

Mental Health Australia Report to the Nation

Prepared for Mental Health Australia by Ipsos Public Affairs

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Mentally healthy people, mentally healthy communities



Acknowledgements

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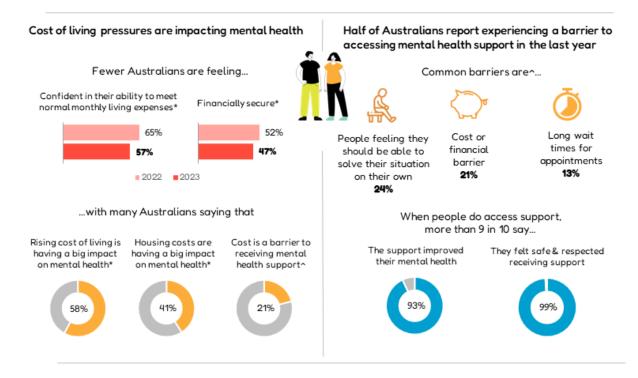
1 Executive Summary

Mental Health Australia's 2023 Report to the Nation is the second iteration of an independent national survey providing a "pulse-check" on the mental health and wellbeing of Australians. In 2022, Mental Health Australia - the independent peak body representing mental health stakeholders and issues in Australia – partnered with Ipsos to develop an annual benchmark survey to address a key gap in mental health data. As the second iteration of this survey, the 2023 report provides insight into changes in Australians' mental health and wellbeing over time.

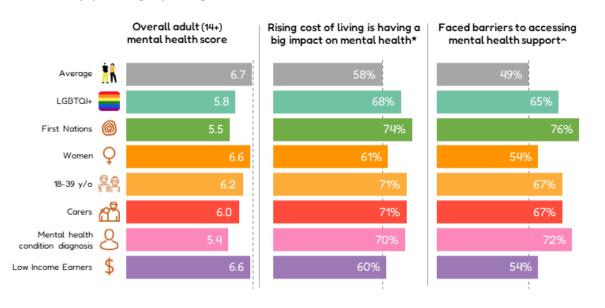
1.1 2023 Summary



Mental Health Australia Report to the Nation 2023



Particular population groups being hit hardest...





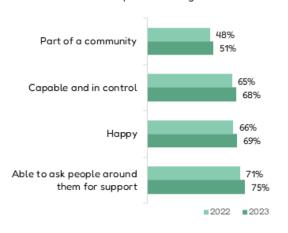


Mental Health Australia Report to the Nation 2023

Overall mental health score remains the same as last year

But in 2023, Australians report feeling happier and more connected suggesting improvements as we move out of the COVID-19 crisis

More Australians reported feeling...





Changing supports

Speaking to colleagues, friends or family remains a common and significant support^(39%)



In 2023, we have seen improvements amongst Australians accessing other support services^...







- ^ 14+yo population ~ 9yo+ population

2 Research Context

2.1 Background & Research Objectives

Mental Health Australia is the independent peak body representing mental health stakeholders and issues in Australia. Its members include people living with or caring for someone with mental ill-health, mental health service providers (clinical and community based), professional bodies, researchers, and state/territory-based community mental health peak bodies.

In 2022 Mental Health Australia partnered with Ipsos to produce the first wave of their independent benchmark survey aimed at understanding the mental health and wellbeing of Australians. This led to the publication of Mental Health Australia's Report to the Nation which outlined experiences and perceptions of mental health among Australians of all ages across the country. Ipsos developed the survey with the help of members from the community through cognitive interviews, to ensure questions and themes reflected current experiences of mental health in Australia.

The data collected from the national survey was used to present a detailed report, underscoring key issues impacting the mental health and wellbeing of people throughout Australia. This report was released on World Mental Health Day 2022 and helped to highlight the importance of mental health and wellbeing awareness for Australians.

The current wave marks the second year of the study and the beginning of timeseries data. The 2023 iteration will provide the ability to compare back to the 2022 benchmark data, to analyse the way that the mental health and wellbeing of Australians has changed over time.

3 Methodology

In 2022, Ipsos and Mental Health Australia worked in collaboration to design a questionnaire tool around the domains of the Contributing Life Framework, to provide a holistic measure of mental health and wellbeing. The domains are:

- Thriving, not just surviving
- Having something meaningful to do, and something to look forward to
- · Connection to family, friends, culture and community
- · Feeling safe, stable and secure
- · Access to effective support, care and treatment

Three versions of the survey were designed:

- The 'adult' survey, for participants aged 14 and over
- A simplified version of the 'adult' survey for those aged 9 to 13, completed by young people about their own mental health and wellbeing
- A children's survey for those aged 0 to 8, completed by parents about the mental health and wellbeing of their child, which included six questions for the child to answer directly if they were able.

Given variations in the three questionnaires, direct comparisons across all age groups are made where possible. The commentary included in the corresponding PowerPoint report, report card and infographic specifies which age group received each question and where responses across all ages are shown.

In 2023, Ipsos and Mental Health Australia made slight adaptions to the survey to improve comparability of questions across age groups, and identification of particular population groups. See Section 6.1.2 for further information.

For the 2023 data collection, participants completed the questionnaire online, with recruitment of participants being conducted via online panel. To ensure the representation of First Nations Peoples in the survey, Ipsos consulted their internal Aboriginal and Torres Strait Islander Research Unit (ATSIRU) in 2023 to assist with sampling and review the questionnaire tool for accessibility and relevancy. In 2023, Ipsos had the ATSIRU internal research panel of First Nations participants (iMob) available if needed to reach hard to reach areas. This was in addition to social media sampling for First Nations peoples, which was the method used in 2022. If the participant was under 18 years old, parental consent was attained prior to completion of the survey.

Fieldwork was completed between 8th June and 23rd June 2023.

The final questionnaires completed by participants are included as appendices of this report, labelled 1 (Adult Questionnaire), 2 (9- to-13-year-old Questionnaire) and 3 (0-8 year old Questionnaire).

3.1 Sample Composition

Quotas were set to ensure a robust sample of Australians by age, gender and location as outlined in the tables below.

This sample was representative of the Australian population according to the Australian Bureau of Statistics 2021 census statistics. An additional boost of n=167 people identifying as First Nations Australians was collected, in addition to the n=2,274 as outlined in the adult quotas, to ensure the sample for this subgroup was sufficient to conduct statistical testing. To ensure that sufficient sample could be collected from each location, 10% flexibility was allowed on quotas during fieldwork.

Adult quotas 2023:

		Male			Female	
	18-39 years	40-59 years	60+ years	18-39 years	40-59 years	60+ years
Greater Sydney	86	66	49	85	67	56
Rest of NSW	36	34	39	36	35	42
Greater Melbourne	84	61	45	82	63	53
Rest of Vic.	20	19	22	20	20	23
Greater Brisbane	41	32	23	41	33	27
Rest of Qld	36	33	32	36	35	34
Greater Adelaide	21	17	15	21	18	18
Rest of SA	5	5	6	4	5	6
Greater Perth	34	28	21	34	28	24
Rest of WA	8	8	7	7	7	6
Greater Hobart	4	3	3	4	3	3
Rest of Tas.	4	4	5	4	4	5
Greater Darwin	3	2	1	3	2	1
Rest of NT	2	1	1	2	1	1
ACT	8	5	4	8	6	4

Child quotas 2023:

	Male	Female	Male	Female	Male	Female
	0-8 years	0-8 years	9-13 years	9-13 years	14-17 years	14-17 years
Australian Capital Territory	1	1	1	1	1	1
Greater Sydney	11	10	10	10	10	10
Rest of NSW	6	5	6	5	6	5
Greater Darwin	1	1	1	1	1	1
Rest of NT	1	1	1	1	1	1
Other Territories	1	1	1	1	1	1
Greater Brisbane	5	5	5	5	6	5
Rest of Qld	5	5	6	5	6	5
Greater Adelaide	3	3	3	3	3	3
Rest of SA	1	1	1	1	1	1
Greater Hobart	1	1	1	1	1	1
Rest of Tas.	1	1	1	1	1	1
Greater Melbourne	10	10	10	9	10	9
Rest of Vic.	3	3	3	3	3	3
Greater Perth	5	4	4	4	4	4
Rest of WA	1	1	1	1	1	1

3.2 Weighting

All data were weighted by location, age, gender and Aboriginal and/or Torres Strait Islander Status, in line with population statistics obtained from the Australian Bureau of Statistics (ABS). Age, gender and location weights have been 'nested' to ensure a more representative dataset is used and aligns the sample back to the representative quotas set during fieldwork. Separate weights were applied to the 2023 data due to the updated population figures available from the ABS.

Weighting, also known as sample balancing, is used to adjust the results of studies to make them more representative (e.g., if a study has 49% men, but the population has 50%, weighting can be used to bring the results of the study into line with the population). Rim weighting was applied to the data using Q software.

Rim weighting was used as it allows the adjusting of a data set to occur across different characteristics,

such as age, gender, location etc, ensuring that these different characteristics are kept proportionate across the sample.

Note that differences between First Nations Australians and the remaining population are reported with a different level of weighting applied by age, gender and location only. This is done to ensure the sample boost conducted to over-represent this group and provide more statistical power when making conclusions about First Nations Australians' mental health and wellbeing is not corrected by weighting.

3.3 Data cleaning

Data cleaning occurred in the following ways prior to reporting results:

- Deleting cases with an invalid open response answer, indicating invalid completion of the survey
- Deleting any skimmer or flatliner cases these are defined as cases where the participant has rushed through or 'skimmed' through the survey and hence providing not true nor self-reflective responses.

4 Analysis

Data analysis and significance testing was undertaken using the Q analysis package, which is custom designed for analysis of social research survey results. Coding, editing and weighting of variables and statistical manipulations were conducted as appropriate.

Please note that reported results are in reference to the results in the corresponding PowerPoint report provided by Ipsos.

The adult age brackets (18-39; 40-59; 60+) have been set in this way to provide enough statistical power to each cohort during analysis for significance testing, while allowing the reader to see differences in age bands. Ages brackets are loosely based on generational age breakdowns.

Statistical analysis has been undertaken for the following priority cohorts: gender, LGBTQI+ status, location, Culturally and Linguistically Diverse status, mental health status (whether respondents reported ever having been diagnosed with a mental health condition), support/carer status (i.e. people who have experience providing ongoing support to close friends or family members with a mental health condition), those who identify as First Nations Australians and by different income brackets.

4.1 Significance testing

Significance testing was undertaken at the 95% confidence interval using false discovery rate (FDR) adjusted p values. A 'significant difference' means we can be 95% confident the difference observed between the two samples reflects a true difference in the population of interest and is not a result of chance. Such descriptions are not value judgements on the importance of the difference. The reader is encouraged to make a judgement as to whether the differences are 'meaningful' or not.

Ipsos applies FDR as standard to address an issue known as multiple testing problem (or multiple comparison problem). As the name implies, this issue arises when multiple tests are conducted, resulting in more false discoveries. Applying FDR means that 5% of significance tests¹ will result in false positives. Not applying an FDR means 5% of all tests result in false positive. In short, applying FDR results in fewer false positives.

Where significance testing has occurred between pairs such as male vs. female, this has been undertaken as an independent samples test. However, where significance testing has occurred between more than two categories within a group, such as by age, the significance testing used tests one category against the average of the others that are not in that category combined. Such a test is ideal for multiple comparisons as it reduces the likelihood of displaying a significant difference where one does not exist.

4.2 How to interpret results

For each question, data has been presented in the corresponding PowerPoint report, and a summary below, in a combination of tables and charts at the overall level, by age breakdown, and by population

¹ When testing at the 95% confidence interval.

Analysis

group of interest. Significant differences are identified using red text to indicate that a result is significantly lower among that group and green text to indicate it is significantly higher. In the corresponding PowerPoint report, they are identified using * and ^ symbols, with a key included in the bottom lefthand corner of each slide.

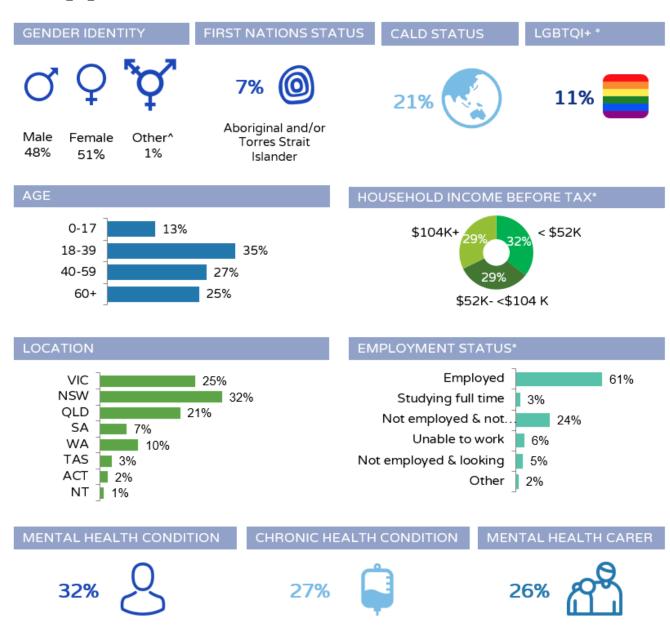
Due to rounding, responses may not always add up to 100%, and Nets (e.g., 'strongly agree' + 'agree') may not appear to be an exact addition of the two responses included.

5 Survey Sample

5.1 Demographics

The infographic below outlines the demographics of the survey sample for adults and children. Note that this data is unweighted.

6 Appendix



Base n=2,441. *Asked only of adults 14+. <u>Note:</u> 'Other' gender refers to those who identify as non-binary, use a different term or preferred not to answer a gender identity question. 'Other' gender was not used in the analyses throughout the report as the sample size for this cohort was too small to conduct a meaningful analysis

6.1 Appendix A: Detailed Methodology

6.1.1 Questionnaire Design

In 2022, Ipsos and Mental Health Australia worked in collaboration to design the questionnaire. In 2023 some minor updates were made to the questionnaire.

Initial questions were framed around the Contributing Life Framework.

These were then revised to improve clarity for respondents and capture more nuanced information. Where possible, the following validated measures were used:

- The WHO-5 Well-Being Index
- The Harvard IQSS, the "Flourish" measure
- The De Jong Gierveld Loneliness Scale
- The Campaign to End Loneliness Measurement Tool

This questionnaire, developed for adults, was then adapted to be suitable for younger age groups. It was agreed that the standard questions were suitable for participants 14 years and over. A sub-set of simplified questions for 9–13-year-olds to answer about their own wellbeing was developed, and for parents of 0-8 year-olds to answer about their child's mental health and wellbeing (with a small set of questions for the child to answer directly if able).

In 2022, Ipsos conducted a series of n=10 cognitive interviews with participants representing a broad range of demographics. In two of these interviews, the parent or guardian completed the adult questionnaire, and invited their child aged 0-8 to complete relevant questions for their age. The parent or guardian then answered questions on behalf of the child.

The questionnaires were adapted where needed to incorporate findings from the cognitive interviews, to ensure appropriateness for each age group and ease of understanding for participants, prior to commencing fieldwork.

6.1.2 2023 Questionnaire Updates

All tracking studies must weigh the need to maximise comparability between waves, against keeping survey instruments as up-to-date and relevant as possible. Minor changes were made to the questionnaire in 2023, altering the way the Culturally and Linguistically Diverse (CALD), Carer and LGBTQI+ demographics are defined.

The 2022 definition of **CALD** was those who had answered YES to speaking a language other than English at home, however in 2023 this was expanded to more closely align with the Australian Bureau of Statistics (ABS) Standards for Statistics on Cultural and Language Diversity. In 2023, respondents were included as CALD, if they answered that they spoke a language other than English at home or their country of birth was not Australia nor a country classified by the ABS as 'main English-speaking countries' (Australia, Canada, Republic of Ireland, New Zealand, South Africa, United Kingdom (England, Scotland, Wales, Northern Ireland) and United States of America). Respondents were also asked about their self-rated proficiency in English, however the number of people who identified as speaking English 'not

well' was insufficient for further analyses. While results remain broadly comparable year on year, given this change in methodology, care should be taken when comparing findings from the 2022 and 2023 CALD cohorts.

- The 2022 definition of **Carer** included those who had answered 'Yes definitely' or 'Yes maybe' to the question "Do you have experience supporting close friends or family members with a mental health condition?" In 2023 the wording of this question changed to "Do you have experience providing regular and ongoing support to a friend or family member with a mental health condition?" and Carers were defined as those who answered 'Yes'. There was no option to select 'Yes Maybe' in 2023. This change was made to focus more on people providing significant caring duties. While results remain broadly comparable year on year, given this change in methodology, care should be taken when interpreting findings from the 2022 and 2023 carer groups.
- The 2022 definition of LGBTQIA+ was those who answered 'Yes' to the question "Do you identify as LGBTQIA+". Changes were made in 2023 in order to align with the <u>ABS Standard for Sex, Gender, Variations of Sex Characteristics and Sexual Orientation Variables</u>. The question from 2022 was removed from the 2023 survey, with LGBTQI+ (note the removal of 'A' to comply with the 2023 definition) being defined in 2023 as those who identified as/with at least one of the following:
 - 'Non-binary' or 'uses a different term' in SQ1 "How do you describe your gender?"
 - 'Gay/lesbian' or 'bisexual' or 'uses a different term' in SQ26a "How do you describe your sexual orientation?"
 - Was born with a variation of sex characteristics in SQ26c "Were you born with a variation of sex characteristics (sometimes called 'intersex' or 'DSD')?"
 - Describe their gender in a different way (SQ1) than their sex recorded at birth (Q26b)

While results remain broadly comparable year on year, given this change in methodology, care should be taken when interpreting findings from the 2022 and 2023 LGBTQI(A)+ cohorts.

Additional changes were made in other areas of the questionnaire, including:

- This year, participants were informed at the end of the questionnaire that the survey was conducted
 on behalf of Mental Health Australia. In 2022 participants were informed of this at the beginning of
 the survey.
- When asked to reflect on barriers to receiving support for mental health and wellbeing, participants in 2023 were given the time period of the last 12 months whereas participants in 2022 were asked to reflect on whether they had ever faced barriers (with no specified time period).
- The questions Q22, Q23 and Q24 in the adult survey (see appendix 1) were added in 2023. Question Q22 assessed the impact of various issues on mental health, including housing costs, cost of living, stress at work, concerns about climate change and experience of extreme weather events/natural disasters. Question Q23 assessed the impact of public discussion around the Referendum on a Voice to Parliament on participants mental health, while Q24 was added to gain an understanding of Mental Health Australia's brand awareness and recognition level. Please note that these questions were placed at the end of the survey, before the demographic questions in

order to prevent influencing or priming participants in any way. This ensures that questions remain comparable year on year.

- Unlike in 2022 when Q5c was only asked of respondents aged 18 and above, the 2023 survey asked participants aged 14 to 17 years old if they felt secure in their housing and accommodation due to increased housing and accommodation difficulties facing Australians in 2023.
- To create greater comparability across age groups, the 2023 9–13-year-old survey included "I have felt part of a community" and "I help others around me when they need it" in Q4 as well as "I have felt safe from the impact of global threats (e.g., climate change, war, social unrest)" in Q5.

As a result of these changes, caution should be taken when comparing 2022 and 2023 results for these demographics and questions.

6.2 Appendix B: Summary of Measures Included Across Most Age Groups

6.2.1 Summary 2022 Vs Summary 2023

	2022	2023
Felt happy	66%	69%
Felt capable and in control	65%	68%
Felt energised	49%	51%
Felt life had been filled with things that were interesting / enjoyable	62%	62%
Had things to look forward to	76%	76%
Felt comfortable asking for support / felt they had people they could ask for help	71%	75%
Felt part of a community	48%	51%
Takes part in celebrations, traditions or cultural activities	61%	63%
Felt safe from global threats	55%	59%
Felt safe in their neighbourhood	80%	78%
Have felt secure in their job / education / training / school	58%	56%
Have needed mental health support	53%	51%
Have obtained mental health support	42%	40%
Felt the support improved their mental health	92%	93%
Felt safe and respected during support	98%	99%
Have ever faced a barrier accessing mental health support	50%	49%
Felt confident being able to meet normal monthly living expenses*	65%	57%
Felt financially secure*	52%	47%
Overall average mental health rating	6.9	6.9

^{*}Asked only of participants aged 18 and over Significantly **higher** or **lower** than 2022 at 95%Cl

6.2.2 Child 2022 Vs Child 2023

	(2022) 0-8*	(2023) 0-8*	(2022) 9-13	(2023) 9-13	(2022) 14-17	(2023) 14-17
Felt happy	100%	100%	83%	82%	77%	80%
Felt capable and in control	N/A	N/A	65%	82%	70%	74%
Felt energised	N/A	N/A	76%	81%	61%	64%
Felt life had been filled with things that were interesting / enjoyable	94%	98%	90%	92%	62%	67%
Had things to look forward to	82%	95%	91%	86%	90%	83%
Felt comfortable asking for support / felt they had people they could ask for help	74%	82%	73%	84%	86%	90%
Felt part of a community	72%	83%	N/A	80%	60%	52%
Takes part in celebrations, traditions or cultural activities	78%	88%	81%	91%	76%	73%
Felt safe from global threats	63%	68%	N/A	66%	61%	64%
Felt safe in their neighbourho od	76%	91%	85%	89%	82%	77%
Have felt safe and secure in their home / school / education / training / job	78%	83%	88%	88%	72%	71%
Have needed mental health support	41%	43%	75%	76%	57%	54%
Have obtained mental health support	31%	35%	72%	72%	51%	46%

	(2022) 0-8*	(2023) 0-8*	(2022) 9-13	(2023) 9-13	(2022) 14-17	(2023) 14-17
Felt the support improved their mental health	92%	96%	96%	98%	95%	92%
Felt safe and respected during support	96%	96%	100%	100%	100%	100%
Have ever faced a barrier accessing mental health support	35%	39%	45%	44%	39%	45%
Felt confident being able to meet normal monthly living expenses	N/A	N/A	N/A	N/A	N/A	N/A
Felt financially secure	N/A	N/A	N/A	N/A	N/A	N/A
Overall average mental health rating	8.1	8.4	7.7	7.9	7.2	7.3

Significantly higher or lower than 2022 at 95%CI

6.2.3 Adults 2022 VS Adult 2023

	(2022) 18-39	(2023) 18-39	(2022) 40-59	(2023) 40-59	(2022) 60+	(2023) 60+
Felt happy	68%	71%	59%	60%	64%	71%
Felt capable and in control	62%	63%	63%	62%	70%	76%
Felt energised	48%	49%	41%	42%	47%	49%
Felt life had been filled with things that were interesting / enjoyable	53%	50%	53%	52%	64%	65%
Had things to look forward to	74%	77%	69%	64%	75%	77%
Felt comfortable asking for support / felt they had people they could ask for help	70%	74%	66%	68%	73%	76%
Felt part of a community	44%	48%	39%	36%	51%	51%
Takes part in celebrations, traditions or cultural activities	57%	60%	53%	52%	57%	61%
Felt safe from global threats	53%	54%	51%	55%	58%	63%
Felt safe in their neighbourho od	76%	75%	78%	73%	85%	82%
Have felt secure in their job / education / training / school	63%	60%	51%	49%	38%	36%
Have needed mental health support	63%	64%	56%	49%	31%	31%

	(2022) 18-39	(2023) 18-39	(2022) 40-59	(2023) 40-59	(2022) 60+	(2023) 60+
Have obtained mental health support	47%	50%	44%	35%	25%	23%
Felt the support improved their mental health	94%	92%	89%	93%	86%	93%
Felt safe and respected during support	97%	98%	98%	99%	99%	98%
Have ever faced a barrier accessing mental health support	68%	67%	53%	48%	33%	33%
Felt confident being able to meet normal monthly living expenses	60%	48%	63%	54%	74%	71%
Felt financially secure	47%	41%	50%	43%	61%	59%
Overall average mental health rating	6.2	6.2	6.4	6.4	7.4	7.6

Significantly higher or lower than 2022 at 95%CI

6.2.4 Population Groups of Interest Vs Wider Population 2023

		Felt cost of	Felt	
	Overall mental health rating	living had a big impact on mental health	housing costs had a big impact on mental health	Top 3 barriers to population groups of interest accessing mental health and wellbeing support
First Nations Australians	5.5	75%	63%	 Cost or financial barrier 26% I felt I should be able to solve my situation on my own 25% Long wait times for appointments 22%
Carer	6.0	71%	57%	 Cost or financial barrier 32% I felt I should be able to solve my situation on my own 32% Long wait times for appointments 22%
Experience of mental health condition	5.4	70%	53%	 Cost or financial barrier 37% I felt I should be able to solve my situation on my own 31% Long wait times for appointments 26%
LGBTQI+	5.8	68%	50%	 Cost or financial barrier 32% I felt I should be able to solve my situation on my own 26% Didn't feel my problem was worthy of someone else's help 23%
Female Gender	6.6	62%	47%	 I felt I should be able to solve my situation on my own 27% Cost or financial barrier 24% Long wait times for appointments 16%
Male Gender	6.9	55%	44%	 I felt I should be able to solve my situation on my own 21% Cost or financial barrier 18% Long wait times for appointments 10%
Culturally and linguistically diverse (CALD)	6.6	60%	48%	 I felt I should be able to solve my situation on my own 27% Cost or financial barrier 22% Didn't feel my problem was worthy of someone else's help 16%
Regional / remote	6.7	59%	45%	 I felt I should be able to solve my situation on my own 26% Cost or financial barrier 21% Didn't feel my problem was worthy of someone else's help 15%
Low-income earner	6.6	61%	41%	 Cost or financial barrier 24% I felt I should be able to solve my situation on my own 24% Long wait times 16%

6.3 Appendix C: Summary of All Adult Measures

Survey Question Number	Question	Positive / Yes Answer	2022	2023
Thriving,	Not just Surviving		Average: 59%	Average: 61%
Q2_A	I have felt happy	% Strongly Agree or Agree	65%	68%
Q2_B	I have felt energised	% Strongly Agree or Agree	47%	48%
Q2_C	I have felt capable and in control	% Strongly Agree or Agree	65%	67%
Having s to	omething meaningful to do, som	ething to look forward	Average: 67%	Average: 67%
Q3_A	My daily life has been filled with things that interest me	% Strongly Agree or Agree	57%	56%
Q3_B	I have been able to do things that are meaningful to me	% Strongly Agree or Agree	70%	70%
Q3_C	I have things to look forward to	% Strongly Agree or Agree	74%	74%
Having fa	amily, friends, culture and comm	unity	Average: 64%	Average: 66%
Q4_A	I have felt there are enough people I feel close to	% Strongly Agree or Agree	64%	66%
Q4_B	There are people in my life that I have felt comfortable asking for help at any time	% Strongly Agree or Agree	71%	74%
Q4_C	I have felt part of a community	% Strongly Agree or Agree	45%	46%
Q4_D	I have celebrations, traditions or cultural activities in my life that I enjoy	% Strongly Agree or Agree	57%	59%
Q4_E	I help others around me when they need it	% Strongly Agree or Agree	85%	86%
Feeling S	Safe, Stable and Secure		Average: 63%	Average: 61%
Q5_A	I have felt confident about being able to meet normal monthly living expenses	% Strongly Agree or Agree	65%	57%
Q5_B	I have felt financially secure	% Strongly Agree or Agree	52%	47%
Q5_C	I have felt secure in my housing and accommodation	% Strongly Agree or Agree	78%	78%
Q5_D	I have felt safe in my neighbourhood	% Strongly Agree or Agree	79%	76 %
Q5_E	I have felt safe from global threats (such as impacts of climate change, war, social unrest)	% Strongly Agree or Agree	54%	58%
Q5_F	I have felt secure in my job/education/training	% Strongly Agree or Agree	54%	51%

Survey Question Number	Question	Positive / Yes Answer	2022	2023
Effective	Support, Care and Treatment		Average: n/a	Average: n/a
Q6	If you have needed mental health support or information over the past 3 months, have you been able to obtain it? This could be from friends, family, a GP, psychologist, online self-help etc.	% Yes, definitely or Yes, to some extent	41%	38%
Q7	Which of the following support services or networks, if any, did you utilise over the past three months to help manage your mental health or improve wellbeing?			
Q7	General Practitioner (GP)	#1 most popular response selected	37%	41%
	Spoke with colleagues, friends or family members	#2 most popular response selected	40%	39%
	Psychologist, psychiatrist, counsellor	#3 most popular response selected	26%	30%
Q8	Do you feel the support or information you received improved your mental health?	% Yes, definitely or Yes, to some extent	91%	92%
Q9	Did you feel safe and respected by the person providing you support?	% Yes, definitely or Yes, to some extent	98%	99%
	Have you ever felt you were unable to receive the support you needed for your mental health and wellbeing?	% who faced any barrier	52%	51%
Q10	I felt I should be able to solve my situation on my own	#1 most popular response selected	23%	24%
	Cost or financial barrier	#2 most popular response selected	20%	21%
	I didn't feel the problem was worthy of someone else's help	#3 most popular response selected	15%	15%
Overall N	Mental Health		Average: n/a	Average: n/a
Q11	Thinking about how you have been feeling over the past three months, how would you rate your overall mental health?	Average response out of 10	6.7	6.7
Q22a	Housing costs (including mortgage/rent payments, or difficulty finding appropriate housing)	% A very big impact or A big impact	n/a	41%
Q22b	Rising cost of living	% A very big impact or A big impact	n/a	58%
A22c	Experience of extreme weather events/natural disasters	% A very big impact or A big impact	n/a	12%
Q22d	Concerns about climate change	% A very big impact or A big impact	n/a	17%
Q22e	Stress at work	% A very big impact or A big impact	n/a	31%
Significant				

6.4 Appendix D: Detailed Tables

Contact Mental Health Australia for inquiries regarding the questionnaire or detailed data tables.

For more information

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