

THE MELBOURNE CHARTER

for Promoting Mental Health and Preventing Mental and Behavioural Disorders

<p>The Melbourne Charter asserts that mental health and wellbeing are:</p> <ul style="list-style-type: none"> • an indivisible part of general health; • essential for the wellbeing and optimal functioning of individuals, families, communities and societies; and • a fundamental right of every human being, without discrimination. 	<p>The Melbourne Charter affirms that mental health and wellbeing are:</p> <ul style="list-style-type: none"> • of universal relevance; • most threatened by poor and unequal living conditions, conflict and violence; and • a key indicator of a nation's social and economic development. 	<p>The Melbourne Charter believes that mental health and wellbeing are:</p> <ul style="list-style-type: none"> • everybody's concern and responsibility; • best achieved in equitable, just and non-violent societies; and • advanced through respectful, participatory means where culture and cultural heritage and diversity is acknowledged and valued.
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The Melbourne Charter identifies principles and actions that governments, communities, organisations and individuals can take to influence the interconnecting social, economic, cultural, environmental and personal factors that influence mental health and wellbeing.

MENTAL HEALTH

Mental health is a state of complete physical, mental, spiritual and social wellbeing in which each person is able to realise one's abilities, can cope with the normal stresses of life, and make a unique contribution to one's community.

Mental illnesses such as anxiety disorders, depression and schizophrenic disorders are real and potentially disabling conditions, affecting over 450 million individuals, families and carers worldwide.

Poor mental health, loss of wellbeing, and illness have economic and social consequences for societies, communities, families and individuals. Mental health promotion is a strategic and sustainable approach to eliminating or minimising those factors which give rise to distress and loss of wellbeing and introducing and maximising those which create the circumstances in which all can flourish. It is also important in the process of recovery from illness or episodes of illness.

Principles for promoting mental health and preventing mental illness

Mental health and wellbeing are determined by multiple and interacting social, environmental, psychological and biological factors, just as health and illness in general are determined.

The critical social, environmental and economic determinants of mental wellbeing and of mental illness are common across nations. Individual and family-related and community protective and risk factors can be biological, emotional, cognitive, cultural, behavioural, interpersonal and environmental.

The presence of multiple risk factors, the lack of protective factors and the interplay of these culminate in greater likelihood of poor mental health and wellbeing and the development of mental illness (see boxes overleaf).

Mental health promotion aims to improve social, spiritual and emotional wellbeing by creating: supportive living conditions and environments that foster connectedness between people; strength in recovery from illness; and competence and resilience in individuals and communities. Prevention strategies are a core component of mental health promotion.

Population-based approaches for promoting mental health and wellbeing and preventing mental illness work by:

- utilising principles of public participation, engagement and empowerment
- redressing inequities and discriminatory practices that exclude the most socially disadvantaged or people at risk such as indigenous people, people with mental illness, children and young people, people with disabilities, elderly people and those in prison
- action in everyday contexts such as in schools, workplaces, sports clubs, community-based activities, government services and the natural environment
- providing access to quality care and recovery-focused services for those who are experiencing poor mental health or mental illness
- combining advocacy, communication, policy and legislation, together with community participation and evidence-building strategies
- joining up policies and practices across sectors including education, housing, mental health services, employment and industry, transport, arts, sports, urban planning and justice; and are
- accompanied by person-centered responses to mental distress and loss of wellbeing which foster hope, offer choices, support people to lead their own recoveries and ensure a quick return to active citizenship.



THE
CARTER CENTER



Waging Peace. Fighting Disease. Building Hope.

The Melbourne Charter is the outcome of a worldwide discussion that was initiated by the organisers and participants of the Global Consortium for the Advancement of Promotion and Prevention in Mental Health (GCAPP) conference entitled From Margins to Mainstream: 5th World Conference on the Promotion of Mental Health and the Prevention of Mental and Behavioural Disorders, in Melbourne, Australia, September 2008. The Charter reflects the input and support of organisations from all over the world. It articulates some common principles and recommendations that should be part of our future action in mental health promotion and mental illness prevention. The Charter provides a framework which recognises the influence of social and economic determinants on mental health and mental illness and identifies the contribution that diverse sectors (including but not exclusive to health) make to influencing those conditions that create or ameliorate positive mental health.

ACTIONS

Decision-makers

The Melbourne Charter calls on national governments to acknowledge the factors that influence their people's mental health and wellbeing and:

- take responsibility for ensuring that those factors that protect mental health and wellbeing are accessible to all and those that place people at risk of poor health or illness are reduced or eliminated
- actively engage with those who are most adversely affected and socially excluded, such as people experiencing and affected by mental illness, people with disabilities, young people, people forcibly displaced, women subject to violence, and prisoners
- protect indigenous cultures
- promote equal opportunity and freedom from discrimination
- ensure policy is informed by best available and appropriate evidence and adequately funded
- invest in training personnel in publicly funded agencies to promote mental health
- facilitate partnerships across public agencies that influence mental health
- adequately fund and deliver accessible, high quality and recovery-focused mental health services; and
- ensure the private sector complies with local, national and international regulations and agreements that promote and protect mental health.

People working to promote mental health and wellbeing

The Melbourne Charter calls on those working to improve the mental health and wellbeing of populations to:

- advocate for human rights, ensuring the protection of all and in particular
 - indigenous people and their cultures from exploitation
 - people affected by mental illness
 - people forcibly displaced from their homeland
 - children, young people and older people
 - prisoners
- act to eliminate stigma, discrimination and inequities
- engage, partner and build alliances with public, private, non-governmental, community-based and international organisations to create sustainable initiatives
- build greater community understanding of mental health and mental distress and loss of wellbeing
- empower and mobilise communities and individuals, particularly the most socially excluded, by supporting their rights and providing resources and opportunities for them to shape and initiate their own actions to promote wellbeing
- support engagement with and leadership by people with lived experience
- use evidence to inform programs and ensure appropriate research and evaluation methods are used to increase the knowledge base
- encourage the corporate sector to share responsibility by ensuring health and safety in the workplace, and to promote the health and wellbeing of employees, their families and communities.

PROTECTIVE FACTORS AND RISK FACTORS FOR MENTAL HEALTH AND WELLBEING

Protective factors

<p>Arts and cultural engagement</p> <p>Childhood: positive early childhood experiences, maternal attachment</p> <p>Cultural identity</p> <p>Diversity: welcomed/shared/valued</p> <p>Education: accessible</p> <p>Environments: safe</p> <p>Empathy</p> <p>Empowerment and self determination</p> <p>Family: resilience, parenting competence, positive relationship with parents and/or other family members</p>	<p>Food: accessible, quality</p> <p>Housing: affordable, accessible</p> <p>Income: safe, accessible employment and work conditions</p> <p>Personal resilience and social skills</p> <p>Physical health</p> <p>Respect</p> <p>Social participation: supportive relationships, involvement in group and community activity and networks</p> <p>Sport and Recreation: participation and access</p> <p>Transport: accessible and affordable</p> <p>Services: accessible quality health and social services</p> <p>Spirituality</p>
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Risk factors

<p>Alcohol and drugs: access and abuse</p> <p>Disadvantage: social and economic</p> <p>Displacement: refugee and asylum-seeker status</p> <p>Disability</p> <p>Discrimination and stigma</p> <p>Education: lack of access</p> <p>Environments: unsafe, overcrowded, poorly resourced</p> <p>Family: fragmentation, dysfunction and child neglect, post-natal depression</p> <p>Food: inadequate and inaccessible</p>	<p>Genetics</p> <p>Homelessness</p> <p>Isolation and exclusion: social and geographic</p> <p>Natural and human-made disasters</p> <p>Peer rejection</p> <p>Political repression</p> <p>Physical illness</p> <p>Physical inactivity</p> <p>Poverty: social and economic</p> <p>Racism</p> <p>Unemployment: poor employment conditions and insecure employment</p> <p>Violence: interpersonal, intimate and collective; war and torture</p> <p>Work: stress and strain</p>
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