Community awareness about mental illness has come a long way, but the current mental health system is not meeting people’s needs. We still see many people with mental illness not getting treatment and experiencing higher rates of unemployment, social isolation and poverty.

Over their lifetime half of all Australians will experience a mental illness.

Up to a million Australians with a diagnosed mental illness maybe missing out on treatment for their condition.

Most at risk: Aboriginal and Torres Strait Islander people, people who identify as LGBTIQ and those living in regional and remote communities.

We currently spend around $18 billion a year on mental health, but still see many people with mental illness not getting treatment and experiencing higher rates of unemployment, social isolation and poverty. Mental illness tends to first occur in younger people, raising lifetime costs.

The cost to Australia of mental ill-health and suicide is about $500 million per day – with direct economic costs of almost $140 million per day.

It doesn’t have to be that way. The evidence shows the need to intervene early to prevent and treat mental illness.

Over 3000 people die by suicide each year in Australia — significantly more than our current road toll.

Eight people are lost to suicide each day, while three people die in motor vehicle accidents.

A concerted effort on many fronts and cooperation across governments has seen a dramatic drop in deaths on our roads. We can dramatically reduce the suicide rate if we put in the same effort.

“Our draft report sets out a path for achievable, sustainable long-term reform of our mental health system.”

To see all of our recommendations and read our full draft report, or to access our other fact sheets please go to www.pc.gov.au or google search productivity commission mental health report.
There are some significant gaps in our current mental health system

There are not enough services for many people who have symptoms that may be too complex to be adequately treated through a GP, but whose condition does not qualify for access to specialised mental health services.

Our recommendations for improving the mental health system are across three key areas.

**Close critical gaps in health care services**

Some of our key recommendations in this area include:

1. Improving the provision of information so that people can find out what services are going to help them and what’s available in their area.
2. More low intensity services for those who need them, including access to online programs that include support from a psychologist. This will free up more intensive services for those currently missing out.
3. More mental health nurses, peer workers and psychiatrists.
4. Provide alternatives to emergency services when people are experiencing a mental health crisis but also ensure there are beds for those who need them – either in hospitals or in the community.

**Intervene early to prevent and treat mental illness.**

Some of our key recommendations in this area include:

1. Including social and emotional development in the existing physical development checks at early ages.
2. Schools to have a senior teacher dedicated to social and emotional wellbeing.
3. Better follow-up services for people who have attempted suicide.

**Fundamental reform to coordination, governance and funding arrangements**

Some of our key recommendations in this area include:

1. Having care pathways for people that are clear and seamless with single care plans for people receiving care from multiple providers and care coordination for people with severe mental illness and other complex needs.
2. Inject genuine accountability and clarify the responsibilities of governments.
3. Ensure consumers and carers have the opportunity to participate fully in the design of policies and programs that affect their lives.

To see all of our recommendations and read our full draft report, or to access our other fact sheets please go to [www.pc.gov.au](http://www.pc.gov.au) or google search productivity commission mental health report.