



## SESSION SUMMARY

### FIRST MEETING OF THE NATIONAL NETWORK OF MENTAL HEALTH PROMOTION PRACTITIONERS

The first meeting of the National Network of Mental Health Promotion Practitioners was held on Wednesday 30<sup>th</sup> March 2022 via Zoom. The meeting generated a lot of interest with a total of 87 people registering their interest to attend, and over 50 people attending the first meeting!

Attendees came from a broad cross-section of professional backgrounds and settings and sectors, highlighting the multidisciplinary nature of the mental health promotion workforce.

#### Keynote presentation

Following an Acknowledgement of Country, Prevention United CEO Dr Stephen Carbone gave the keynote presentation titled “What is mental health promotion and why is it important”. A recording of Stephen keynote presentation is available [here](#).

Stephen argued that mental health promotion is a specialised field of endeavour that overlaps with mental health, health promotion and public health practice, and in many ways, it could be regarded as the mental health component of the broader field of health promotion.

Stephen explained that in his view the field focuses on three main outcomes including:

- Promoting high levels of mental wellbeing (AKA ‘good’ or ‘positive’ mental health) across the whole population.
- Preventing the onset of mental health conditions.
- Enhancing mental health literacy to promote self-care, destigmatise mental ill-health, and encourage help-giving and help-seeking for people experiencing suicidal ideation or mental health challenges.

Stephen noted that despite steadily increasing expenditure on mental healthcare over the last few decades, the prevalence of mental health conditions in Australia has increased not decreased, and the rate of suicide and psychosocial disability remains tragically high and static.

While a major increase in spending on mental healthcare and suicide prevention is necessary, and improvements in the availability, affordability and quality of supports and services are urgently needed, Stephen noted that more mental healthcare services alone will not solve Australia’s mental health crisis. We also need to invest in tackling the underlying factors that contribute to mental ill-health to prevent these conditions from occurring in the first place.

This requires a public health-informed approach focused on individual skills building, social connection, and organisational and societal-level structural change to address the social determinants of mental health.

Achieving this requires dedicated and recurrent funding for mental health promotion, a strengthening of Australia's preventive mental health system infrastructure, and better support for the thousands of workers working in mental health promotion roles in education, workplaces, health and mental health services, non-government and government organisations and other settings.

Stephen expressed a hope that this new network would bring people working on mental health promotion related activities together to network, share ideas and information and participate in professional development activities.

In turn this would help raise the profile of the work we do, improve our capacity and capability in this critical field of endeavour, and allow us to make real in-roads in reducing the incidence and impact of mental ill-health among the Australian community.

### Small group discussion

Stephen's keynote address was followed by small group discussions in the Zoom breakout rooms.

The breakout rooms provided an opportunity for people to introduce themselves and their organisation, and to discuss what mental health promotion meant to them, what they thought this workforce needed, and what they were hoping to get out of joining the network. This was followed by a large group discussion about the merits of the network and how it could best function. Some of the key points raised during these conversations are summarised below.

#### **What is mental health promotion?**

- Mental health promotion is about enabling flourishing and helping people to attain and maintain good mental health and wellbeing.
- It involves enabling/empowering people to increase control over and improve their mental health and wellbeing.
- It takes a whole of population view and focuses upstream on risk and protective factors.
- It requires a focus on individual behaviour change and tackling the social/structural determinants of mental health.
- It involves action in health and non-health settings where people live, work, learn and play.
- It is important that it supports communities in a way that makes sense to them culturally and linguistically so that they feel safe and connected, with a strong sense of belonging.
- May include public education campaigns, program design and delivery, advocacy, capacity building, and policy development among other activities.
- It is part of, or at least informed by health promotion and public health practice, as well as community development.

#### **Who is part of the mental health promotion workforce?**

- People acknowledged it is a very diverse workforce that includes community members, community leaders, First Nations Elders, people with lived/living experience and peer workers, youth workers, family violence workers, community development workers, bicultural workers, educators, Human Resource Managers, arts officers/artists, psychologists, social workers, nurses, people with skills in marketing and communication, health promotion practitioners and others.
- People also acknowledged mental health promotion activities occur in a very wide range of settings including online, in schools, workplaces, leisure centres, neighbourhood/community houses, sport groups and clubs, child youth and family services, local government, health and mental health services, public health teams, suicide prevention networks, non-government organisations, and government departments amongst other settings.

### **What does the workforce need to become stronger, more effective and get greater recognition?**

- Mental health promotion often gets overlooked in health promotion/public health and mental health professional groups and networks.
- People therefore agreed that it's important to define this workforce and raise its profile.
- We need to highlight and recognise our unique and specialised skills without becoming separated from health promotion/public health and mental health sectors.
- Some people suggested the field needs a 'peak body' to represent it.
- Others noted that the workforce requires access to training and professional development. This could include communities of practice like this network or a range of accredited training from vocational certificate qualifications – to create a workforce similar to personal trainers – through to postgraduate certificates/diplomas/degrees in mental health promotion.
- It also needs resources such as best practice guidelines.
- Others thought we need more predictable and adequate resourcing for mental health promotion roles. Some people noted that the way mental health promotion work is funded means the workforce is often on short term contracts – this has an impact on the workforce and the way that people can develop their career in the sector. Others mentioned the competitive nature of funding was holding us back.
- Others emphasised the need to foster partnerships and collaboration, including with the mental health, health and human services sector, to highlight our role and strengthen the workforce.

### **What do people want from the network and how should it function?**

- Most people thought the network was a good idea and filled a need for people working in mental health promotion. One person stated she'd 'found her tribe' and noted that it was wonderful to be around like-minded individuals who 'got' what she did without her having to explain it, and were working on similar issues.
- In terms of how the network should function, most people said they were looking for information and professional development opportunities to improve their practice – ideas, frameworks, updates on what other people were doing, latest research, sharing best practice/case studies/success stories/lessons learnt etc.
- They were also looking to strengthen their professional networks and look for opportunities to connect with or collaborate with others in their state or nationally. There were also looking to draw inspiration from others, offer and receive encouragement and peer support.
- Others thought that the network could focus on advocacy, for example around funding and sustainability of mental health promotion programs and the workforce, or offer itself as an expert advisory group to inform government policy development at a state and/or national level.
- Some people thought it could focus on advocating for, or help to develop accredited training in mental health promotion.
- Others thought it could actively promote/advocate for the field/workforce as well as clients and communities, while some people emphasised the benefits of opening channels of communication between people working in different settings and sectors to break down silos.

### **Next steps**

The meeting concluded with Stephen thanking the organising committee and all the people who had attended the meeting.

He noted that Prevention United would be circulating a link to an exit survey designed to find out more about how members would like the network to function. The result of the survey will be summarised, and a report provided back to everyone who registered to be part of the network.