



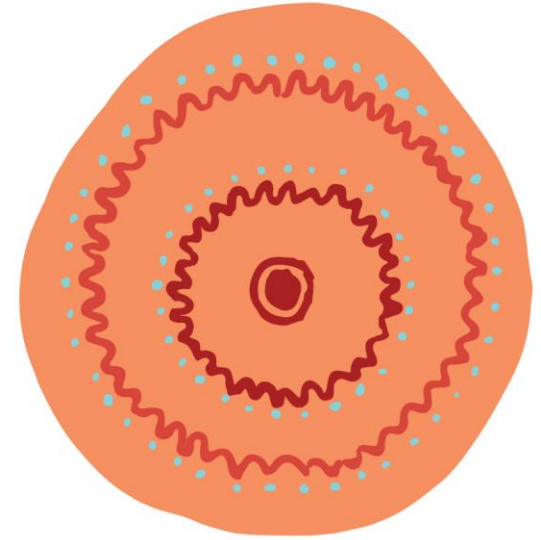
Australian Government

National Mental Health Commission

Gungahlin, ACT

21 August 2019

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



40 Participants

This snapshot identifies key points from the
Town Hall Meeting

Content from all Town Hall Meetings is being
collated by the Commission

Exploring Mental Health



Participants were asked to share 3 words that come to mind when thinking of mental health:

- Wellbeing, support and family were the dominant responses
- Lonely, depression and stigma were frequent responses
- Children and community were mentioned a number of times

Help Seeking

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

Direct comments included:

- 'Don't know who to ask or where to go to for help'
- 'My GP won't have time to talk to me as she is always running late and the waiting room is full'
- 'Previous help, or an outcome that was not successful, helpful or enjoyable'
- 'Fear of unknown or high costs'
- 'The gap between waiting for an appointment with a specialist, and going straight to the Emergency Department. What's available in between?'
- 'Self stigma and guilt because of previous poor choices'
- 'Fear of having children taken away – one third of children in out of home care in the ACT are Aboriginal'
- 'Being told and offered medication instead of a recognition that many of my problems are loneliness, lack of money, the need for a job and understanding of my illness'

Help Seeking

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

Discussion points included:

- Being shunted back and forth between the mental health and the substance abuse agencies
- Extremely difficult to get help for boys in the 8 to 15 years age
- The inability of the public school system to provide support for students with social anxiety and the lack of integration with alternative schooling such as distance education
- Lack of services for the 'missing middle' (ie: not crisis, not youth but adversely affected by the system)
- Having to handle housing problems, domestic violence, being a parent means putting all of these things before any attention to personal mental health issues
- Staff not listening or respecting personal insights into the illness, feeling invisible and surviving despite the services
- Shame and risk of being bullied
- Working in the sector and being worried about the impact disclosing a mental health issue might have on career

Big Ideas or Initiatives

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

Direct comments expanded during discussion included:

- 'Youth mental health first aid becoming mandatory in all schools. Friends are usually the first respondents to suicide ideation and they need the tools to be able to respond appropriately whilst being safe'
- 'Postnatal care in the ACT is incredible and I would model mental health services after that (nurse to visit at home, resources, access to free groups, etc)'
- 'Co-design, co-design, co-design, working with people with lived experience as equal partners in designing, evaluating and monitoring services, policies and key mental health developments'
- 'Intentional design of a small, supportive, low stress school in Canberra to provide education through to Year 12 for students with emerging serious mental illness...could link with clinical expertise and early education for families too'
- 'Culturally appropriate model of social emotional wellbeing in mental health and suicide for Indigenous youth'
- 'Turn the situation and power dynamic on its head – have more mental health organisations and services where the criteria for getting a job is to have a mental illness to be employed'
- 'Kindness Campaigns to promote compassion in our communities'

Big Ideas or Initiatives

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

Discussion points included:

- Revisit previous successful models from as early as the 1950s that were based on an integrated approach of medical services, employment services and social support services
- Tackle the issues of legislation and privacy that limit counsellors talking to each other or sharing information with carers or family members that would help recovery
- Address the social determinants of mental health by implementing a universal, unconditional basic income scheme
- More community and public figures saying they have a mental illness or that they support people with mental health challenges
- Separate the mental illness from the justice system and especially, recognise substance abuse and its impacts on mental health as social issues
- A safe drop-in place to go when people are not feeling okay – don't have to say anything, just have a cup of coffee and peer workers to sit with. Maybe also dogs!
- Focus on secure, safe, supported housing, employment, education and social inclusion for all, especially for the most needy when they need it

The Developing Vision

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

- Trust and connections
- Respect
- Togetherness
- Kindness, empathy and tolerance
- Social supports
- Open dialogue
- Emotional intelligence
- Empowerment
- Communities of recovery

Thank You, Gungahlin

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

