

# Mental Health

## We are seeking:

1. Support for our community organisations to prepare for the implementation of Social Prescribing Trials in Banyule. We are asking for \$50,000 over 2 years to deliver Mental Health First Aid training to community leaders from the Aboriginal and Torres Strait Islander community, sporting leaders, multicultural leaders and leaders supporting our socio-economically disadvantaged communities.

## Overview

All Banyule residents deserve to live healthy, happy lives and experience positive mental health and wellbeing. Despite considerable evidence that many mental health conditions are preventable, too many people in our community experience mental health conditions that affect their wellbeing and their ability to participate fully in everyday life.

**Good mental health is as important as physical health. Good mental health helps people to thrive, learn, develop and manage the normal stresses and challenges of life.**

Banyule recognises and celebrates the Victorian Government investments in new local mental health services including the State-wide Child and Family Centre in Macleod and the HOPE adult mental health service at the Austin. These represent important steps towards better supporting residents to access specialised care to address significant mental health challenges. Despite increasing investment in services, the prevalence of mental health conditions in Melbourne's north (and in Australia generally) is rising, services struggle with demand and workforce shortages, and costs to individuals, governments and society are escalating. The COVID-19 pandemic and recent natural disasters have made this crisis worse.

At the same time, service systems in Melbourne's north are already stretched. The Austin Hospital is at capacity, and projected population growth in the region will create significant new demand for all health services. The high level of diversity and disadvantage across Banyule and the Northern region requires advocacy to ensure that mental health and wellbeing services are available, accessible, affordable, and culturally safe and appropriate.

## What we are seeking

**Funding and services to improve and support mental health and wellbeing, and an increased focus on mental health prevention across our region.**

This can be achieved by funding local government to engage in mental wellbeing activities, committing to local government representation on key governance structures and in planning processes relating to promotion and prevention, better recognition and funding for the promotion and prevention work already occurring in local

government, resourcing local government to strengthen data collection and research evidence, and improving the availability of local mental healthcare services.

The Banyule ask is to:

- Support for our community organisations to prepare for the implementation of Social Prescribing Trials in Banyule. We are asking for \$50,000 over 2 years to deliver Mental Health First Aid training to community leaders from the Aboriginal and Torres Strait Islander community, sporting leaders, multicultural leaders and leaders supporting our socio-economically disadvantaged communities.

## Banyule facts and stats

### What do the statistics tell us about mental health presentations?

- 9.2% of Banyule residents reported mental health condition (Census 2021).
- Heidelberg West, Bellfield, Macleod, Heidelberg Heights, Heidelberg, Watsonia and Greensborough residents are more likely to report a mental health condition.
- Females are more likely than males to report a mental health condition, but there are higher presentations for both genders in the suburbs above.
- In Banyule, 331 young people aged 10-14 years, 667 young people aged 15-19 years, and 891 young people aged 20-24 years, experience one or more mental health conditions.
- Other age groups in Banyule with substantial variance in mental health conditions include: 30-34 year bracket (1,116), 25 – 29 year bracket (1071), 35 – 39 year bracket (1067), and 40 – 44 year bracket (1019).
- Of the 11,641 people reporting a mental health condition, 5973 are employed in full-time work, 4710 are not employed, and 3332 have a total personal weekly income of \$300-\$649.
- People who identify as LGBTIQ+ are disproportionately more likely to experience a mental health condition.



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- 19% of First Nations people report a mental health condition (162 people). First Nations people report nearly three times the rate of psychological distress than non-Indigenous people, are hospitalised for mental health-related conditions at between 2.2 times the rate (for males) and 1.5 times the rate (for females) of non-Indigenous people, and the suicide rate for First Nations people is around twice that for non-Indigenous people.
- Adults with disability are also more likely (32%) to experience high or very high levels of psychological distress than adults without disability (8%), and this is even more so for adults with severe or profound disability (40%).<sup>1</sup>

## What does research tell us?

- **Gender:**
  - We know that in Australia women and gender diverse people are over a third more likely than men to be diagnosed with a mental illness.
  - Women and gender diverse people experience inequality, discrimination, abuse, gendered violence, and poverty at a higher rate than men. These gender-related inequities significantly contribute towards people's experience of mental health.
  - The lower rates of diagnosed mental health conditions in men is complicated by gendered differences in willingness to seek help. The research is clear that men are less willing to seek mental health support.
- Multicultural communities experience challenges regarding use of health services and these include:
  - Language barriers
  - Stigma towards mental health issues
  - Mental health illiteracy
  - Distrust and lack of familiarity with mainstream mental health services
- **LGBTIQ+ communities:**
  - had low to medium life satisfaction and a feeling of life being worthwhile, compared with the non-LGBTIQ+ adult population
  - had moderate, high or very high levels of psychological distress, compared with the non-LGBTIQ+ adult population
  - were diagnosed with anxiety or depression, compared with the non-LGBTIQ+ adult population
  - had an experience of family violence, compared with the non-LGBTIQ+ adult population
  - had an experience of discrimination, compared with the non-LGBTIQ+ adult population.<sup>2</sup>

- **Socio-economic status:**
  - populations of lower socio-economic status are in a less resilient position than those of higher socio-economic status and the out-of-pocket costs of care exacerbate the barriers
  - As the Census data below shows, levels of education, employment, income, and marital status all have clear associations with mental health.
- **People with disability:**
  - The ways that mental health and disability intersect are complex, as mental health issues can arise as part of the presentation of a disability, or alternatively mental health issues can themselves result in disability

## Increasing mental wellbeing is an important priority of all local governments

Despite increasing investment in services, the prevalence of mental health conditions in Melbourne's north (and in Australia generally) is rising, services struggle with demand and workforce shortages, and costs to individuals, governments and society are escalating. The COVID-19 pandemic and recent natural disasters have made this crisis worse. At the same time, service systems in Melbourne's north are already stretched.

**The high level of diversity and disadvantage across Melbourne's north requires advocacy to ensure that mental health and wellbeing services are available, accessible, affordable, and culturally safe and appropriate.**

Melbourne's north should be a priority area for establishment of new mental healthcare initiatives and local mental health services. Local wellbeing support and other community services are also needed to support people living with mental health challenges. Along with increased investment in and improvements to mental health services in Melbourne's north there is a need to increase investment in local government mental health prevention and promotion activities.

A partnership approach between all levels of government is required where data collection, research evidence and best practice approaches inform improved coordination and service delivery across the mental health and wellbeing continuum, from prevention and early intervention to crisis responses and treatment.



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FOR MORE INFORMATION

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<sup>1</sup> Ibid.

<sup>2</sup> Department of Health Victoria, 'LGBTIQ+ Victorians', accessed 03 April 2023, <<https://www.health.vic.gov.au/chief-health-officer/lgbtiq-victorians>>.