



Queensland Alliance for Mental Health

Measuring What Matters

Submission

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Who is QAMH?

The Queensland Alliance for Mental Health (QAMH) is the peak body for the Community Mental Health and Wellbeing Sector in Queensland. We represent more than 100 organisations and stakeholders involved in the delivery of community mental health and wellbeing services across the state. Our role is to reform, promote and drive community mental health and wellbeing service delivery for all Queenslanders, through our influence and collaboration with our members and strategic partners. At a national level, we have a formal collaboration with Community Mental Health Australia and provide input and advice to the work of Mental Health Australia and the National Mental Health Commission where appropriate. Locally, we work alongside our members, government, the Queensland Mental Health Commission and other stakeholders to add value to the sector and act as a strong advocate on issues that impact their operations in Queensland communities.

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Background

QAMH has welcomed the Treasurer’s announcement that the government will develop a national framework for measuring progress and wellbeing that goes beyond traditional macroeconomic indicators. This aligns with our strong belief that the nation’s social and economic pursuits should be centred around activities which enhance Australians’ wellbeing and allow them to live a good life. Economic markers such as GDP do not truly capture the nation’s prosperity and have little relevance to Australians’ day-to-day lives. A wellbeing approach also necessitates whole-of-government and whole-of-society perspective – something QAMH has long been calling for.

QAMH strongly believes that the mental health status of the population must be a central component of this proposed framework. The profound disruptions brought about by the Covid-19 pandemic, natural disasters, international conflict and the cost-of-living crisis have shifted the focus onto the pivotal role mental health plays in creating a thriving community. Where it was once the poor cousin of physical health, mental health has been “reconceptualized as a key contributor to the mental wealth of nations, encouraging an asset-based approach that pushes governments to focus on creating environments where people can flourish.”¹ As the government embarks on this process to “fundamentally rethink what has real value, and how we define, measure, model and forecast national prosperity”², we ask them to put mental health at the centre of this progress and wellbeing framework.

In developing the systems to support the framework, it is essential that these design features are considered:

- A whole-of-government approach
- Linking funding to wellbeing indicators
- Mental health indicators that move beyond clinical diagnostic criteria and are captured by an independent body

These features are explored in further detail below.

¹ World Economic Forum. (2022). *Future Focus 2025: Pathways for Progress from the Network of Global Future Councils 2020-2022 Insight Report*. [WEF Future Focus 2025.pdf \(weforum.org\)](#)

² Occhipinti, J., Buchanan, J., Skinner, A., Song, Y.J.C., Tran, K., Rosenberg, S., Fels, A., Doraiswamy, P.M., Meier, P., Prodan, A., & Hickie, I. (2022). Mental Wealth: Measuring Progress Towards the Wellbeing Economy. *Frontiers in Public Health*, 10, [Frontiers | Measuring, Modeling, and Forecasting the Mental Wealth of Nations \(frontiersin.org\)](#)

Whole-of-Government Approach

QAMH is advocating for a whole-of-government approach where every minister is held accountable to the wellbeing framework as part of their portfolio. Just as concepts such as ‘value for money’ or ‘cost-effectiveness’ are core components of government processes, the extent to which programs or policies impact the nation’s long-term wellbeing must be central to all decision making.

In reality, unlike GDP, most indicators will fluctuate little over time. Homelessness, education attainment and gender wage gap are markers that take years, if not decades, for noticeable change to occur. While rates of mental illness have skyrocketed since the Covid-19 pandemic, historically there have been more gradual, less seismic shifts. While this doesn’t necessarily signal that there is a political imperative to make decisions according to the framework, we believe it will focus attention on the long-term policy goals and wellbeing priorities of the nation. For this reason, QAMH strongly believes the wellbeing approach must be embedded across the entire public sector to ensure priority setting, strategic planning and budgetary decisions are subject to accountability through a wellbeing lens.

Linking Funding to Wellbeing Indicators

QAMH believes all new funding proposals put to the government must be assessed using agreed wellbeing indicators. Notably, the New Zealand government has successfully embedded a wellbeing framework into budgetary and policy-making processes, with the success of policy proposals contingent on their ability to positively impact wellbeing indicators. This approach puts the population’s wellbeing at the core of budget decisions by investing in initiatives that strengthen the community and enable human flourishing.

We feel this is a fundamental design feature as it allows us to collectively change the nation’s future course by only funding policy proposals that meet our agreed progress goals. It also sends a clear message about the importance of those goals and focuses attention on the type of actions needed to achieve them.

Mental Health Indicators

Selected mental health indicators must move beyond clinical diagnostic criteria which focus on mental illness as opposed to mental wellbeing. Rather, they should incorporate holistic, person-

centric, psychosocial measures across multiple life domains. QAMH is concerned that the existing reporting instruments that Treasury may be considering rolling into a progress and wellbeing framework focus predominantly on DSM-5 criteria and cite incidence of, among other things, depression, generalized anxiety and schizophrenia. For example, the ABS Census and the [National Study of Mental Health and Wellbeing](#) both rely on clinical definitions.

QAMH believes that mental illness and mental wellbeing are two different constructs. At any given time, you can have low, moderate or high levels of mental wellbeing AND none, some or all of the symptoms of a particular mental illness. Mental wellbeing exists on a continuum ranging from floundering to flourishing. A dual focus on both the mental illness continuum and the wellbeing continuum will ultimately provide the best outcomes. This concept is elaborated upon in QAMH's [Wellbeing First Report](#).

Some alternative indicators to consider which better capture mental wellbeing data include:

- Mental Health Australia's [Report to the Nation](#): This online questionnaire was designed by Ipsos, in collaboration with Mental Health Australia, and includes measures such as self-rated mental health over past three months, if they felt life has been filled with interesting/enjoyable things, if they felt part of a community, whether they needed mental health support.
- [Mental Wellbeing Index — Smiling Mind](#): This survey, designed by Smiling Mind and KPMG, uses data collected over a two-year period from more than 225,000 Australians. The index is released quarterly. It looks at six everyday mental wellbeing domains including emotional awareness, focus and concentration, emotional regulation, relationships and social connections, sleep and stress.
- [Harvard Flourishing Measure](#): These 12 items assess various domains of flourishing or human well-being in the following domains - Happiness and Life Satisfaction, Mental and Physical Health, Meaning and Purpose, Character and Virtue, and Close Social Relationships.

QAMH is advocating for a national survey which would capture the above outcome measures. This should be administered by a truly independent body, with results to be broadly available to the public. We believe this separation from the machinery of government is fundamental to ensuring transparency and integrity of the data captured.

It is also important to note that none of these examples include a mechanism for measuring child and youth mental health outcomes. We have very precise data on literacy and numeracy rates of Australian children, courtesy of NAPLAN, and yet there is no national capturing of data regarding their mental health. This is despite concerns about the unprecedented rates of mental distress in

younger age groups as a result of a number of factors including the Covid-19 pandemic, social media, climate change, social isolation and rising inequalities. A new outcome on student wellbeing should be included in the proposed progress and wellbeing framework. This would also align with the Productivity Commission's recent report which stated that "there are clear benefits in developing a national indicator of student wellbeing to better understand how student wellbeing is tracking and to provide insights into the efficacy of policy interventions — governments should develop a sub-outcome on student wellbeing and report against it as a matter of priority."³ QAMH believes there is an obligation to comprehensively capture this data on a national scale.

Thank you for the opportunity to contribute to this consultation process. We look forward to continuing to work with the Australian Government to better the lives of people living with mental distress. Please do not hesitate to contact QAMH should you require any further information.

³ Australia. Productivity Commission. (2022). *Review of the National School Reform Agreement, Study Report*. <https://www.pc.gov.au/inquiries/completed/school-agreement/report/school-agreement-overview.pdf>