

A photograph of two women sitting at a white table in a bright, minimalist room. The woman on the left, with short dark hair and wearing a dark hoodie, is holding a dark mug and looking towards the other woman. The woman on the right, with long wavy brown hair and wearing a grey sweater, is gesturing with her right hand while speaking. On the table between them are a laptop, a notebook, and a pen. In the background, a white shelf holds two round woven baskets and a mug that says "EAT DRINK ENJOY".

Mental Health and Mental Illness

This module covers....

- What is mental health?
- What is mental illness?
- The mental health continuum
- Prevalent mental health disorders
- Psychological consequences of COVID-19
- Suicide and self-harm
- Referrals: Crisis and non-crisis services
- Mental health resources for people from culturally and linguistically diverse backgrounds, for indigenous communities and the LGBTIQ+ community

What is mental health?

According to the World Health Organisation, mental health is *“a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.”*

So rather than being about *what's the problem?*

it's really about *what's going well?*



- Mental health includes our emotional, psychological, and social well-being.
- It affects how we think, feel, and act.
- It also helps determine how we handle stress, relate to others, and make choices.
- Mental health is important at every stage of life, from childhood and adolescence through adulthood.

It's important to remember that mental health is complex.

The fact that someone is not experiencing a mental health condition doesn't necessarily mean their mental health is flourishing.

Likewise, it's possible to be diagnosed with a mental illness while feeling well in many aspects of life.



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<https://youtu.be/rSpg5Jxgjfc>



What is Mental Illness?

- Clinical disorder - Severe functional impairment.
- A **mental illness** is a health problem that significantly affects how a person feels, thinks, behaves, and interacts with other people. It is diagnosed according to standardised criteria.
- A **mental health problem** also interferes with how a person thinks, feels, and behaves, but to a lesser extent than a mental illness.

Almost half of all Australians aged 16 to 85 years — 7.3 million people — will experience mental illness at some point in their life (Department of Health)

- Mental illnesses includes the more common conditions such as Anxiety and Depression as well as far less common but often more severe conditions such as Schizophrenia and other forms of psychotic illness.
- Mental illnesses vary in how long they affect people: sometimes a single episode, sometimes a lifelong condition.
- Mental illnesses vary in severity: sometimes transitory, sometimes causing psychosocial disability requiring long-term support.
- There are nearly 300 mental disorders listed in the DSM-5 (*Diagnostic and Statistical Manual of Mental Disorders*). This is a handbook used by health professionals to help identify and diagnose mental illness.

DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS

FIFTH EDITION

DSM-5

AMERICAN PSYCHIATRIC ASSOCIATION



Some of the main groups of mental health disorders are:

- Mood disorders such as depression or bipolar disorder
- Anxiety disorders
- Personality disorders
- Psychotic disorders such as schizophrenia
- Trauma-related disorders such as post-traumatic stress disorder
- Substance abuse disorders
- Eating disorders



The mental health continuum

- Mental health and mental illness is sometimes talked about as a continuum, where mental health is at one end of the spectrum – represented by feeling good and functioning well – while mental illness is at the other – represented by symptoms that affect people's thoughts, feelings or behaviour.
- Mental health is not fixed or in a static state, and we can move back and forth along this scale at different times during our lives.





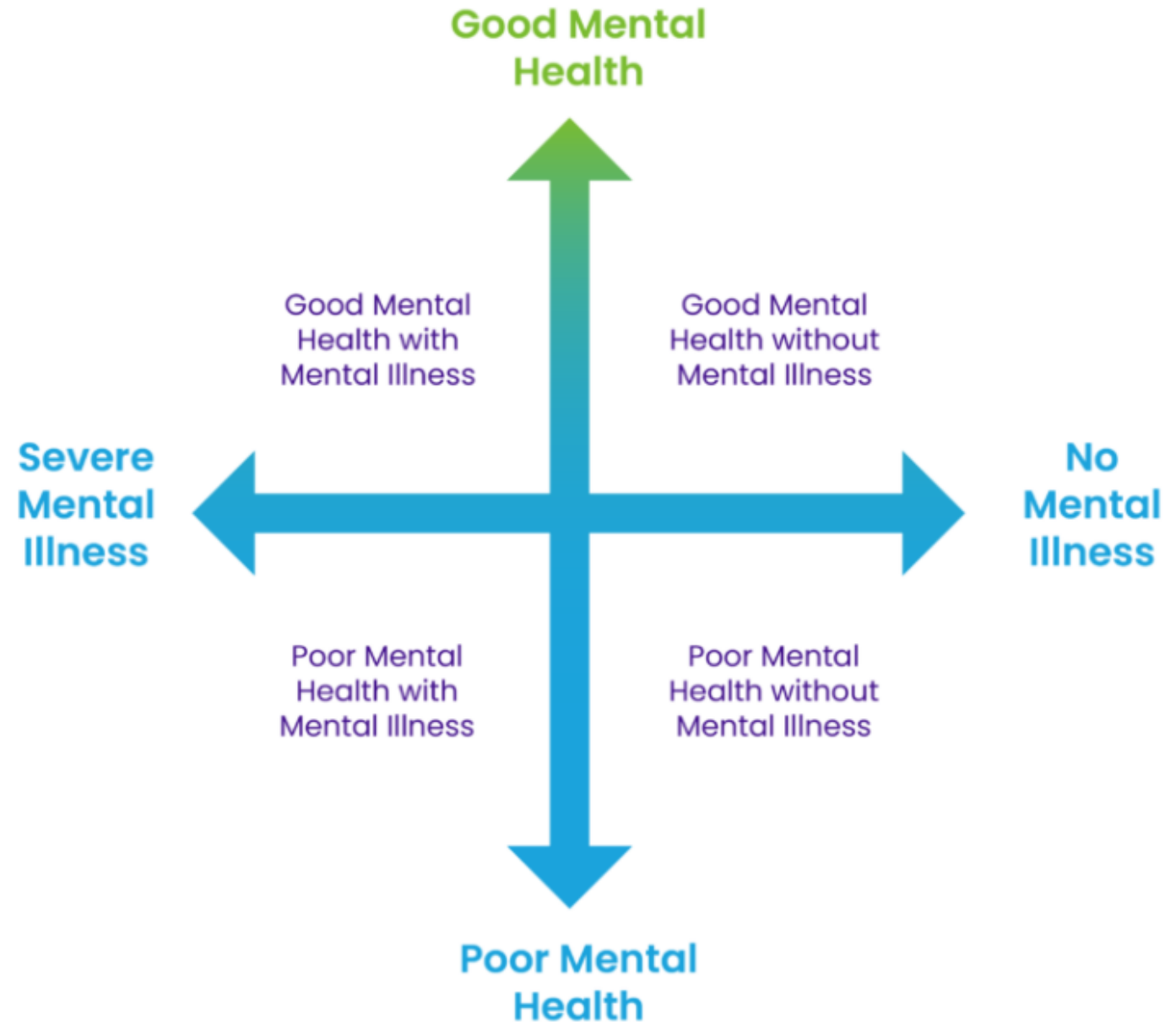
- At one end of the spectrum is mentally healthy. In this area you feel able to work and study, feel connected to others, be involved in activities in your community and 'bounce back' when life's changes and challenges come along.
- At the other end of the spectrum is mental illness. Mental illness is a general term that refers to a group of conditions. These conditions can significantly affect how a person feels, thinks, behaves and interacts with others. In between these two ends there is a 'coping area', where people might feel some pressure but are doing OK, and a 'difficulties area' where people might feel like they aren't doing so well

Dual continuum

People who have been diagnosed with a mental illnesses can still feel mentally well. And similarly, people who don't have a diagnosed mental illness can have low mental health and need help.

- Everyone has mental health. It might be helpful to think about mental health as a range or continuum. On one end is the optimal, on-top-of-the-world mental health. On the other is poor mental health.
- Not everyone has a mental illness. Mental illness, like mental health can fluctuate. On one end of the continuum is no diagnosable mental illness (minimal or no symptoms). On the other end is severe mental illness.

When the mental health and mental illness continuums are put together, they create a “dual continuum”



NO CONSCIENCE

GOOD
MENTAL
SURVIVE

NO
MENTAL
SURVIVE

HEALTHY

The most common mental illnesses are anxiety and depressive disorders

While everyone experiences strong feelings of tension, fear, or sadness at times, a mental illness is present when these feelings become so disturbing and overwhelming that people have great difficulty coping with day-to-day activities, such as work, enjoying leisure time, and maintaining relationships.



Anxiety

- Anxiety is more than just feeling stressed or worried. While stress and anxious feelings are a common response to a situation where we feel under pressure, they usually pass once the stressful situation has passed, or the 'stressor' is removed.
- Everyone feels anxious from time to time. When anxious feelings don't go away, happen without any particular reason or make it hard to cope with daily life it may be the sign of an anxiety condition.
- Anxiety is the most common mental illness in Australia. On average, one in four people – one in three women and one in five men - will experience anxiety at some stage in their life.
- In a 12-month period, over two million Australians experience anxiety.



A wooden mannequin arm and hand are positioned on the left side of the frame, set against a solid light blue background. The arm is bent at the elbow, with the hand pointing towards the top right. Above the hand, there are several black, abstract, scribbled lines and shapes, resembling a chaotic or anxious thought process. The main title of the slide is located to the right of this image.

Signs and symptoms of anxiety

The symptoms of anxiety conditions are sometimes not all that obvious as they often develop slowly over time and, given we all experience some anxiety at various points in our lives, it can be hard to know how much is too much.

Normal anxiety tends to be limited in time and connected with some stressful situation or event, such as a job interview. The type of anxiety experienced by people with an anxiety condition is more frequent or persistent, not always connected to an obvious challenge, and impacts on their quality of life and day-to-day functioning. While each anxiety condition has its own unique features, there are some common symptoms including:

- Physical: Panic attacks, hot and cold flushes, racing heart, tightening of the chest, quick breathing, restlessness, or feeling tense, wound up and edgy
- Psychological: Excessive fear, worry, catastrophizing, or obsessive thinking
- Behavioural: Avoidance of situations that make you feel anxious which can impact on study, work or social life



<https://youtu.be/vjxhq5QJBU>

Depression

While we all feel sad, moody or low from time to time, some people experience these feelings intensely, for long periods of time (weeks, months or even years) and sometimes without any apparent reason. Depression is more than just a low mood – it's a serious condition that affects your physical and mental health.

You may be depressed if, for more than two weeks, you've felt sad, down or miserable most of the time, or have lost interest or pleasure in usual activities, and have also experienced several of the signs and symptoms across at least three of the categories listed on the next few slides.

It's important to remember that we all experience some of these symptoms from time to time, and it may not necessarily mean you're depressed. Equally, not everyone who is experiencing depression will have all of these symptoms.

Behaviour

- Not going out anymore
- Not getting things done at work/school
- Withdrawing from close family and friends
- Relying on alcohol and sedatives
- Not doing usual enjoyable activities
- Unable to concentrate





Feelings

Overwhelmed

Guilty

Irritable

Frustrated

Lacking in
confidence

Unhappy

Indecisive

Disappointed

Miserable

Sad





Thoughts

- 'I'm a failure'
- 'It's my fault'
- 'Nothing good ever happens to me'
- 'I'm worthless'
- 'Life's not worth living'
- 'People would be better off without me'

Physical symptoms

- Tired all the time
- Sick and run down
- Headaches and muscle pains
- Churning gut
- Sleep problems
- Loss or change of appetite
- Significant weight loss or gain





<https://youtu.be/XiCrniLQGYc>



Speaking with a GP

A Doctor (GP) is often a good place to start for most mental health conditions. Doctors can provide treatment or referral to other services.

Starting a conversation about mental health with a GP

Patients should discuss the following:

- Their symptoms or how they feel
- Their concerns
- How what they feel has affected their life

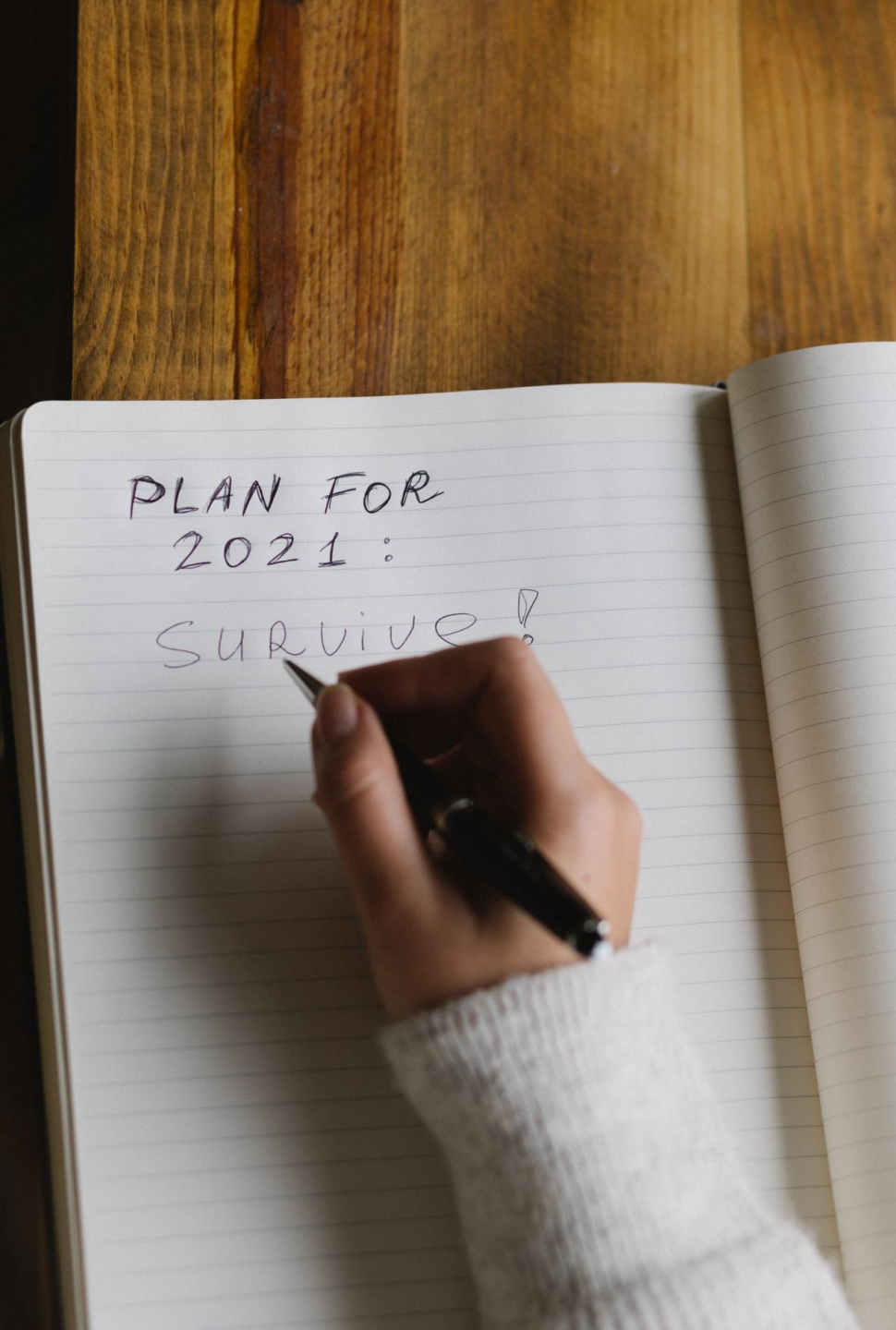


Mental Health Treatment Plans (MHTP)

- A mental health treatment plan is a plan for people with a mental health disorder. A doctor can write out this plan.
- It identifies what type of health care is needed and spells out what the patient and their doctor have agreed they would like to achieve. It also may refer the patient to local mental health services.
- The doctor will ask a few questions, fill in the plan and set goals together with the patient. When making the booking, ask if a long appointment — 20 minutes or more — is needed.

What a MHTP covers

- If a patient is given a mental health treatment plan, they will be entitled to Medicare rebates for up to 20 appointments with some allied mental health services in a year (such as psychologists, social workers, occupational therapists).
- Patients can't get Medicare rebates for all 20 sessions in one go. After the first 6 appointments, they will need to see their doctor again for a mental health plan review and another referral.



Psychological consequences of COVID-19

ref: Australian Institute of Health and Welfare

- The potential for the COVID-19 pandemic to impact mental health and wellbeing was recognised early in the pandemic. In addition to concerns around contracting the virus itself, some of the measures necessary to contain its spread were also likely to negatively impact mental health.
- During periods of lockdown, the loss of employment and social interaction, as well as the added stressors of moving to remote work or schooling, negatively impacted the mental health of some Australians.
 - Specific negative impacts on mental health and well-being include difficulty sleeping or eating and increases in alcohol consumption or substance use.
 - Common consequences include anxiety and panic, depression, anger, confusion and uncertainty and financial stress.
- Many workers with the ability to work from home have been doing so during the pandemic. Combined with the closure of schools and day care centres, many workers have needed to juggle their work-load and caring responsibilities, with some reporting a sense of over-whelm.
- People with pre-existing anxiety disorders, existing health anxiety (those who worry excessively about having or contracting illnesses), and other mental health disorders (e.g., depression, and post-traumatic stress) are at risk of experiencing higher anxiety levels during the pandemic.

<https://www.youtube.com/watch?v=Rn306wjvl3g>

Coronavirus - Getting help

coronavirus.vic.gov.au/getting-help

- Financial and other supports
- Mental health resources
- Family violence crisis response and support

Suicide and Self-harm – The Facts

Source: ABS, 2018

Every year:

- Over 65,000 Australians make a suicide attempt
- More than 3,000 Australians died by suicide in 2017
- Suicide is the leading cause of death for Australians between 15 and 44 years of age
- Young Australians are more likely to take their own life than die in motor vehicle accidents
- In 2017, about 75% of people who died by suicide were males and 25% were females
- In 2017, the suicide rate among Aboriginal and Torres Strait Islander people was approximately twice that of non-Indigenous Australians

Self-readiness check

Identify if you are comfortable continuing with the call.

Escalate the call to a TL if needed.

Suicide Prevention

1. Ask directly about suicide

If you're worried about someone having suicidal thoughts you should ACT IMMEDIATELY by taking the following steps.

- Be direct. Ask them, “*Are you having thoughts about suicide?*”
- Don't be afraid to ask: Asking decreases risk – it shows someone is willing to talk about it.
- If the person confirms they are thinking about suicide, it is important to try and find out if they are in immediate danger. People are usually at higher risk of suicide when they have a specific way in mind and the ability to carry it out. The more detailed the plan is, generally the higher the risk will be.

Suicide Prevention

2. Ask about plans

- You may need to ask direct questions to find out how detailed their plans are. For example:

"Have you thought about how you would kill yourself?"

"Have you thought about when you would kill yourself?"

"Have you taken any steps to get the things you would need to carry out your plan?"

Suicide Prevention

3. Ask further questions

- Ask further questions to determine the risk.
- You are not expected to be an expert but getting further information can be important if you need to talk to a professional about how the person is feeling.
- People who have attempted suicide in the past or have been exposed to the suicide of someone close to them can be at increased risk of dying by suicide. So too can people who have recently had a loss or crisis.
- For example, you may want to ask:

"When did you first have thoughts about suicide?"

"Has anything happened recently that has made you feel worse?"

Suicide Prevention

3. Ask further questions (continued)

- *"Have you already hurt yourself?"*
- *"Is someone there with you?"*
- *"Where are you at the moment?"* Try to confirm the current address

Suicide Prevention

4. Get help

If you are concerned the person may be at IMMINENT RISK (that is, they might take their life soon):

- If you established their location, call 000 - *"I am really worried about you and I want to make sure you are okay so I will be arranging for someone to come to your location to talk with you"*
- If you don't have their location, advise that you are concerned for their safety and would like to transfer them to someone/a service who is better equipped to help
 - Offer to warm-transfer to Lifeline (13 11 14) or ask if they agree for you to contact the Suicide Call Back Service (1300 659 467).
 - If they don't want to be transferred, provide them with support line details (as above) or refer them to the Emergency Department at a hospital

THOUGHTS: Are you having thoughts about suicide?

Is this the first time you have had these thoughts?

Has anything happened recently that has made you feel worse?

PLANS: Have you thought about how you would kill yourself?

Have you thought about when you would kill yourself?

MEANS: Have you taken the steps needed to carry out your plan?

De-brief

Conversations like this can be exhausting.
Take time to reflect on the conversation
and how you are feeling.

De-brief with a TL.

Self-care

- Self-care is about actively looking after your own mental health and wellbeing so that you can more effectively support the people you work with.
- In the course of doing your work you may be confronted by the more challenging aspects of life. People may be stressed, test your patience or push you to your limit.
- Practising self-care is an important professional development activity that will help you to cognitively, physically and emotionally 'bounce back' each day over the long term.





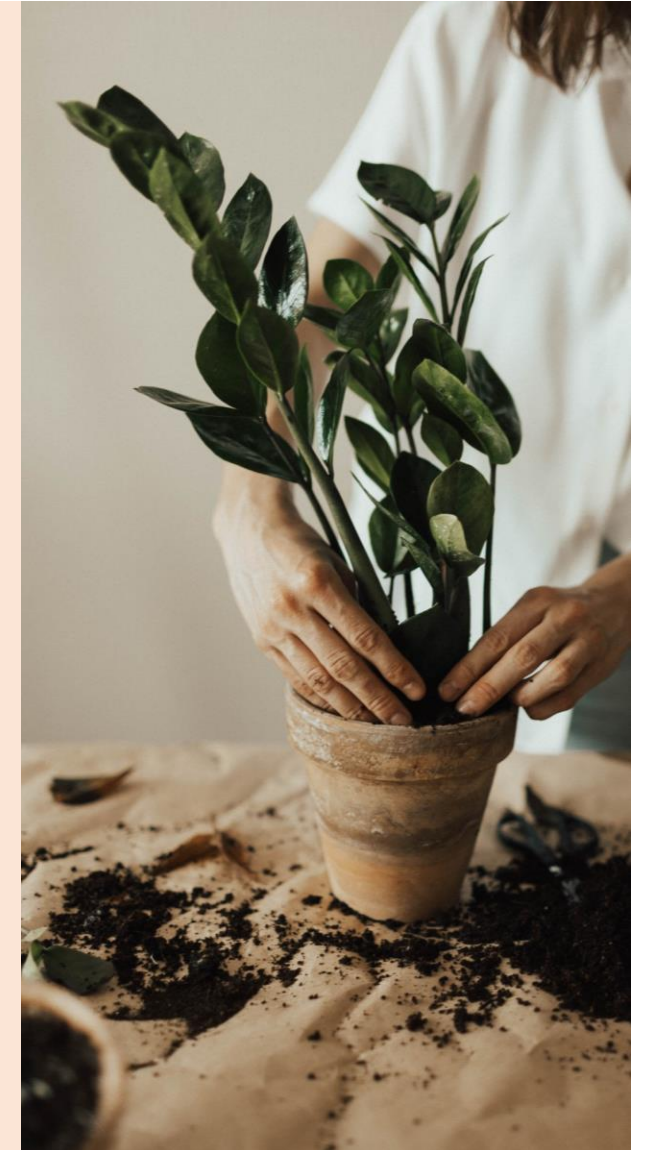
What does self-care look like?

Engaging in activities and practices that give you energy, lower your stress and contribute to your wellbeing (E.g., exercising regularly, eating well and fostering positive relationships). Self-care activities will be different for everyone.

Doing these activities regularly.

Noticing when your stress is manageable, and your physical and emotional wellbeing is enhanced.

Making a commitment to your health and wellbeing for today and into the future.





RESOURCES AND POINTS
OF REFERRAL



CRISIS AND NON-CRISIS
SERVICES

For immediate help contact triple zero (000) if the participant has divulged their location and is at imminent risk

National 24/7 crisis services

- Lifeline: 13 11 14 or lifeline.org.au
- Suicide Call Back Service: 1300 659 467 or suicidecallbackservice.org.au

CRISIS SERVICE - Lifeline



If life is in danger
call 000

Call 13 11 14 >
24/7 Crisis Support

Text us >
Online

Chat with us >
Offline

Get help ▾

Real experiences ▾

Get involved ▾

Resources ▾

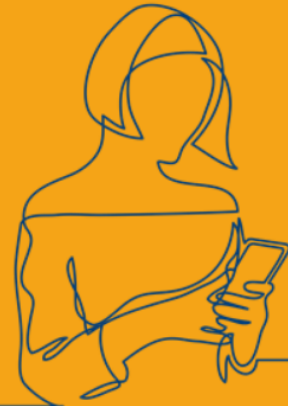
About ▾


Search

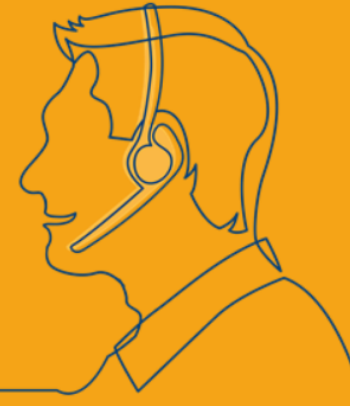

Fundraise


Donate


Volunteer



Want to talk
about it?



We're here for you

Call 13 11 14

Chat with us

Text us

CRISIS SERVICE - Suicide Call Back Service



Call 1300 659 467

Feeling
Suicidal ▼

Worried
About Someone ▼

Lost Someone
to Suicide ▼

Mental Health
Blog

Health
Professionals ▼

Phone
and Online
Counselling ▼



[Register](#) or [login](#)

**Suicide Call Back Service is
a nationwide service
providing 24/7 telephone
and online counselling to
people affected by suicide.**

beyondblue: 1300 224 636 or beyondblue.org.au

Beyond blue coronavirus mental health wellbeing service: 1800 512 348 or www.coronavirus.beyondblue.org.au

headspace: 1800 650 890 or www.headspace.org.au

Kids helpline: 1800 55 1800 or www.kidshelpline.com.au

SANE Australia: 1800 187 263 or www.sane.org

ReachOut: www.reachout.com

OTHER RESOURCES

Blue knot foundation – National Centre of Excellence for Complex Trauma

- 1300 657 380
- <https://www.blueknot.org.au/>

Head to Help

- 1800 595 212
- <https://headtohelp.org.au/>

Head to Health

- www.headtohealth.gov.au

Embrace Multicultural Mental Health

<https://www.embracementalhealth.org.au/>



- Embrace Multicultural Mental Health (the Embrace Project) is run by Mental Health Australia and provides a national focus on mental health and suicide prevention for people from culturally and linguistically diverse (CALD) backgrounds.

Embrace Multicultural Mental Health

Embrace Multicultural Mental Health is now live! 📢

Visit www.embracementalhealth.org.au 📢 for more information.



- It provides a national platform for Australian mental health services and multicultural communities' to access resources, services and information in a culturally accessible format.

Choose a language...

and we'll provide resources in that language where we can.

English

English

am'harik

Amharic

عربي

Arabic

ܐܡܝܬܐ

Assyrian

简体中文

Simplified Chinese

বাংলা

Bengali

မြန်မာဘာသာ

Burmese

hrvatski

Croatian

دری

Dari

Thuɔŋjäŋ

Dinka

فارسی

Farsi

Ελληνικά

Greek

آزرگی

Hazaragi

Italiano

Italian

ကညီကျိ

Karen

ភាសាខ្មែរ

Khmer

한국어

Korean

Krio

Krio

Macedonian

Macedonian

नेपाली

Nepali

فارسی

Persian

polski

Polish

ਪੰਜਾਬੀ

Punjabi

русский

Russian

Multilingual information

Mental health and illness is complex and diverse. It is even harder to understand when it's not explained in your own language. These resources have been translated into a range of languages for those from culturally and linguistically diverse backgrounds to access.

[For multilingual resources from other sites, please click here.](#)

For translated fact sheets on common mental health concerns, please see below:

What is an anxiety disorder?

[Amharic.](#)

የከፍተኛ ጭንቀት ችግር ምንድን ነው? (What is an anxiety disorder?)

[Arabic.](#)

ما هو اضطراب القلق؟ (What is an anxiety disorder?)

[Assyrian.](#)

ܡܐ ܗܝ ܐܝܬܪܒܐ ܕܐܠܝܩܐ? (What is an anxiety disorder?)

[Simplified Chinese.](#)

什么是焦虑症? (What is an anxiety disorder?)

[Croatian.](#)

Što je anksiozni poremećaj? (What is an anxiety disorder?)

[Dari.](#)

اختلال اضطراب چیست؟ (What is an anxiety disorder?)

[Dinka.](#)

Yenō yenē tuaany de diærdiit nɔŋɔc riðōc? (What is an anxiety disorder?)

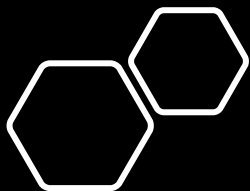
[English.](#)

What is an anxiety disorder?

[Farsi.](#)


اختلال اضطراب چیست؟ (What is an anxiety disorder?)

[Greek.](#)



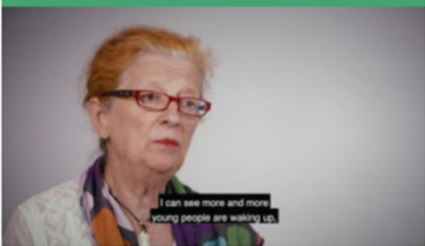
One of the most powerful ways to gain greater insight towards the experiences of mental illness in multicultural communities is to listen to people share their own stories, in their own unique way.

stigma of mental illness




centre for
culture,
ethnicity
& health


Available in English and Croatian



I can see more and more young people are waking up.


Watch and listen to Nevena's Story - Part 2






But I did get the help at the right time.

Watch and listen to John's story




Ali's Story




you're actually part of so many communities

Watch and listen to Ali's story




Thir's Story




There are supports available

Watch and listen to Thir's story




Naseema's Story



Can make a difference for them

Watch and listen to Naseema's story



<https://www.embracementalhealth.org.au/community/personal-stories>

Health Translations

<https://healthtranslations.vic.gov.au/>

Help us improve the Health Translations Directory by taking our brief online survey. It will only take a few minutes.

Health Translations
Translated information about
health and wellbeing

A-Z of resources About us Contact us Promote us FAQ News

Home Search by topic Search by language Register your resource Tools for professionals

Find translated health information

Search resource here

Keyword

Language

Advanced Search

GO

Watch a short video on how to search the directory

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VICTORIAN ABORIGINAL
HEALTH SERVICE

"Caring for the Community"



YARNING SAFE'N'STRONG

1800 959 563

Free and confidential phone support • 24 Hours • 7 days a week



YARNING SAFE'N'STRONG

Available
24/7

Yarning Safe'N'Strong is a confidential phone crisis line for Aboriginal and Torres Strait Islander People and families who need to have a yarn with someone about their wellbeing.

So if you're feeling down, isolated, or just need a yarn, maybe give us a call?

You can yarn safely with culturally suitable counsellors that 'get it', no matter how small or big the challenge.

- Social and Emotional wellbeing
- Counselling
- Medical help and COVID-19 advice
- Drug and alcohol counselling and rehab

Free and
confidential

If you're not sure who to call but need assistance, please call our helpful team at VAHS and we can help link you to the right service.

1800 959 563



YarningSafenStrong



During COVID-19 we continue to run our service. Get support from [QLIFE](#) // Get support from [Rainbow Door](#)



[Home](#)

[Who We Are](#)

[Get Support](#)

[Out & About](#)

[Suicide Prevention](#)

[Get Involved](#)

[Resources](#)



[DONATE](#)

Staying well together

Switchboard is here for our LGBTIQ+ community

[GET SUPPORT](#)



GET SUPPORT

Rainbow Door is a free service of Switchboard. You can call, text or email for support.

Phone: 1800 729 367

Text: 0480 017 246

Email: support@rainbowdoor.org.au





Mental Health First Aid Course

DEVELOPING MENTAL HEALTH PROBLEMS **COVERED**



DEPRESSION AND ANXIETY



PSYCHOSIS



SUBSTANCE USE PROBLEMS

MENTAL HEALTH CRISIS SITUATIONS **COVERED**



SUICIDAL THOUGHTS
AND BEHAVIOURS



NON-SUICIDAL SELF-
INJURY (DELIBERATE
SELF-HARM)



PANIC ATTACKS



TRAUMATIC EVENTS



SEVERE EFFECTS OF
DRUG AND ALCOHOL
ABUSE



SEVERE PSYCHOTIC
STATES



AGGRESSIVE
BEHAVIOURS