

# Evaluation summary: Royal Commission and women's mental health webinar

## Introduction

### Background

*The Royal Commission and women's mental health: Challenges and opportunities*, was a webinar delivered as a joint project between Women's Health Victoria, Mental Health Victoria and the Women's Mental Health Alliance. The webinar was held on 17 August 2021.

Women's Health Victoria (WHV) established the [Women's Mental Health Alliance](#) (the Alliance) in 2019 to advocate for a stronger focus on women's mental health in the context of the Royal Commission into Victoria's Mental Health System (Royal Commission).

It is made up of over thirty organisations and individuals who provide expert advice to policy makers and service providers on the mental health of women and girls, and undertake advocacy to ensure all women have access to evidence-based, gender-sensitive and trauma-informed mental health support. The Alliance brings together consumer and carer advocates, service providers, clinicians, women's health organisations, human rights bodies and researchers. The Alliance works to ensure the voices of women with lived experience are centred in policy, advocacy and service delivery.

The Alliance believes that the current mental health reform process offers unprecedented opportunities to reorient the service system and build system capability to deliver gender-responsive mental healthcare. Many of the recommended reforms have the potential to significantly improve the mental health and wellbeing of women, girls and gender diverse people, including those relating to: centring the voices of people with lived experience as consumers and carers; the renewed focus on mental health promotion; increasing the range of available service and treatment options; embedding a trauma-informed approach; and building the capability of the mental health workforce.

However, unless the implementation of these reforms is informed by an intersectional and gendered approach, the benefits for women, girls and gender diverse people will not be fully realised.

Mental Health Victoria are valued members of the Women's Mental Health Alliance and partnered with Women's Health Victoria to deliver this webinar. Their communications and networks were instrumental to the success of the event.

## Aim of the event

The primary purpose of this webinar was to raise awareness within the mental health sector and with key policy-makers and decision-makers of the key issues in women's mental health and opportunities to improve women's mental health through the Royal Commission's reforms.

The distinct and varied needs of women have long been under-recognised by the mental health system, as have the gendered social determinants of women's mental health and wellbeing. As it would be impossible to address the topic of 'women's mental health' in any comprehensive way in a 90-minute webinar, this webinar was framed as an opportunity to introduce the audience to key issues in women's mental health and the particular needs and experiences of women and girls.

While the webinar centred the experiences of women, it was an inclusive space that involved contributions from gender diverse and non-conforming people, and considered how gender-responsive approaches in mental health can meet the needs of all women (anyone who identifies as a woman) and gender diverse people.

A secondary purpose for the webinar was to encourage ongoing sector engagement with the work of the Women's Mental Health Alliance.

We hope to follow up with further webinars that will explore key topics in greater depth e.g. intersectional approaches to women's mental health, the intersections between gendered violence and mental health, and gender-informed mental health promotion.

## Format

Mischa Barr (Policy & Health Promotion Manager at Women's Health Victoria and Chair of Women's Mental Health Alliance) gave a short catalyst presentation on key issues in women's mental health.

A panel of experts, facilitated by Mischa Barr, was then asked to discuss and share their thoughts and expertise on pre-prepared questions on topics including:

- The key strengths and gaps in the Royal Commission's report in terms of improving the mental health of women, girls and gender diverse people
- How to ensure the Royal Commission recommendation on gender separation in mental health facilities succeeds and meets the needs of trans and gender-diverse people
- Intersectional approaches to women's mental health
- Meeting the mental health needs of women and gender-diverse people who have experienced gendered violence
- Gender-responsive primary prevention and mental health promotion.

## Key audience

The primary audience for this event was the mental health sector, including service providers and the mental health workforce. We were able to reach this sector using MHV's extensive networks and communications. We were able to pique interest in key issues in women's mental health via Mischa's op-ed in The Age, [Women deserve a better mental health system](#) (21 July 2021) and a [blog post](#) on Mental Health Victoria's conference blog prior to the webinar.

Our secondary audience included government policy-makers tasked with implementing the Royal Commission's reforms, as well as the women's sector.

## Speakers

- Maggie Toko, Assistant Commissioner Lived Experience & Engagement, Mental Health Complaints Commissioner
- Prof Jayashri Kulkarni AM, Professor of Psychiatry at Monash University and The Alfred and Director, Monash Alfred Psychiatry research centre (MAPrc)
- Dr Adele Murdolo, CEO, Multicultural Centre for Women's Health
- Jackson Fairchild, Head of Policy and Programs, Rainbow Health Victoria
- Lena Risteski, Counsellor at Mind Australia
- Mischa Barr, Policy & Health Promotion Manager, Women's Health Victoria; Chair, Women's Mental Health Alliance (Facilitator)

## Participants

506 people registered for the webinar, 257 attended the webinar on the day and 52 attendees responded to the webinar evaluation survey (20% of attendees).

Of the attendees who responded to the survey (n=52), the majority identified as mental health practitioners (25%) and other health/social services practitioners (30.8%). This was followed by government representatives (11.5%), service provider representatives (9.6%), academics (7.7%) and consumers (5.77%). A further 9.6% were from the legal sector and 7.7% were union organisers.

There were 33 questions asked of the panel.

## Survey results

### Participant expectations

Respondents were asked to rate their satisfaction with the webinar. Over 96% (n=50) were satisfied (46.2%) or very satisfied (50%), with one respondent neutral and one dissatisfied.

Additionally, respondents were asked to describe what they were hoping to gain from this webinar. The most common themes were:

- Insights into the Royal Commission's recommendations (n=25)
- A deeper understanding of women's mental health (n=23)
- How to improve service delivery and better support women (n=8)

A few respondents indicated that they were hoping to learn about mental health primary prevention (n= 2) and more information about the Women's Mental Health Alliance (n=1).

### Insights into the Royal Commission's recommendations

Almost half of respondents (48%) of survey respondents indicated that they attended this webinar in order to understand how the Royal Commission's recommendations had addressed women's and gender diverse people's mental health, as well as its shortcomings and implementation issues.

*A better understanding of how the RC addressed women's mental health. I was shocked at the actual outcome.*

*Further insight into final report of the Royal Commission. With discussion about recommendations and changes as they relate to women. Also a further understanding of not just intervention and in patient care but community mental health and prevention areas.*

*Understanding of the gaps in the Royal Commission's recommendations specifically in regards to women and gender diverse people.*

*Insight into what is missing from the Royal Commission.*

*Learn about the priorities and challenges in implementing the recommendations.*

Many were keen to hear what our panel of experts thought of the Royal Commission's recommendations:

*Insight into experts take on the reforms and what else would be recommended.*

*Just an understanding of how others had viewed the MHRC, particularly around women's and gender diverse people's experiences.*

## **A deeper understanding of issues in women's mental health**

44% of respondents stated that they attended the webinar to deepen their understanding of current issues in women's mental health.

*I wanted to get an insight into the current thinking and major issues from a gender specific lens.*

*An understanding of the diversity of the challenges and to hear from those with lived or direct experience of diversity and its impact on mental health outcomes.*

*Understanding of the broad issues for women.*

*Key policy take-aways for how the rest of the sector can amplify the voice of those calling for women's mental health system changes.*

Many also indicated that they wanted to understand if and how the Royal Commission's recommendations would address these issues.

*To better understand how women's mental health issues have been addressed by the Royal Commission's recommendations.*

*Better understanding of women's mental health challenges and the Royal Commission's response.*

*Critical engagement with issues of women's mental health as they relate to the RCMH.*

*To hear discussion about sexual safety on mental health units, and if/how it can be realistically improved with the Royal Commission's recommendations.*

## **Improving service delivery and better supporting women**

Many respondents (15%) indicated that they were attending this webinar to understand how their practice can better support women's mental health.

*General information, understanding of what's happening out there, what's happening with the Royal Commission, how I can be informed for my own work practices, how I can be informed to help other women, LGBTQI community*

*To understand women's mental health needs and how to support them.*

*To hear from experts about we can improve women's mental ill health and illness outcomes.*

*Better understanding of the specific needs of women in mental health services.*

*Time to reflect on needs of women consumers and think about implications of mental health Royal Commission report.*

*How to support women and girls better in our service.*

*Confidence that we are moving forward in the mental health field and not just ticking boxes.*

## Learnings

Survey respondents were asked to highlight which elements of the forum they found most valuable. 20% of survey respondents stated that they found the whole webinar, including the presentation and panel discussion, valuable:

*Every aspect of the webinar was valuable. The panel presentation was very well moderated and every panellist brought great knowledge and expertise.*

*I learned so much from the presentation and the panel was fantastic.*

*The overview at the beginning by Mischa was fantastic and the panel discussion was superb.*

*Found the whole webinar valuable.*

*It was very professional, engaging, informative and well organised.*

*Diversity in panel members, sound knowledge of speakers, excellent host.*

57% of respondents stated that they found the panel discussion the most valuable aspect of the webinar. This included the expertise and different perspectives of panellists, the issues discussed, the validation of lived experience, and practical approaches to implementing the Royal Commission's recommendations:

*Representation from a range of diverse service providers to sufficiently highlighting the gaps in women's mental health and the possible solutions.*

*The high level of expertise on the panel was great. All discussion resonated and the passion of those who presented was fantastic.*

*I thought everyone was so thoughtful, considered and wise in their responses. I appreciated you had diverse voices and experiences represented and that was what I most valued. It would be good to have a consumer with lived experience and a carer with lived experience at the next one but otherwise, excellent.*

*Panellists' views on action that needed to be taken.*

*Discussion of necessary change and how to achieve that. Highlighting the importance of a holistic approach to women's mental health, acknowledging the role of physical health and personal circumstances, background and diversities. This was validating in terms of my own lived experience as I struggle to find people that I identify with, even amongst others struggling with their mental health. This acknowledgment of differences made me feel slightly less isolated in my experience.*

*Panel speaking directly to the recommendations.*

The overview of women's mental health presentation was listed as the most valuable aspect of the webinar by 31% of respondents. Respondents stated that they valued the summary of

gendered mental health issues and the succinct overview of the Royal Commission's relevant recommendations:

*Mischa Barr's slide presentation giving lots of valuable information and areas to research further. The statistics were alarming and good to hear where we need to improve.*

*The succinct and effective overview of the Royal Commission recommendations that are relevant.*

## Impact

Survey respondents were asked to describe how they plan to apply their learnings from the forum into their work. The common answers are grouped under the following themes:

- Sharing information with colleagues (n=12)
- Broadening personal knowledge and incorporating ideas into work (n=12)
- Changes in practice (n=6)
- Applying a gender lens to work (n=4).

### Sharing information with colleagues

One quarter of survey respondents indicated that they would or already had shared the webinar slides and information with their colleagues and networks. This reinforces that the webinar was valuable and provided expert and evidence-based information.

*Shared with Mental Health network the presentation and resources to advocate during our Mental Health Steering Committee meetings, project and work.*

*I'd love to share the recording / learning with colleagues working in the mental health environment. I also think nurses working in our major trauma hospital could benefit from these learnings too.*

### Broadening knowledge and incorporating ideas into work

A quarter of respondents stated that they were actively thinking about how to incorporate ideas raised in the webinar into their roles. This included those in direct mental health service, clinicians, advocates, policy-makers and communications professionals.

*I will be thinking about how to incorporate the ideas and feedback in my systemic advocacy role.*

*The content of the webinar expanded my thinking about several aspects of this important issue and I will be able to use that knowledge in my future work in this area.*

*This session will help policy and strategy development in my work.*

*Understand the driving factors and the system issues leading to inequality. And also that women need leadership, empowerment and safety.*

*Understanding the importance of mental health in people experiencing family violence.*

### **Practical changes to work practice**

A small number (8.3%) of respondents indicated how the information gleaned from the webinar would directly influence their work practice. This included working more collaboratively with consumers, consideration of trauma-informed care and the impact of gendered violence on mental health.

*I will continue to advocate for gender separation on my workplace.*

*Considering trauma informed responses and working collaboratively with consumers.*

*To apply understandings of the intersecting factors that impact on the mental health of women.*

One respondent in particular stated that the webinar had given them a practical way to apply a trauma-informed approach:

*The discussion on trauma informed practice was helpful- I feel that this phrase gets a lot of lip service in my organisation but the webinar gave me some practical ways to apply it. To take the time to get to know people and their story - this is already part of my job, but I will no longer see it as time that could be better spent.*

The same respondent also reported feeling inspired to challenge inertia preventing workplace change:

*My team often identify problematic processes, but no action is taken due to the need to consult before making a final decision. So we keep talking about it, we don't have a 'perfect' solution, consultation rarely yields one (as everyone is different), so we keep tolerating inadequate processes when ANY change would be better than what we are currently doing. In trying to make these decisions, our own consultative value due to our personal lived experiences is also overlooked. Not being in a leadership role makes it hard to have a voice sometimes, but I feel inspired to try to challenge this inertia.*

### **Applying a gender lens**

8.3% of respondents indicated that they were reminded to apply a gender lens to their work as a result of this webinar:

*Reinscribed gender to the front of my mind which was important in another mental health project I am doing.*

*This will add to my understanding of women's issues when assessing complaints about MH Services.*

*I work in health care so re framing the concerns from a feminist lens. I know it but I need to rehear it as it is not normative in the general frame.*

6 respondents (12.5%) indicated that they were still digesting the information or unsure of how they would apply the webinar learnings to their work:

*Will need to digest information firstly then think about how this may fit with the suicide prevention work I am doing particularly with South Asian women.*

## **Issues in women's mental health attendees would like to know more about**

Respondents were asked to if they were interested in knowing more about:

- Intersections between gendered violence and mental health
- Intersectional approaches to women's mental health
- Gender-informed mental health promotion; or
- Other (please specify)

75% (n=39) respondents indicated that they wanted to know more about gender-informed mental health promotion.

73% (38) wanted to know more about intersectional approaches to women's mental health, with one respondent interested in a focus on disability.

67% (35) wanted to know more about the intersections between gendered violence and mental health, with one respondent particularly interested in the issue of sexual violence.

9.6% respondents indicated that they would like more information on other topics, including:

- Body image, media and young people (n=1)
- Mental load and the impact of unpaid caring work on women's mental health (n=1)
- Community mental health and what can be done to improve women's mental health in these services (n=1)
- Strengths-based approaches that inform the work of First Nations' women in Australia and other settler-colonial societies (n=1)
- Realistic and practical solutions to problems of sexual safety in inpatient units (n=1)

## **Additional comments**

32 out of 52 respondents made an additional open text comment at the end of the survey, the vast majority of which were positive. Survey respondents appreciated the diversity and varied perspectives of the panel, the organisation of the event and frank discussion.

*Just to comment again that I thought it was really well done. I thought your intersectionality and diversity was excellent and everyone was so generous, wise and thoughtful.*

*It was excellent and the speakers were well-informed.*

*Thank you so much for this webinar, it was very well run and highly useful!*

*Was very inspiring to witness these thought leaders and to remember and enact my feminist values.*

*Thank you I became better informed on the implications of the Royal Commission for women.*

*Would be interested to attend other WMH Alliance webinars in future. Thank you.*

Some respondents gave feedback for future events, including having less talking, and providing a summary of the Alliance's views on the recommendations.

Comments made via the webinar Q&A included:

*Thank you MHV for this webinar and to the great speakers – it has been so disappointing that women were excluded, so to have this raised and have a webinar concentrating on this is inspiring.*

*Just wanted to say, what a great conversation. Thanks all!*

*Thank you for this session. The presentation by Mischa and panel conversation has been fantastic. Particularly the issue of gendered violence and women's mental health.*

*Thanks all - really excellent and much needed discussion. Thank you all for your work in this area!*

## Conclusion

This webinar generated an unprecedented amount of interest, with over 500 registrations and requests for recordings. Overall, this webinar was highly attended and very well received. It was pleasing to see a high level of interest in women's mental health within the mental health and related sectors. Participants found the introductory presentation valuable, indicating that it was pitched correctly. Care taken to invite panellists with a diverse range of expertise, experiences and backgrounds was appreciated by the webinar attendees. Feedback indicated that there is appetite for future events discussing specific issues in women's mental health, particularly gender-informed mental health promotion, intersectional approaches to women's mental health and the intersections between gendered violence and mental health.