Mental Health

Policy Position Statement

Key messages:
Mental health is a state of well-being where a person realises their own potential, copes with life's normal stresses, can work productively and fruitfully, and can make a contribution to their community. Mental illness significantly interferes with a persons' cognitive, emotional or social ability. Complex social determinants impact mental health. Mental illness places a burden on society.

Australian mental health services and supports are disjointed and inefficient and reforms to funding, service provision, and accountability are needed.

Improving population mental health will require promotion, prevention, treatment of mental illness/disorder and supporting recovery. Inter-sectoral strategies are required to create living and working conditions and environments supporting mental health and promote healthy lifestyles. Efforts should be directed at the population level as well as individuals and high-risk groups.

Key policy positions:

1. Government should take a ‘mental health in all policies’ approach.

2. Funding is needed to promote mental health, prevent mental illness, and for early intervention and treatment including mental health services and housing/disability support resources.

3. Better services are needed for people and communities with higher mental health risks, including for young people, Aboriginal and Torres Strait Islander communities, gender and sexuality diverse young people, people who are homeless, asylum seekers and refugee communities both on- and offshore, and persons associated with justice and detention systems.

4. Mental health should be included in all chronic disease initiatives, and specific programs are needed to reduce stigma and discrimination, build social inclusion of people with mental illnesses, including access to the National Disability Insurance Scheme. Specific programs are needed to address the physical health of people with mental health issues.

5. Increased accountability for mental health services funding is needed to ensure resources positively impact the lives of consumers and carers.

Audience: Australian, State and Territory governments, agencies, policy makers, and program managers.

Responsibility: PHAA Mental Health Special Interest Group

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Mental Health

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PHAA affirms the following principles:

1. Mental health is defined as “a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”.

2. A mental illness/disorder significantly interferes with an individual’s cognitive, emotional or social abilities. Mental illness/disorders include anxiety disorders, depression, bipolar affective disorder, schizophrenia and dementia, among others.

3. Mental health should be promoted at individual, family, workplace, community and government level.

4. Coordinated, collaborative, appropriately resourced and accountable mental health services are needed to improve public health and wellbeing.

5. Social determinants - such as early childhood environment, education, conditions of work and leisure, secure housing, food security, family income security, social capital and social inclusion, and access to health care - strongly influence population mental health and wellbeing.

6. The mental health of Australian citizens and communities is influenced not only by local and national events, but also by world events and global issues such as displacement from civil war and natural disasters, financial crises, trade policies and agreements and climate change.

7. A comprehensive approach to mental health improvement includes strategies directed at the whole population as well as specific strategies directed at high risk population sub-groups and individuals.

8. Mental health promotion requires strategies to both prevent and treat mental illness/disorder and supporting recovery. Inter-sectoral strategies are required to create living and working conditions and environments supporting mental health and promote healthy lifestyles.

9. A comprehensive public health approach to improving mental health includes:
   - Action to reduce the negative impacts of social determinants of health.
   - Action to reduce mental and physical health inequities.
   - Mental health promotion
   - Creating communities that promote and support mental health.
   - Providing universal access to mental health care, including people form disadvantaged groups.
   - Ensuring people with mental disorders receive appropriate, affordable and effective care for both their mental and physical health.

10. Current mental health services and supports are disjointed and inefficient and reforms to funding, service provision, and accountability are needed.
PHAA notes the following evidence:

11. Acute periods of mental illness may be episodic and people with mental health conditions can recover from these episodes to achieve wellbeing.\(^5\)

12. Although some cases of mental illness/disorder are chronic and disabling and require substantial treatment, some are also short-lived and may not require treatment.\(^6\)

*Mental illness/disorders cost the community in many different ways:*

13. Mental and behavioural disorders are one of the leading contributors to burden of disease in Australia.\(^7\)

14. Personal and community costs relate to employment, housing and social opportunities, experiences of stigma and discrimination, social isolation, increased risk of physical illness and substance misuse contributing to high rates of morbidity and reduced life expectancy,\(^8\) and personal stressors for individuals, carers and families.

15. Social costs in terms of time and productivity lost to disability or death, reduced employment capacity, and costs to carers and families who may experience reduced employment and be required to play an active role in housing and social support.

16. Economic costs resulting from lost productivity, expenditure by governments and community organisations, health funds, and for individuals associated with their mental health care, as well as financial costs to the carers and families of people with mental illnesses.\(^9\)

17. Some population groups are more vulnerable to mental health problems and their social and financial costs, including young men and women, gender and sexuality diverse young people, people who are homeless, refugees and asylum seekers, Aboriginal and Torres Strait Islander peoples and those incarcerated and/or in contact with the justice system.

18. People with mental health disorders face many barriers to receiving treatment for and accessing services for their physical health care, contributing to high rates of morbidity and mortality.\(^10\)

*Approaches to improving mental health and reducing the prevalence and impact of mental illness/disorders*

19. For the first time in 2015, the Sustainable Development Goals (SGDs) made specific reference to mental health. Target 3.4 requests that countries: “By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.” Within Target 3.4, suicide rate is an indicator (3.4.2).

20. Mental health promotion is action to maximise mental health and well-being among individuals, families and societies.\(^11\)

21. Prevention of mental illness/disorders (primary, secondary and tertiary) includes preventing or delaying the onset of a disorder, or reducing the severity, course, duration, and associated disability by taking preventive measures throughout the course of the disorder and also decreasing the impact of illness in the affected person, their families and society.\(^11,12\)

22. Mental health services and communities are integral to creating environments that promote recovery from mental illness. They should incorporate recovery oriented practice, including self-determination, self-management, personal growth, empowerment, choice and meaningful social engagement, and should be incorporated into all facets of mental health policy, promotion, prevention and support.
PHAA seeks the following actions:

23. The adoption of a ‘Mental health in all policies’ approach to ensure the impact of public policies on mental health is assessed, reported and promoted, building on existing jurisdictional efforts to implement a ‘Health in All Policies’ approach.

24. Implementation of reforms of the mental health sector be a priority across federal and state governments and in alignment with the recommendations of the 2014 National Review of Mental Health Programmes and Services.¹

25. An increased focus on mental health promotion and prevention of mental illness/disorders, through addressing the determinants of health. Population mental health and wellbeing, not simply the absence of mental illness, is promoted through responsible and equitable policy and practice.

26. Strengthen efforts to reduce stigma and discrimination.

27. Community interventions where relevant include the measurement of mental wellbeing and mental illness as key outcomes.

28. The lived experiences of people with mental illnesses/disorders and family carers should inform policies, services and program delivery.

29. Increased resources dedicated to mental health promotion, service delivery, and housing and social support programs for people with mental disorders, including access to the National Disability Insurance Scheme to ensure social inclusion, and for people and communities at increased risk.

30. The physical health of people with mental health problems and disorder to be addressed, for example through the inclusion of mental health in chronic disease initiatives.

31. Increase accountability for mental health services funding, and ensure resources are positively impacting the lives of consumers and carers.

PHAA resolves to:

32. Work with and support the advocacy activities of like-minded organisations such as Mental Health Australia and Suicide Prevention Australia.

33. Actively contribute to policy, advisory forums and consultation processes relating to mental health policy and the determinants of health.

34. Work with mental health networks and key NGOs to advocate to Australian governments the importance of a national, collaborative and multi-sectoral approach to improving mental health and wellbeing.

35. Advocate for the above steps to be taken based on the principles in this position statement.

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(First adopted 2012, revised 2015 and 2018)
References


