Improving Aboriginal and Torres Strait Islander Social and Emotional Wellbeing

beyondblue submission to the
Close the Gap Refresh Process

April 2018

Introduction

beyondblue's focus and approach

beyondblue is a national, independent and bipartisan not-for-profit organisation working to promote good mental health, prevent suicide and improve the lives of individuals, families and communities affected by depression, anxiety and suicide.

This submission focuses on policy recommendations to drastically improve the social and emotional wellbeing[1] of Aboriginal and Torres Strait Islanders, as the Government moves to refresh the Closing the Gap process. *beyondblue* is a member of the Closing the Gap Campaign Steering Committee, and we seek to ensure our advocacy represents the views of Aboriginal and Torres Strait Islander peoples.

Submission arguments 'in a nutshell'.

The central arguments of this submission are:

- There is a crisis in social and emotional wellbeing in many Aboriginal and Torres Strait Islander communities. Aboriginal and Torres Strait Islander peoples have defined the solutions that will work for their communities, and these may not always meet the way we think about and design mainstream mental health and suicide prevention interventions.

- Action on mental health and suicide prevention is critical in its own right and is also a lynchpin to achieving Closing the Gap targets in all other areas, notably education, labour market participation and mortality. Without good mental health, it is hard for children to learn, or for adults to get jobs and excel at work. People with poor mental health die significantly earlier than average.

- There is demonstrated under-investment in culturally appropriate services and supports that promote the social and emotional well-being of Aboriginal and Torres Strait Islander peoples and prevent suicide.

- There are proven approaches that can deliver recovery in the social and emotional wellbeing of Aboriginal and Torres Strait Islander peoples. With positive social and emotional wellbeing, Aboriginal and Torres Strait Islander peoples will be much better positioned to fulfil their potential in education, work, their families and broader life.

- To drive this change, the Government can:

  o Establish Close the Gap targets to improve the mental health of Aboriginal and Torres Strait Islander Australians.

  o Lift investments to address service gaps.

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[1] 'Social and emotional wellbeing' is recognised as the term preferred by Aboriginal and Torres Strait Islander people instead of mental health. It is a more holistic term that encourages people to consider the historical, cultural, social and personal psychosocial factors that impact on the wellbeing of Aboriginal and Torres Strait Islander people. It includes physical, psychological, social and spiritual dimensions that are influenced by an individual's connection to land, sea, culture, ancestry, family and community. See Garvey, D. (2008), A review of the social and emotional wellbeing of Indigenous Australian peoples – considerations, challenges and opportunities. Retrieved 13th January 2012 from http://www.healthinfonet.ecu.edu.au/sewb_review

Recommendations

Social and Emotional Wellbeing targets

None of the seven existing Closing the Gap targets specifically focus on suicide or social and emotional wellbeing. New targets should be created which focus on closing the gap in poor mental health and suicide between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians.

We suggest establishment of a target to halve the gap in social and emotional wellbeing, including:

1. Halve the gap in the rates of Indigenous suicide by 2028 (currently twice the rate of non-Indigenous people[2]).

2. Halve the gap in the rates of high to very high levels of psychological distress by 2028 (three times the non-Indigenous rate[3]).

3. Halve the proportion of Aboriginal and Torres Strait Islander people with a mental health condition reporting problems accessing health services by 2028 (one in four people[4]).

4. Halve the rates of discrimination towards Aboriginal and Torres Strait Islander people in Australia by 2028 (almost forty per cent of people report abuse[5]).

To make the critically needed investments, *beyondblue* suggests that Australian Governments:

1. Identify and address the mental health services investment shortfall in Aboriginal Community Controlled Health Services (sixty per cent of services report mental health funding gaps[6]).

2. Fully fund an implementation plan for the *National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing 2017-2023.*

3. Ensure mainstream services embed the priorities of the national strategy – such as the need to have trauma informed staff available in mental health services serving Aboriginal and Torres Strait Islander communities.

4. Develop and fully fund a plan of activities that build connection to culture and identity to reduce the rates of psychological distress in Aboriginal and Torres Strait Islander peoples[7].

5. Ensure all Closing the Gap policies are co-designed with Aboriginal and Torres Strait Islander leaders and communities.

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[2] According to the 2013 National Aboriginal and Torres Strait Islander suicide prevention strategy, Indigenous people are twice as likely to die by suicide as non-Indigenous people in Australia.

[3] Rates of high to very high levels of psychological distress are almost three times the rates of non-Indigenous people as per The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples reports.

[4] One in four people as per the 2014–15 National Aboriginal and Torres Strait Islander Social Survey.

[5] The 2016 Australian Reconciliation Barometer reports that 37 per cent of Indigenous people reported verbal racial abuse in a six-month period.

[6] The Australian Government's, *Healthy Futures—Aboriginal Community Controlled Health Services: Report Card 2016*, shows that the top health services gap reported was mental health/social and emotional wellbeing services, reported by over sixty per cent of ACCHSs.

[7] *A ten-year review: The Closing the Gap Strategy and Recommendations for Reset* recommends a focus on social determinants of health inequality. Although culture is linked to wellbeing through its effect on building resilience, happiness, and confidence, this is not well recognised or supported by institutions, governments and the wider community.

The case for action

Indigenous social and emotional well-being

- Four million people in Australia each year report living with mental health conditions, with three million involving depression and anxiety.

- Over a lifetime, one in six women and one in eight men will experience depression. Anxiety is even more prevalent, affecting one in three women and one in five men. Left untreated, depression and anxiety can impact on people's functioning, productivity and relationships and may put them at risk of suicide.

- Indeed, tragically every day, more than eight Australians die by suicide, six of whom are male (a total of around 3,000 Australians per year). For every suicide, approximately 30 people attempt to take their lives.

The situation is particularly severe for Aboriginal and Torres Strait Islander peoples, who are around:

- three times as likely to report high/very high levels of psychological distress as non-Indigenous Australians.

- two and a half times more likely to be hospitalised for intentional self-harm than non-Indigenous Australians.

- twice as likely to die by suicide as non-Indigenous people in Australia.[8] In 2014, suicide was the fifth leading cause of death among Aboriginal and Torres Strait Islander peoples.[9]

In 2012 the World Health Organization (WHO) ranked Indigenous suicide in Australia as the twelfth highest compared to the rest of the world, while Australia overall was ranked at 64.[10]

Good mental health is seminal to reaching all the Closing the Gap Targets

Without urgent action to address social and emotional wellbeing, the Closing the Gap targets cannot be achieved. For instance:

- **Mortality:** Higher rates of suicide and poor mental health are significant contributors to the gap in life expectancy.

  o With suicide among Aboriginal and Torres Strait Islander peoples occurring at twice the rate of non-Indigenous Australians, suicide is a direct contributor to the gap in life expectancy.

  o People with mental health conditions also have shorter lives. Indeed, people with severe mental health conditions live between 10-25 years less than average. There is a 1.8 times higher risk of dying associated with depression.[11]

- **Education – Reading, Writing and Numeracy; and Year 12 attainment:** Aboriginal and Torres Strait Islander children who face mental health challenges can find it difficult to learn or even attend class, making it particularly difficult to close the education gaps.

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[8] Australian Bureau of Statistics (2015). *Australian Aboriginal and Torres Strait Islander Health Survey: First Results, 2012-13*, Cat. no. (4727.0.55.001) Canberra: ABS.

[9] Dudgeon, P., Milroy, J., Calma, T., Luxford, Y., Ring, I., Walker, R., Cox, A., Georgatos, G., & Holland, C. (2016). *Solutions that work: What the evidence and our people tell us. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report*. School of Indigenous Studies, University of Western Australia. Accessed from http://www.atsispep.sis.uwa.edu.au/__data/assets/pdf_file/0006/2947299/ATSISPEP-Report-Final-Web.pdf

[10] Dudgeon, P., Milroy, J., Calma, T., Luxford, Y., Ring, I., Walker, R., Cox, A., Georgatos, G., & Holland, C. (2016). *Solutions that work: What the evidence and our people tell us. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report*. School of Indigenous Studies, University of Western Australia. Accessed from http://www.atsispep.sis.uwa.edu.au/__data/assets/pdf_file/0006/2947299/ATSISPEP-Report-Final-Web.pdf

[11] World Health Organisation, Information Sheet - http://www.who.int/mental_health/management/info_sheet.pdf

- o Poor mental health is a major issue for many young Australians. Indeed, half of all 'adult' mental health issues arise before the age of 14.[12] Aboriginal and Torres Strait Islander young people are particularly vulnerable. For instance, they account for thirty per cent of the deaths by suicide of those under the age of 18.[13]

- **Employment outcomes:** While many people who live with mental illness are high functioning in the workplace, for others mental illness can affect their productivity or, worse still, their capacity to find employment and participate in the workforce.

  - o Every year the cost to Australian business from lost productivity due to mental health conditions is $12 billion. The recently released "Shifting the Dial: 5-year productivity review" by the Productivity Commission highlighted the impact of poor mental health on the productivity of Australian workplaces and highlighted how critical workplace participation in mentally healthy workplaces is for the Australian economy.

Targets on social and emotional wellbeing are seminal to achieving all of the Closing the Gap targets.

Mental health is the number one health services gap, leaving Aboriginal and Torres Strait Islander Australians without the support they need to recover.

The Australian Institute of Health and Welfare's report card on the delivery of services by Aboriginal Community Controlled Health Services (ACCHS) shows mental health/social and emotional wellbeing services constitutes the top health services gap, reported by over sixty per cent of ACCHSs.[14]

Similarly, as the Close the Gap Campaign Steering Committee noted in *A ten-year review: The Closing the Gap Strategy and Recommendations for Reset report* noted, the *National Strategic Framework for Aboriginal and Torres Strait Islander People's Mental Health and Social and Emotional Wellbeing 2017-2013* still has no implementation plan, service gaps are yet to be clearly identified, funding allocated and reforms operationalised.

Proven interventions can unlock 'a contributing life'.

There are proven interventions that can deliver recovery in the social and emotional wellbeing of Aboriginal and Torres Strait Islander Australians, including cognitive behaviour therapy and interpersonal therapy. A range of additional activities can support social and emotional wellbeing, including: satisfying employment with meaning, purpose and autonomy; mindfulness; connections to friends and family; and physical health.

With positive social and emotional wellbeing, Aboriginal and Torres Strait Islander peoples will fulfil their potential in education, work, their families and broader life.

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[12] Kessler, R.C., Berglund, P, Demler, O, Jin, R, Merikangas, K.R. and Walters, E.E., *Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication*, Arch Gen Psychiatry, 2005 Jun;62(6):593-602.

[13] Dudgeon, P., Milroy, J., Calma, T., Luxford, Y., Ring, I., Walker, R., Cox, A., Georgatos, G., & Holland, C. (2016). *Solutions that work: What the evidence and our people tell us. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report*. School of Indigenous Studies, University of Western Australia. Accessed from http://www.atsispep.sis.uwa.edu.au/__data/assets/pdf_file/0006/2947299/ATSISPEP-Report-Final-Web.pdf

[14] Australian Institute of Health and Welfare 2016, *Healthy Futures—Aboriginal Community Controlled Health Services: Report Card 2016.* Cat. no. IHW 171. Canberra: AIHW.

Targeted investment

Identifying and addressing funding gaps

With proven interventions available to improve Aboriginal and Torres Strait Islander social and emotional wellbeing, *beyondblue* suggests the Government:

- Identify and address the mental health services investment shortfall in Aboriginal Community Controlled Health Services (where sixty per cent of services report mental health funding gaps[15]).

- Fully fund an implementation plan for the *National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing 2017-2023.*

As the Close the Gap Campaign 2018 report recommends, a five-year national plan to identify and fill health service gaps is needed, with emphasis on investment in Aboriginal Community Controlled Health Services. A national agreement must be accompanied by jurisdictional implementation plans that include state/territory reporting targets to ensure accountability.

Culture and identity

While some of the causes and solutions to the poor mental health of Aboriginal and Torres Strait Islander peoples are the same as for all Australians, there is also a need to address a range of unique factors. Good mental health can be difficult to achieve where people have experienced intergenerational trauma, are separated from family and friends, are unable to participate in their culture, or are subject to repeated discrimination and racism. In particular, policy needs to consider:

- the impact of colonisation and intergenerational trauma caused by previous government policy (e.g. the taking of children from their families – the Stolen Generations);

- loss of culture and identity;

- discrimination and racism;

- the sense of hopelessness and feeling trapped.[16]

The view long expressed by Aboriginal and Torres Strait Islander communities - that strong cultural identity is fundamental to social and emotional wellbeing - is supported by research. Aboriginal and Torres Strait Islander peoples with strong attachment to culture have better self-assessed health, and among those who speak an Indigenous language and participate in cultural activities, mental health is significantly better. Connection to land, family, culture and spirituality can protect against psychological distress. However, research by Reconciliation Australia shows that only approximately fifty per cent of Aboriginal and Torres

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[15] The Australian Government's, *Healthy Futures—Aboriginal Community Controlled Health Services: Report Card 2016*, shows that the top health services gap reported was mental health/social and emotional wellbeing services, reported by over sixty per cent of ACCHSs.

[16] See discussion of these factors in: Hunter & Milroy (2006), cited in Silburn, S, Robinson, G, Leckning, B, Henry, D, Cox, A, and Kickett, D (2014), Preventing Suicide Among Aboriginal Australians in Dudgeon, P, Milroy, H and Walker, R (eds), *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*, Commonwealth of Australia: Canberra, p 153; Priest, N.C., Paradies, Y.C., Gunthorpe, W., Cairney, S.J. & Sayers, S.M. (2011). Racism as a determinant of social and emotional wellbeing for Aboriginal Australian youth in *Medical Journal of Australia,* 194(10), 546-550; Silburn, S., Robinson, G., Leckning, B., Henry, D., Cox, A., & Kickett, D. (2014), Preventing Suicide Among Aboriginal Australians in Dudgeon, P, Milroy, H and Walker, R (eds), *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*, Commonwealth of Australia: Canberra, 147-164; and evidence cited in Mitchell, M. (2014). *Children's Rights Report 2014*, Australian Human Rights Commission: Sydney (pp 76-8 and pp 104-108) Accessed online on 7 May 2016 from https://www.humanrights.gov.au/our-work/childrens-rights/publications/childrens-rights-report-2014. Dudgeon, P., Cox, K., D'Anna, D., Dunkley, C., Hams, K., Kelly, K., Scrine C., & Walker, R. (2012). Hear our voices. Accessed on 8 May 2016 from http://aboriginal.telethonkids.org.au/media/394426/hear_our_voices_final_report.pdf

Strait Islander people feel that they can be true to their culture or personal beliefs during interactions with police, workplaces, government departments, and the in the general community.

With this in mind, policy innovation is needed to develop and fully fund a plan of activities that build connection to culture and identity to reduce the rates of psychological distress in Aboriginal and Torres Strait Islander peoples.

Co-design

Australia's history has repeatedly demonstrated that unilateral action by Governments results in sub-optimal and at times catastrophic outcomes for Aboriginal and Torres Strait Islander peoples. Any plan for improving Aboriginal social and emotional well-being – and closing the gap more broadly – should be developed in close collaboration with Aboriginal and Torres Strait Islander peoples and communities. This can deliver more effective solutions, while also facilitating the development of local Indigenous leadership.