

Mental Illness in Australian Aboriginals – A Literature Review

Abstract

Background: The Aboriginal population comprises 3.3% of the entire Australian population. They suffer several physical and mental health conditions due to historical and situational factors. This, in turn, affects their quality of life and increases their morbidity and mortality. Aim: To understand the accessibility and quality of mental healthcare services available for the Aboriginals in Australia. Design: The design of this study was a systematic literature review. Methods: The databases PubMed and CINAHL were used to search for relevant journal articles pertaining to the objectives. Only original research articles between the years 2010 and 2020 were included in the review. Results: Most of the articles obtained focused on the prevalence of mental illnesses and described the specific mental health disorders found in the Aboriginal population. Very few studies threw light on the therapeutic strategies available for addressing mental health conditions in Aboriginals. Conclusion: Future studies need to focus on describing and evaluating specific treatment options for mental health conditions in the Aboriginal population in Australia.

Introduction

The Australian Aboriginal population comprises of over 200 tribes that can be traced back to as much as 120,000 years earlier. They account for around 3.3% of the total Australian population, which is a 19% increase since 2011 (Australian Bureau of Statistics, 2016). The year 1788 witnessed British colonization in Australia and the simultaneous downfall of the health of the Aboriginal population. The reasons for this were conflicts over property and wealth, and their inability to lead their traditional way of life. Apart from this, there were new diseases brought in by the Britishers and the prevailing situation made the Aboriginals more susceptible to these diseases. Their ancestral lands were taken away leading to their psychological distress, they were forced to live in other settlements, and forced into poverty and marginalization. All these factors contributed to a sharp increase in mental and psychological disorders in the Aboriginal population (Das et al., 2018).

Currently, the physical as well as mental health outcomes for the Aboriginals are quite low and the chronicity of their conditions is very high. Problems of substance abuse and violence are quite rampant in this population, and their rate of mental illnesses is 1.7 times higher than the general population. Their possibility of self-harm is also 2.5 times higher than that of the native Australian population. Suicide deaths account for 5.5% of all deaths in this population compared to 1.7% in the general population. These statistics are quite concerning in terms of the Aboriginals' quality of life as well as the financial burden on the Australian healthcare system (Jorm et al., 2012).

This paper intends to explore the consequences of high rates of mental illness in the Aboriginals on the Australian healthcare system. It will also focus on the current government as well as private initiatives for addressing the high prevalence of mental health conditions in Aboriginals, and the extent of success of these initiatives.

Objectives

The aim of this paper is to evaluate the government as well as private initiatives undertaken to combat the rising rates of mental health conditions in the Aboriginal population.

The objectives of this paper are as follows:

- To perform a review of literature to analyse the burden of mental illness of Aboriginals on the Australian healthcare system
- To perform a review of literature to identify the government and private initiatives that aim to bring down the rates of mental illness in the Aboriginals
- To evaluate the success of these initiatives in addressing mental health conditions in the Aboriginals

Methods

In order to find relevant journal articles for the literature review, the databases PubMed and CINAHL were used to search for original research articles. The keywords that were used included different combinations of Aboriginals, mental illness or mental health conditions, therapeutic interventions, and healthcare burden.

Articles that were in English and provided access to the full text were chosen for this literature review.

Inclusion and exclusion criteria

Studies that provided insights into the mental health conditions of the Aboriginal population specifically were included in the review. Only original research articles between the years 2010 and 2020 were chosen for this review. Studies that focused on both physical and mental health conditions or considered the entire Australian population in general were excluded from the review. Articles that were dated 2009 or earlier were excluded from the review as the objective was to get a more recent picture of mental illness in the Aboriginal population. Finally, articles that were in the form of editorials, reports, comments, discussions, and systematic reviews were excluded from the search.

Method and design

Using the pre-defined inclusion and exclusion criteria, the relevant journal articles were finalized for this literature review. The titles and abstracts of the selected articles were scanned thoroughly to see if each article met the inclusion criteria. In instances where a conclusive decision could not be taken by reading the abstract alone, the full text of the article was scanned. Additionally, the reference list of each article was also scanned to search for more relevant articles for this literature review. Once the entire list of articles to be included in this literature review was obtained, the studies were categorized on the basis of the specific theme of each article. The points of each article were noted and summarized as presented in the following sections.

Results and Findings

A total of 3449 articles were obtained in the initial search, out of which 107 articles were finalized based on the stated inclusion and exclusion criteria. Out of these articles, 42 focused on the specific burdens of mental illness in different age and gender groups of the Aboriginal population on the Australian healthcare system. The remaining focused on different aspects of mental healthcare that could potentially be applied to lower the high incidence rate of mental health conditions in the Aboriginals. However, there were no studies that described tried and evaluated

mental healthcare pathways that could be accessed by the Aboriginals. Also, there were no articles that described specific processes by which treatment and/or management of Aboriginal mental illnesses could be successfully achieved. Instead, most of the articles reported the high incidence rates of different mental and psychological conditions in the Aboriginal population. Based on the research articles obtained through the search, the insights obtained from this literature review are presented in the subsequent section.

Discussion

A study conducted by Hinton et al. (2015) explored the views and perspectives of various non-Indigenous as well as Aboriginal mental health service providers and found that inter-service collaboration was extremely important in promoting early interventions for mental illness in the Aboriginal population. However, many care providers are concerned that such type of collaborations can potentially breach the confidentiality of patient information despite its benefits of enhanced coordination of care (Kuipers et al., 2016). It has been stated by several researchers that the formalization of care pathways can make it easier for Aboriginals to understand how to access specific mental healthcare services. These care pathways also need to include secure information sharing systems so that patient confidentiality is maintained (Gronholm et al., 2015). Currently, there are no defined pathways that enable a structure of mental healthcare services targeted to the Aboriginal population with collaborating professionals, information-sharing systems, and a proper delegation of responsibilities.

The Aboriginals that did access mental healthcare services showed specific patterns that can provide insights in the formulation of future studies and interventions. One study found that Aboriginals who were at a higher risk of developing behavioural and emotional problems were more likely to access mental healthcare services as compared to those people who had a lower risk of developing such conditions. However, the overall accessibility was low as evidenced by just 22% of the population classified as 'high risk' ever accessing mental healthcare services (Williamson et al., 2016). The factors which pose a barrier for the Aboriginals in seeking healthcare services include insufficient ease of accessibility of services, stigma, lack of awareness, lack of trust on general physicians as well as

mental healthcare providers, and a higher propensity of relying on informal care services (Brown et al., 2016). However, it has also been noted that positive attitudes and culturally appropriate practices of care providers towards the Aboriginals can help improve the rate of treatment completion and enhance accessibility of services for other people belonging to this group (PD and Goldstone, 2011).

Another issue in developing targeted mental health interventions and providing appropriate referrals to the Aboriginal population is lack of identification of potential mental or emotional problems in Aboriginal patients by the family doctors. Thus, the Aboriginals do not receive a strong platform for recognition of their underlying mental issues making it difficult for them to seek treatment. Studies have shown that identification of mental health conditions in the Aboriginal population by general physicians is quite low (Carey et al., 2014). However, an interesting finding is that the detection rate of mental health problems in Aboriginals is low only for cases where symptoms are not immediately apparent. The detection rate of severe mental health conditions in the Aboriginals is quite high and most of the referrals come from family doctors for this population. This may be due to understaffing, larger number of Aboriginal patients visiting the clinic thereby limiting the consultation time, and increased workload on the practitioner not allowing him/her sufficient insight into underlying mental health illnesses in this population (Kilian and Williamson, 2018). This heavily points to the fact that accessibility of mental healthcare for the Aboriginal population can be improved by educating general practitioners about some of the common symptoms of underlying mental illness in this population that should be actively identified and immediately addressed.

The literature is filled with several suggestions and recommendations for improving the healthcare delivery system for identifying and addressing mental illnesses in the Aboriginal population. One of the most important strategies that has been identified is setting up a centralized facility for the Aboriginals to enhance accessibility to mental healthcare services and to increase the amount of referrals to specialist services (Fuller et al., 2010). This will also help in setting up a data collection system and an information sharing system that will help mental healthcare providers and policy makers understand the burden of mental illnesses in the Aboriginal population, understand the specific mental healthcare requirements of this community, and allow the collection of feedback and suggestions to improve the

accessibility and quality of mental healthcare services for the Aboriginals (Taylor et al., 2013).

Another reason for poor accessibility of mental healthcare services is lack of provision of culturally safe healthcare services. This places health workers, community workers, and cultural consultants in a very sensitive position as they need to be aware of the content of their conversation as well as their body language in caring for the Aboriginal population. Additionally, it also makes them important stakeholders in the care delivery process as they form the bridge between mental healthcare practitioners and Aboriginal patients (Freed et al., 2012). Apart from this, ongoing training and supervision for cultural awareness should be provided to practitioners as well as nurses dealing directly with Aboriginal patients, so that they are encouraged to access healthcare services in a culturally safe and comfortable environment and the quality standards of mental healthcare services for the Aboriginal population are maintained (Lampe et al., 2012).

Limitations

The scope of this literature review was limited to providing an understanding of the mental healthcare services available for the Aboriginal population, and so, it did not focus on the prevalence of mental illness in this population and the specific mental health disorders found in this population. Also, research articles dated post 2010 were considered for this review and so, essential information regarding mental healthcare services published before this date has been excluded from this review.

Conclusions

This literature review found that very little original research specifically focuses on the mental healthcare services and pathways that are available for the Aboriginal population. The most part of the literature focuses on the prevalence of different types of mental health conditions in the Aboriginals in different parts of the country. However, the literature pertaining to therapeutic and management interventions is highly lacking. Also, no description or evaluation of available therapeutic strategies targeted at the Aboriginal population for mental healthcare is available in the literature. This is a matter of concern as an improvement in the

mental health status of the Aboriginals will only be seen if more research focuses on treatment options rather than prevalence rates.

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