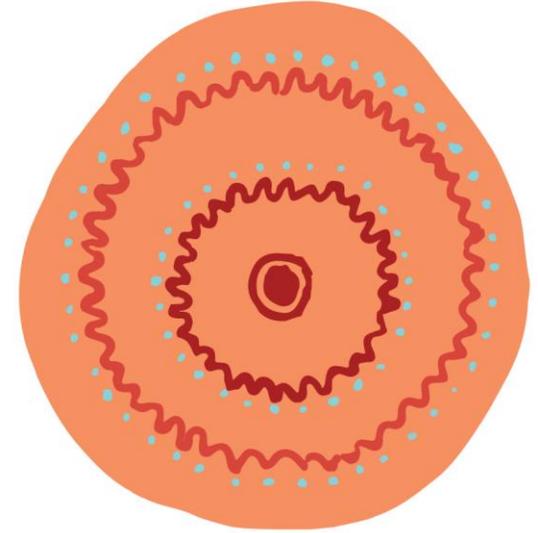




Australian Government

National Mental Health Commission

**Making
Connections
with your
Mental Health
and Wellbeing**



**Dandenong, VIC
04 September 2019**

22 Participants

This snapshot identifies key points from the
Town Hall Meeting
Content from all Town Hall Meetings is being
collated by the Commission

Help Seeking

Participants were asked what stops them or someone they know from seeking help.

Direct comments included:

- 'Fear of being labelled as "crazy"'
- 'Self blame, not knowing what to do and where to seek help'
- 'It may take a while to find the right service so repeating your story / trauma can be disempowering'
- "Lack of appropriate local resources, long waiting lists, no bulk billing providers'
- 'Feeling like health practitioners don't have time to listen'
- 'Lack of family support and understanding'
- 'Fear of being deported from Australia or losing children if seen unwell'
- 'As a victim of crime, put into a psychiatric ward and having child taken away, all because they called it a Section 351'

Help Seeking

Participants were asked what stops them or someone they know from seeking help.

Discussion points included:

- If you don't trust the practitioners that you are seeking help from, the relationship doesn't work
- For psychologists and psychiatrists, support for interpreting is not covered under Medicare funding
- Services for young people and students are not available at the time they need them, and the opportunity is lost
- Very few services are geared to reaching out beyond one-to-one consultations, especially for different cultures and communities
- The cost of specialist support, with virtually no bulk billing and a large gap fee for private psychologists or psychiatrists
- It is now 'normal' to be suicidal; what are we doing wrong in society that results in suicide being a significant cause of death?
- Profound dysfunction between the drug and alcohol system and the mental health system

Big Ideas or Initiatives

Participants were asked for one big idea or initiative to improve mental health in their community.

Direct comments included:

- 'Increase acute psych beds to OECD average of 50 per 10,000 compared to Victoria now at 22 and NSW at 36'
- 'Provide a free interpreter service to psychiatrists and psychologists (including private) like GPs have'
- 'Emphasis on what underlies the psychological distress as opposed to a focus on treating the symptoms'
- 'Health systems need to have a human face, a human story and recognise our humanity. Humans don't exist as a point in time, they exist in a context. People need to be connected to their life, to be productive, to work and to build relationships'
- 'Effective media in multiple languages across multiple platforms (not just online) to increase awareness of mental health. Needs to be gender and culturally aware, noting some psychological concepts may not be clearly established in some languages'
- 'Mental health awareness needs to also destigmatise low prevalence disorders, eg: mood disorders and psychotic disorders. Also need to understand the wide range of severity of anxiety and depression, as it's sometimes referred to flippantly'

Big Ideas or Initiatives

Participants were asked for one big idea or initiative to improve mental health in their community.

Discussion points included:

- Along with the public advertising and exposure in languages other than English, bring multilingual campaigns of mental health awareness and access to support into the schools
- Address the fundamental values and the social and cultural mores to emphasise true connection for people needing support rather than taking another pill
- Change the funding system so that there is a package of money that goes to the person with the illness who then determines the most appropriate support mechanisms needed; put the money where you want the outcomes to be
- Address the issue of mental safety arising from social media and the digital revolution
- Greater cultural awareness and education for professional health workers
- Service for the duration of what is needed, for inpatient admissions

The Developing Vision

Participants were asked for key aspects to be included in the vision of a new system.

Responses included:

- Purpose – a reason to get well rather than a focus on limiting the negatives
- Holistic approaches
- Personalised plans that take a broader view of the context of a person's life and all of its dimensions, rather than just a clinical treatment plan
- Acknowledgement that mental illness may be a consequence of many other factors
- Co-participation so that people are designed into all aspects of the care and recovery journey
- Permanent, supported housing for those who need it
- Peer support as a central feature
- Importance of the relationship between the client and the counsellor as the key to recovery

Thank You, Dandenong

The Commission thanks the community for their comments and suggestions on improving our mental health system

Ways to stay connected:

- ✓ Attend a Town Hall meeting
- Read the snapshots from your community and other communities in Australia
- Take the survey online (on our website)
- Follow us on Facebook (@NMHCAustralia) and Twitter (@NMHC)
- Join the conversation online using #ConnectingWithYou

www.mentalhealthcommission.gov.au

