



Victoria's next 10-year mental health strategy

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Executive summary

Women's Health West welcomes the opportunity to provide feedback to *Victoria's next 10-year mental health strategy* and commends the Victorian government for the development of this strategy. To strengthen the strategy's capacity to optimise the mental health and wellbeing of Victorians, Women's Health West provides the following recommendations:

1. Identify the different settings for mental health promotion action in the scope of the strategy
2. Clearly identify all groups at particular risk of poor mental health, such as women, people with a disability, culturally and linguistically diverse communities, Aboriginal and Torres Strait Islander people and gay, lesbian, bisexual, transgender, intersex and queer people, in the scope of the plan to ensure their visibility throughout the strategy and its associated outcomes
3. A stronger commitment to the social determinants that drive good mental health and wellbeing in our community, such as gender equity, freedom from violence and discrimination and access to economic and social resources
4. A greater focus throughout the strategy on primary prevention, population health and health promotion as the key to lifelong mental health
5. Include sex-disaggregate data pertaining to mental health and wellbeing at all levels of the strategy in order to develop an understanding of the gendered nature of mental health and wellbeing
6. Include mental health promotion as a guiding principle to ensure actions have a systems-based approach and work across the spectrum of prevention, early intervention and response
7. Integrate a gender-sensitive approach to mental health promotion, policy and program and service provision as a guiding principle
8. Undertake mental health promotion efforts in a range of settings, including schools, workplaces, community services, the corporate sector, recreational and sport settings, the arts, health and justice services and public services
9. Include an outcome that focuses on promoting a society in which all Victorians live free from violence and discrimination through effective prevention, early intervention and response efforts
10. Recognise the important role of women's health services in the coordination and facilitation of regional plans to prevent poor mental health in women, young people and children

11. Incorporate and support recommendations from the Royal Commission into Family Violence into the mental health strategy that relate to best practice prevention, early intervention and response

12. Align this strategy with other policy frameworks including the Victorian Public Health and Wellbeing Plan.

Our submission has been endorsed by the following women's health services:



Introduction

Women's Health West (WHW) has actively contributed to the health, safety and wellbeing of women in the western region of Melbourne since 1988 through a combination of direct service delivery, research, health promotion, community development, capacity building, group work and advocacy. Our health promotion, research and development unit offers a range of programs and projects targeted to prevention and early intervention strategies to improve outcomes for women's health, safety and wellbeing. We are leaders in the development of regional strategies to further our work, seeing partnership within and outside the sectors in which we work as crucial for bringing about effective and sustainable outcomes for women and children.

In 1994 we expanded our organisation to encompass delivery of family violence services for women and children ranging from crisis outreach and court support, to housing establishment and crisis accommodation options, to counselling and group work programs. WHW has been an active and strong supporter of family violence reform at a regional and state-wide level, integrating and coordinating family violence services in our region, and ensuring the integration of those services with a range of related sectors, including the housing sector.

As a feminist organisation we focus on redressing the gender and structural inequalities that limit the lives of women and girls. WHW's work is underpinned by a social model of health, recognising the important influence of, and aiming to improve, the social, economic and political factors that determine the health, safety and wellbeing of women and their children in our region. By incorporating a gendered approach to health promotion work that focuses on women, interventions to reduce inequality and improve health outcomes will be more effective and equitable.

WHW's service provision experience and expertise in working with women to improve their mental health and wellbeing

- Lead on Again: The program builds the knowledge and capacity of young women from culturally and linguistically diverse backgrounds to feel safe and connected, recognise their strengths, and develop new skills to become active leaders in their community.
- Our Community Our Rights: The program support women's understanding, skills and confidence to engage in actions that promote and protect their own and their communities' human rights, and to actively participate in their communities and civil society.
- Financial Literacy: This program supports women from newly-arrived communities to effectively engage with Australian financial systems. Many of these women grew up in countries or refugee camps with cash-based economics and also had limited access to education and this program aims to improve their understanding of complex financial systems in Australia to assist with their settlement.
- Sunrise Women's Groups: Women come together to connect and overcome the barriers associated with experiencing a mental illness in this strengths-based program

that offers safe, inclusive and supportive fortnightly groups, and is underpinned by a participatory approach driven by the women who attend.

- Power On: A 12-week program designed for women who experience a mental illness. The program is comprised of modules that women have identified as key to enhancing their health and wellbeing. One of the strengths of Power On is the peer education approach that recognises women as experts in their own health. Participants continue to attribute significant change in their lives to the program.
- Power On for Carers: An 8-week peer education program for women who are carers of a person who experience a mental illness, designed to enhance their own wellbeing. The program recognises the gendered nature of caring responsibilities and that this role can often lead to isolation and poor mental health and wellbeing outcomes for women.
- WHW is the lead agency for Preventing Violence Together: This is a regional partnership to prevent violence against women in Melbourne's western metropolitan region. WHW is the lead agency for this regional partnership of eighteen formal partners that are committed to implementing strategies to prevent violence against women. Examples of primary prevention strategies within partner workplaces include implementation of gender audits of workplaces, and development of resources and training to build understanding of the drivers of violence against women.
- Intensive case management for women who experience family violence/abuse: WHW provide intensive case management support for between six months and two years, working collaboratively with other agencies to assist women to achieve their goals. This includes identifying when levels of risk require action to increase a woman's safety by working closely with the police and other agencies.

Definitions

WHW's programs that are designed to promote women's mental health and wellbeing are informed by the following internationally and nationally recognised definitions.

The World Health Organisation defines mental health as:

A state of wellbeing in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community (WHO, 2010).

VicHealth's definition of mental health and wellbeing includes the:

Embodiment of social, emotional and spiritual wellbeing. It provides individuals with the vitality necessary for active living, to achieve goals and to interact with one another in ways that are respectful and just (VicHealth, 2005).

Mental health promotion requires action to ensure positive environments for good health and wellbeing that:

Influence determinants of mental health and redress inequalities through the implementation of effective multi-level interventions across a broad number of sectors, policies, programs, setting and environments (Keleher and Armstrong, 2006).

Is this the right vision for the next 10-year mental health strategy?

WHW congratulates the Victorian government on the development of the 10-year strategy that takes a strengths-based, holistic approach to improve the mental health and wellbeing of all Victorians. WHW supports the cross-sectoral vision that recognises the role that all levels of government, non-government organisations, the private sector, businesses and the wider community play in improving mental health outcomes for all Victorians.

WHW also commends the vision's focus on promoting 'social inclusion and economic participation' as the fundamental building blocks of positive social and emotional wellbeing. It is well known these social and economic determinants are key drivers of mental health outcomes and as such upstream health promotion initiatives that redress these societal inequities, as well as more targeted individual responses, are needed. Furthermore, we commend the vision's focus on redressing barriers and disadvantage that disproportionately impact people living with a mental illness. Through our work, WHW knows that people who experience a mental illness are highly likely to experience additional disadvantage and discrimination, which further impedes their mental wellbeing and hinders their overall health outcomes.

Is this the right scope for the next 10-year mental health strategy?

WHW commends the government on its recognition in the scope of the strategy of the importance of prevention, as well as treatment, early intervention, social support and primary care. To achieve positive mental health outcomes for all Victorians, an integrated mental health and wellbeing plan with wider community care models of service that are cross-sectoral and multi-faceted, are paramount. Strategies need to focus on primary prevention, as well as early intervention and treatment for the greatest reach and impact. WHW commends the government's recognition that the best mental health outcomes will be achieved through broad and universal outcomes and action. For clarity, we recommend the different settings for mental health promotion work be identified in the scope, including schools, workplaces, community services, the corporate sector, housing and transport services and throughout the health and justice system.

WHW commends the government for identifying Aboriginal and Torres Strait Islander people as a group that is particularly at risk of poor mental health in the strategy. This will ensure that programs and initiatives redress some of the societal, social and economic factors that disproportionately impact our First Nations people. We would like to recommend that other groups who are also known to be at greater risk of poor mental health be identified in the strategy, in addition to being referenced in the strategy's technical papers. Gender, race, ethnicity, sexuality, ability, age, socioeconomic status and rurality play a role in mental health onset, diagnosis, treatment and prevention, and intersect to hinder and/or enable mental health outcomes. WHW recommends that women, culturally and linguistically diverse people, people with a disability, and lesbian, gay, bisexual, transgender and intersex people be

identified in the scope as at risk groups. By clearly articulating and acknowledging in the scope of the strategy the different experiences and access to primary prevention, intervention programs and health services for different communities, we will ensure all of these groups are visible and considered throughout the strategy and its associated outcomes.

Recommendation: *Identify the different settings for mental health promotion action in the scope of the strategy*

Recommendation: *Clearly identify all groups at particular risk of poor mental health, such as women, people with a disability, culturally and linguistically diverse communities, Aboriginal and Torres Strait Islander people and gay, lesbian, bisexual, transgender, intersex and queer people, in the scope of the plan to ensure their visibility throughout the strategy and its associated outcomes*

Why would a new strategy for mental health be important to you?

A new mental health strategy is important to WHW, as it is the opportunity to develop a strategy that acknowledges that women and men experience mental health and mental illness differently, and that there are clear gendered differences in risk factors, protective factors, prevalence, diagnosis, treatment and outcomes of mental health and wellbeing. Reasons to consider women and men's mental health and wellbeing using a gendered approach include:

- That depression and anxiety will be the greatest single contributor to the burden of disease in Australian women and the third greatest in Australian men by 2023 (Australian Institute of Health and Welfare, 2007)
- That up to 90 per cent of eating disorders occur in women (Australian Bureau of Statistics, 2008)
- That one in six mothers experience mild, moderate or severe forms of peri-natal and/or post-natal depression (Australia Women's Health Network, 2012).

In addition to differences in diagnoses and mental health outcomes, the risk factors and protective factors are different for women and men. Risk factors that disproportionately impact women include poverty and limited access to resources and economic participation (such as employment and educational opportunities) and strict gender norms and stereotypes. These risk factors are a result of entrenched gender inequities within our society, and are demonstrated by the current gender pay gap of almost 20 per cent between women and men (Workplace Gender Equality Agency, 2015) and the level of violence perpetrated against women by men. One in three Australian women will experience physical violence and one in five women will experience sexual violence over their lifetime (VicHealth, 2012). Known protective factors for good mental health among women include participation in community activities; freedom from violence; supportive relationships; self-esteem and self-efficacy; access to education and employment; economic and social participation; empowerment and an increased sense of belonging.

A new mental health strategy is also the opportunity to ensure that the approach for the next 10-years is heavily grounded in upstream health promotion initiatives. Upstream health promotion ensures social and economic determinants that drive poor mental health outcomes, particularly among disadvantaged groups, are redressed through enabling people to take greater control of their lives in areas outside of health (see Example 1 and Example 2 below). This strategy can support redressing social exclusion, limited access to resources and secure housing, and violence and discrimination, as identified by VicHealth as key drivers of poor mental health and wellbeing (2010).

Example 1: WHW's Financial Literacy Project

Objective: Increase the capacity of women from newly-arrived communities in the west to negotiate financial systems, take control of financial decision-making and access economic resources by providing financial literacy training to target communities.

Indicators: Women increased their financial capability and experience increased confidence to access financial and other services. Service providers have increased knowledge about the needs of newly-arrived women and their communities within their local area.

Key results: The Eritrean Financial Literacy Program provided an opportunity for Eritrean women to learn about and discuss their needs and interests. The program supported women to establish relationships with local service providers, including Spectrum Migrant Resource Centre, Footscray Community Legal Centre, the Telecommunications Industry Ombudsman and Centrelink. The evaluation found that the program supported women to develop practical skills about financial literacy information. Policy makers are better informed of the structural barriers affecting migrant and refugee women's economic participation.

Quote from a participant: "I feel different now, less scared and less stressed about money".

Example 2: WHW's Our Community Our Rights Project

Objective: Develop women's understanding, skills and confidence to engage in actions that promote and protect their rights, and actively participate in their communities and civil society.

Indicators: Women increased their skills, knowledge and confidence in human rights, project planning, community engagement and civil participation.

Key results: Of the women who participated in the third iteration evaluation of this project 100 per cent reported increased confidence, self-efficacy, social connectedness, civic participation and understanding of human rights.

Quote from a participant: "I have always wanted to be a part of change that positively affects the lives of vulnerable women and children. This project has given me the opportunity of time, resources and fellowship of likeminded women to make it a reality".

This is also the opportunity to ensure that actions to prevent and respond to poor mental health are undertaken in a variety of settings across our community through strong cross-sectoral partnerships and coordination. In recognising the strategy's focus on working across sectors, we recommend actions take place in the following settings to promote positive mental health; in schools, workplaces, community services, the corporate sector, recreational and sport settings, the arts, health and justice services and public services (see Example 3 – a school-based sexuality education health promotion project).

Example 3: WHW's Girls Talk- Guys Talk Project

Overview: Research shows that an effective way to improve the long-term sexual and reproductive health of the community is to ensure that young people have sufficient sexuality education that supports their ability to make healthy decisions about their relationships and sexual practices.

Objective: Build the capacity of health professionals to implement Girls Talk- Guys Talk in schools across the western region

Indicators: Partners collaborate and deliver health education to young people to increase their sexual health knowledge, promote respectful relationships and to prevent sexual assault.

Key results: Young people increased their knowledge in relation to puberty and reproduction, pathways and prevention of teenage pregnancy, safe sexual practices, sexuality, respectful relationships, mental health promotion and promotion of sexual diversity.

Recommendation: *A stronger commitment to the social determinants that drive good mental health and wellbeing in our community, such as gender equity, freedom from violence and discrimination and access to economic and social resources*

Recommendation: *A greater focus throughout the strategy on primary prevention, population health and health promotion as the key to lifelong mental health*

Recommendation: *Undertake mental health promotion in a range of settings, including schools, workplaces, community services, the corporate sector, recreational and sport settings, the arts, health and justice services and public services*

Do these principles reflect what is important to you?

WHW commends the government on the principles outlined in this strategy. We are pleased to see that the social model of health has been identified as a guiding principle to inform subsequent actions in this strategy as there are a myriad of societal factors that impact on a person's mental health, including housing security, access to a good income, social connectedness and freedom from discrimination and violence (VicHealth, 2010). We also commend the government for its acknowledgement of the importance of equity and diversity as a guiding principle for this work given that we know that particular groups are at greater risk of poor mental health, and given that discrimination is known to be a key driver of poor mental health outcomes.

To strengthen the strategy, WHW recommends that the strategy include a gender-sensitive principle to ensure the different needs of women and men are met. A gender-sensitive approach to this strategy will ensure that gender differences, norms and roles and women and

men's subsequent access to power, resources and the impact this has on mental health are acknowledged. This principle will support data to be sex-disaggregated ensuring that findings are not gender blind. This will also include incorporating a gender perspective into actions, policy and practice, and enable actions to redress gender-based health inequities.

To give an example of the importance of integrating a gender-sensitive principle in the design of policy, programs and services, consider suicide prevention, which is identified as a key outcome of the strategy. Evidence shows that the patterns of suicide and suicide attempts are gendered (ABS, 2010; WHV, 2011). In Australia, men commit suicide three times more often than women; however, women attempt suicide three times more often than men (ABS, 2010). Because suicide attempts are for the most part under-reported, women are subsequently overlooked in the design and implementation of suicide prevention strategies despite the fact that they are more likely to engage in suicidal behaviours (WHV, 2011). Given the gendered nature of suicide and other mental health difficulties such as depression and anxiety, improving access to mental health prevention activities and programs, particularly for disadvantaged women, is key. The inclusion of a gender-sensitive approach in this strategy and to mental health promotion will ensure that Victorian policy, program and service delivery is in line with best-practice (WHO, 2005; VicHealth 2005).

We also suggest that mental health promotion be identified as a guiding principle for this strategy as a cost effective measure for managing and reducing the economic burden of mental health in our society. Mental health promotion is the process of enabling people to increase control over their lives and redresses the social determinants of poor mental health. Mental health promotion targets the mental wellbeing of those who are not at risk, those who are at increased risk, and those who are suffering or recovering from poor mental health through taking actions to redress environmental, political and economic conditions factors that impact on people's mental health and wellbeing.

Recommendation: *Integrate a gender-sensitive approach to mental health promotion, policy and program and service provision as a guiding principle*

Recommendation: *Include sex-disaggregate data pertaining to mental health and wellbeing at all levels of the strategy in order to develop an understanding of the gendered nature of mental health and wellbeing*

Recommendation: *Include mental health promotion as a guiding principle to ensure actions have a systems-based approach and work across the spectrum of prevention, early intervention and response*

Do you agree with taking an outcomes approach?

We commend the government on taking an outcomes approach in this strategy as this will ensure the government and other funded sectors are accountable to the outcomes proposed and ensures key goals are articulated and measurable.

What is your view about the proposed actions?

While the strategy details the importance of working to redress the 'unfavourable social, economic and environmental circumstances' that lead to poor mental health and mental illness, and prevention is strongly articulated in the vision and scope, many of the outcomes identified are wedded to downstream actions that are focussed on individual behaviour change and response to poor mental health rather than prevention. We recommend more actions under each of the outcomes are committed to prevention and have an upstream health promotion focus. These actions need to commit to redressing some of the social and economic factors that lead to poor mental health in our community as identified in VicHealth's *Framework for the Promotion of Mental Health and Wellbeing* (2005).

For example in response to the outcome, 'reducing disadvantage and increasing social and economic participation' we support the narrative that acknowledges that 'social inclusion, freedom from discrimination and violence, and access to economic resources are the most significant determinants of mental health'. We therefore suggest that actions align with primary prevention of mental health as well as response. Below are some alternative actions:

- Increase the proportion of people at risk of mental illness in stable, affordable and safe accommodation
- Enhance the support for social and economic participation of people experiencing social isolation
- Provide timely, effective and coordinated services for women and children, experiencing family violence
- Redress gender inequity and access to power and resources through promoting pay equity

We also strongly recommend including an additional outcome in the strategy that focuses on ensuring women and children live free from violence as a key priority area to improve mental health and wellbeing in our community. Given the pervasiveness of violence against women in our community, that children often witness this violence and that violence against women and children is a key determinant of poor mental health (VicHealth, 2010), we recommend this priority area be identified as a separate outcome. Although this problem is mentioned under the outcome focussed on trauma, WHW recommend that this strategy align with other current policy frameworks, such as the Victorian Public Health and Wellbeing Plan (2015), and highlight preventing violence as a key outcome priority. We also recommend that this strategy subsequently support the recommendations from the Royal Commission into Family Violence when they are released in February 2016.

Recommendation: *Include an outcome that focuses on promoting a society in which all Victorians live free from violence and discrimination, through effective prevention, early intervention and response efforts*

Recommendation: *A greater focus on primary prevention, population health and health promotion as the key to lifelong mental health throughout the strategy*

Recommendation: *Align this strategy with other policy frameworks including the Victorian Public Health and Wellbeing Plan*

Recommendation: *Incorporate and support recommendations from the Royal Commission into Family Violence into the mental health strategy that relate to best practice prevention, early intervention and response*

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