



## The Benevolent Society Social Issues Paper 6

# Mental health

**Mental health problems can affect people of all ages and backgrounds, often leading to isolation and discrimination. Social inclusion and supportive relationships promote good mental health and individual and community wellbeing. The Benevolent Society works with people affected by mental illness to build their resilience and independence. We support the right of all people with mental illness to lead full, active lives.**

### Why this is important

Good mental health helps people to cope with the normal stresses of daily life, be productive at work, realise their own potential and contribute to their community. Good mental health is much more than the absence of mental illness - it is essential to individual, family and community wellbeing.

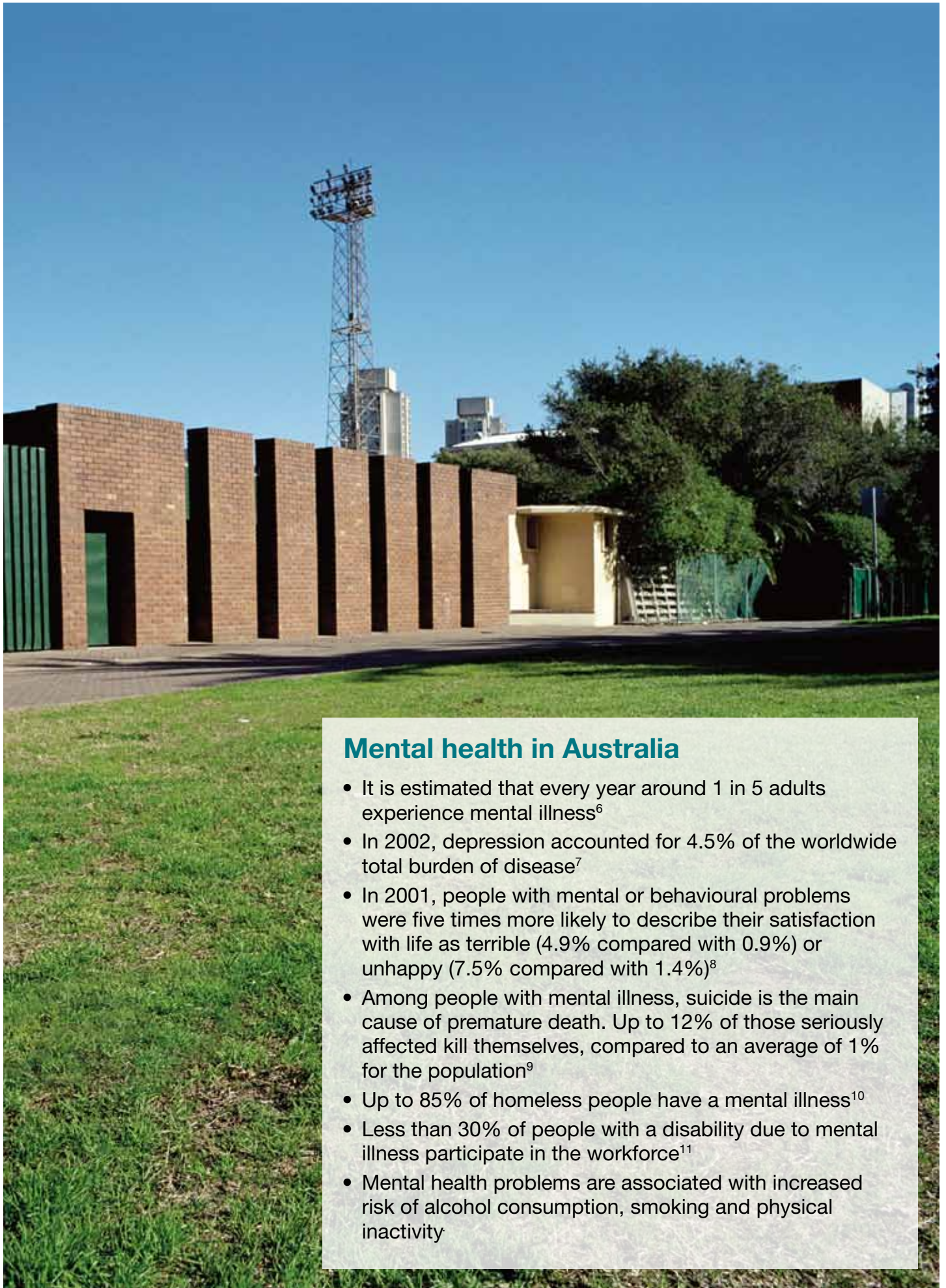
Poor mental health is the main cause of the non-fatal burden of disease and injury in Australia, and is estimated to be the third largest contributor to the total burden of disease<sup>1</sup>. It is estimated that by 2020, depression alone will represent one of the largest health problems worldwide<sup>2</sup>. Mental illness and mental health problems can affect people of all ages and backgrounds, and can occur at different times in people's lives or be a chronic and long term problem.

Mental illness is an illness just like any other, but the myths and negative stereotypes that surround it can lead to people being isolated, stigmatised and discriminated against. We believe that people with mental illness should be able to feel valued and live with dignity in a community where differences and diversity are respected.

### The importance of social inclusion

Social inclusion has a powerful protective effect on health. Social support, good friendships, and the ability to participate in economic and community life help people to maintain good mental health. Belonging to a social network can make people feel loved, valued and cared for<sup>3</sup>.

Research shows that supportive relationships encourage healthier behaviour patterns, improve wellbeing by acting as a buffer against stress, and influence self-esteem and the ability to cope<sup>4</sup>.



## Mental health in Australia

- It is estimated that every year around 1 in 5 adults experience mental illness<sup>6</sup>
- In 2002, depression accounted for 4.5% of the worldwide total burden of disease<sup>7</sup>
- In 2001, people with mental or behavioural problems were five times more likely to describe their satisfaction with life as terrible (4.9% compared with 0.9%) or unhappy (7.5% compared with 1.4%)<sup>8</sup>
- Among people with mental illness, suicide is the main cause of premature death. Up to 12% of those seriously affected kill themselves, compared to an average of 1% for the population<sup>9</sup>
- Up to 85% of homeless people have a mental illness<sup>10</sup>
- Less than 30% of people with a disability due to mental illness participate in the workforce<sup>11</sup>
- Mental health problems are associated with increased risk of alcohol consumption, smoking and physical inactivity

## Determinants and impacts of mental health

The conditions in which people live affect their physical and mental health. The causes of mental illness are complex, but there is clear evidence that the risk of poor mental health is linked to poverty, unemployment, social exclusion and poor housing<sup>5</sup>.

Lack of control over home and work life, including job insecurity, and low self-esteem can result in mental health problems. Family and domestic violence have a significant negative impact on women and children's mental health. Migration and resettlement can also lead to an increased risk of poor mental health, especially where there is trauma and/or prolonged stress.

Poor mental health affects families, carers, friends and others in the community, and there are often intergenerational impacts. Children can be profoundly affected by parental mental illness, with effects continuing into adulthood. Poor mental health in older age affects people's quality of life and the ability to 'age well'. We also recognise the continuing and intergenerational effects of the history of dispossession, family separation and discrimination on the mental health and wellbeing of Indigenous Australians.

## What should be done

The availability of mental health services alone is not enough. Most of the risk and protective factors that affect an individual's mental health fall outside the scope of mental health services, which mainly deal with people once they have reached crisis point.

Strong, supportive community environments, mental health promotion, early diagnosis of problems and appropriate treatment are critical for reducing the impact of mental illness. People with mental health problems need pathways and support to participate in community life, such as employment, education and volunteering opportunities.

We need the involvement of individuals, communities and all sectors to promote good mental health. We can all encourage social connections and participation through access to leisure and cultural activities, supportive social relationships and connections to the local community.

Organisations can raise awareness of mental health issues, promote positive images and combat negative stereotypes. They can raise awareness of the risk of abuse faced by people with mental illness and advocate for people's rights.

Organisations can also encourage participation so that people with mental illness and their families have meaningful input into decisions that affect them and policy and planning processes.

Community organisations and governments must work together to combat the structural causes of social exclusion. The starting point for promoting good mental health is when people have adequate incomes, secure housing, education, training, access to services and choices about their lives.

We can all treat people affected by mental health issues with respect, and support them to exercise control over their lives and live with dignity.

## Endnotes

1. Australian Institute of Health and Welfare, *Australia's Health 2006*
2. VicHealth, *Burden of Disease due to Mental Illness and Mental Health Problems*, 2007
3. Wilkinson, R. and Marmot, M. *Social Determinants of Health: The Solid Facts*. World Health Organisation, 2003.
4. VicHealth, *Social Inclusion as a Determinant of Mental Health and Wellbeing*, 2005
5. VicHealth, 2007.
6. Mental Health Coordinating Council, *Social Inclusion: Its Importance to Mental Health*, 2007
7. VicHealth, 2007.
8. Australian Bureau of Statistics, *Mental Health In Australia: A Snapshot*, 2001
9. SANE Australia, *Suicidal Behaviour and Self Harm: The Facts*, 2005
10. Mental Health Coordinating Council, 2007
11. Mental Health Coordinating Council, 2007

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## Other sources of information

Australian Government Department of Health and Ageing, *What is Mental Illness?*, 2007

Australian Institute of Health and Welfare, *The Burden of Disease and Injury in Australia*, 1999

Hickie I., Groom G., Davenport T. Mental Health Council of Australia, Brain and Mind Research Institute, *Investing in Australia's Future; The Personal, Social and Economic Benefits of Good Mental Health*, 2004

World Health Organisation, *Promoting Mental Health: Concepts, Emerging Evidence, Practice*, 2004

VicHealth, *Evidence-based Mental Health Promotion Resource*, 2006

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## Social Issues Papers

The Benevolent Society works with vulnerable individuals, families and communities who face a wide range of difficult issues which affect their wellbeing and their social and economic participation. Our Social Issues Agenda identifies 12 broad issues that are related to social and economic inclusion, and our series of issues papers explores these challenges and some potential solutions. To read the full series of social issues papers go to [www.bensoc.org.au](http://www.bensoc.org.au)

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