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**NATIONAL OVERARCHING MENTAL HEALTH PLAN NEEDED**  
*AMA Position Statement on Mental Health 2018*

The AMA is calling for a national, overarching mental health “architecture”, and proper investment in both prevention and treatment of mental illnesses.

Almost one in two Australian adults will experience a mental health condition in their lifetime, yet mental health and psychiatric care are grossly underfunded when compared to physical health, AMA President, Dr Michael Gannon, said today.

Releasing the *AMA Position Statement on Mental Health 2018*, Dr Gannon said that strategic leadership is needed to integrate all components of mental health prevention and care.

“Many Australians will experience a mental illness at some time in their lives, and almost every Australian will experience the effects of mental illness in a family member, friend, or work colleague,” Dr Gannon said.

“For mental health consumers and their families, navigating the system and finding the right care at the right time can be difficult and frustrating.

“Australia lacks an overarching mental health ‘architecture’. There is no vision of what the mental health system will look like in the future, nor is there any agreed national design or structure that will facilitate prevention and proper care for people with mental illness.

“The AMA is calling for the balance between funding acute care in public hospitals, primary care, and community-managed mental health to be correctly weighted.

“Funding should be on the basis of need, demand, and disease burden – not a competition between sectors and specific conditions. Policies that try to strip resources from one area of mental health to pay for another are disastrous.

“Poor access to acute beds for major illness leads to extended delays in emergency departments, poor access to community care leads to delayed or failed discharges from hospitals, and poor funding of community services makes it harder to access and coordinate prevention, support services, and early intervention.

“Significant investment is urgently needed to reduce the deficits in care, fragmentation, poor coordination, and access to effective care.

“As with physical health, prevention is just as important in mental health, and evidence-based prevention can be socially and economically superior to treatment.

“Community-managed mental health services have not been appropriately structured or funded since the movement towards deinstitutionalisation in the 1970s and 1980s, which shifted much of the care and treatment of people with a mental illness out of institutions and into the community.

“The AMA Position Statement supports coordinated and properly funded community-managed mental health services for people with psychosocial disability, as this will reduce the need for costly hospital admissions.”

The Position Statement calls for Governments to address underfunding in mental health services and programs for adolescents, refugees and migrants, Aboriginal and Torres Strait Islander people, and people in regional and remote areas.

It also calls for Government recognition and support for carers of people with mental illness.

“Caring for people with a mental illness is often the result of necessity, not choice, and can involve very intense demands on carers,” Dr Gannon said.

“Access to respite care is vital for many people with mental illness and their families, who bear the largest burden of care.”

The AMA *Position Statement on Mental Health 2018* is available at <https://ama.com.au/position-statement/mental-health-2018>

## Background

- 7.3 million Australians (45 per cent) aged 16 to 85 will experience a common mental health disorder, such as depression, anxiety, or substance use disorder, in their lifetime.
- Almost 64,000 people have a psychotic illness and are in contact with public specialised mental health services each year.
- 560,000 children and adolescents aged four to 17 (about 14 per cent) experienced mental health disorders in 2012-13.
- Australians living with schizophrenia die 25 years earlier than the general population, mainly due to poor heart health.
- Almost one in three (30 per cent) of Indigenous adults suffered high or very high levels of psychological distress in 2012-13. Indigenous adults are 2.7 times as likely as non-Indigenous adults to suffer these levels of distress.
- General practitioners manage mental health problems for Indigenous Australians at 1.3 times the rate for other Australians, and mental health-related conditions accounted for 4.4 per cent of hospitalisations of Indigenous people in 2012-13.
- About \$8.5 billion is spent every year on mental health-related services in Australia, including residential and community services, hospital-based services (both inpatient and outpatient), and consultations with GPs and other specialists.

*(Source: Australian Institute of Health and Welfare)*

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