



# Mental illnesses: *every* family in Australia is at risk



*Every family* in Australia is at risk of experiencing mental illnesses.

- Some of the more common mental illnesses include depression, anxiety, substance abuse, schizophrenia and bipolar disorder.
- About 14% of children and adolescents and 18% of adults will be directly affected by a mental illness each year – or approximately one in every five people.<sup>1</sup> This statistic cannot convey the distress caused to individuals, the loss of function and quality of life, and the impact on family and friends.
- Mental illnesses account for about 30% of the total burden of non-fatal disease in Australia.<sup>2</sup>



# The real impact of mental illnesses

Mental illnesses impair a person's ability to learn and to work, to love, to maintain physical health, to earn a living, to enjoy leisure, and to obtain basic needs such as housing and transport. Productivity, daily functions and quality of life are severely affected.

One measure of the effects of a mental illness is 'days out of role'. According to the Australian National Survey of Mental Health and Wellbeing<sup>3</sup>:

- Anxiety disorders account for 2.7 million person-days out of role *every month*.
- Depressive disorders account for 2.1 million person-days out of role *every month*.
- Substance use disorders account for 1.1 million person-days out of role *every month*.

The World Health Organization Global Burden of Disease Study,<sup>4</sup> first released in 1990, found that mental illnesses are five of the top ten causes of disability worldwide (Table 1). Older teenagers and young adults are at particular risk of mental illnesses:

- 75% of mental illnesses first occur in people aged 15-24
- two-thirds of all disability in people aged 15-30 is caused by mental illnesses.

Figure 1 indicates the types of mental illness that occur throughout the lifespan, and some of the implications.

FIGURE 1: MENTAL ILLNESSES THROUGH THE LIFESPAN



TABLE 1: LEADING CAUSES OF DISABILITY – WHO, 1990<sup>4</sup>

1. **Unipolar major depression**
2. Iron-deficiency anaemia
3. Falls
4. **Alcohol use**
5. Chronic obstructive pulmonary disease
6. **Bipolar disorder**
7. Congenital anomalies
8. Osteoarthritis
9. **Schizophrenia**
10. **Obsessive-compulsive disorders**

In Australia, 500,000 children and 2.6 million adults – a total of 3.1 million people – experience mental illnesses each year.

# Treatment of mental illnesses

About 62% of Australians with mental illnesses do not receive treatment from health services.<sup>3</sup> Reported reasons include:

- the significant stigma associated with mental disorders such as depression
- fear of treatment
- the poor distribution of specialist services
- the cost of treatment

- an inappropriate mix of medical and psychosocial services provided by the public health system.

When people with mental illnesses do access care, it is provided mainly by GPs. Difficulties in accessing bulk-billed GP services is a further barrier to access.

Among young people with mental health problems, *only one in every four* receives professional help. Sources of help for this age group include GPs, school-based counsellors and paediatricians.

## Promoting mental health – from childhood to adult life

*“Tomorrow’s world may be influenced by science and technology, but more than anything, it is already taking shape in the bodies and minds of our children”*

KOFI ANNAN, SECRETARY-GENERAL OF THE UNITED NATIONS

Mental health is fundamental to physical health, quality of life and productivity, but ‘mental health’ is more than the absence of mental illness. Just as people vary in their physical fitness, there is scope to enhance mental health and prevent mental illnesses.<sup>5</sup>

Good mental health through childhood and adolescence often underpins mental health and wellbeing during adult life. If mental health problems in childhood are not addressed, they result not just in suffering for the individual, family and carers, but also hinder educational, psychological, and social development.

Prevention and early treatment programs have the potential to reduce child and adolescent mental illnesses. Some factors that enhance mental health are listed in Table 2.

**TABLE 2: FACTORS ENHANCING MENTAL HEALTH IN YOUNG PEOPLE<sup>6</sup>**

- A family environment that is valuing and affectionate.
- A cohesive and non-violent school environment.
- A sense of self-worth and social connectedness.
- Self-efficacy in problem solving, coping skills and social skills.
- An internal locus of control.
- Belonging to a positive peer group.
- Leading an active lifestyle.
- Having a personal confidante, role model or mentor.

## Current initiatives

Consumers, health professionals and governments in Australia have actively pursued the effective treatment of mental illnesses and the promotion of mental health. Initiatives include:

- **Mental Health Council of Australia.** The MHCA is the independent, national representative network of individuals and organisations committed to achieving better mental health for everyone in Australia. <http://www.mhca.com.au>

- **beyondblue: the national depression initiative.** beyondblue aims for a society that understands and responds to the personal and social impact of depression, and works actively to prevent it and improve the quality of life of everyone affected by it. <http://www.beyondblue.org.au>
- **Centre for Mental Health Research.** The CMHR at the Australian National University develops and promotes a range of mental health promotion activities

and community mental health literacy projects. They include 'MoodGYM' an internet-based program for delivering cognitive behaviour therapy, and Mental Health First Aid, a 12 hour, four module educational program. <http://www.anu.edu.au/cmhr/>

- **Better Outcomes in Mental Health Care.** This initiative by the Australian Government has supported education for general practitioners and incentives to coordinate structured, comprehensive care for people with mental illnesses. <http://www.adgp.com.au/site/index.cfm?display=353>

## Scope for improvement

Australian mental health policy is leading the world. Our national policy has championed the appropriate move to non-institutional forms of continuing care. However, people using or providing services continue to report significant gaps in services and dissatisfaction with the quality of services.

Uptake of more effective service systems has been slow. These include programs for early intervention and specialised treatment. We need to provide more support

for initiatives that will increase the skills of the mental health workforce and ensure that services are distributed according to population needs. We have only just started to invest in programs to change community attitudes about mental illnesses.

Many people with mental illnesses receive either no treatment or sub-optimal treatment. For example, less than one in six people with depression or anxiety are currently receiving evidence-based treatments.

## Investment in mental health

Australia spends about 7% (\$2.56 billion) of its health budget on mental health, although mental illness is thought to account for at least 20% of the economic costs of disability and premature death. Other first-world countries report investing 10–14% of their total health expenditure on mental health. Similarly, only 8.9% of NHMRC funds is spent on mental health research compared to the 20% contribution of mental disorders to disease burden in Australia.<sup>7</sup>

The costs of all health areas continue to rise because of population growth, increased demand for new treatments,

new technologies and more comprehensive services. Despite the increased expenditure on mental health over the last decade, the proportion devoted to mental health is relatively unchanged. A 46% increase in funding of mental health has simply mirrored a 42% increase in the cost of providing health care.

The National Mental Health Strategy assumed that the proportion of health expenditure devoted to mental health would increase. An increase in the Commonwealth contribution has not been matched by growth in State and Territory expenditure.

## Conclusion

Mental illnesses such as depression and anxiety are a major cause of disability. If they remain untreated, they result in high costs to families, communities, businesses and governments. In Australia, we have a world-leading mental health policy but we need to do more to ensure that the provision of mental health care matches the vision and the philosophy of the policy.

## References

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