It is estimated that, based on current prevalence data, the cost of mental ill-health and suicide to the Australian economy is up to $70 billion per year, with additional costs arising from disability and premature death due to mental illness.\(^3\)

However, research indicates that investment in prevention can reduce these costs. For example, for every $1 spent on programs targeted at children with behavioural problems, a return of between $1.80 and $3.30 has been estimated.\(^4\)

Similarly, universal primary prevention programs targeting parents could generate a return of up to $9.29 for every $1 spent.\(^5\)

It’s time to try something new. It’s time to add prevention to the policy and funding mix because without greater investment and action to prevent mental health conditions from developing in the first place, we will never be able to ‘shift the dial’ in mental health in Victoria.\(^6\)

- Prevention United
I wasn’t the type to stand up for myself or, you know, voice my opinion ... And everything in my life kind of then felt out of control because of that. I became a person who was able to stand up for myself and speak up.¹²

- Bethany Henry

Prevention and mental health promotion are important strategies to improve mental wellbeing and reduce mental illness:

- ‘Primary prevention’ describes policies, initiatives or activities which try to prevent the initial occurrence of mental illness or psychological distress. It is achieved by reducing the risk factors associated with mental illness and strengthening protective factors.

- ‘Mental health promotion’ includes actions and advocacy to allow people to adopt and maintain healthy lives, including people experiencing mental illness, and to create living conditions and environments that support health.⁸

There is evidence that certain types of prevention strategies can be effective in influencing the factors that shape mental health. Some of these strategies include:

- parenting programs
- social and emotional development programs
- creating supporting environments for mental health, including workplaces, education and other settings;
- strengthening community action for mental health,
- developing mentally healthy public policy;⁹ for example, ‘studies suggest that by eliminating child abuse we could potentially reduce the prevalence of anxiety and depression by around 20-25%’.¹⁰

We have to cast a large net, we can’t just focus on particular people who might have risk factors. We have to say, we must spread this across the whole community, so a universal prevention, and then that requires that you engage the community and that everybody has a place.¹¹

- Scientia Professor Helen Christensen
It meant everything to be able to work at a pace that suited my recovery. It meant I could participate in conversations with friends about work, just like everyone else. Having a job really provided me with a sense of forward momentum and gave me something to strive towards.

- Jen Riley

Workplaces

- Evidence indicates that being employed is linked to a greater sense of autonomy, improved sense of wellbeing, reduction in symptoms of depression and anxiety and opportunities for personal development.
- Evidence also indicates that there are risk factors in workplaces that can contribute to psychological distress and mental injury. These include job design factors, structural and organisational factors, team and group factors, home or work conflict and individual factors. Some industries, sectors and employee groups are at higher risk of mental injury.
- In June 2020 the Productivity Commission estimated that ‘absenteeism and presenteeism in the workforce costs up to $17 billion per year.’

[m]any other government portfolio areas and community services play a critical role in addressing the social determinants of health, in areas such as employment, education, housing, justice and social security.

– Lucinda Brogden

Australia is on the cusp of significant change in the workplace mental health area … Focus is shifting from the reactive management of sickness absence, to a more proactive effort around employee engagement and preventative initiatives.

– Christine Morgan, CEO, National Mental Health Commission
The type of support that was really useful in the past is that schools and mental health services would work together to provide that complex case management of services to families and students.  

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Kelly Duncan has worked with a number of local schools in East Gippsland and has seen firsthand the major impacts the recent summer bushfires have had on children and families. Kelly spoke about the benefits of schools and child and youth mental health services working together.
Overall, the modelling shows that there is good evidence for investing in a range of preventative interventions, both on the grounds of cost effectiveness and cost savings. These include less demand on the health budget through use of mental health services (such as less hospitalisation and use of community-based services), as well as increased productivity (via less absenteeism and presenteeism in the workplace).

- National Mental Health Commission
Recommendation: Governance arrangements for promoting good mental health and preventing mental illness

The Royal Commission has recommended that the Victorian Government establish a new leadership and coordination function for prevention and promotion activity in Victoria. The Victorian Government will establish a new Mental Health and Wellbeing Promotion Office within the new Mental Health and Wellbeing Division of the Department of Health. The purpose of the Mental Health and Wellbeing Promotion Office is to coordinate a state-wide approach to promoting mental wellbeing for the whole population.

The functions of the Mental Health and Wellbeing Promotion Office will include:

- leadership of a new state-wide Mental Health Promotion and Prevention Plan – including planning, delivery and monitoring across sectors, government departments and communities
- distribution of dedicated funding for prevention and promotion activity
- coordination of communications, research and evaluation, workforce development and other activity to support prevention and promotion
- delivery of the Royal Commission’s recommendations in relation to places and communities, workplaces and education as priority settings.

Recommendation: Establishing mentally healthy workplaces

The Royal Commission has recommended that the Victorian Government provide leadership for Victorian workplaces, businesses and employer-related agencies to increase their efforts in creating mentally healthy workplaces. This will strengthen the promotion of good mental health in workplaces; address workplace barriers to good mental health; promote inclusive workplaces that are free from stigma and discrimination and support people experiencing mental illness at work.

The Victorian Government will:

- lead a mentally healthy workplaces consortium
- establish the Victorian mentally healthy workplaces framework, and supporting tools and resources
- establish a digital platform to assist businesses to access resources and build capability
- sponsor mentally healthy workplace industry-based trials to build evidence for what works.

Recommendation: Supporting social and emotional wellbeing in schools

The Royal Commission has recommended that the Victorian Government provide resources to enhance the delivery of social and emotional wellbeing initiatives in schools. This includes:

- funding evidence-informed initiatives, including anti-stigma and anti-bullying programs, to assist schools in supporting students’ mental health and wellbeing
- developing a digital platform which contains a validated list of these initiatives
- developing a fund, modelled on School Readiness Funding for kindergartens, to support schools, with priority given to those in rural and regional areas, to select the most appropriate suite of initiatives for them.
VicHealth, Submission to the RCVMHS: SUB.0002.0029.0238, 2019, p. 2.
McDaid, Park, and Wahlbeck, p. 376.
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VicHealth, p. 5.
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Evidence of Scientia Professor Helen Christensen AO, 19 July 2019, p. 1414.
RCVMHS, Interview with Bethany Henry, 27 November 2020.
Dr Samuel B Harvey and others, Developing a Mentally Healthy Workplace: A Review of the Literature, 2014, p. 6.
Witness Statement of Colin Radford, para. 53.
Productivity Commission, p. 297.
Witness Statement of Lucinda Brogden AM, 11 May 2020, para. 70.
RCVMHS, Personal story of Jen Riley.
Witness Statement of Denna Healy, 26 May 2020, para. 5.