

Prevention in Practice Summit 2023 communique

Getting prevention knowledge into practice is imperative if we want to reduce the onset and impact of mental health concerns in Australia.

The gap between prevention knowledge and implementation is significant. Changing this was the key focus of a one-day summit hosted by Everymind in partnership with the Wellbeing and Prevention Coalition for Mental Health, the HMRI Healthy Minds Program and the Manna Institute.

Hundreds of participants and eighteen national experts across lived experience, community, government, research, industry and the mental health sector came together in Newcastle, and virtually, for the Prevention in Practice Summit on Wednesday, 6 December.

Why a Prevention in Practice Summit?

Australia already has a distinguished track record in preventing the onset and impacts of many physical health conditions and the Prevention in Practice Summit was an opportunity to bring people together to identify ways to get the same results in preventing the onset and impact of mental health concerns.

Despite steadily increasing investment in some parts of mental healthcare, the prevalence of mental health concerns in Australia is rising rather than falling, and the human and economic costs are increasing. This is unlikely to change if investment and system reform is primarily directed to secondary and tertiary interventions.

The summit recognised that while we must continue to invest in more and better services, prevention approaches must also be a priority. There is evidence for the effectiveness of prevention interventions, excellent return on investment, as well as a return on human capital and potential if they are implemented at scale.

Themes from the summit

The eighteen summit presenters and panellists engaged in thought-provoking and solution-focused discussions about how we move from knowing that prevention is an important part of our national approach to getting it implemented at scale across policy and practice.

Discussions on the day centred around four key session themes.

Theme 1: Taking action on the social and commercial determinants of mental health requires collective action across sectors and an investment in building strong communities.

Key takeaways:

- The commercial determinants of mental health are often overlooked but are having a significant impact on equity, mental health and wellbeing.
- Addressing the impact of childhood maltreatment must be a priority action if we are to address the onset and impact of mental health concerns now and into the future.

- The strengths of Aboriginal and Torres Strait Islander and LGBTIQ+ communities can be leveraged to address social determinants of mental health, but that also means investing in strong community control organisations and services.
- What we measure matters, with some clear data priorities if we are to be inclusive of all communities and better understand the impacts of key social and commercial determinants.

Theme 2: There needs to be a significant investment in implementation of prevention programs across sectors and systems, to ensure what we know reaches people where they live, work, learn and connect.

Key takeaways:

- Implementation planning is often an afterthought resulting in significant research and program wastage when interventions do not progress to implementation at scale.
- Systems and implementation science can be used to help solve complex challenges, but there is a need to significantly increase capability, skills and understanding of how to apply it in practice.
- Context is important, so understanding the systems and communities where prevention programs are implemented is key.
- Lived experience knowledge can and should inform the 'way' things are done and not just what is done.

Theme 3: Connecting whole of government and whole of community action can enable a comprehensive and evidence-based approach where each brings their unique skills and knowledge.

Key takeaways:

- There is an appetite within government and the wider community to break down silos and enact change together.
- Government portfolios can make a significant contribution to prevention of mental health concerns by doing their core business well e.g. equitable and sustainable housing policies.
- Government legislation can be an enabler for effective workplace approaches when it is supported by sound evidence of what makes 'good work good for people'.
- Sound governance structures, transparency and a focus on longer-term culture change are enablers for better whole of government and whole of community action.

Theme 4: A planned, efficient and effective preventative system is needed to build capabilities and deliver impact across communities.

Key takeaways:

- To change the prevalence and impact of mental health concerns we need a dedicated preventative mental health system with a clear roadmap for action and an investment in the workforce to deliver on priorities.

- Philanthropic funders and other business and community partners are key to success, but they need a clearer and more solutions-focused narrative from the mental health sector with a focus on the impact we can achieve together.
- Evidence is not enough on its own to create the change we need – investing in relationships and drawing reciprocal obligations will be important for the longer-term culture change required.
- People with lived experience and our broader community must be engaged in and drive our prevention priorities, and advise on narratives that engage.

To share a quote from one panellist, “Our work in prevention of mental ill-health is an ultra-marathon and not a sprint”. Our collective work in prevention must be built on and sustained over time. The Prevention in Practice Summit was an opportunity to stop, reflect and reconnect for the next part of the journey.

Next steps

Everymind, together with our event partners, will draw together key priorities and practical actions emerging from the in-person and online discussions at the summit. This report will be released in February 2024 and provide a roadmap for bridging the knowledge to practice gap in the prevention of mental ill-health. [Subscribe to the Prevention in Practice Summit mailing list](#) to keep updated.

Summit speakers

Dr Jaelea Skehan OAM, Director of Everymind; Aunty Cheryl, Indigenous Elder of the Newcastle Aboriginal Community, Elliot Waters, Lived Experience Advisory Group Member, Everymind; Professor Rob Moodie, Professor of Public Health, University of Melbourne; Dr Sally Fitzpatrick, Program Manager, Everymind; Ivan Frkovic, Queensland Mental Health Commissioner, Queensland Government; Dr Stephen Carbone, Founder and CEO, Prevention United; Shane Hamilton, Deputy Secretary Aboriginal Affairs, Department of Premier and Cabinet, NSW Government; Professor Daryl Higgins, Director of the Institute of Child Protection Studies, Australian Catholic University; Samara Shehata, Acting Manager for LGBTQ+ Health Equity, ACON; Associate Professor Sarah Wayland, Senior Research Fellow Manna Institute, Discipline Lead, Social Work, University of New England; Greg Jennings, Chief Engagement Officer, Beyond Blue; Adjunct Associate Professor Robyn Mildon, Chief Executive Officer, Centre for Evidence and Implementation; Carolyn Nikoloski, Chief Executive Officer, Mental Health Australia; Cecelia Gore, Acting Deputy Chief Executive, NT Health; David Burroughs, Chief Mental Health Officer, Westpac Group; Monica Kelly, Executive Director of the Prevention, Equity and First People’s Branch of the Mental Health and Wellbeing Division, Victorian Department of Health; Emily Fuller, Social Impact Manager, Future Generation Global; and Melanie Clark, Lived Experience Advisory Group Member, Everymind.