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# Response to the Productivity Commission's Interim Report on the Mental Health and Suicide Prevention Agreement



Presented by

**HER CENTRE  
AUSTRALIA**

**SUBMISSION PREPARED BY**

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**MONASH**  
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## About HER Centre Australia

Established in May 2022, HER Centre Australia is a Centre of Monash University and continues decades of work in driving world-leading research, education and service provision for women with mental ill health.

Under the leadership of Professor Jayashri Kulkarni AM, HER Centre Australia is uniquely dedicated to specifically understanding and advocating for women's mental health, using the expertise of its clinicians and researchers to help develop world-first gender-tailored innovative treatments and interventions.

Our team includes women with lived experience and their families, psychiatrists, psychologists, doctors, research professionals, higher degree students, and administration staff — all dedicated to improving the quality of life for every woman around the globe.

Because women's mental health is everyone's business.

## HER Centre Response: An Overview

We thank the Productivity Commission (PC) for their interim report on the Mental Health and Suicide Prevention Agreement and this opportunity to respond.

Our focus, built on decades of experience and advocacy, is in Women's Mental Health. Our centre has fast established itself as a leader in the development of new understandings, treatments and services for women with depression, trauma-related mental health issues, menopausal and other hormone-related mental health conditions, anxiety, eating disorders and many other mental health concerns.

We agree with the PC statement that 'The Agreement is not fit for purpose'

We further contend that sadly, women have long suffered as a result of their specific mental health and their needs lacking appropriate or proportionate consideration and focus in the Agreement; despite women being acknowledged to experience depression at rates nearly twice that of men, anxiety at rates four times as much, and eating disorders at rates 12 times more than in men. Suicide Prevention Australia's latest Community Tracker reveals a stark gender disparity across a range of risk factors for suicide, with women reporting elevated distress related to cost-of-living and personal debt, family, relationship breakdown, and housing access and affordability<sup>1</sup>. This is not to even scratch the surface of the mental health challenges uniquely faced by women because of hormonal fluctuations and disruptions relating to menstruation, menopause and childbirth.

Women also face a unique variety of environmental, sociocultural, biological, and psychological experiences which have negative impacts upon their mental health and wellbeing, including being subjected to higher rates of domestic, familial and sexual violence.

HER Centre Australia's mission is to serve as a voice and source of hope for all women at all stages of the life cycle, and to continue our pioneering work striving for the establishment of a new horizon for women's mental health. We urge the PC to raise women's mental health to become a national priority in the next report and ensure that mental health services better meet women's needs.



**Professor Jayashri Kulkarni AM**  
Director, HER Centre Australia



## **An Overview of Our Strategic Recommendations:**

### **1. National Priority for Women's Mental Health**

- **Explicitly prioritise women's mental health in national agreements.**
- **Ensure tailored services for women across all life stages and backgrounds.**

### **2. Specialist Women's Mental Health Clinics**

- **Establish a national network of specialist clinics based on HER Centre's proven model.**
- **Co-designed with lived experience input, integrated into public health systems, and accessible via telehealth.**

### **3. Digital Resource Hub**

- **Create a government-supported digital platform for women to access mental health education, risk screening tools, and pathways to care.**

### **4. Education for Health Professionals & Community**

- **Scale HER Centre's short courses for GPs, psychologists, and other providers on women-specific mental health conditions.**
- **Develop workplace training and launch a "HIM for HER" campaign to educate men in supporting women's mental wellbeing.**

### **5. Research Investment in Five Key Areas**

- **Menopausal depression**
- **Complex trauma (including c-PTSD)**
- **Eating disorders**
- **Anxiety and depression**
- **ADHD in women**

### **6. Reform of National Mental Health Commission**

- **Ensure true independence, transparency, and gender-representative leadership.**

### **7. Fairer Mental Health Funding Distribution**

- **Shift from youth-dominated models to equitable, age-inclusive, gender-responsive funding.**
- **Recognise economic benefits: even small improvements in women's mental health deliver significant national productivity gains.**

**Conclusion To build a stronger and healthier Australia, women's mental health must be a national priority. We urge the Commission to explicitly recommend gender-responsive reform, investment in specialist services and research, and the development of infrastructure that recognises and meets women's unique needs.**

**HER Centre Australia stands ready to contribute our expertise to this essential reform agenda.**

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## Specific Issues for Women's Mental Health

While some modest progress has been made in recent years for investments to improve mental health care in Australia<sup>2,3</sup>, particularly in response to the COVID-19 pandemic<sup>4</sup>, Australians continue to suffer amid a crisis in mental ill-health, further complicated by mental health systems struggling to keep up with high levels of demand. While greater than 42% of Australians aged 16-85 are already reported to have experienced a mental disorder in their lifetime<sup>5</sup>, Australia's mental health crisis and the high levels of demand for mental health care are only predicted to worsen due to the growing psychosocial and economic influence of factors such as climate change<sup>6</sup>. The PC interim report highlights that the actions in the current Agreement do not advance reform.

Australia's mental health crisis is particularly impactful upon **women**, who are recognised as experiencing rates of mental ill-health greater than that of males, in addition to higher rates of suicidality and self-harm<sup>5,7</sup>.

Despite this, mental health care and research both in Australia and globally have suffered from a 'gender-blind' approach, where biological, psychological and sociocultural factors contributing to mental ill-health that are unique to women have often gone without consideration. Sadly, the interim report by the PC continues this 'gender-blind' approach, which excludes the many innovations that can be made by including a focus on women.

Underlining the need for a female focus, the PC can consider the many submissions to the 2024 Senate Inquiry into Issues Related to Menopause and Perimenopause<sup>8</sup>, which led to a total of 25 recommendations, including the commission of research into establishing a "comprehensive evidence base" about the mental health impacts of menopause and perimenopause.

Clearly, to meaningfully address the mental health crisis in Australia, it is imperative that Women's Mental Health be made a national priority.

### The Economic Benefits of Improved Action in Women's Mental Health

Addressing the crisis of women's mental health stands to offer significant benefits to the prosperity of Australia as a nation, beyond even just the improvements to the quality of life for greater than half of the nation's population, as a growing body of evidence demonstrates substantial broader economic benefits to be gained from meaningful investment into women's mental health.

In November 2023, a report from the Victorian Women's Health Services Network found that a decrease of just 0.5% in the numbers of women suffering long-term mental ill-health would stand to offer potential economic benefits of \$178 million (AUD)<sup>9</sup>. This is supported by international studies demonstrating that societies which prioritise women's health see significant gains in intergenerational productivity<sup>10</sup>, and that a global investment of just \$300 million (USD) to research into women's health could yield financial returns as high as \$13 billion (USD)<sup>11</sup>.

### Ways Forward for Women's Mental Health

We agree with the PC report statement (p 15) "The next agreement should include tangible actions to progress existing priorities". Such tangible actions need to include improved access, understandings and specialist care for women.

# Mental Health Service Provision for Women

To meaningfully address the mental healthcare needs of Australian women, HER Centre Australia proposes the introduction and support of a network of **specialist women's mental health clinics**, divided among each state/territory in Australia.

Clinics will be co-designed with women with lived experience, staffed by Consultant Psychiatrists and supported by local infrastructure including GPs, public hospital systems and clinical psychologists, within a 'hub and spoke' network model.

This would enable streamlined export of the experience and expertise gained from the existing HER Women's Mental Health clinic model, based at the Alfred Hospital, Melbourne, to inform and support the implementation of new clinics within the network, as well as facilitate the provision ongoing education to practitioners engaged within the broader network.


This clinic model implements a care approach that covers three stages and is delivered within a single session, with these stages as follows:

- Commencement with a detailed, extensive professional consultation in which skilled practitioners obtain detailed clinical stories of patients to identify and determine biological, psychological and/or social factors contributing to patients' mental ill-health
- Informed diagnosis based upon patient assessments performed in the initial stage
- Formation and implementation of a management plan, made in consultation with patient and their support network(s), to then be shared with patient's existing healthcare provision network (e.g. GP, psychologists, counsellors)

This model can be delivered either via face-to-face sessions or Telehealth appointment, with the latter enabling improved accessibility to care for women living in rural areas or who might otherwise face barriers to attendance of in-person appointments.

Implementation of such a network of specialist Women's Mental Health clinics to offer the provision of tailored mental healthcare to women, within public health systems nationwide, would benefit from precedent set by the establishment of headspace on a national scale.

The adoption of a similar implementation and integration strategy would benefit from collaboration(s) with public health services through assistance in the facilitation of clinic establishment and operations, and lowered costs of establishment. Public health services would also see cumulative benefits to existing operations through supporting specialist women's mental health clinics within their communities, such as through reductions in mental health-related hospital admissions.



Quick, easy to understand and clear outcomes and directions. They saw through what others couldn't. I felt they were the only place to put into account other factors which are always treated separately, and I felt valued, cared about and understood. I am really proud of myself for questioning my diagnosis and pushing for more answers, and the HER clinic confirmed there was indeed more.

**'Candice'**  
WMH Clinic patient

# Education

Knowledge and understanding of the unique mental health challenges faced by women remains poorly understood and assisted. Professionals within healthcare networks lack a proportionate and appropriate knowledge base that would enable them to provide women with the best possible mental health care. Addressing this knowledge gap specifically through targeted education is essential to improving mental health outcomes for women.

## Women in the Community – A Digital Resource Hub

HER Centre Australia proposes investments to facilitate construction and scale of a dedicated, fit-for-purpose 'digital resource hub' to provide women with the means to more easily access information and resources to enable and empower them to better understand their own mental health, identify risk factors and better identify where/when to seek help.

The empowerment of women to better understand their own mental health through improved education is vital to any efforts at seeing substantive progress in the mental health and wellbeing of women. Recognition of how and where women would prefer to be able to access this information is also an important factor of consideration in the construction of a truly fit-for-purpose resource hub, as women are seen to be twice as likely as men to access 'other' mental health services by phone, internet or other digital technology<sup>4</sup> (inclusive of crisis support or counselling services, online treatment programs, tools to improve mental health, and mental health support forums).

Present digital mental health services or platforms in Australia either suffer from a gender-blind approach, or are more specifically targeted at 'crisis support', leaving a gap for Australian women who may look to seek help or to educate themselves regarding their own mental health *before* or to *avoid* crisis. Investment into the construction of a dedicated digital resource hub is therefore also beneficial from a perspective of crisis prevention.

This 'digital resource hub' would take initial shape as a publicly accessible website where fit-for-purpose Women's Mental Health resources and tools would be made available, with the opportunity for scale to incorporate the introduction of a digital app in the future.

## Healthcare & the Workplace

HER Centre Australia proposes an investment to facilitate the scale and expansion of its existing specialist courses on Women's Mental Health.

For healthcare practitioners, this would include development of additional courses and/or modules to improve disorder-specific education, providing opportunities for healthcare professionals (GPs, etc) to enhanced diagnostic criteria and practical knowledge of the latest treatment options for conditions such as menopausal depression, pre- and post-natal mental health disorders, and trauma-related mental health conditions including Complex Post-Traumatic Stress Disorder (c-PTSD).

Investment would also see scaled adaptation of short-course and education modules for workplaces and employers.

## 'HIM for HER'

HER Centre Australia proposes an investment to launch and expand a dedicated 'HIM for HER' education campaign, aimed at improving education and awareness among Australian men on Women's Mental Health and how best to support the women in their lives.

For the loved ones of women experiencing mental ill-health, a lack of proportionate education and awareness on how best to support their loved one can feel suffocating. This is especially true in the case of men, who often lack any understanding of the biological, psychological and/or social factors that can contribute to mental ill-health in women, or awareness of symptoms, and risk factors, in the mental health of the women in their lives. This lack of education and awareness can then inform heightened risk of domestic and/or familial conflict, or potential to exacerbate mental ill-health in women.



# Research

HER Centre Australia proposes an investment to support new and ongoing research in five key areas in Women's Mental Health.

Research must be a key component to any attempts at acknowledging and addressing both the women's health gap broadly, and the crisis in women's mental health more specifically, as progress to reverse the effects of a centuries-long 'gender-blind' approach to healthcare is desperately needed. The impact that this longstanding culture of ignorance to the specific and unique mental health needs of women was particularly laid bare in the recent Senate Inquiry into Issues Related to Menopause and Perimenopause<sup>6</sup>, which ultimately led to investment in research regarding the mental health impacts of menopause being one of the inquiry's key recommendations.

However, menopause is far from the only area of women's mental health where greater investment into research is desperately needed, with HER Centre Australia identifying five key areas of research focus:

- Menopause & Menopausal Depression
- Eating Disorders
- Complex Trauma Disorders (including Complex Post-Traumatic Stress Disorder)
- Anxiety & Depression
- ADHD in Women

Each of these five areas of research focus have been identified as areas where research investment has been lacking, and where collective understandings of the impacts of the same upon women specifically remain limited – despite women making up higher proportions of those suffering from many of the above conditions.

## The Role of the National Mental Health Commission

It is critical for Mental Health systems to have **independent** oversight, as discussed by the PC interim report. Sadly, particularly in the recent past, this Commission has been staffed and led by individuals with partisan political interests or an allegiance to specific mental health service entities, which has decreased its capacity to innovate broadly. As per the PC interim report, reinvigorating the National Mental Health Commission is important for governance, but new members and executives with true independence need to be found.

## Mental Health Funding & Accountability for Outcomes

The PC report outlines 'Unlike other national agreements, the National Mental Health and Suicide Prevention Agreement contains only limited funding commitments. In an average year, funding commitments in the Agreement total about \$360 million, or 3% of the \$12 billion governments spend on mental health services. Over the past decade, governments' real expenditure on mental health services has grown by 30%. In 2022-23, real expenditure per person was nearly 16% higher than it was in 2013-14.' Yet – the number of Australians who cannot access mental health help has risen enormously.

An issue for the PC to consider further is the distribution of mental health funding. Political campaigns each election continue to promise funding for 'youth mental health' (e.g.: Election 2025 promise 'Labor's \$1 billion mental health package marks a breakthrough in delivering the reform and investment needed to address Australia's youth mental health crisis'.) Young women do not receive specialised care, midlife and older women and men are excluded from the disproportionate youth focus – which has been present now for decades. The distribution of mental health funding must include equitable funding for all ages and for all types of mental ill health, including addictions to alcohol and other substances. A fairer funding system would go a long way to improving mental health outcomes for all. A focus on women's mental health, with special female services, tailored treatments and better education on this large group's needs is overdue and would make a significant difference for the mental health of our nation.



**Conclusion: To build a stronger and healthier Australia, women's mental health must be a national priority. We urge the Commission to explicitly recommend gender-responsive reform, investment in specialist services and research, and the development of infrastructure that recognises and meets women's unique needs.**

**HER Centre Australia stands ready to contribute our expertise to this essential reform agenda.**

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# References

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- <sup>2</sup>National Mental Health Workforce Strategy 2022–2032 (<https://www.health.gov.au/our-work/national-mental-health-workforce-strategy-2022-2032>)
- <sup>3</sup>Vision 2030 (<https://www.mentalhealthcommission.gov.au/projects/vision-2030>)
- <sup>4</sup>Pandemic Response Plan (<https://www.mentalhealthcommission.gov.au/projects/national-disaster-response/pandemic-response-plan>)
- <sup>5</sup>National Study of Mental Health and Wellbeing 2020-2022 (<https://www.abs.gov.au/statistics/health/mental-health/national-study-mental-health-and-wellbeing/latest-release>)
- <sup>6</sup> Mental Health and Suicide Prevention - Final Report ([https://parlinfo.aph.gov.au/parlInfo/download/committees/reportrep/024705/toc\\_pdf/MentalHealthandSuicidePrevention-FinalReport.pdf;fileType=application%2Fpdf](https://parlinfo.aph.gov.au/parlInfo/download/committees/reportrep/024705/toc_pdf/MentalHealthandSuicidePrevention-FinalReport.pdf;fileType=application%2Fpdf))
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- <sup>8</sup>Issues related to menopause and perimenopause ([https://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Community\\_Affairs/Menopause](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/Menopause))
- <sup>9</sup> Return on Equity - Health and economic dividends from investing in Women's Health Service (<https://www.whsn.org.au/an-economic-case>)
- <sup>10</sup>Onarheim, K. H., Iversen, J. H., & Bloom, D. E. (2016). Economic Benefits of Investing in Women's Health: A Systematic Review. PloS one, 11(3), e0150120. <https://doi.org/10.1371/journal.pone.0150120>
- <sup>11</sup>The Wham Report: The Case to Fund Women's Health Research ([https://thewhamreport.org/wp-content/uploads/2022/02/TheWHAMReport\\_crosscutting-compressed.pdf](https://thewhamreport.org/wp-content/uploads/2022/02/TheWHAMReport_crosscutting-compressed.pdf))

