

Lloyd et al. recently found that income growth over the 1991 to 1996 period was roughly twice as rapid in the capital cities as in most other areas of Australia.² The proportion of low income households has been increasing somewhat more rapidly outside the cities.

In Figure 2, all Australians have been ranked by the equivalent gross household income of the local government area in which they live (using the OECD equivalence scale). The bottom decile thus consists of the 10 per cent of Australians who lived in the poorest local government areas. The results suggest that the 10 per cent of Australians living in the most affluent local government areas gained over the 10 years to 1996, with their share of the total income pie increasing by 1.26 percentage points to 14.96 per cent. Overall, the 30 per cent of Australians living in the top three deciles of local government areas increased their share of the total pie. In contrast, the 70 per cent of Australians living in middle and lower income local government areas lost ground, seeing their share of the total income pie shrinking from 63.5 per cent to 61.91 per cent. There is thus some evidence

that already rich neighbourhoods are becoming even richer, while poorer neighbourhoods are becoming even poorer.

CONCLUSION

There has been little change in national overall inequality during this period. But this lack of overall change at the national level disguises two major trends: better outcomes for the poor and the rich than for middle Australia; and an apparent increase in spatial income inequality (that is, inequality of income by geographical regions).

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PROMOTION, PREVENTION AND EARLY INTERVENTION IN MENTAL HEALTH: TWO NEW NATIONAL DOCUMENTS

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Mental health has been identified as a key priority area by NSW Health and also nationally. Recent documents have highlighted the increasing burden imposed by mental health problems and disorders in our society. Depression alone has been predicted as one of the greatest problems internationally by the year 2020.¹ Promotion, prevention and early intervention for mental health has been identified as important to progress, in order to diminish this burden. There is growing evidence that effective promotion, prevention and early intervention initiatives can reduce the prevalence of mental health problems, and lessen the severity and duration of mental illness.^{2,3,4}

The *National Action Plan for Promotion, Prevention and Early Intervention for Mental Health 2000*,⁵ and an accompanying *Promotion, Prevention and Early Intervention for Mental Health 2000: A Monograph*,⁶ were released in late 2000. These two documents have

been developed by the National Promotion and Prevention Working Party, which has representation from the National Mental Health Working Group and the National Public Health Partnership.

Together these documents provide a strategic framework and a plan for action to address promotion, prevention and early intervention priorities and mental health outcomes across Australia. The monograph provides the theoretical and conceptual framework and background information for the action plan.

To support the implementation of the National Action Plan, a New South Wales Promotion, Prevention and Early Intervention Steering Committee has been appointed. Consultation forums to guide implementation are occurring in the area health services across NSW, with 600 people participating in these to date.

Copies of *Action Plan 2000* (ISBN 0642 447241) and the *Monograph* (ISBN 0642 44725X) are available from the Better Health Centre, telephone: (02) 9816 0452; fax: (02) 9816 0492. Feedback on the documents can be provided through a form enclosed at the back of these documents.

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GETTING IN EARLY: A FRAMEWORK FOR EARLY INTERVENTION AND PREVENTION IN MENTAL HEALTH FOR YOUNG PEOPLE IN NEW SOUTH WALES

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Improving the mental health of young people is a priority of the NSW Government. A substantial number of adolescents and young adults have significant mental health problems. Up to 24 per cent of adolescents experience depression by the time they are 18 years old, and young people aged 15–24 years are the group most frequently affected by a first episode of psychosis.¹ These mental health disorders have serious consequences for young people and their families including:

- an increased risk of suicide
- an increased risk of hazardous substance use
- disruption to psychological, educational and social development
- strain on relationships.

Mental health problems in young people have been poorly recognised, identified and managed, and there has often been a considerable delay in young people receiving appropriate care. Increasing evidence shows that preventing and intervening early for young people with mental health problems can dramatically improve their immediate and long term health outcomes.^{1,2}

Programs and initiatives for depression and first onset psychosis have been established in area health services across NSW. *Getting in Early—A Framework for Early Intervention and Prevention in Mental Health for Young People in NSW* is a framework for improving and supporting these initiatives.

Five broad strategies are outlined for mental health promotion, prevention and early intervention in young people:

- developing and coordinating comprehensive programs and services;
- engaging young people and their families and providing comprehensive assessment and management;
- developing and implementing prevention programs;
- educating the community, particularly on depression and related disorders and first onset psychosis in young people;
- monitoring quality and effectiveness.

Getting in Early provides an innovative framework for mental health service delivery for young people. *Getting in Early* also presents an opportunity to emphasise and maximise mental health services working collaboratively with other agencies towards better mental health for young people in NSW.

Copies of *Getting in Early* (Publication No. CMH00014) are available from the Better Health Centre, telephone: (02) 9816 0452; fax: (02) 9816 0492.

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