provide a one-stop information and drop-in centres as common grounds for the youth to meet and share their lives and eyes of recovery in regards to a holistic sharing of health related issues. Such as providing available funding for said drop-in centres at skate parks and common ground areas to address youth unemployment by providing opportunities for further education, self-help groups and creative workshops gathered around keeping the youth safe, sound of mind, healthy and active.

Providing safe space centres gathered around easing homelessness in the youth, abuse, rape and/or mental health or otherwise health issues. To guide the young holistically on the road to healthier minds, bodies and hearts whilst remaining mindful of each their own individual journeys and requirement needs.

By remaining non-judgemental yet gently guiding such fragile minds on the path to a recovery based community gathered around wellness and wellbeing for the long-term and endorsing the use of Peer Support as a valuable tool for the young minds of the land. For as the youth are our future Teachers, Leaders and Specialists and by keeping them safe is of much importance to us as a community and a nation, to always guide the youth to a better, brighter tomorrow.

Whilst remaining mindful that the youth of this nation are emerging as young adults and due to this have complex needs and requirements due to their ever evolving minds growing and expressing themselves as emerging adults.

In that we as a nation keep their best interests in mind by remaining Partners in Recovery gently guiding the youth towards a happier, healthier and more mindful future of sustainability in regards to their wellness and wellbeing as being essential and crucial in these ever changing times.

And that we at all times will not undermine ourselves nor the community that we represent as the youth having an essential and crucial perspective.

Also there is a need to provide a resplendence to the Family Unit by placing a value on relationships holistically shining a spotlight on valuable partnerships by partnering relationships gathered around an equality of wellbeing and wellness not just the increasing of socio-economic stability nor the acquisition of wealth, money, power, nor prestige.

But also the inclusion of the prosperous nature of relationships of value inclusive within the Family Dynamic of which is lacking due to the images and messages projected into peoples' lives gathered around the acquisition of beauty, money and prestige regardless of the wellbeing of valuable relationships of which is lacking in society today.

For partnered relationships to seek valuable meaning in each their own individual and/or collectives relationships and lifestyles gathered around sustaining such relationships for the long term which is more than possible and achievable for the duration of ones' lifetime.

For partners, spouses and marriages to reflect on the healthy maintenance of their relationships of value to each other by providing holistic resplendence to such whether it is on the television or in the media, the radio, on social media platforms and/or the internet.

Giving value to 'Relationships Australia' and other counselling services by providing such a backdrop of information gathered from such mediums, on television and/or otherwise other media platforms, for Families to embrace a more valuable and meaningful connection towards one another and partner towards maintaining healthy Families and relationships regardless of the circumstances of such partnerships though maintaining that not all things are possible and sometimes for the value of the Family Unit and/or the partnership to flourish such a separation may be necessary.

To also provide such a medium, such as television and/or otherwise other media platforms to discuss the need of Fathers to role model to sons and daughters what it looks like to be a healthy minded, healthy bodied and healthy spirited Father and support ones children in regards to maintaining also each their own healthy lifestyles and relationships with value being placed upon each fathers role to role model to their children.

And not to project a parented insecurity onto or towards such children simply because of the mistakes we make as adults and thereby Peer Support would like to endorse and embrace 'Healthy Relationships Australia' initiatives to maintain healthy Families and healthy partnerships gathered around the acquisition of the 'Prosperity of wellness and wellbeing' not just socio-economic wellbeing but the overall wellbeing of health, mind, body, spirit and relationships entwined as one.

To also encourage all Mothers to reflect upon such relationships with sons and daughters by teaching and educating such young minds around skills and tools such as self-validation techniques, by utilising self-love, self-care and self-reflection techniques and also what it looks like to be and engage in a healthy relationship.

As 'The World Health Report 2001' outlines that it "is the crucial importance of relationships with parents or other caregivers during childhood" (Murthys et al., 2001) and as such there is a great need for parents to take an active role in the primary care of their children inclusive of giving the emotional support of these such fragile lives is of much importance to the Peer Support Community.

Thereby reducing the factors relating to self-harm and/or the feelings of inadequacies or self-image problems by gently guiding such young lives around the acceptance of their bodies and minds as a part of whom they are individually and embracing such an individualistic viewpoint as being a complete and whole person regardless of each their own individual idols and those whom they look up to as having everything.

In knowing that such peoples live up to such extreme expectations placed upon themselves and to place such an extreme amount of expectation upon our children is to undermine them in that the societal pressures of this day are projecting ever-more so many images and sounds into such young lives and the expectations of living up to their idols and dreams, whilst maintaining their topsy-turvy lifestyles, is partly responsible for the spiralling of the youth into image problems, self-harm and the projected insecurities of their own shadows seeking to be something or some-one they are not and can never ever achieve.

Yet to remain mindful that to dream is to dream of Hope and remain Hopeful at all times and as such endorsing the 'Dreaming of Hope' to be the best they can be given the tools they have acquired and to continue in each their own lives regardless of the circumstances surrounding such young eyes and lives to dream and obtain new eyes and lives to live and see with.

Therefore Peer Support would like to encourage legislation to be implemented to provide media, television, radio and/or social media platforms to discuss the needs of the youth and reflect upon the lives of 'Champion Peer Parenting' programs to initiate change in the Family Dynamic and Unit to express towards all Australians what a healthy family unit looks like and the means and/or ability to achieve thus realistically.

To place a value unto the roles of the media (Murthys et al., 2001) in educating the public sector in ways, means and systems of engagements to therefore address mental health and promote mental health through-out the Australian population (Murthys et al., 2001) and raising awareness for those who may experience mental health issues and/or mental illness daily or otherwise at some point in time in their life²¹.

To give resplendence to fulfilling relationships of value to one another with mindfulness towards one another and their own individual needs.

Including wellbeing, mindfulness and wellness into such programs whilst not holistically focusing on the acquisition of wealth, money, power nor prestige whilst remaining mindful that 'Socio economic wellbeing' is part and parcel of recovery and as such would like to endorse such a sharing throughout the population and encourage a restoration to the 'Family Unit' and a restoration to 'Family Values' of resplendent nature to raising a nation onwards ever onwards towards wellbeing and remaining well in each our own lives and Family Values holistically partnering towards a more mindful and well nation, Family and peoples.

To place a value on such intimate sexual relationships and Family relationships of value to all Australians and remain centred in maintaining such for the long term.

To also combat Family and domestic violence by addressing 'Family Values' such as physical abuse, jealousy, stalking behaviour, limiting connections to others, inadequacies felt between partners and/or the projecting of judgemental values onto partners

by the teaching of 'Mutual Family Values' and 'Mutually Respectful Relationships' initiatives.

To guide young couples or partnered husbands and wives in regards to maintaining and sustaining such mutually fulfilling relationships with hope that by breaking down the barriers between the sexes and educating young men and women in partnerships with one another, the correct types of behaviour and mutually respectful boundaries that are needed for healthy relationships to flourish, and thereby be nourished on such mediums as heretofore mentioned via television, radio, social media and/or the internet.

To rebuild relationships as partnering with mindfulness towards one another and their needs as social creatures to maintain outside connections, wear clothes that are as each individual does so desire and have each ones' own personal space and bodies to be held in highest regard and esteem to not have any damage inflicted upon one another as being mutually respectful of ones' body.

To not infringe upon the home of separated spouses premises after termination of the partnership, relationship or marriage, if spouses or partners so desire, whilst remaining focused upon healing the damage of severed relationships by offering Peer Support as a means to thereby facilitate the recovery of such broken hearted men or women.

Given the turbulent nature of these times there is a great need to harness resources such as Peer Support, the Mental Health Community and the Criminal Justice Community to offer mediation at most times where applicable and if not to provide a resolution for the disputing party involved to receive, obtain and/or gain closure in that they may be able to undertake their affairs without harassment, duress nor the threats of violence upon their person.

To give such disputants a means of healing the damaging effects of Family or domestic violence by restoring them to the community engagement processes thereof and be of value to the community with wellness tools in hand to manage their lives onwards ever onwards to healing and the road to recovery from abusive relationships whilst treating the perpetrators also by providing counselling and if so necessary 'Mental Health Intervention Programs' and/or placing 'Criminal Charges' to facilitate the recovery of the instigator neither isolating either.

To educate all communities that Family or domestic violence is not acceptable and liable to punishment from Criminal Justice Services and/or the hospitalisation within a Mental Health Facility if so required.

To also give a voice to such separated Families inclusive of un-partnered single Parents to then be supported through-out their darkest hours of need in they may also be dealing with separation and Family issues related to either isolation, drug and alcohol addiction, grief, loss of employment, poverty and/or the separation from their children.

Of which they may also be in the care of a challenged child whom needs the specialized care of their parent and/or partnered parenting agreements with child services or distant separation from Husband or Wife. To give value to such individuals and Families that they may not be isolated and feel disempowered to be able to hold onto Hope, and at all times utilise personal empowerment, gentle reflection, self-care, self-empowerment, self-love, personal responsibility and/or the responsibility to care for their children or child in their care via Peer Support models of holistic support and Models thereof to gain and/or obtain resilient natures of Hope.

To also empower the young Families of this nation that they also may not be isolated by Poverty nor not knowing what to do or how to access services as they also may feel disempowered by these trialling, testing times and unable to cope under the brunt of such hopelessness. To hand such young Families Hope that their lives

may be maintained and supported with the empowerment of Hope and such Peer Supportive Models of recovery and support as they may also experience mental health issues and/or are in the care of a child that does.

Knowing the link between child care and the onset of mental health issues due to the ill-treatment of such children and as such encourage policy to reflect the appropriate means of caring for children within such challenged and impoverished or separated sole parent Families and/or the Families of the youth (Murthys et al., 2001).

Thereby not isolating any one member of the community and providing services and funding to such services to address such isolation issues in our society and endorse such initiatives to take hold of this wonderful land and bring about an empowerment of the nation as a whole.

Therefore we will act unitedly to educate the public sector of the Peer Support Communities, the Mental Health Communities and the wider community alike surrounding the need to embrace a holistic view of recovery gathered around intimate sexual and physical relationships as being essential and crucial in recovery.

In that the nature of mental illness and the issues arising from such a diagnosis is relative to isolation and loneliness whilst being treated for a lived mental illness in that the stigmatism and shame surrounding mental illness is part and parcel of such an isolation barrier. In partnering with all levels of Mental Health Communities and Peer Support Communities alike we unitedly reflect on each our own needs as social creatures to then reflect holistically on each our own roles of intimate sexual and physical relationships of a healthy nature and understanding thereof.

In that the process of breaking the silence of isolation is not just connectivity but also the empowering and encouraging of such intimate relationships with Hope, to then share stories of a mutual nature in a safe environment and safe space reflecting on our own intimate relationships and roles with consumers and consumers reflectively sharing their experiences with their spouses, partners, lovers, wives or husbands.

Managing the discourse, forums and meetings in regards to the direction of guiding the life experience and duration of such mutually fulfilling relationships of these particular individuals in great respect towards the need to support such a disenfranchised people to then open the door of the heart with the keys of reflection, empowerment and Hope.

In that the barriers surrounding isolation may be minimalized and Hope may then shine a light on such individuals to then take up their active involvement in seeking safe, stable and healthy sexually intimate relationships.

So as such that isolation may be reduced and the breaking down of barriers may be overcome to thereby give each peer supported participant a voice active for change respecting the need for progress as a recovery based community and thereby partnering as an active voice for change in recovery.

Gauging the direction of each individual participant and each their own personal journey's due to the skills, achievements, abilities, gifts and talents they model in regards to their own interaction with their Peer Support Facilitating Officers to then support such individuals accordingly to each their own needs and desire to do so. To also break the silence of such isolation in that the stigmatism experienced in mental health may be reduced.

Also in regards to healthy intimate and sexual relationships there is a need to rally around the Gay, Lesbian, Transgender, Transsexual, Intersexual and Transvestite communities in regards to each their own overall physical, mental and emotional wellbeing as being

essential in keeping same sex partnerships healthy and well for the long-term. As wellbeing is the primary interest of the nation and as such, said communities are at risk of harm due to discrimination stemming from choosing same sex partnerships and at times may experience trauma and may receive treatment for a lived mental health issue and/or illness.

And so in regards to thus keeping such individuals mindful of safe same sex practices and by remaining safe, sound and well is of utmost concern to the Peer Support Community in that as we are repairing communities we are also repairing the hearts, minds, bodies and relationships of all communities inclusive of the Gay, Lesbian, Transgender, Transsexual, Intersexual and Transvestite communities alike.

In that by reflecting on healthy relationships with such individuals we may empower such a community with Hope that maintaining safe, happy and sustainable same sex partnerships is possible and more than achievable for the long-term.

In that sustaining such relationships with Hope that life experience and life duration may increase and expand by maintaining these such communities with health in highest and utmost concern with interest invested into a healthier community and breaking down the barriers of discrimination, stigmatism and the negative impact of a diagnosis of a lived mental health issue and/or illness with Hope.

That we may educate all communities in regards to the need for such individuals to engage in safe same sex practices as no longer remaining taboo and is then being understood with the keys of the heart in understanding their complex lifestyles, non-judgemental of their same sex practices and compassionately engaged with such a community on all levels, encouraging safe practices of same sex partnerships with hope.

To give the Gay, Lesbian, Transgender, Transsexual, Intersexual and Transvestite communities an active voice for change and crucial perspective in this ever-turbulent world and thereby rallying around such a community we may bear a light of Hope that same sex partnerships may endure whilst remaining mindful of their topsy turvy lives and their need to remain supported with the respect they deserve.

By providing open dialogue in regards to maintaining such safe same sex partnerships with hope by discussing the need to support such a community gathered around wellness and well-being as the primary interest of such individuals. In that holistically the wellbeing of the community is of greatest concern to us and as we are Partners in Recovery as a community and a nation we are partnering towards a healthier community onwards towards a healthier more mindful nation.

The Secondary Outcomes

The secondary outcome of the Australian Peer Support Mandate is to provide a collaborative leadership council of Consumer leaders, Mental Health Community leaders and Peer Support leaders to meet on a regular basis with a network of participants to gauge the direction of Peer Support and the Mental Health System alike.

By initiating a universal sharing of essential feedback forums, surveys, statistics and relative information then enabling collaborative leaders to explore emerging themes and trends to then shape the Mental Health System and Peer Support delivery processes alike.

Including consumer leaders as being essential in providing an active voice for change in a changing community of Peer Support workers and Mental Health Community workers alike, thereby inclusively remaining Partners in Recovery to then unitedly provide a one-stop information exchange service online and/or on paper for consumer engagement processes to be simplified giving consumers

the opportunity to access such services and have an active voice and voice their say.

Thereby holistically managing a disenfranchised community to be as advocates, role models, representatives and ambassadors of the Peer Support and Mental Health Communities alike, providing the best possible outcomes and possibilities to be achieved, whilst being mindful of transparency of all parties involved for consumers to then make informed, consented decisions in relation to each their own individual treatment and/or possible outcomes.

By also pioneering alternative treatment options as opposed to western medicine as incorporating eastern treatments in to the life plan of such individuals such as Mindfulness Yoga, Yoga, Faldenkrais, Meditation Exercises and Relaxation Exercises.

To then maintain the Peer Support Community at all levels of engagement within the Peer Support Community, families, Carers and the Mental Health Community alike and to remain transparent that our aims are reflective of each individual participant and each their own individual needs.

Furthermore by endorsing a conceptual architectural artwork and masterpiece of Hope to thereby paint and inscribe murals throughout all Mental Health Facilities whether it is within the private sector or public sectors alike.

Portraying a realistic view of recovery by unitedly painting and inscribing such murals in representation of Peer Support and the communities thereof as a reflection of an overall view of recovery within the community of each their own lived mental health issue and/or illness with Hope.

To also encourage the sharing of hopeful interactions by endorsing Hope within such particularly institutionalized institutions therefore providing the backdrop for hopeful engagements whilst an inpatient by sharing the writings and stories of Hope and facilitating such through creative writing groups within all facilities and also scrawling's of Hope shared amongst inpatients whilst in admission to thereby empower such particularly disenfranchised individuals to actively engage in recovery story-telling in a reflection of each their own personal experiences with Hope.

To comply with aforementioned strategies and implement such strategies throughout all Mental Health Facilities therefore providing the backdrop for the 'Sharing of Hopeful Engagements' and the raising of Hopeful interactions with other patients and/or Professionals.

To bring Hope to such communities where Hope seems to be absent thereby encouraging voluntary activation into a recovery based community such as Peer Support and/or other support connections such as family, work obligations, community involvement or friends.

Supporting such a community holistically knowing and recognizing the needs to do so whilst in first point of admission and diagnosis of a mental illness to then reduce the negative impact, stigmatism and shame of such a diagnosis and admission into a Mental Health Facility therefore giving insights to each particular individual and each their own individual needs and requirements to remain supported through connectivity to recover fully.

To maintain Hope whilst an inpatient in admission into a Mental Health Facility by providing suitable green strips and nature settings for inpatients to utilize in order to feel peace and happiness by the surrounding environment by giving Hope in such times of great need to then have places designed specifically and placed well within the grounds of the facility layout to bear a light of Hope and raise the standard of awareness of such individuals to having, holding and keeping Hope whilst within admission.

To reflect on their own recovery altruistically with the empowering of Hope thereby satisfying our primary objective

and primary aim which is personal reflection spaces and sharing moments empowering those particular individuals with Hope that full recovery is possible and self-sustainable, self-managing roles of each their own lived mental health issues and/or illnesses is more than achievable.

Whilst growing unitedly in understanding that as a greater community we are educating ourselves as partners in recovery. In maintaining Hope at all levels of Mental Health and Peer Support Communities alike whereby endorsing such hope altruistically throughout such a disenfranchised community.

To then bear a light of Hope at all times empowering such individuals on the road to recovery whilst remaining mindful of each their own particular needs and requirements at the time.

And so as such endorse advocating as partnering with all levels of the Mental Health Community engagement processes and involvement within the Mental Health Sector as being role models, advocates, ambassadors and representatives. With respect being given to consumers and the Mental Health Community alike in that we unitedly are partnering towards a healthier, wiser and more productive community and that stigmatism is being reduced and the negative impact of a diagnosis of a mental illness is minimized.

Tertiary Outcomes

Finally the tertiary outcome of the Australian Peer Support Mandate is to provide feedback and statistics to the Mental Health Community and respective State and Territorial Mental Health Commissions and also the National Mental Health Commission, so as to provide better treatment outcomes of those who experience a lived mental health illness and thereby improving service delivery of such services all included.

In that we at all times remain transparent in our aims, objectives, outcomes and resolutions to then ethically provide a united front thereby actively engaging the community as role models, advocates, ambassadors and representatives of the Mental Health Community and the Peer Support Community alike.

And thereby not undermine the Peer Support Community as aligning with such behaviour as being reprimanding in any sense and if so will be resolved by the resolution dispute code of conduct.

We thereby satisfy our objectives and aims holistically by role-modelling recovery using reflective guidance techniques with active listening to raise the awareness of those peer supported participants to actively engage in recovery as being a reflection of a healthy mind and healthy body attitude. Partnering in recovery therefore reducing the impact of a culture of addiction and its' social and criminal implications.

To break the silence of isolation of such a culture thereby reducing stigmatism, raising life experience and life duration of such particularly at risk individuals by supporting such individuals on the road to recovery whilst remaining ever mindful of each their own particular needs and requirements to do so by minimizing the negative impact of a diagnosis of a lived mental health issue and/or illness.

By also reducing the impact of homelessness, youth unemployment and raising the nation onwards to becoming a world leader in mindfulness and well-being by always remaining mindful of the wellness code and not undermining such a disadvantaged, disenfranchised community nor peoples.

To keep in upmost highest regards the needs to support such individuals holistically and remaining transparent, reputable with integrity and at all times aware of the needs of these particularly bright individuals to recover fully and act for themselves in the community, without stigmatism nor shame.

Providing open forums, dialogue, meetings and conferences to discuss how we may assist those most challenged individuals to meet their needs and requirements and support them better by providing the services they need and keeping them safe, sound and healthy thereby rebuilding communities and uniting peoples as one.

And finally being as advocates, role models, representatives and ambassadors of the Peer Support and Mental Health Communities alike to provide better opportunities and possibilities, such as education options and services, to then give each consumer a voice active for change and have a say.

In that unitedly all peoples may be educated by breaking down barriers within the broader spectrum of the community therefore holistically remaining ambassadors, representatives, role models and advocates in recovery.

By partnering with the Mental Health Community, Criminal Justice Services Community, Homeless Services and participants alike whilst minimalizing the negative impact of a diagnosis of a mental illness, admission and stigmatism thereof by providing suitable outcomes and treatment options relative to each individual and each their own particular needs and requirements and thereby aiding in the reduction of social discrimination, barriers and challenges that face such individuals daily.

THE RESOLUTIONS OF THE AUSTRALIAN PEER SUPPORT COMMUNITY

Primary Resolutions

Therefore the primary resolution of the Australian Peer Support Mandate and the community it represents is to equate Peers Support Models of recovery across a broader spectrum of sharing the eyes and lives of recovery in regards to transposing such models towards creative and educational institutions by empowering all educational institutions with hope, legislating via value based guidelines and policies in changing the way such institutions work.

Gathering around those individuals who experience lived mental health issues and /or illnesses and also all individuals within educational institutions with Hope in that such and said institutions may shift towards a holistic view of preparing such individuals in regards to maintaining wellness as fully recovered individuals.

Tailoring and managing learning programs gathered around educating such individuals in regards to maintaining healthy relationships, reducing and minimalizing systemic issues such as drug and alcohol abuse, healing the negative lifetime trauma of sexual abuse, molestation and rape, standing up and speaking out against bullying, stand over tactics and/or mocking behaviour, aiding in the recovery of an individual whom may suffer from great amounts of stress and/or mental illness daily and finally managing the lives of those particularly disadvantaged individuals dealing with poverty and/or homelessness.

Which is value based, guiding such young minds to entering the workforce and/or community as well balanced individuals by not solely educating children in a bias industrialized way to simply become competent working adults, but by utilizing Peer Support Models of recovery and education thereby breaking the cycle of mental illness and the negative impact of stress thereof in the youth.

Eliminating stressful issues related to such behavioural traits of a lived experience of the youthful emerging minds of the land thereby increasing life's resilience and the ability to embrace challenges by bouncing back after stressful experiences with greater ease by the empowerment of obtaining, holding onto and the receiving of Hope.

This empowerment of Hope is essential in obtaining resilient natures, as by being the holding onto and receiving of Hope, by

empowering those experiencing such stress related issues to thereby bounce back with greater ease and overcome life's challenges with less negative impact upon their already fragile minds, lives and nature thereof.

Finally increase life's experiences and duration of life, preparing such individuals around entering the community and/or workforce with wellness tools, toolkits, toolbox and skills in hand and of value to such emerging minds by educating such individuals utilizing Peer Support Models of recovery within all institutions.

By building sustainable creative and educational environments conducive in teaching such emerging young children gathered around strength not weakness, skills, positive traits, abilities, gifts and talents they exhibit in interaction with family, fellow peers, teachers, educators and mentors by nurturing such qualities and providing them with the skills to be the best they can be.

Matching each particular individual to each their own individual learning styles, techniques and learning curves relative to their interaction with others by investing into and providing a new job title and multi-tooled position such as a 'Wellness Recovery Facilitating Officer/s' to engage with such young minds and determine learning styles and learning programs individually tailoring such plans inclusive of providing wellness tools and action plans in reducing the severity, duration and intensity of such stress related issues.

Complying with aforementioned strategies in regards to creating 'Mental Health Resources' in compliance with 'World Health Organization Standards' (Murthys et al., 2001).

To give such facilitating officers valuable tools in recognizing issues early and picking the right moment in implementing early intervention programs to facilitate recovery, gently guiding individuals and managing tailored learning programs with more ease by utilizing the tools of Peer Support such as active listening, remembering, letting them guide, giving permission, personal ownership, story-telling, reflection and the teaching of having and holding onto Hope.

Eventually eliminating such stressful experiences in the youth thereby increasing the ability for such individuals to always bounce back by better managing their life's experiences in obtaining resilience and nurturing positive traits and skills that each individual exhibits.

Whilst remaining mindful of each their own individual journeys and weaknesses by not denying room for change to grow and expand by overcoming such challenges and barriers that face them daily and embracing opportunities when they arise with confidence, skills and tools in hand combined with intellect.

By endorsing and encouraging the further education of teachers and fellow educators in Peer Support Models of recovery based education and therefore applying such teaching techniques towards their classes and educating the young emerging minds of the nation with a positive value to mental health, relationships, social engagements and connections in mind.

Giving teachers and educators valuable tools to manage such young minds as being and remaining strength based, treating each particular student as an individual and able enough to enter into the community as well rounded individuals with wellness tools in hand, to always remain hopeful and resilient when times get tough.

To also educate those particular individuals with a lived experience of mental illness utilizing such Peer Support models inclusive of each their own individual needs and requirements, providing beautified natural environmental settings specifically designed to stimulate the visual perceptions of such individuals to give them Hope when times are getting tough and restoring faith in themselves when things are breaking down.

To encourage and stimulate a greater sharing of Hope, in house within all educational institutions, thereby opening safe and honest dialogue within the communal lives of such individuals reducing shame, fear, anxiety and stigmatism experienced by those with a mental illness.

To design and build such environments by encouraging and engaging in a connection to each other and the various communities each individual and family represents.

Building and valuing positive connections to teachers, fellow peers, friendships fostered and the community at a young age and to also encourage a sharing of their eyes of a lived experience with mental illness and creating suitable environments conducive to engaging, sharing, opening up and/or connecting.

In that such places should be placed well within the grounds of the schools and/or institutions with knowledge of past and present gathering areas peers are attracted to and beautifying such areas to bear a light of Hope, beauty and comfort to such young minds.

Creating such special spaces for peers to fully utilize and connect with, sharing their young lives of many experiences and reducing stigmatism within schools thereby allowing such emerging youthful minds of our children and youngsters to open up and share their lived experiences thereby reinforcing that social environments are conducive to recovery based sharing and interactions of Hope (Murthys et al., 2001).

In knowing that societal pressures are impacting negatively upon such fragile minds and that by keeping them safe and in highest regard for each their own individual journeys' of recovery and wellbeing is of utmost concern to the Peer Support Community and the Mental Health Communities alike and that by creating suitable value based policies and legislation guiding such individuals gently to recovering well and emerging as young emerging adults fully recovered from a lived experience.

Remaining well balanced and safe is to keep the wellbeing of such individuals and the diverse communities of this great nation in highest regard as being and remaining crucial and paramount in these ever-changing times.

By managing such tailored plans and environments thereby educating young minds around not solely preparing them for working roles in the community or workforce but by rallying under a common banner of Hope in that they may sustain their eyes and lives of recovery in knowing they have complex needs and requirements in remaining supported and connected to family, friends and each their own positive relationships by educating each individual individualistically and holistically giving them valuable tools and life skills in maintaining themselves in fully self-managing roles and emerging as recovered adults.

Whether they are at work within the workforce, in educational institutions continuing in studies, at play, on the sporting field, partaking of their individual pursuits and engagements within the community and/or in the creative industries encouraging innovations in such a way that all individuals within all educational institutions may discover new eyes and lives to live and see with.

In that the wellbeing of the youthful emerging minds of the children of the land is of utmost concern to the Peer Support Community as they are emerging as specialists, teachers and leaders of the future and by undermining such individuals is to undermine the peoples, community and the sustainable futures of the entire nation.

In that educational institutions may bear the load of educating these young minds holistically promoting the reduction of shame and stigmatism in such individuals who may experience a lived mental health issue and/or illness.

Empowering them with Hope encouraging them to always reach out, connect with an adult and/or fellow peer to then share their recovery stories and/or lived experience in a safe manner, safe space and safe environment to feel comfortable within such connections and within themselves to open honest and safe dialogue in regards to sharing their lives of a lived experience with value in mind by creating positive mental health connections.

Partnering in educating families and the community in always considering the wellness and wellbeing of the young minds of the land by engaging in a communal sharing of experiences of a lived nature thereby nurturing and guiding such individuals gently onwards towards the road to recovery.

By reflecting on connections and maintaining healthy relationships with hope whilst slowly working gradually on resolving traumatic experiences one at a time reducing the negative impact of such experiences upon their ever-evolving, changing and dynamically growing minds.

Encouraging social interactions with positive connections to the Arts such as Music, Art, Literature, Dance, Role playing such as Acting, Characterizing and Creative Arts such as Creative Writing, Poetry, Story Telling and otherwise Creative Industries meanwhile including Mindfulness techniques, Yoga, Relaxation Exercises, and Philosophical pursuits to then maintain wellness tools gathered over a life-time of recovery.

Guiding policy and legislation with value in mind by keeping safe and well the ever emerging minds of the many nations, communities, peoples, cultures, races and denominations with diverse origins of families that gather here in this land to live, work, play and experience the full experience this great land has to offer.

By encouraging such institutions to reduce already alarming rates of successful suicidal incidences in working adults, minimalizing self-harm in the youth, raising awareness and standing up against bullying, mocking behaviour and stand over tactics, opening up about same sex and intersexual, transgender relationships.

Breaking down barriers of isolation of the poorest most disenfranchised communities and combating stigma in the community by educating such young minds in that as we remain focused around wellness and wellbeing as a community, a peoples, a philosophy, a movement and service unit is to keep all communities safe and well.

Remaining centred and focused around reducing stress related issues and working as one, partnering to eliminate such stressful experiences of a mental illness in the youth and the wider populace as a whole.

Thereby actively engaging the entire community and the many families the community represents, so as to role-model an adult perspective of sharing our stories of a lived experience reflecting on our roles empowering our children to do likewise.

Setting an example for young minds to connect with each their own individual positive mental health connections of Hope promoting a greater sharing of open dialogue in regards to each their own individual lived experiences without shame, fear, anxiety nor stigmatism thereby actively reducing stigmatism in the community by opening the lines of effective story-telling in communicating life experiences and the nature thereof.

In gently guiding individuals, communities, families, peoples and nations that gather here as a whole onwards towards the path of recovery by becoming a world leader and fraternity in mindfulness and sustaining each our own ongoing roles of each our own lived experiences with wellness tools in hand.

In that we place a value on positive mental health experiences and connections to always consider our wellness code and action

planning of wellness tools in the exhibited roles and many hats that we utilize every day.

By placing such a value on wellbeing and remaining well in self-managing, self-sustaining roles in the community in regards to each our own individual lived experience of recovery we as a people, a nation and community of many diverse cultures, families and origins may guide one another onwards ever onwards, towards a more mindful future.

By breaking down barriers in the community in regards to shame and/or stigmatism of those individuals experiencing lived mental health issues with hope that by educating such institutions to rally around positive mental and health conditions.

By positive mental and health connections, we may raise a nation gathered around mental health and wellbeing.

And teaching our emerging youthful ever-changing individuals, shaping and moulding their minds gathered around recovery by opening the doors of such institutions to gather under a common thread of Hope that they may embrace a commonality of normalizing such a sharing of experiences within said institutions shifting towards Peer Support Models of engaging in recovery gathered around education, role-modelling, reflection, story-telling, Hope and strength.

To cease the spiral of society into hopelessness where now children are experiencing many more difficulties due to the images, sounds and negative influences being projected into their young eyes and lives therefore negatively impacting upon such young minds ever-increasingly. To give and teach Hope to such young lives giving them valuable tools to obtain resilience and persist at their lives regardless of the circumstances.

To combat bullying by standing up and speaking out against such and said bullying in knowing that this is ever-more prevalent in schools today. In knowing that bullies are the victims of bullying themselves and to keep the interest of all young minds at heart is to keep the mental health of these particular individuals who bully others of great concern to the Peer Support Community, as a whole, and to treat the victim is to treat the bully also, neither isolating either.

To reduce such incidents by creating special safe spaces and natural environmental settings conducive to sharing the lives of the youth to engage in recovery based story-telling, opening up about bullying, connecting with teachers or fellow peers and sharing their lived experiences.

Handing the power of the bullies back to each individual to seek and find safe connections and environments to open up and expose such behaviour and provide the backdrop to healing the victims of bullying and providing sustainable environments conducive to preparing the youth in remaining well balanced and multi-tooled individuals thereby entering the community and/or workforce with ease.

Also sharing the eyes and lives of recovery in that as children they may have been mishandled by their parents and further-more abused sexually and therefore have chosen same sex partnerships as adults and thereby must be supported to seek safe and healthy same sex partnerships and also healing such mistreatment of the innocent eyes and lives of such particularly fragile individuals by encouraging them to seek higher ground and open up about such mistreatment and/or sexual abuse.

In that they are particularly at risk due to the indecent treatment of their little hearts and therefore may at one time be seriously impaired and/or shattered due to such ill-treatment.

To give such little lives Hope in times when they are being ill-treated and/or abused sexually and that such young peers' lives are

in a state of disrepair and thereby encouraging governmental policy and legislation to recognize that such same sex relationships are due to the ill-treatment by family members and/or close personal friends or close relatives and that such young lives should not be further discriminated against due to the ill-treatment and indecent behaviour of adults.

In reinforcing the nature of child rearing and the circumstances surrounding such in regards to emotional support in the raising of children, also the negative impact of abuse (sexual and/or physical) will depend on whether they will have a mental disorder (Murthys et al., 2001) or not regardless of whether or not such young lives choose same sex partnership but otherwise such individuals are to be protect at all times.

To give Hope to such a community in that they in their own lives have been negatively impacted upon by such adults and therefore to be no longer discriminated against and given the rights they deserve in regards to sustaining healthy same sex partnerships for the long-term and encouraging governmental policy to reflect the need in providing legislation in regards to empowering such a community with Hope.

In that they may have accumulated shared wealth from such partnerships regardless of whether they are married or not and thereby endorsing a sharing of wealth in the deceased property of such same sex partnerships to hand such a community Hope that those same individuals may continue their solitary life or otherwise seek higher ground to partner again in another partnership.

Regardless of whether they have marital rights or not in maintaining their lives for the long term increasing longevity of such a people and handing them the power in that such same family members who may have abused such individuals may not acquire their wealth as the partnered shared relationship they have maintained has accumulated such wealth accordingly.

Handing the power to such individuals regardless of marital rights and therefore shared wealth is accumulated through shared partnerships of shared lives and shared eyes of a governance of love nonetheless.

Therefore partnering as one so as to educate the youth thereby reducing systemic issues, eliminating stress related issues, decreasing suicide rates, increasing life's resilience, duration and experience, combating self-harm, standing up against bullying, opening up and no longer tolerating the ill-treatment of the sexually abused and minimalizing the negative impact of a diagnosis of a lived mental illness upon such young minds in that such individuals may self-harm and therefore educating such individuals to always connect with an adult.

Whether it be a Teacher, Mentor, Educator or a 'Wellness Recovery Facilitation Officer' in order to be assisted in remaining supported in such times when they are under such extreme stress thereby minimalizing such re-occurring incidences in such young lives.

Minimalizing further deterioration and spiralling into adult suicide attempts and even so furthermore deterioration into successful suicide due to not being able to connect with other peers and/or adults at a young age and remaining outcast and isolated through-out their lives.

Therefore by supporting such individuals holistically and meeting such young children where they are at in their lives, partnering together and educating such young lives and youthful minds within all creative and educational institutions as a fraternity, a service unit within the community and a nation of many families of diverse origins, backgrounds, denominations, cultures and peoples guided by a common core thread of wellness, wellbeing and hope.

Gathered around Peer Support Models of recovery based

education gently embracing life's challenges in order to gain resilience and bounce back in times of great stress and need will greatly improve the standard of life for such individuals and increase longevity of the nation entirely.

Ensuring the young minds of the land emerge as well rounded, well balanced adults with each their own wellness tools in hand and being able to embrace life's challenges with ease, guiding themselves through the myriad of life's pitfalls with little to no negative impact.

Thereby in regards to the working adult population, legislation, policy and guidelines may be implemented to address adult suicide in the working population, bullying in the workplace, mocking behaviour, abuse, trauma and family breakdown by encouraging working environments to embrace a commonality of sharing positive mental health connections by providing suitable environments conducive to the positive health of such employees within workforce companies and industry.

To endorse an in-house sharing of lived experiences within common grounds and natural beautified environmental settings conducive to opening up and sharing lived mental health experiences and positive mental health connections of value to the individual resilient nature of employees and thereby improving the wellbeing of the employees and the productivity of the company exponentially.

Increasing the value of awareness within such working environments to then reduce stigmatism and discrimination often felt in the workforce in regards to those whom suffer from mental illness, whether it be daily or from time to time, thereby sharing within such working environments and normalising such sharing by also providing working roles with a 'Human Resources Wellness Officer' to empower individuals with hope and encourage such individuals considering suicide to open up and connect with each their own 'Wellness Officer' and/or work colleagues to then facilitate recovery, without repatriation, such sustainable recovered futures.

Providing such Mental Health Resources (Murthys et al., 2001) to repopulate working roles and educate individual's employed within such industries with the capacity to engage in the workforce with diverse inclusivity in mind to then remain mindful of the needs of others with diverse backgrounds and creating strategies to do so.

Empowering all working roles with a connectivity to one another and also each their own 'Wellness Officer/s' with positive mental health in utmost concern and highest regard to then provide sustainable working environments conducive to the wellbeing of the industries, company work roles and working job titles inclusive of CEO's, Directors, Management, Administration, Staff and lower level employees.

By implementing 'Mental Health Workplace and Environmental Occupational Therapy Safe Guards' to determine appropriate 'Early Intervention Initiatives' to 'Foster Healthy Workplace Environments' and finally 'Hopeful Workplace and Environmental Engagements Initiative' with a resplendence and focus on wellness and wellbeing in utmost concern to industry thereby rebuilding workforce environments onwards ever onwards towards sustainable futures and recovered lives with Mental Health and Health as being first and foremost.

Increasing the overall productivity of a well workforce and underlying key theme of Hope and Happiness unfelt before in the workforce across a broad demographic and broader spectrum by associating a value placed on positive mental health and overall wellbeing of all said working roles.

Giving all employees and Management, tools to educate themselves further by encouraging community involvement and the reduction of trauma and/or abuse by providing counselling services to all employees inclusive of 'Drug and Alcohol Counselling' to restore the stability to such job titles remaining ever mindful that

work is not to be considered as the daily mundane tasks involving pay but a value to what each individual brings to the industry and company or organization in particular.

Effectively managing such working titles with an empowerment to Health, Mental Health, Emotional Stability, and the Socio-Economic Stability and Wellness raising a community to be able to engage in positive mental health of value to one another whether it is on the sporting field, in the workplace, within educational institutions, at home or at play thereby handing such tools as positive mental health connections as well as resplendent safe guards and initiatives to cease the spiral of the workforce into hopelessness and a culture of addiction and abuse related to the stresses experienced at work.

Exponentially increasing productivity by increasing individual and collective wellbeing and wellness of staff, reducing loss of working roles due to abuse or sexual harassment not being tolerated but able to be appropriately mediated between each party or parties if such issues are able to be resolved amicably.

Increasing of hopeful engagements by sharing each our own positive mental health connections, reducing sick or down-time due to stresses at work or at home by providing counselling to all employees inclusive of Management, CEO's and Directors and finally reducing the nature of bullying and mocking behaviour in the workforce by neither isolating either though not tolerating such behaviour so as to continue in such activity of harassment by providing mediation if able to be resolved otherwise terminating employment and encouraging access to counselling services to facilitate the recovery of terminated employees in regards to such incidences and incident reports.

To rebuild a workforce gathered around wellness and wellbeing inclusive of all levels of management, company directives and governing principles of increasing awareness in the community that mental health issues affect more and more individuals daily and such issues are not isolated to the very few but a larger demographic and broader spectrum and thereby must be addressed from a communal viewpoint of sharing our lived experiences and the reduction of stress related issues in the working force.

Therefore boosting morale in creating a treasured experience not just meeting deadlines for benefit nor the fulfilling of daily tasks and thereby also reducing systemic issues such as drug and alcohol addiction, the reduction of suicide rates related to loss of Hope and minimalizing abusive relationships in the workplace related to the inability for such individuals to connect on a humane level without turning to such behaviour, handing Hope to all employees throughout industry and working fields to restore the balance within their lives and give them the tools to remain well and ever mindful of each their own individual requirements and needs.

Also there is a great need to address redundancy in the workforce by providing such individuals whom have lost their working roles with the tool sets and skills to further engage in employment and/or otherwise engage in the community engagement processes.

To therefore pursue their goals and ambitions within the Peer Support Community or Community Services and become of value to the community and contribute to the greater good whether it is educating themselves, recovering from job loss or the acquisition of further tools and skills to further themselves and therefore bounce back with resilience and Hope that their lifestyles may continue regardless of the lifestyle change and the negative impact of job loss and the working roles thereof.

Creating sustainable lives and communities with wellness of utmost concern to them and providing the backdrop for our nation to

become a world leader in wellbeing in knowing that together as one we are travelling the path of recovery.

Furthermore as we are partnering in educating such young individuals gathered around wellness and wellbeing, we are also in a way partnering and educating families and also by encouraging such young minds to engage in reflective story-telling with fellow siblings and Parents therefore guiding the many families that gather here in this wonderful land through the eyes and lives of the children and the youth.

Giving them an active voice for change and healing the family dynamic in that such young eyes may reflect the eyes and lives of recovery as having and holding hope for the long term guiding families onwards ever onwards towards the path of maintaining recovered futures for the long term.

In that through the eyes and lives of the children wisdom may speak and shine through gathered under a core theme of wellness and wellbeing and brought forth unto the healing of negative family generational patterns in that even as such, children may be educated by Peer Support Models of Education.

That such and said family members may seek higher ground and be of value and service to the increasing of wellbeing of the land by actively engaging in Peer support themselves to then heal their own ancestral negative behavioural patterns which prior to thus has not been previously treated and therefore improve the wellbeing of the family dynamic as Parents or older siblings.

Healing the family dynamic and the children with the healing power of hope in order to obtain resilience and better ourselves regardless of what the circumstances are within each our own lives therefore healing all peoples onwards ever onwards towards the path of recovery and sustainable, long term recovered futures, bouncing back with ease in times of need and engaged with one another in a more humane, deeper and more meaningful manner.

By also educating the young minds of the land in regards to obtaining hope when hope seems to be absent at such times to therefore prepare such young lives for any possibility even the eventuation of experiencing homelessness and impoverishment.

Raising awareness within educational facilities that by teaching of hopeful engagements and interactions in times of great need and stress will empower such young minds to thereby remain in a recovered wellness and wellbeing state under such extreme circumstances handing them Hope in maintaining and working in each their own wellness tools and thereby crafting of such in personal ownership and personal empowerment to then provide for themselves in times of great need.

Educating and preparing such individuals to embrace their personal empowerment of the Arts and tooling by fashioning and creating each their own wellness realities. Giving them valuable tools to then seek higher ground at all times therefore reducing the nature of homelessness in the community and increasing awareness of the community by creating a youth of well-rounded individuals with wellness tools in hand and thereby sustaining themselves in the community engagement process regardless of their circumstances.

Who may then express the eyes and lives of fully recovered individuals with wellness tools in hand and raise themselves into the capacity to also seek of working relationships with the Peer Support Communities thereby becoming of value to the mental health of all Australians and peoples.

By also shoring up the broken hearted, healing the trauma of mental illness, raising the standard of positive mental health connections, comforting the grieving, mourning with those who mourn, healing the sick, giving to the poor and needy. And also by

feeding the poor and hungry and finally restoring those places which have become wasted and destroyed.

Giving such young individuals Hope to empower others and thereby empowering themselves in working in the most positive manner whilst also receiving pay for each their own wellness fashioning's and coining's whilst still engaged within each their own work related engagements in personal reflection of each their own individually whole and complete recoveries and wellness with positive value to mental health.

This resolution is essential in raising a community gathered around wellness and wellbeing by valuing mental health and positive mental health connections and reducing the mental impairment of the youth and lower mortality rates of the mentally ill.

By building a youth gathered around wellness and recovery whilst building also a 'Wellness Force' (Murthys et al., 2001) to then go and bring about the recovered futures of all Australians and taking up the mantle of positive mental health and the positive connections thereof and encouraging the recovered futures of all peoples alike.

Secondary Resolutions

The secondary resolution is to utilise Peer Support Models of recovered lives in order to activate a united voice in actively engaging with all community members and discussing positive mental health connections with health as being the pivotal key word and formulation to question community engagements in regards to dis-connectivity towards others by seeking positive mental health associations, reflecting thus upon all community members thereby raising awareness within the community in regards to how we as a people and community value mental health.

With positive connections in mind thereby reflecting on such systemic issues such as drug and alcohol addiction and also sharing of the experiences of those most disadvantaged, disenfranchised and impoverished communities such as the mentally ill, the prison criminal justice community and the homeless communities alike.

Raising the standard of positive health by discussing openly within the community such issues that relate to all peoples, gaining a perspective from ourselves as role models and fully recovered individuals therefore becoming an inspiration for all peoples.

To give community members valuable learning tools and lessons such as statistics and reflective stories of ourselves as role models of each our own recovered addictions, ex-alcoholic recovery, housed ex-homeless individuals, also fully recovered mentally healthy individuals, ex-criminals and ex-inmates therefore raising awareness in the community of such an essential perspective and lived experience without stigmatism, shame, fear nor anxiety.

Activating our voices as one so as to encourage positive mental health connections within the community of value in order to teach all community members of the choices we make and steps needed to reflect upon active story telling of each our own recovered futures by meeting all community members where they are currently at in their lives.

Obtaining real true connections not false connections simply based around ones' own social groups, families and work colleagues. To address the spiralling of hopelessness in society due to unreal connections based solely around our own particular groups and therefore reaching out to all members of the community and engaging with them in a humane manner and unconditionally loving all individuals to encourage similar attributes in all peoples and community members.

Reflecting Hope whilst engaging with others and opening up the heart of Hope without stigmatism or shame. To be and remain truly active voices for change in a society that has degraded all value to

seeking positive connections and valuable relationships gathered around maintaining health and Hope for the long term.

To reflect the eyes and lives of hopeful engagements and sharing from a communal perspective of having and holding Hope in times of great need and stress, to bounce back with ease and obtain resilient natures.

Guiding all peoples onwards ever onwards towards recovered futures by being and remaining role models, protectors of the homeless, gentle guides of the mentally ill, liberators of the criminally minded and out-spoken voices active for change by reflecting with all community members with Hope.

Thereby giving all community members valuable tools to then choose for themselves to abstain from such systemic issues such as drug and alcohol addiction, seeking higher ground in regards to homelessness by engaging in our lives independently receiving pay by working in each our own individual wellness tools and crafting and/or otherwise paid work to continue in maintaining each our own independent lifestyles without the need to beg and discussing mental health without stigmatism or shame.

Therefore opening up the heart of Hope and giving all peoples true and valuable connections and associations in order for all community members to choose positive mental health connections by valuing health and mental health as being paramount and raising much needed awareness in the community by sharing with all peoples such real connections via reflective story-telling and the handing over and receiving of Hope.

To also create a standing 'Wellness Army' within the compliancy and constraints of the 'Armed Services' to thereby go about and restore nations which have been ravished by war, civil unrest and turmoil such as natural disaster, famine, drought and epidemics in their own lands by creating such a 'Working Restorative Force' to then repopulate such countries and nations that have been destroyed and/or dismantled, ravished by natural disaster and/or other disastrous events.

To be as role models for the Global Community and as such role modelling as a 'Wellness Nation' gathered under the banner of 'Hope' and sustained by our 'Economic and Educational Climate' as being a very wealthy nation and to do so would place Australia on the platform of being a nation gathered around the wellbeing of ourselves and of other nations.

To always remain mindful of the needs of other nations in regards to the Global turmoils that continues to ravish lands and affect civil and economic unrest in such environments and as such problematic Global unrest needs to be addressed as Australia is a very prosperous nation and would do so very well to improve relations with other countries and restore hope of which there is ever more poverty, civil unrest, turmoil, war and natural disaster's affecting many lands creating hopelessness throughout the world.

As "war, conflict, disasters, unplanned urbanization and poverty are not only significant determinants but are also significant barriers to reducing the treatment gap" and so as stated by the 'Mental Health Report 2001', that, "Mental Health policy can address the effects of determinants by meeting the special needs of vulnerable groups and ensuring that strategies are in place to prevent exclusion" (Murthys et al., 2001).

Whereby the Australian Peer Support Community would like to encourage the sharing of our Educational

Resources through such a 'Wellness Force' by implementing such legislation and policies to strategically support the 'Humanitarian Efforts Overseas' evermore increasingly costing such into the Budget.

To also encourage such acceptance of 'Refugee Asylum

Seekers' into this great and wonderful land by merit and 'Adverse Sufferings' of such peoples whilst not allowing people smuggling to simply get away with such behaviour and endorsing proper more humane "Due Processing Initiatives" to allow somewhat a smaller population of humanitarian efforts to alleviate refugees sufferings but not allowing, altogether, such human efforts to be discharged and go undone.

Thereby giving such skills and training to refugees and accepting them into our lands whilst assuring the public that due processing will be determined by skill sets acquired whilst in processing and/or otherwise brought forth with such individuals as well as the ruling out of terrorist affiliation (therefore protecting this wonderful land) and finally the severe impairment of such individual due to the Global unrest of our times.

Therefore training such refugees whilst in processing to give them skills and available toolsets to engage in the workforce and not create a dependant community reliant on welfare services nor the resources of this land.

And remaining mindful not to explode populations of the Australian Communities of this nation and saving such a land, as Australia, for future generations whilst being and remaining mindful of our Global counterparts.

Also protecting our lands from the imposing of a threat in our lands from our Global counterparts to take by force this land and set a standing army to take resources and/or the attack upon a governing body inclusive of all States and Territories and the National Governing Body such as Parliament and the Commonwealth Government of Australia inclusive of all levels of Government whether it be enterprise or otherwise Governing Body Systems, Offices and Procedures.

And finally in regards to the secondary resolution of the Australian Peer Support Mandate, the Peer Support Community would like to encourage further supplementary funding to services gathered around the wellbeing of the Mentally ill, the Homeless Community, the Criminal Justice Community and also Humanitarian Efforts such as those welfare services providing the essentials of life for the most impoverished communities and peoples of this great land.

To recharge such services with the governance of duty of care that service funding's will not be cut and therefore supporting the nation holistically towards remaining well for the long-term whilst working slowly on resolving issues with mindfulness and Hope in highest regards.

To address such systemic issues holistically and funding such services to provide for the wellbeing of the peoples and citizenry of the Commonwealth Government of Australia at State, Territorial and Federal level neither isolating either.

Tertiary Resolutions

Furthermore the tertiary resolution of the Australian Peer Support Mandate and the community it represents is to obtain and sustain accountability of all Mental Health Professionals and Community Housing Companies and Networks alike by providing inquests and tribunals relative to keeping such service providers transparent in regards to such issues as being Public Trustee Orders, Physical and Sexual abuse within mental health facilities, the damaging treatment of ECT, outlawing the implementation of damaging micro-chipping implants and also the violent alcohol fuelled attacks upon tenants within community housing network holdings.

To keep Mental Health Professionals transparent in regards to Public Trustee Orders and holding such Professionals accountable for the induced and forced death in custody of those individuals who just want to do as they deem so fit to do and have acquired wealth

and such wealth is seized by the state and placed into hands that are not the rightful owners of such an estate.

Forcing such individuals to beg and continue in spiralling out of control due to not having the desire to engage in recovery and thereby are placed on such orders and continue to deteriorate eventually dying young and impaired, without money to survive and without hope to continue.

Whereas such individuals should not be forced to beg and continue to spiral out of control and thereby should be educated in regards to recovery and the maintaining of having and holding onto Hope by always reflecting on each their own recovered futures with Hope to do so and receive their pay to be able to be housed appropriately, able to eat and not have to beg.

Giving and handing such individuals the keys of Hope to then seek higher ground by education and personal empowerment thereby maintaining each their own individual lives for the long term, increasing resilience, lowering mortality rates in Public Trustee and improving the wellbeing of such individuals to the seek higher ground and maintain each their own wellbeing without being forced out of a job such as pay and/or the pension simply because they cannot live and support themselves appropriately.

Releasing such individuals from bondage to such Mental Health Professionals and their families thereby such families and/or Mental Health Professionals not inheriting their estate and giving such power back to such and said individuals by not placing such individuals estates into the hands of in-transparent Mental Health Professionals, family members nor the state to then profit from the death of such a disenfranchised, shattered and disempowered people.

By not creating a dying population on the streets and providing sustainable recovered futures for such disenfranchised individuals by rewarding such individuals with suitable means to live, not damaging the fragile nature of such already disempowered individuals at risk of harm to themselves and others and ensuring the safe passage of those inpatients within mental health facilities are maintained at all times.

That no Mental Health Professional may abuse their Mental Health training and/or education and comply with the governance of "U.N. Charters and Principles" in regards to such inappropriate behaviour of Mental Health Professionals and the ill-treatment of those with mental health issues and/or mental illness (Office of the United Nations High Commissioner for Human Rights, 1991).

Therefore handing them each their own pay to live well and remain well without increasing mortality rates of such a people which is alarmingly high already and must be addressed accordingly.

In extension of the tertiary resolution there is also a need for accountability for all Mental Health Professionals within a Mental Health Facility to regard mental health as being and remaining a value placed upon positive health and overall healing of mind, body, soul and spirit.

To then reflect upon positive health as being fully recovered futures inclusive of the physical ailments presented at admission and thereby not undermining such a community by simply placing a value on mental illness and the recovered application of psychological models simply to heal the mind whereas psychology reflects the psyche as mind, body, soul and spirit entwined as one, neither isolating either.

Giving positive value to the treatment of such individuals as such inpatients minds are just as shattered as their bodies, souls and spirits thereby healing from a holistic standpoint of health by being and remaining crucial and otherwise pivotal.

Placing positive mental health as being and remaining holistic healing of the overall health of such inpatients and the healing of

symptoms of the physical body as well as the mind, spirit and soul to bring a value to the longevity of such individuals and reducing death in custody of inpatients and also the lowering of mortality rates in mental health.

Also remaining transparent in regards to the sexual abuse of inpatients by all Mental Health Professionals and not ever allowing such individuals to be raped by other inpatients nor Mental Health Professionals alike thereby maintaining transparency in all levels of the facility and staff to then be held accountable and if so bearing justice to thereby prosecute such individuals accordingly.

Keeping the rights and liberties of all those particular souls within Mental Health Facilities in utmost concern and highest regard for each their own individual recovery journeys and therefore sustainable recovered futures for the long-term maintaining such transparency through-out all levels of engagement and treatments thereof and providing suitable outcomes for the wellbeing of such and said individuals.

To also outlaw damaging treatments such as ECT as this damages the already fragile minds of such individuals by wiping their memories simply to treat such things as Schizophrenia and/or Depression by damaging the nature of the brain and its' fragile state in tearing such memories from such individuals and therefore is to be outlawed and no longer to be used as a possible treatment of mental illness.

Thereby complying with Part 2 of the 'Victorian Current Acts' in regards to the 'Rights and Responsibilities Act 2006 sect. 10(b) and 10(c) of which outlines the treatment of those with mental illness in that 'a person must not be-

- Subjected to torture; or
- Treated or punished in a cruel, inhuman or degrading way; or
- Subjected to medical or scientific experimentation without his or her full, free and informed consent (Victorian Parliament, Victorian Current Acts, 2006).

Placing positive value to the fragile nature of the brain and its' working order and functioning and placing positive value on gentle healing remedies such as TMS or Trans-Magnetic-Stimulation which is more effective in treating such issues without damaging memories nor the fragile nature of the brain and mind therein providing suitable recoveries that are less damaging to such individuals lives and eyes of recovery.

Furthermore outlawing the implementation, use, application and implantation of damaging micro-chipping technologies, into the human body, due to the evidence showing

that such technologies and toxic radioactive materials found within such micro-chips alter the fragile nature of the human physical body and condition thereof to thereby leak radiation and toxins through-out the body and also damages the fragile nature of the brain as the human brain is closely connected to the physical body and psyche therein.

Therefore is not to be considered as a means to connectivity to technological advancements in science but determinately will damage the populace and create an ill and diseased population with mental illnesses that will dramatically rise and continue to do so regardless of treatment orders and options therefore the Australian Peer Support Community and Mandate herein seeks to outlaw such use of micro-chipping technologies simply because of the toxicity and radioactive nature of such implants.

Given the nature of such scientific advancements and the value we as the Australian Peer Support Community and Mental Health Communities place upon the body, mind, spirit and soul entwined

as one there is no need to create a mentally ill, unstable and diseased population regardless of global pressure to do otherwise.

Finally in continuation of the tertiary resolutions of the Australian Peer Support Mandate there is such a great and dire need to hold Community Housing Companies and Networks accountable for the deaths or violent alcohol and/or drug fuelled assaults and attacks upon other tenants within the holdings of such Community Housing Companies.

Thereby providing governmental inquests and tribunals to seek the truth of such a company thereby maintaining accountability and transparency of all such companies at all times.

Therefore prosecuting such companies and no longer tolerating the dismissing of complaints made by such individuals in regards to such violent and abusive attacks upon the wellbeing of those tenants in tenancy within such holdings.

To bring a light of Hope to such darkened corridors and no longer allowing such companies to turn a blind eye simply because of the Gross Domestic Product or GDP of said companies thereby holding them accountable at all times and not ever dismissing such violent alcohol and/or drug fuelled assaults or death by murder or manslaughter to go ignored.

Bearing the light of truth to such companies and outlawing such behaviour by legislating against such undue treatment of those individuals within all Community Housing Company tenancy as most individuals within such and said holdings suffer from Mental illness daily and therefore are negatively impacted by such treatment from such Community Housing Companies.

Therefore no longer placing such tenants in danger from such violence and not allowing such to continue unabated and undisclosed in remaining gathered around the safety and wellbeing of all tenants in utmost highest regards and concern to then embrace a common goal of recovered futures not the value of money for lives and souls at risk of assault, murder and/or death

So in finality this tertiary resolution is essential in obtaining accountability and transparency in regards to all parties Mental Health Professionals and Community Housing Companies alike in regards to the mal-handling and the ill-treatment of the mentally ill.

Improving outcomes in the sustainable recovered futures of all such individuals holistically guiding such individuals to maintaining wellbeing and recovered housed futures for the long term as these individuals are the most disenfranchised members of the community and that all parties not undermine such a people ever again.

By placing a value on wellbeing and wellness as a code and standard to work, engage and live by as Hope in recovery by empowering Hope in all peoples to obtain resilient natures and the ability to bounce back in times of need and/or great stress regardless of the circumstances, barriers and/or challenges surrounding all peoples.

CONCLUSION

Therefore in conclusion the Australian Peer Support Mandate is a peaceful protest against the ill-treatment of the mentally ill and the most disadvantaged, disenfranchised and impoverished communities such as the Mental Health Community, Homeless Community and the Criminal Justice Community and those individuals and Families experiencing Poverty in regards to obtaining sustainable resilient futures and suitable outcomes by legislation, guidelines and policies reflecting the needs of the mentally ill and empowering such individuals with Hope in recovery to recover well and obtain resilient natures.

By providing Peer Support as a means of recovery based

treatment as a pathway, a Philosophy and a Service Unit gathered around holistic support, community engagement processes, the having and holding onto Hope, reflective story-telling, personal ownership and the empowering of the Arts to obtain sustainable recovered futures and recover well with Hope in mind and finally aims to improve the wellbeing of the Young emerging minds of the land, the recovered futures of the Youth and also aims to improve the wellbeing of the peoples, cultures and communities of Australia.

The Australian Peer Support Mission

To create suitable outcomes, opportunities and sustainable recovered futures for the Mentally ill and most disadvantaged, disenfranchised, impoverished communities such as the Homeless Community, the Criminal Justice Community and those individuals and Families experiencing Poverty whilst improving the well-being of the peoples and communities of Australia.

In supporting the most disenfranchised communities we may raise awareness for such peoples and promote the active wellbeing of the Australian population whilst engaging with other nations in regards to each their own wellness and wellbeing. To be and act as Role Models for ourselves within our own communities and population of Australia and the Global Community by promoting wellbeing across the Globe and incorporating policies, legislation, guidelines and initiatives within the Australian Parliamentary processes to raise Hope within our country and within the Global environment.

Authors' Statement

I hope to see in my lifetime a Global environment which accepts the needs of others above economic prosperity whilst maintaining Global relations with Poor countries to raise the standard of the peoples' plight in regard to mental health and the plight of the poor. To always look out for our neighbours needs whilst not neglecting the needs of our own peoples and populations thereof. To restore Hope to the Globe and raise the banner of Hope towards all nations, peoples and communities as a standard of wellbeing, health and prosperity for all peoples included.

Commiserations

I would like to express my full gratitude for the Australian Peer Support Community, the Queensland and Federal Government of Australia inclusive of all States and Territories, the Criminal

Justice System and Services thereof, the Homeless Community and the associated services, the Welfare Services Community and the Peoples and Citizenry of the Commonwealth Governance of Australia and more importantly the Traditional, Original Land owners and Indigenous First Nationals of this wonderful land I call Home, in giving them the full rights and dignities comforted for such a peoples that their land was acquired by false means and the trials they have had in gaining sovereignty in full recognition of their Elders, traditions, rituals and culture, past, present and future in that they may sustain their lands and traditions as Land Owners' with full assurance for future generations to come in acknowledgement and full rights' of passage.

Authors Notes

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Foreword

This Mandate is and was written to ensure the rights and liberties of the mentally ill in that such rights are maintained and upheld at all times and to provide suitable outcomes for the sustainable recovered futures of such a peoples comforting the dignity they deserve in reducing the negative impact of diagnosis, the reduction of discrimination and stigmatisation in the community by providing holistic support and treatment utilising 'Peer Support Models of Recovery' whilst respecting the current Mental Health System and the needs to change.

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Cover Design

The cover was designed by my loving and kind brother Nephi Pugh with full respect and thanks granted for such a design, I am truly grateful.

Active Roles and Engagements

Mental Health Community Leader and Role Model for the Peer Support Community, Active Consumer Rights Advocate for the Mentally Ill, Role Model for the Homeless Community, Musician, Creative Writer and Performer for the School of Hard Knocks, Dancer and Actor-Activist.

REFERENCES

- Australian Bureau of Statistics (2009). Australian Social Trends, Mental Health.
- Forsythe, L., & Gaffney, A. (2012). Mental disorder prevalence at the gateway to the criminal justice system, Australian Institute of Criminology, pp.438.
- http://www.austlii.edu.au/au/legis/vic/consol_act/cohrara2006433/
- Lane, P., Ayre, R., Phillips, S.B., & William, S. (2014). The Law Handbook: Your Practical Guide to the Law in New South Wales, Historical Legacy, pp.40.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health:New Understanding, New Hope, World Health Organisation, An integrated Public Health Approach, pp.16.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., Saracen, B., et al. (2001). The World Health Report 2001-Mental Health:New Understanding, New Hope, World Health Organisation, 'Involving other Sectors', pp.101.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, The Shifting Paradigm, pp.50.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Involvement in the Local Community, pp.58.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope', World Health Organisation, Partnerships with patients and families, pp.56.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Poverty, pp.40.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Developing Human Resources, pp.95.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Developing Community Mental Health Services, pp.88.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001) The World Health Report 2001-Mental Health:New Understanding, New Hope, World Health Organisation, The Shifting Paradigm, pp.50.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, The Shifting Paradigm, pp.50.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope', World Health Organisation, Advances in Behavioural Medicine, pp8.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope', World Health Organisation, Introduction, pp.3.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Psychological Factors, pp.12.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Roles of the Media, pp.98.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). 'The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Promoting Mental Health, pp.97.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). 'The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, 'Raising Public Awareness, pp.98.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, 'Psychological Factors, pp.12.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001) 'The World Health Report

- 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Developing Human Resources, pp.95.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001) The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Involvement of the Local Community, pp.58.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001) The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Psychological Factors, pp.12.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001) The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Developing Human Resources, pp.95.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Developing Human Resources, pp.95.
- Murthys, R.S., Bertolote, J.M., Funk, M., Prentice, T., Epping-Jordan, T., & Saracen, B., et al. (2001). 'The World Health Report 2001-Mental Health: New Understanding, New Hope, World Health Organisation, Involving other Sectors, pp.101.
- Office of the United Nations High Commissioner for Human Rights (1991). Appendix 1: United Nations Principles for the Protection of Persons with Mental Illness and for the improvement of Mental Health Care, Geneva, Switzerland, pp.94.
- Office of the United Nations High Commissioner for Human Rights Geneva, Switzerland (1991). Appendix 1: United Nations Principles for the Protection of Persons with Mental Illness and for the improvement of Mental Health Care, pp.97-98.
- Victorian Parliament, Victorian Current Acts (2006). Charter of Human Rights and Responsibilities Act.

