

## Mental Health Statement

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Over the past few decades, there has been a growing awareness of the prevalence and impact of poor mental health. In Australia, mental ill-health is the leading cause of non-fatal disease burden. Almost half of all Australians will experience one or more mental disorders in their lifetime and around one in five will have experienced a mental disorder in the past twelve months. For certain vulnerable groups, mental health statistics are particularly concerning. Over one quarter of young people experience a mental health disorder in any one year, and Aboriginal and Torres Strait Islander peoples are hospitalised for mental and behavioural disorders at twice the rate of other Australians. Although rare, the fatal consequences of poor mental health is also significant, with suicide the second highest contributor to deaths in the 12–24 year old age group<sup>i</sup>.

Mental ill-health also affects an individual's care-givers, supporters, their families and communities. While individuals suffering mental ill-health are at greater risk of decreased quality of life, poor educational outcomes, lowered productivity and poverty, social problems, vulnerability to abuse, and other mental and physical health problems, the burden of caring for someone with mental ill health can place care-givers at increased risk of unemployment and poverty, and their own physical and mental ill-health<sup>ii</sup>. There are also costs to society, with studies associating mental ill-health with lost productivity and the exacerbation of other public health issues such as drug use, non-adherence with medical treatments for comorbidities, violence and incarceration<sup>iii</sup>.

Relationships Australia supports people affected by poor mental health through the services we provide, advocacy and contribution to the evidence base. Our organisation is committed to social justice and inclusion, and respects the rights of all people, in all their diversity, to live with dignity and safety, and to enjoy healthy relationships. Relationships Australia has been a provider of family relationships counselling, dispute resolution, children's services, relationship and professional education, and associated services for more than 60 years.

Relationships Australia engages with people on a broad spectrum of the mental health continuum, and with members of their families. This occurs in the course of our ordinary work in universal family support service provision, as well as through a range of specific mental health programs. We also work around the country in suicide prevention, often in collaboration with other service providers, peak bodies, governments and alliances.

### Relationships Australia believes that...

- people affected by poor mental health and their families are vulnerable and in need of support if they are to lead safe and fulfilled lives.
- There is a bi-directional relationship between poor family relationships and mental ill health. Mental health can be challenged during periods of family conflict, especially during separation, post-separation, and negotiating and managing joint custodial arrangements for children. In turn, mental ill-health can lead to conflicted family relationships and relationship breakdown.

- the community sector plays a vital role in prevention and early intervention work in the area of mental health. We believe that while there is clearly a place for medical models of mental health intervention and treatment, there is also real and unmet need for community models of mental health. General counselling and community mental health models should sit alongside, and collaborate with, medical models and provide early intervention pathways and choice for clients seeking to access mental health services.
- collaboration within and across the non-government and government health and community services sectors is essential to delivering a spectrum of prevention, early intervention and tertiary intervention programs with men, women, young people and children. Many people experiencing mental health problems are also dealing with insecure housing, employment, gambling, drug and alcohol problems, family violence, relationship and financial issues.
- long-term, ongoing financial and practical assistance needs to be available for those experiencing chronic mental illness, and this includes support for their family members.
- governments and service providers need to consult across sectors and work with consumer, advocacy and self-help groups in order to provide a broad range of effective mental health services.

### **Relationships Australia supports...**

- a whole of government approach to mental health, as set out in the Fourth National Mental Health Plan.
- the implementation of priority areas for action identified in the Fourth National Mental Health Plan.
- collaborative government-community sector sharing of evidence, resources and skills to develop effective programs to build mental health resilience in the community and to support people living with poor mental health.
- prevention and early intervention approaches to mental well-being, including the provision of services to children and young people.
- greater community understanding of, and efforts to, de-stigmatise mental illness through community education programs.
- building literacy around mental health. This helps clients and the community to understand mental health problems and illness, and assists people to navigate the mental health and allied mental health systems to find appropriate services and support.
- a 'no wrong door' integrated support system that ensures those in need of assistance do not fall between the gaps and do not have to repeat their story to each service provider with whom they have contact.
- targeted, well-resourced interventions for identified at-risk groups, including: Aboriginal and Torres Strait Islander people; lesbian, gay, bisexual, transgender and intersex people; humanitarian entrants; people with a dual-diagnosis of mental health and drug/alcohol issues; people who have experienced family and domestic violence; people experiencing homelessness; women in the peri-natal period; people in prison; and children, including young carers, of parents with a mental illness.
- Mental Health Australia, Beyondblue, Headspace, Children of Parents with a Mental Illness (COPMI) and Child and Adolescent Mental Health Services (CAMHS), Suicide Prevention Australia and similar organisations in their efforts to educate and support the community and individuals about mental health.

## Relationships Australia is committed to ...

- working with Aboriginal and Torres Strait Islander people. We acknowledge that Aboriginal people experience higher rates of depression than non-Aboriginal people, and Aboriginal mental health and well-being needs to be considered in the context of Australian history, social change and the holistic view of health and well-being traditionally taken by Aboriginal people.
- working with culturally and linguistically diverse people who face many barriers to accessing services.
- supporting healthy family relationships through relationship education, counselling, family dispute resolution and family support programs.
- working directly with children, young people and their families to offer support and help develop resilience, recognising that almost one-quarter of Australian children and young people live with at least one parent with a mental illness.
- supporting healthy communities and workplaces through mentoring programs, community development projects and employee assistance programs.
- working collaboratively with government and non-government agencies to provide case-managed, wrap-around services tailored to meet the unique needs of each client.
- working in rural and remote areas to assist individuals, families and communities whose mental health is often disadvantaged by where they live and the economic and social circumstances related to remote and rural living.
- supporting women and children affected by family violence, as safety and a life free from violence are fundamental to good mental health.
- ensuring that financial and social disadvantage do not prevent people from accessing appropriate services.
- continuously improving the skills of our workforce, including being open to working flexibly and in innovative ways to meet the needs of clients with poor mental health.

Relationships Australia's experience in delivering a range of support services targeted at individual and family wellbeing puts it in an excellent position to make an informed, evidence-based contribution to public policy development in the area of mental health, and to use its voice to advocate for the many Australians affected by mental health problems.

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<sup>i</sup> Mathers, C., Vos, T., & Stevenson, C. (1999). The burden of disease and injury in Australia. Canberra: AIHW; Murray, C., & Lopez, A. (1997) Alternative projections of mortality and disability by cause 1990–2020: Global Burden of Disease Study. *The Lancet*, 349, 1498–1504.

<sup>ii</sup> National Mental Health Commission. A Contributing Life, the 2012 National Report Card on Mental Health and Suicide Prevention. Sydney, NMHC, 2012.

<sup>iii</sup> For example see <http://mentalillnesspolicy.org/medical/medication-noncompliance.html>.