

Strategic Priorities for Mental Health & Wellbeing in Australia

Australia is seeking to place itself at the forefront of international best practice in mental health by understanding mental ill-health and its opposite, and how this impacts all Australians. This is evidenced by the Productivity Commission’s Inquiry into mental health.

The prevalence and burden of mental health issues necessitate they be prioritised as a public health imperative. We seek to contribute to Australia’s ability to succeed in its mission to address the mental health needs of all Australians. This includes consideration of the onset of mental illness, risk and protective factors, and opportunities to address mental health at all phases of the lifespan.

We bring extensive research, clinical, and preventive experience to this endeavor, and take both an aspirational and pragmatic approach. Evidence-based practice means implementing interventions and policy decisions based on scientific research. Where possible, we make reference to high-quality peer-reviewed scientific publications.

In this submission, we address:

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Our Vision

Our vision is to eliminate preventable psychological disorders in Australia, and to provide all Australians with the knowledge, resources and opportunities necessary to maintain an optimal level of mental health and wellbeing.

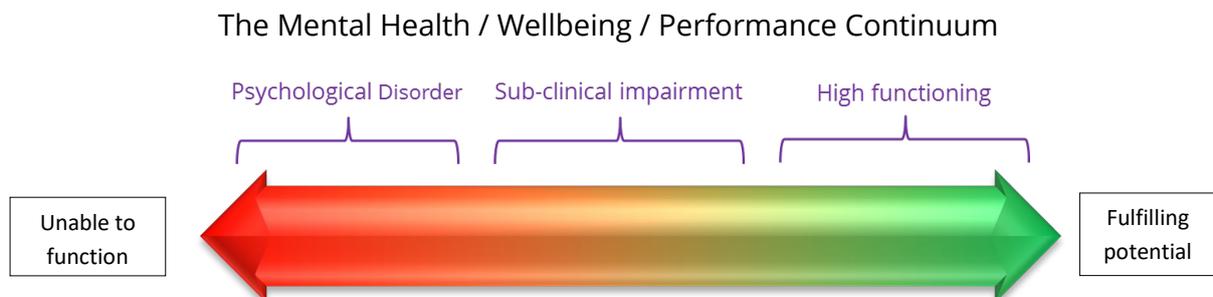
Healthy Minds Education & Training has the existing, scalable structure to disseminate high-quality, evidence-based interventions to schools, universities, residential colleges, and companies. We have conducted world-leading research and have the experience and expertise to inform the Productivity Commission's Inquiry and its understanding of many issues relating to mental health.

Definitions

The World Health Organisation defines mental health as *a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.*

We agree.

When most people hear the phrase 'mental health' their mind tends to conjure thoughts and images of mental *ill*-health. However, mental health exists on a continuum. Where at one end there is dysfunction and disorder, at the other is optimal wellbeing and high performance. Being mentally healthy brings with it more energy, focus and drive to engage with all the tasks of life. Sustainably high wellbeing is the foundation upon which the fruits of success and the joy of life is built.



Who We Are



Dr. Tom Nehmy is a clinical psychologist and corporate trainer with over 10 years' experience. His passion is preventing psychological problems in people of all ages while also enhancing resilience and wellbeing. His doctoral research in developing the Healthy Minds Program was awarded the 2015 Flinders University Vice-Chancellor's Prize for Doctoral Thesis Excellence. He currently works with schools and companies to build psychological skills for mental health, resilience and overall wellbeing.

More than 20,000 people have attended Tom's workshops, training programs, invited addresses, and conference presentations across Australia and overseas. He maintains an active interest in psychological research - especially preventing the onset of psychological problems - and has co-authored 10 scholarly articles in peer-reviewed scientific journals. He was previously an accredited training supervisor with the Psychology Board of Australia.

Tom's work has been featured on Triple J, ABC Radio, 7 News, Power FM, Radio Adelaide, in the Sydney Morning Herald, The Age, The Advertiser, and beyond.

Who We Are



Nick Lee's career took a major change in direction following the death of his wife Jodi from bowel cancer in 2010. Having witnessed first-hand the devastating effects of bowel cancer, he made the brave decision to use his experience for the greater good and do all he could to stop this happening to others.

Leaving his role as a Director of a multi-national consumer goods company (Unilever), Nick set up The Jodi Lee Foundation to promote the prevention of bowel cancer in Australia. His aim was to inspire others to take a simple bowel screening test and make positive choices to improve their health.

Through his work at The Foundation, Nick has delivered his corporate wellbeing program to a diverse range of clients including EY, Telstra, ANZ, McDonalds, BMW, GE, Adelaide City Council.

Through his work as the Founder & CEO of The Jodi Lee Foundation, Nick developed a passion for corporate health and a strong desire to improve the health of ordinary Australians. Joining Tom Nehmy at Healthy Minds presented a perfect opportunity for Nick to continue to fuel his passion.

As well as providing compelling keynote presentations on purpose, resilience, and wellbeing, Nick is also an accredited Mental Health First Aid Instructor.

Nick was a 2015 SA Australian of the Year finalist, and was awarded the 2013 Social Entrepreneur of the Year (Central Region) by Ernst and Young.

Where We Are Now

Mental health disorders are the leading cause of non-fatal disease burden in Australia¹.

Children and Adolescents – Mental health in schools

Mental health interventions in schools are typically focused on a reactive approach. School counsellors and occasionally in-house psychologists will have students self-refer or be alerted to students who may be struggling with such issues as peer relationship difficulties, or with symptoms of psychological disorders such as anxiety, depression or eating disorders. Epidemiological studies reveal that middle-adolescence is a period of dramatic increase in risk for onset of these psychological disorders, and they represent the leading cause of disease burden in adolescence. However, not all young people who require treatment receive it. When mental health episodes occur in adolescence they increase the likelihood of later episodes into adulthood. Of those individuals with recurrent mental health problems, 75% of the individuals experienced the onset of their condition in youth.

Unfortunately, the majority of schools do not implement robustly evaluated prevention programs with demonstrated efficacy. High-school is a major window of opportunity for primary prevention.

In Australia, there is currently a number of schools implementing the leading universal prevention program *Healthy Minds*, however there is scope for much wider dissemination throughout the nation. (See references for Nehmy, 2010; Nehmy & Wade, 2014; Nehmy & Wade, 2015). We are currently conducting a government schools trial, funded by the Federal Health Minister / Department of Health.

Young Adult Mental Health – Universities and colleges

A recent report has emphasised the need for preventive mental health interventions in university settings around Australia. Most university campuses have student counselling facilities, yet preventive approaches are not currently widely implemented².

Adult Mental Health – Corporate wellbeing & community programs

Corporates in Australia generally recognise the importance of work health and safety, however this has tended to focus more heavily on physical health and safety. Mental health support tends to be remedial (employee assistance programs) rather than preventive. Many mental health interventions in companies can be tokenistic, lack a scientific evidence-base, and tend to favour larger organisation with greater resources.

¹ Australian Institute of Health and Welfare 2016. Australian Burden of Disease Study: Impact and causes of illness and death in Australia 2011. Australian Burden of Disease Study series no. 3. BOD 4. Canberra: AIHW

² Veness, B. (2016). The wicked problem of university student mental health. Report to the Winston Churchill Memorial Trust. Sydney, Australia.

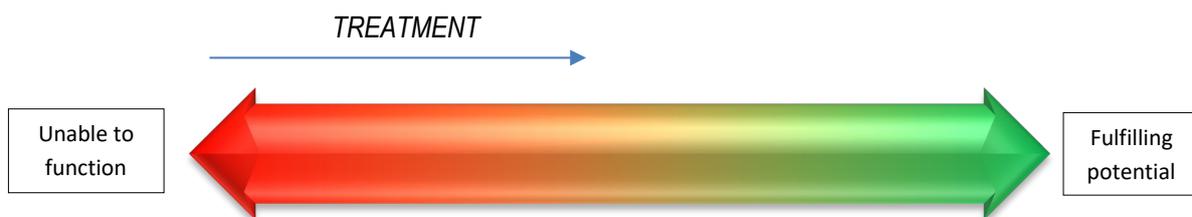
Three Key Processes in Addressing Mental Health

The three key processes for consideration in mental health planning are treatment, prevention, and wellbeing enhancement.

Treatment

Treatment is the most established mode of provision of mental health services in Australia. Our ability to remediate serious mental illnesses like depression, anxiety and eating disorders has been well demonstrated over many decades, particularly since the advent of cognitive-behavioural therapy (CBT) in the 1960's. Recent waves of CBT such as Acceptance and Commitment Therapy (ACT) and mindfulness-based cognitive therapy have further enhanced our understanding of how to remediate psychological problems.

Treatment involves taking an individual from a low state of functioning and wellbeing, and remediating their symptoms and impairment:



Many mental illnesses including unipolar and bipolar depression, and psychotic disorders, have been commonly treated by a pharmacotherapy - usually under the guidance of a psychiatrist.

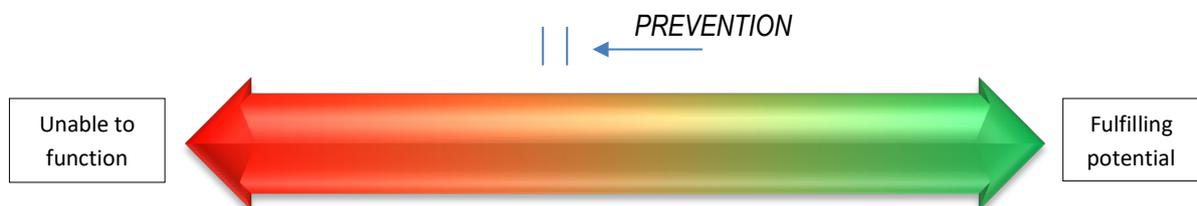
Thanks to Medicare funded services, most outpatients who suffer of mental ill-health are able to receive timely and effective treatment for their condition. It is recommended that the number of available Medicare-funded consultations be increased. (In the 2011-2012 Federal budget, the Government reduced the annual number of subsidised consultations with a psychologist from 18 to 10).

Hospital-based facilities for the treatment of mental health conditions will benefit from improvements in funding, availability and processes.

Prevention

Health in general has benefited from great strides in prevention over the past century – including water fluoridation, seat-belts, ergonomics, public health campaigns around diet and exercise for cardiac health, and preventive dentistry. In mental health, preventive approaches commenced in a substantive fashion only in the 1990's.

The concept of prevention in mental health is a compelling and important one. 'Psychological Immunization' is the idea that healthy individuals can retain their mental health throughout life's inevitable challenges.



Our review of school-based prevention efforts in Australia (Nehmy, 2010)³ and the world (Nehmy & Wade, 2014)⁴ found that only a minority of universal prevention programs work. That is, only a minority yield a *lower rate of onset* of symptoms or cases over time. Some researchers have cited reduction in symptoms in high-risk children or those who are already symptomatic (and hence larger statistical effect sizes) as reason to pursue programs targeting those experiencing problems. However, true prevention is about keeping healthy individuals healthy. This requires an examination of groups of healthy individuals who receive an intervention and explore the differing rates of onset of symptoms over time compared to a control group.

Over the course of four years, the development and evaluation of the Healthy Minds Program involving hundreds of South Australian high school students, was found to yield a prevention effect for a combined measure of depression and anxiety, while also reducing a major risk factor for depression, anxiety and eating disorders ('unhelpful perfectionism'). These findings are believed to be a world first. Subsequently, this research was published in one of the world's leading peer reviewed journals, *Behaviour Research and Therapy*⁵, and awarded a Flinders University Vice-Chancellor's Prize for Doctoral Thesis Excellence.

This broad ('transdiagnostic') approach represents a viable type of psychological immunization for early adolescent Australians, before they reach the peak age for risk of onset of psychological problems (middle-adolescence). With 75% of recurring mental health problems beginning in youth, teaching high-school age adolescents the sophisticated psychological skills of mental health and wellbeing is an enormous opportunity.

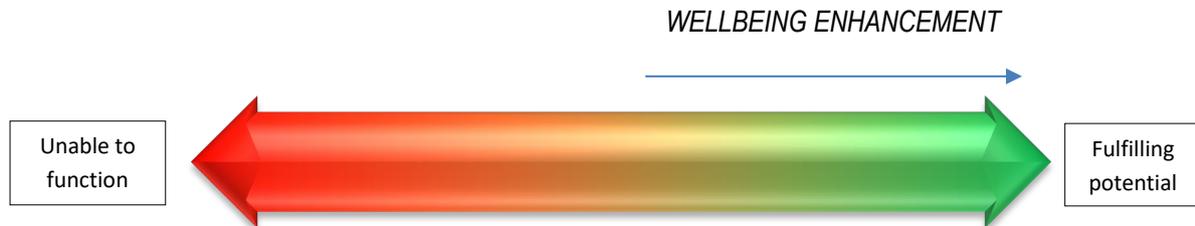
³ Nehmy, T. J. (2010). School-based prevention of depression and anxiety in Australia: Current state and future directions. *Clinical Psychologist*, 14(3), 74-83.

⁴ Nehmy, T. J., & Wade, T. D. (2014). Reduction in the prospective incidence of adolescent psychopathology: A review of school-based prevention approaches. *Mental Health & Prevention*, 2(3), 66-79.

⁵ Nehmy, T. J., & Wade, T. D. (2015). Reducing the onset of negative affect in adolescents: Evaluation of a perfectionism program in a universal prevention setting. *Behaviour Research and Therapy*, 67, 55-63.

Wellbeing Enhancement

Wellbeing enhancement is a mental health approach that takes individuals who are mostly healthy or who are in a 'sub-clinical' or 'sub-diagnostic' state of mental health, and supports the further improvement of their mental health.



Wellbeing enhancement can include the teaching of emotion-regulation skills and other psychological concepts, and integrates multiple wellbeing factors. Wellbeing enhancement strategies should aim to make individuals proficient self-managers of their mental health.

In the Healthy Minds program, we teach an evidence-based framework for thinking about personal wellbeing. In the context of the World Health Organisation definition, *wellbeing* becomes synonymous with *mental health*.

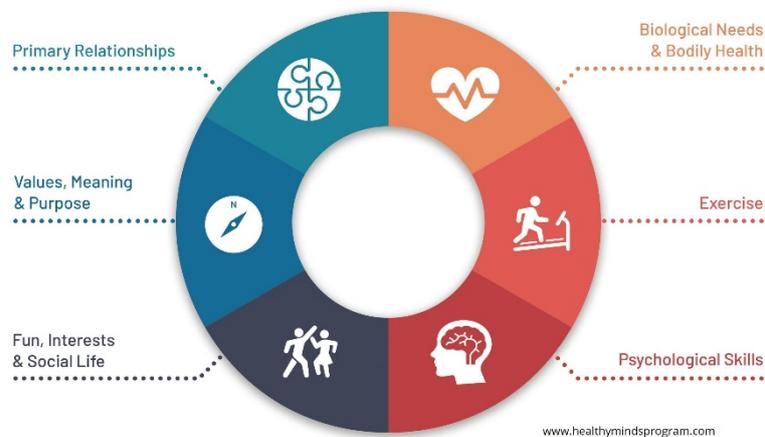


Figure 1. 'The Wellbeing Wheel' - An evidence-based, multi-factor model of mental health and wellbeing incorporating biological, psychological and social components (a 'bio-psycho-social' model).

The Healthy Minds *Wellbeing Wheel* is a pragmatic, relevant, and easily understood model of mental health which emphasises proactive strategies for self-management. This is particularly applicable to the processes involved in prevention and wellbeing enhancement.



OPPORTUNITY

Because mental health is perceived as more intangible and complex than physical health, distributing a straightforward, evidence-based model of wellbeing will raise public knowledge and awareness.

Teaching Psychological Skills

The Australian public may arguably have a reasonable level of knowledge pertaining to physical health practices, such as the importance of exercise in cardiac health, or tooth brushing to prevent decay, regardless of whether they engage in such practices. In terms of mental health, however, many people lack the crucial psychological knowledge that would afford them the opportunity to become effective self-managers of mental health. At Healthy Minds, we actively disseminate psychological knowledge to benefit the mental health of Australians. This includes:

- The purpose and function of emotions
- Thinking skills associated with mental health
- Behavioural strategies to deal with strong emotions
- Media literacy
- Self-compassion
- Gratitude
- Stress management
- Challenging unhelpful perfectionism
- Understanding wellbeing

Parenting is a crucial variable in the development of mental health in children

In addition to broadly teaching individuals the psychological skills associated with a lower onset of anxiety, depression and eating disorders, teaching psychological skills to parents and increasing their knowledge of specific parenting practices that increase resilience is a crucial opportunity. We routinely teach parents the specific processes that build resilience, distress tolerance, emotion regulation, and independent problem-solving in children.



OPPORTUNITY

The population-wide dissemination of psychological skills training and parenting for resilience will reduce the incidence and burden of mental health problems in Australia, conferring large-scale public health benefit.

New Opportunities Across the Lifespan

Pre-natal Intervention

More than 15% of women experience perinatal anxiety or depression. The trigger is entirely predictable – pregnancy and/or the first 12-month after the birth of a child. All new parents in SA should be provided with a preventive psychological intervention, to the benefit of both parent and child.

{Before birth}

Universal School-Based Prevention in Adolescence

Middle adolescence represents a sharp increase in risk for depression, anxiety and eating disorders. These should be targeted with a transdiagnostic prevention program, *Healthy Minds*, in Year 8. This program engages students, teachers and parents and retains the involvement of a psychologist-facilitator.

{Adolescence}

Wellbeing in University Settings

Scope exists to bridge the important gap between the high-risk adolescent years, and the transition into university and the professional world.

Residential colleges and university campuses are an excellent setting for the implementation of psychological skills training for mental health and wellbeing.

{Adulthood}

Parenting in Early Childhood

Parenting practices in early childhood shape the developmental trajectory of each child. Parenting for resilience (i.e., not over-parenting) and modeling healthy thinking and behaviour shapes later mental health. Early childhood self-control is a major predictor of a multitude of adult health and social outcomes (see the Dunedin Health & Development Study <http://dunedinstudy.otago.ac.nz/>).

{Early Childhood}

Corporate Wellbeing Programs / Other Adult Community Programs

The discrepancy between the general public's knowledge of physical health needs and preventive strategies (i.e., healthy diet, tooth brushing, how to lift heavy objects, etc.) and those for mental health requires redress. Sophisticated psychological skills, such as those taught in the Healthy Minds Program, and follow-up activities like the Healthy Minds 30-Day Wellbeing Challenge create the habit of being proactive about personal wellbeing.

Wellbeing Officers

Organisational leaders with more in-depth mental health and wellbeing training can powerfully influence workplace culture, the rollout of prevention programs, and early intervention.

Fashions, Fads & Tales of Caution

Mindfulness

While mindfulness has been shown to positively affect various aspects of mental health, recent, high quality research suggests that it may not be an effective prevention approach in targeting adolescent depression, anxiety and eating disorders. While mindfulness no doubt benefits many people, more evidence is required before the wholesale rollout of mindfulness-based interventions as a universal prevention strategy.⁶

Positive Psychology / Positive Education

While hugely popular, the movement of 'positive education' – the application of positive psychology principles in an educational context – lacks scientific support. Specifically, positive education approaches have not yet demonstrated the ability to prevent the onset of symptoms of depression and anxiety in adolescents. Although often citing the prevalence of mental ill-health as the motivation behind positive education, the field suffers from a dearth of high-quality evidence that it can affect mental health outcomes in young people.

“As a whole, research in positive education points to the possibilities of evidence-informed practices, with a great need for greater intersections between research and practice to collectively determine best practice guidelines for the field. Only then can we truly refer to positive education as a scientifically rigorous paradigm in education.”

- January 2017 *'The State of Positive Education'* Report by the International Positive Education Network (IPEN)

Body Image Interventions

There is a plethora of goodwill to assist young people to accept and be happy with their bodies. This is in response to the importance placed on body image concern in youth surveys, such as the Mission Australia Youth Survey. The rise of social media has provided abundant opportunities for young people to engage in comparison with their peers and idols, many of whom are highly selective in the images they present. Body image and eating disorder prevention programs must be rigorously evaluated as iatrogenic (harmful) effects have been found in many attempts to assist young people in this area.

⁶Johnson, C., Burke, C., Brinkman, S., & Wade, T. (2016). Effectiveness of a school-based mindfulness program for transdiagnostic prevention in young adolescents. *Behaviour Research and Therapy*, 81, 1-11.

Making It Happen

Core Opportunities / Recommendations



All Australian schools should have access to registered or clinical psychologists as opposed to generic school counsellors who lack mental health expertise.



All Australian high schools should implement evidence-based universal prevention programs teaching psychological skills. The Healthy Minds Program is an example of a leading published & peer-reviewed program for adolescents, developed at Flinders University in SA.



All Australian primary schools should provide parent evenings that teach the specific skills of parenting for resilience, and challenge overparenting. Many powerful, specific, risk and protective factors can be dramatically altered through informed parenting.



Maternity hospitals in Australia should provide a preventive intervention to new parents targeting perinatal depression and anxiety.



Because mental health is perceived as more intangible and complex than physical health, distributing a straightforward, evidence-based model of wellbeing will raise public knowledge and awareness. We teach the Wellbeing Wheel as a pragmatic way of thinking about and managing mental health that does not erroneously assume mood is the sole indicator of good mental health.



Australian businesses should be incentivised to provide wellbeing interventions to their staff. These interventions, in addition to employee assistance programs (EAP) which generally provide access to treatment, should target prevention and wellbeing enhancement.

Further Ideas



Any schools who currently lack a dedicated Student Wellbeing role should be subsidised to establish 'Wellbeing Officers' to guide the implementation of specific, strategic, and developmentally-appropriate preventive mental health wellbeing interventions.



Specific initiatives should be developed to help disseminate and translate the preventive interventions in higher-risk / higher-need communities such as indigenous Australia and LGBTI groups. This should be done in conjunction with experts in each target group.



Companies should be subsidised for the implementation and training of 'Wellbeing Officer' roles to support workplace mental health and wellbeing. This could be in the form of a full-time worker, or simply the up-skilling and training of individuals engaged in other roles within the organisation.



Just as organisations have an emphasis on physical first aid as an accepted requirement of staff welfare and policy, it is recommended that Mental Health First Aid be prioritised in a similar fashion.



Directors should be made aware of their obligations to employee mental health, not just physical work health and safety. We recommend that wellbeing reviews with a mental health focus become a routine part of management practices. Wellbeing KPIs should be publicly reported to increase accountability and proactive policies.

Realising Success

How we can create a mentally healthy Australia

Professor Richie Poulton, a leading researcher and Director of the Dunedin Health & Development Study, believes it is possible to prevent 50% of cases of depression. We believe it is possible to prevent even more cases of anxiety (perhaps 80%).

If we could prevent 50% of cases of anxiety & depression in Australia, we would achieve:

- **>\$15 Billion p.a. reduction in economic burden from mental illness in Australia**
- **3 million cases prevented if incidence reduces from 25% to 12.5%**
- **1432 Lives saved**
- **Countless suffering alleviated**
- **Increased productivity, engagement, and academic outcomes**
- **Generational benefit through improved parenting competence and reduced modelling of unhealthy psychological processes**

“Evidence suggests we should focus on prevention and early interventions which can reduce the need for more complex and costly interventions,”

- Professor Alan Fels, National Mental Health Commission
(December 2016)

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