

Mental health

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Mental health, hope and recovery

Grant Blashki

Introduction

Mental health conditions are extremely common in the community and have a major impact on people's day-to-day lives, as anyone who has been through the experience will tell you. For many people one of the hardest things is the uncertainty about recovery, and indeed, it is often a person's very sense of *hope* that is diminished. For people experiencing mental distress there often is a powerful sense of hopelessness combined with a sense of despair that they will never recover. My hope is that this chapter also brings hope, especially to those readers who are doubting their capacities to heal. As a GP, I can tell you, never underestimate the ability of the mind, and the capacity of human beings to recuperate and mend themselves. Educate yourself and understand as much as you can about what works for you as you get yourself back on track to mental wellness.

In this chapter, I focus on the mental health issues of depression and anxiety, and also discuss the sensitive issue of suicide risk. In this short chapter I have not been able to discuss the wide range of mental health conditions that affect so many people. I am privileged to currently be the Lead Clinical Adviser for *beyondblue* and so this chapter is very much looking at depression and anxiety through that lens, not discounting the extraordinary contributions of the many not-for-profit mental health organisations we are lucky to have in Australia.

Mental health issues don't occur in a vacuum, but within the context of people's culture and communities in which they live, whether they are living in a rural community, an Aboriginal community, a big city population, or one of the many other groups that make up Australian society. I also explore the important role of schools and the workplace and how they can contribute to strengthening mental health and assisting people when they are experiencing a mental illness. Unfortunately, stigma and discrimination still exist in the community, despite some improvements in recent decades, and I discuss what we can all do to help reduce stigma.

So, the aims of this chapter are to help reassure people who are experiencing anxiety and depression and remind them that there are good reasons for hope about recovery. You get better. I present practical suggestions about how people can gradually get themselves back to their usual everyday selves, and practical advice for family and friends of people with mental health issues.

The Big Picture

As a starting point, it is worth taking a step back and remembering that mental health issues are part of the human experience. They occur across all cultures and societies and cause substantial distress, family disruption, relationship tensions and incapacity to work, and from a broader perspective represents an enormous economic cost to societies. In Australia, it is estimated that in any year, approximately two million people are experiencing anxiety and about one million people are experiencing depression. Furthermore, an issue that is not discussed openly enough is that suicide is still very common around the world, and in Australia, the rate is still almost double the national road toll.

Experiences of mental health issues

Each individual's experience of mental health issues is intensely personal and varies widely. Some insight into people's experiences can be gained by viewing *beyondblue's* very active online forums where many people tell their individual stories and discuss their experiences, including what they have found helpful for them. In fact, on these forums there are some 8,000 comments a month posted, all moderated to ensure that comments are appropriate and supportive in their tone. The online discussion forums can be accessed via the website, and the many topics are arranged along discussion threads. Here are some examples to give you a sense of them; 'How much do you share with those you love?', 'My boyfriend has depression', or 'I can't make big decisions — does anyone else feel that?' So, the forums represent a hive of online activity, advice and compassionate discussions about people's experiences.

The great need for people to share their mental health experiences is demonstrated by the enormous flow of internet traffic representing over 100,000 views per month on these forums. Clearly, people with mental health issues are very interested to find out how others with the same sorts of problems are managing, what approaches they have found helpful, and conversely, which approaches have not helped too. Here is the website: <https://www.beyondblue.org.au/get-support/online-forums>

The experience of *depression* is deeply personal and usually involves a constellation of some of the following typical feelings, thoughts and behaviours. It may be obvious to say, but the essential feature of depression is a persistent lowered mood, a theme described throughout history, literature and music, and really is the hallmark of depression.

For people who have never experienced depression it is important to realise that the lowered mood that people with

depression experience is much more than the everyday experience of just feeling sad. An unfortunate limitation of the English language is that we tend to use terms such as ‘depressed’ both in a colloquial fashion to express trivial upsets, and to speak of clinical ‘depression’, where the depth of feeling is intense, pervasive and overwhelming.

Not uncommonly, the feelings of depression are bound up with negative thoughts of self-blame, despair, hopelessness and oftentimes guilt. In this regard, it is also useful to differentiate depression from grief and loss, which are also part of everyday human experience. Life is hard, and when we lose people we love, relationships break down or illness diminishes our physical capacities, the sense of loss and grief we feel is part of being human and need not be medicalised.

Depression is also often accompanied by overwhelming symptoms of apathy, tiredness, poor concentration, disrupted sleep or sometimes oversleeping, and a general pattern of withdrawal from usual activities and roles.

There are, of course, detailed medical checklists and definitions such as the psychiatric gold standard, the *DSM-V — The Diagnostic and Statistical Manual of Mental Disorders (5th ed.)* — for diagnosing mental health disorders such as depression or anxiety. However, people who are concerned that they might be experiencing mental health issues could start with the simple K10 checklist, which is available on the *beyondblue* website, and which although not diagnostic, does provide some guidance on people’s mental state, and may be a prompt to seek further professional assistance (<https://www.beyondblue.org.au/the-facts/anxiety-and-depression-checklist-k10>).

Symptoms of *anxiety* also vary widely, and accordingly the anxiety disorders are grouped into several different subcategories of illness. The essential feature of the anxiety disorders is

fear. More specifically, an experience of fear that in most cases is excessive and that causes an inappropriate response beyond everyday frightened feelings or sensible caution.

For some people, *panic attacks* are a central part of their anxiety, involving an exponentially escalating sense of doom and panic often accompanied by physical sensations such as a racing heart, rapid breathing, chest pains, a choking feeling, and even a strange sense of unreality. People experiencing panic attacks often have an overwhelming sense that they need to escape the situation, and when the feared situations are repeatedly avoided, people can develop what is called *agoraphobia*, where one's perception of situations in which he or she feels safe becomes quite limited — for example, becoming fearful of leaving the house.

Another common pattern of anxiety is *social anxiety* or social phobia, where the stress and worry are focused around the idea that other people are watching the person and judging them, and this can result in avoidance of social situations and also can become quite debilitating. For example, simply going out with friends to a cafe for a meal can become an uncomfortable, anxiety-provoking ordeal.

Obsessive-compulsive disorder (OCD) is another anxiety-related condition that can also cause enormous life disruptions. People with OCD are unable to control obsessive thoughts or compulsive behaviours. For example, they may develop rituals such as excessive hand washing to remove germs, or repeated 'checking' behaviours such as checking if the gas is off or checking that the door is locked, or a whole range of compulsions that can dramatically interfere with people's day-to-day lives.

Generalised anxiety disorders (GAD) involve a more general pattern of disproportionate worry about everyday things. People with GAD feel anxious and worried most of the time, not

just in specific stressful situations, and these worries are intense, persistent and interfere with their normal lives. Their worries often relate to many aspects of everyday life, including family, relationships, work or money issues, rather than just one issue. Even minor things such as a news item or being late for an appointment can become the focus of anxiety, leading to uncontrollable worries and a feeling that something terrible will happen.

Another type of anxiety-related disorder is *post-traumatic stress disorder (PTSD)*, although this is increasingly viewed as a broader condition than just anxiety. It affects people who have experienced traumatic episodes such as a car or work accident, physical or sexual assault, war or torture, or being caught up in natural disasters such as bushfires or floods. PTSD can lead to marked disruption in people's lives as symptoms include repeatedly replaying or reliving the traumatic event in the mind, feeling constantly wound up or emotionally numb, and a range of other complex symptoms.

Recovering from mental health issues

Be informed

Historically, many myths and misunderstandings have existed with regards to mental health issues. Literature over the centuries is filled with stereotypes and fears about people with mental illness. Indeed, for many cultures, a mental illness in the family is a source of great shame. In fact, for people with no experience of mental health problems, there is often the incorrect belief that mental illness is a choice and that if the individual were simply stronger or more motivated, they could magically 'snap out of it' and get themselves better.

What we have been seeing in Australia over recent decades is a dramatic change in attitudes towards mental illness, and

what researchers call the *mental health literacy* of the Australian community has dramatically improved. In part, this has been achieved by national organisation such as *beyondblue* and many others who have been promoting more open discussion about mental health issues. At the same time, high-profile people and celebrities who have talked openly about their mental health have made it a more acceptable and commonplace conversation to have in the community.

As with any health issue, the more information you have on hand, the better prepared you are to deal with it, and mental health is no exception. *beyondblue* has a wide array of information resources on their website, including detailed fact sheets and videos of experts and stories from people with lived experience of mental health issues who bring great insight into how they have managed their condition. Information on the website is subdivided along demographics and stage-of-life headings, so people can find information most relevant to them. For example, there is a whole section on *post-natal mental health*, one on *men's mental health*, another section on *youth mental health*, just to name a few. There are also some excellent fact sheets translated into many languages.

Lifestyle

Before embarking on more intensive psychological or pharmacological interventions, it is well worth remembering that there are great gains to be made in mental health from simple lifestyle changes, and as a GP, I often find the simple things can make a big difference to people's lives. For example, there is strong evidence that exercise provides many well-documented physical and psychological benefits and is enormously valuable in recovering from mental health issues.

Healthy *sleep* patterns are also very important, especially as disrupted sleep is a common feature of most mental health

conditions. Some simple tips include: turning off the screens from about 11 pm, putting the telephone charger in another room, reduce stimulants during the day and certainly late in the day such as coffee and other caffeine drinks, and also cutting back on cigarettes (if you smoke!) from 4 pm. A quiet room that is not overheated can also promote a healthy sleep routine. If you do wake up and can't get back to sleep, rather than toss and turn in bed, try getting up and going to another room to read or perhaps engaging in some other relaxing activity until you feel tired again.

Managing day-to-day *stress* is another commonsense strategy that is most helpful when dealing with a mental health problem. Although easier said than done, try to make some changes in the workplace or in your home duties so that you reduce your overall responsibilities. Also, be careful with making any big decisions in the midst of managing a mental health issue; sometimes it's better to wait till you are feeling calmer and can quietly consider things rationally before making major renovations to your life.

Planning a regular *routine* sounds very simple, but can also be surprisingly effective for people with mental health issues in that it helps to avoid the scenario of waking up in the morning with no firm plan for the day. Schedule a time to wake up and then plan simple activities, one for the morning, the afternoon and the evening. In general, try to arrange one 'pleasurable' and one 'achievement-based' activity for the day. So, a pleasurable activity might be a walk in the park, and an achievement activity might be submitting your CV for a job application you are interested in. Don't worry if you can't exactly complete your schedule, as it is ultimately better to have a general plan for the day rather than having a totally open schedule that leaves you lost in your own thoughts and worries.

Getting the team right

I often discuss with my patients who are experiencing significant mental health problems that *our first job is to get the team right*. A GP is essential, and I almost always include a psychologist in our team who brings in-depth psychological skills and time beyond the realms of routine general practice. Psychiatrists also bring highly specialised expertise and are crucial for assessing and managing more complex mental health problems. Sometimes other members of the team include social workers, counsellors, schools, workplaces and other professionals — all according to the person's needs. Like an orchestra, when the team works well, there is a high level of communication, everybody is clear about their role, and the person feels well supported.

Psychological treatments

Several *psychological treatments* don't require direct involvement of a mental health professional and it's worth being aware that there are an enormous number of effective and *evidence-based* psychological treatments now available online. For example, there is good evidence that the online program *moodgym* (<https://moodgym.com.au>) and other online CBT approaches can be very helpful for people in managing unhealthy thinking patterns. A terrific online resource called *Head to Health* (<https://headtohealth.gov.au>) catalogues the plethora of online resources for managing mental health issues and is well worth exploring.

Another very effective strategy that a person can try without seeing a health professional is to begin practising *mindfulness* exercises. Practising the meditation approach to mindfulness for just 10 minutes in the morning and night is very beneficial for your mental health. Excellent free apps can be downloaded on

your phone, including one from *Smiling Mind*, and another excellent app from *Headspace*. Don't worry if you find yourself getting very distracted when you first start, it is normal for the mind to wander, but if you persist, the benefits of mindfulness are very well documented, and it can be a terrific routine to help manage your mind.

For many people, professional psychological care can be enormously beneficial in managing a mental health issue, and in Australia we are fortunate to have a highly skilled psychologist and allied health workforce. Cost is often a barrier for people and they should be aware that they can go to their GP and undertake a *GP Mental Health Care Plan*, which will entitle them to six treatment sessions initially, and up to ten Medicare subsidised psychological treatments. A good place to start is to look at the Australian Psychological Society website, which describes all the different sorts of psychologists, what they can offer, and also has a search function to help you find an appropriate local psychologist (<https://www.psychology.org.au>).

A new development has been *beyondblue's New Access* program that supports trained coaches to provide 'low intensity CBT', which is a more limited form of cognitive behavioural therapy and includes approaches such as problem solving and activity planning. Low intensity CBT is designed for people with milder life problems such as work stress, family stress, unemployment, financial concerns and other common issues. The service is expanding across a number of regions throughout Australia and is designed to help people early before they develop more severe mental health issues that may need mental health professional care.

beyondblue is strongly committed to *evidence-based* psychological treatments and routinely reviews the scientific evidence for various treatments for anxiety and depression. These

reviews are published on the website as freely available documents entitled *Treatments that Work*. Currently, there is one review of treatments that work for depression, and another review for anxiety disorders. As new interventions are developed and scientifically evaluated, *beyondblue* is able to add these approaches to the list of evidence-based treatments.

A very popular approach, with numerous studies supporting its effectiveness is called *CBT*, an acronym for Cognitive Behavioural Therapy. It involves helping an individual to better recognise their faulty and unhelpful thinking patterns and encourages them to replace these thoughts with more realistic and kinder thinking patterns that will help them in their recovery — in particular, from anxiety- and depression-related issues. This approach has been well described in a previous Future Leaders chapter that is available online, ‘What’s the use of worrying? Strategies for breaking the worry habit’ (http://www.futureleaders.com.au/book_chapters/pdf/LifeSurfingLifeDancing/Sarah-Edelman.pdf)

Pharmacological treatments

The research is clear that people with milder mental health issues do not generally require any pharmacological treatment. However, for more severe and intractable depression and anxiety issues there is a role for pharmacological treatment, and there is good evidence that they can greatly assist people. As with any medical intervention, there are always risks and benefits, and people should always discuss their situation with their GP or mental health provider before embarking on pharmacological treatments.

In recent decades there has been an expanding array of antidepressant medications available, each with its own side-effect profile and efficacy. Some general principles to keep in mind are that often antidepressants take some time (at least two

weeks) to take effect, and usually need to be continued for at least some months or longer. Psychotropic medications need to be closely monitored by a health provider to assess any side effects, effectiveness, and any problems that arise over time. People have different attitudes and levels of comfort with pharmacological treatment and so the risks and benefits need to be carefully discussed with your doctor to decide if taking them is a good decision for you or not.

Managing crises

Many of the mental health issues I have discussed so far assume that a person is essentially safe and not at immediate risk of harming themselves. The sad reality in Australia is that almost 3,000 people choose to take their own lives each year, and so the issue of *suicidal risk* is a very real and important issue to discuss with your health provider.

People in Australia should be aware that in a crisis they can contact organisations such as *Lifeline* (13 11 14) or are also able to contact services through the local hospital — these services are called *Community Assessment Teams*, or CAT teams for short.

beyondblue is strongly committed to helping reduce suicide risk in the community and has developed lots of resources. The *beyondblue* online forum has a strong focus on reducing suicide risk and is a very helpful source of information and discussion with people who have experienced suicidal thoughts, and this can be very comforting and helpful for people to realise that they are not alone.

BeyondNow is a free app that has been developed by *beyondblue*, which helps people manage suicidal thoughts and to have at the ready in their phone a safety plan. It also sets up contacts for people, as well as resources they can access during a crisis. The app has been downloaded by some 45,000 people already. As a GP I have found that it is one of several approaches that

people find very helpful to manage suicidal feelings and thoughts.

Another important development that *beyondblue* has developed is *The Way Back Program* — recently funded as a national program that targets assistance for people who have attempted to take their own life and subsequently have been discharged from hospital. The program carefully follows people up for at least three months after hospital discharge, which is known to be a very high-risk time.

Building mentally healthy societies

The old saying that prevention is better than cure is still true. How do we help create schools and workplaces that help people develop resilience, to be able to bounce back from adversity, and to be flexible to deal with the many ups and downs that life throws at us all?

Schools

Young people at school are in the midst of an intense time of growth and development and are also subjected to the many stresses and pressures of growing up. The evidence tells us that about half of people with mental health issues first experienced these problems under the age of 14. That's why *beyondblue* has been developing a new national education initiative called *BU* for early learning services and schools. *BU* brings together a wealth of experience from the many organisations that have been working on the mental wellbeing of children and young people.

In particular, there is a very strong focus on assisting educators to help build resilience in young people, to ensure that schools and early childhood services are safe and mentally healthy places, and that children who are experiencing mental health issues are picked up early and engaged in the sorts of

services that will really assist them. Part of this process is working closely with families, and it's fair to say that there is tremendous goodwill in the school communities for developing programs that will help to support resilient mentally well young people.

Workplaces

Most of us spend the majority of our waking lives in the workplace, and *beyondblue* is strongly supporting mentally healthy workplaces in a program called *HeadsUp*. Achieving a mentally healthy workplace is not simple and requires deliberate and continued support from the leadership of an organisation to build its culture. This involves being informed about the best practices for supporting mental health in the workplace. There is a wealth of information on the *HeadsUp* website covering important principles for employers, employees and organisations (www.headsup.org.au).

In order to build a mentally healthy workplace, leaders need to make a serious commitment in terms of time, energy and resources that can set the tone of the culture in a workplace. Research by Price Waterhouse Coopers also shows that for every dollar spent on developing a mentally healthy workplace there is a \$2.30 pay back in the long run. This is because there is less absenteeism, less presenteeism and less compensation claims. Therefore, building a mentally healthy workplace has an important financial rationale as well as the obvious compassionate benefits.

Reducing stigma

It seems it is pretty unlikely we will ever live in a society where nobody has mental health problems. However, great gains have been made in that as a community we can discuss and under-

stand these issues. As a clinical GP, I am struck by the huge change over just 25 years in the attitudes of patients who often quite openly discuss their experience with mental health issues such as depression and anxiety. Families and friends too are much more informed of the nature of mental illnesses and the important role they play in helping people to recover. Reducing stigma in the community is an ongoing process, and *beyondblue* has been very active in this space through advertising campaigns, supporting leading ambassadors and speakers, and working with all sectors of civil society to normalise discussions about mental health issues.

Conclusion

Our human condition is somewhat vexed. Of course, we are all filled with positive nurturing capacities and, truth be told, some pretty destructive and despondent capacities too. While it is naive to have a utopian vision of a perfectly mentally healthy society, there is much we can all do throughout the various life stages to strengthen our resilience and improve overall mental wellbeing. The work of *beyondblue* and others is a very hopeful and dedicated commitment to improving the mental wellbeing of all Australians.

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