

Media Release

Indigenous Leadership Needed to Address Mental Health Crisis

The National Aboriginal and Torres Strait Islander Leadership in Mental Health (NATSILMH) launch the *Gayaa Dhuwi (Proud Spirit) Declaration*, 27 August 2015

Today, NATSILMH Chair Professor Pat Dudgeon launched the *Gayaa Dhuwi (Proud Spirit) Declaration* at the TheMHS Conference in Canberra. New South Wales Mental Health Commissioner Mr John Feneley, and Queensland Mental Health Commissioner Dr Lesley van Schoubroeck, assisted with the launch.

In the Declaration and a *Call to Action* based on it, NATSILMH call on Australian governments and the mental health professions to commit to supporting Indigenous leadership in mental health and suicide prevention as the foundation upon which an address to the high rates of mental health conditions and suicide reported among Indigenous peoples can be built.

NATSILMH Chair Professor Pat Dudgeon said: “Mental health conditions, self harm and suicide are reported among Indigenous Australians at over double the rate of other Australians and the situation may be getting worse.

“While the Australian mental health system has made many strides in the right direction, further efforts are needed if the situation is to turn around. In particular, Indigenous leadership is needed to ensure that culturally informed practices and methods are available to us in addition to clinical responses.”

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Professor Dudgeon added: “Given the culturally informed nature of these responses, and the unique historical and social determinants that shape the mental health crisis among us, Indigenous peoples must lead this renewed effort. The *Gayaa Dhuwi (Proud Spirit) Declaration* sets out key principles for ensuring this happens.”

NATSILMH member Professor Tom Calma AO said: “NATSILMH call on Australian Governments, in a bipartisan way, to formally adopt and commit to the *Gayaa Dhuwi (Proud Spirit) Declaration* by the 30th of June 2016, and to work with Indigenous mental health leaders to develop implementation components within a year of that.

“It’s time for action if the mental health of our peoples is to improve, and for our suicide rates to come down to at least the same as that of other Australians. We must cement Indigenous leadership as fundamental and non-negotiable in that response, and the *Gayaa Dhuwi (Proud Spirit) Declaration* provides framework for that.”

NATSILMH member Mr Tom Brideson also called on the health professions and related standard setting bodies to commit to the *Gayaa Dhuwi (Proud Spirit) Declaration*, and develop their own implementation components.

“These *Gayaa Dhuwi (Proud Spirit)* implementation components could be similar to, and complement, their Reconciliation Action Plans.” Mr Brideson said. “It’s vital that these bodies play a part in delivering the necessary workforce needed to meet the mental health and suicide challenges we face and ensuring Indigenous leadership as they do so.”

Professors Dudgeon and Calma, and Mr Brideson repeated NATSILMH’s previous calls for a dedicated Indigenous mental health action plan to be developed under Indigenous leadership as a national priority. The National Mental Health Commission’s report of the *National Review of Mental Health Services and Programmes* also recommended such.

- ***For media enquiries or interview requests with Professors Pat Dudgeon or Tom Calma AO, or Mr Tom Brideson, please contact:*** Cheryl Gray 0409 599 890
- For more information about NATSILMH: www.natsilmh.org.au
- For more information about the mental health gap, see the factsheet attached to this release.
- For more information on the appropriate reporting of mental illness and suicide see the Mindframe initiative: <http://www.mindframe-media.info>
 - Lifeline: 131 114
 - Kids Helpline: 1800 551 800
 - Mensline: 1300 78 99 78

Factsheet on the Indigenous Mental Health Gap

- **Stressful Life Events:** Indigenous Australians report these at 1.4 times the rate of other Australians.ⁱ Stressful life events can be traumatic and impact on mental health. They include: serious illness, serious accident, mental illness, serious disability; death of a family member or close friend, divorce or separation, not able to get a job, Involuntary loss of job, alcohol or drug-related problems, gambling problems, witness to violence, abuse or violent crime, and trouble with the police.ⁱⁱ
- **Psychological Distress:** In 2012–13, 30 per cent of respondents to the *Australian Aboriginal and Torres Strait Islander Health Survey* over 18 years of age reported high or very high psychological distress levels in the four weeks before the survey interview.ⁱⁱⁱ That is nearly three times the non-Indigenous rate.^{iv} In 2004-05, high and very high psychological distress levels were reported by 27 per cent of respondents suggesting an increase in Indigenous psychological distress rates over the past decade.^v
- **Trauma:** Trauma is a complex phenomenon, has many symptoms and is hard to measure in a population. Post-Traumatic Stress Disorder (PTSD) is one manifestation of trauma. A 2008 study of Indigenous prisoners in Queensland reported 12.1 per cent of males and 32.3 per cent of females with PTSD.^{vi}
- **Mental Health Conditions:** Over the period July 2008 to June 2010, Indigenous males were hospitalised for mental health-related conditions at 2.2 times the rate of non-Indigenous males; and Indigenous females at 1.5 times the rate of non-Indigenous females.^{vii} Rates of psychiatric disability (including conditions like schizophrenia) are double that of other Australians.^{viii}
- **Suicide:** The overall indigenous suicide rate was twice the non-Indigenous rate over 2001-10.^{ix} Approximately 100 Indigenous deaths by suicide per year took place over that decade. In 2012, 117 suicides were reported.^x

ⁱ Australian Bureau of Statistics, 'Family stressors' *Australian Aboriginal and Torres Strait Islander Health Survey: First Results, Australia, 2012-13*, ABS cat. no. 4727.0.55.001, 27/11/13.

www.abs.gov.au/ausstats/abs@nsf/Latestproducts/C0E1AC36B1E28917CA257C2F001456E3?opendocument [Verified 6/7/14].

ⁱⁱ Australian Bureau of Statistics, *Australian Health Survey: Users' Guide, 2011-13*, ABS cat. no. 4363.0.55.001, ABS, Canberra, 2012.

ⁱⁱⁱ Australian Bureau of Statistics, 'Psychological Distress' *Australian Aboriginal and Torres Strait Islander Health Survey, First Results, 2012*, ABS cat. no. 4727.0.55.001, 13, 27/11/13, www.abs.gov.au/ausstats/abs@nsf/Lookup/9F3C9BDE98B3C5F1CA257C2F00145721?opendocument [Verified 15/7/14]

^{iv} Australian Bureau of Statistics, 'Psychological Distress' *Australian Aboriginal and Torres Strait Islander Health Survey, First Results, 2012*, ABS cat. no. 4727.0.55.001, 13, 27/11/13, www.abs.gov.au/ausstats/abs@nsf/Lookup/9F3C9BDE98B3C5F1CA257C2F00145721?opendocument [Verified 15/7/14]

^v Australian Bureau of Statistics, *Australian Aboriginal and Torres Strait Islander Health Survey: First Results, Australia, 2012-13*, ABS cat. no. 4727.0.55.001, 27/11/13, www.abs.gov.au/ausstats/abs@nsf/Lookup/9F3C9BDE98B3C5F1CA257C2F00145721?opendocument [Verified 18/8/14].

^{vi} Heffernan E, Andersen K, Dev A, et al., *Prevalence of mental illness among Aboriginal and Torres Strait Islander people in Queensland prisons*. *Med J Aust* 2012; 197 (1): 37-41.

^{vii} Based on combined data from New South Wales, Victoria, Queensland, Western Australia, South Australia and the Northern Territory. Australian Institute of Health and Welfare, *Aboriginal and Torres Strait Islander Health Performance Framework 2012: detailed analyses*, Cat. no. IHW 94. Canberra, 2013, p.639.

^{viii} Australian Institute of Health and Welfare, 'Psychiatric Disability Support Services', *Mental Health Services in Australia*, May 2014, <http://mhsa.aihw.gov.au/services/disability-support/> [Verified 14/8/14].

^{ix} Australian Bureau of Statistics, *Suicides, Australia, 2010*, ABS cat. no. 3309.0, 24/07/12, www.abs.gov.au/ausstats/abs@nsf/Products/3309.0~2010~Chapter~Aboriginal+and+Torres+Strait+Islander+suicide+deaths?OpenDocument [Verified 15/7/14].

^x Australian Bureau of Statistics, *Causes of Death 2012* (ABS cat. no. 3303.0), 25/3/12, [www.abs.gov.au/ausstats/abs@nsf/Lookup/by per cent 20Subject/3303.0~2012~Main per cent 20Features~External per cent 20Causes per cent 20\(V01-Y98\)~10021](http://www.abs.gov.au/ausstats/abs@nsf/Lookup/by%20Subject/3303.0~2012~Main%20per%20cent%20Features~External%20per%20cent%20Causes%20per%20cent%20(V01-Y98)~10021) [Verified 29/7/14].