

Science.
Compassion.
Action.

From insight to action: enhancing the measurement of mental wellbeing in Australia

Black Dog Institute, January 2023



Introduction

Black Dog Institute is the only Medical Research Institute in Australia to investigate mental health across the lifespan. Mental wellbeing is at the heart of our mission to enable all people to live mentally healthy lives. In this submission, we bring our guiding principles of Science, Compassion, and Action to bear on measuring the wellbeing of the nation. Our researchers and collaborators have extensive international experience in defining and measuring mental wellbeing from micro to macro levels, so this submission offers an expert lens on building upon existing approaches to produce the world-class wellbeing framework our nation deserves. Unlike some other approaches, ours seeks to both understand Australia's wellbeing and identify opportunities for change. Black Dog Institute supports steps to measure the mental wellbeing of Australians and would welcome any opportunity to contribute our expertise to this ongoing endeavour.

Key Points

- The existing OECD framework includes important aspects of wellbeing but is not sufficient to measure what matters most to Australians.
- We believe the existing OECD framework can be enhanced using a continuum approach that also considers more holistic and culturally appropriate ways to measure mental wellbeing.
- Our suggested approach also highlights the importance of measuring Basic Psychological Needs as part of understanding how to take action to improve our nation's mental wellbeing.
- Measuring Basic Psychological Needs offers governments and policymakers modifiable factors that can improve our population mental wellbeing, much the way modifying nutrition, sleep, and exercise through policy can convey enormous benefits to the physical health of a population.

OECD and beyond: Enhancing existing frameworks

The OECD framework measures several social determinants of mental and physical health and wellbeing. We know that safe and affordable housing, secure employment, social support, education, and equal opportunity are all protective factors for population mental health. Absence of these factors can also increase the risk of mental illness. We support continued measurement of key indicators that represent social determinants of mental health, such as Educational Attainment (Indicator 1) Employment Rate (Indicator 2), Housing Affordability (Indicator 15), and Social Support (Indicator 27).

The OECD framework also includes three indicators that are more directly related to the concept of "subjective wellbeing". These are Life Satisfaction (Indicator 18), Negative Affect Balance (Indicator 21), and Social Interactions (Indicator 26).

While these indicators allow for comparisons with other OECD countries, there are several limitations to this approach:

- **Use of single item measures** – these measures only quantify a single component of a broad concept, omitting important details.
- **Limited scope of measures** – concepts such as ‘life satisfaction’ and ‘negative affect balance’ are important components of mental wellbeing, but there are other physical, behavioural, and social components that are of equal importance.
- **Limited cultural relevance** – many Australian communities, such as First Nations communities, value wellbeing factors not represented in OECD metrics, such as connection to land and community.
- **Problem-focused rather than solution-focused** – indicator frameworks quantify problems but have limited capacity to help formulate solutions.

To improve upon the current OECD indicators of wellbeing, we recommend expanding beyond the concept of subjective wellbeing to a more holistic idea of “mental wellbeing”. We believe that implementing a high quality, informative measure of population mental wellbeing is critical to achieving the aims of ‘Measuring What Matters’ and has the potential to position Australia as a world leader in both measuring and achieving health, happiness, and high quality of life for our citizens and communities.

Enhancing our view of mental wellbeing

We believe there are three important considerations when formulating and measuring the mental wellbeing of Australia:

1. Adopting a continuum approach

Measurement of mental wellbeing should adopt the extensively studied “continuum” view of mental illness and mental health (see Figure 1). The continuum approach suggests that people move between states of illness (languishing) and wellness (flourishing) throughout their life¹², rather than simply being “ill” or “well”. In addition to nourishing individuals, wellbeing and flourishing can benefit our entire nation. Evidence shows flourishing is directly related to workforce participation, workplace productivity, psychological resilience, better quality of relationships, lowered risk of chronic disease, fewer health-related impairments, and lower health care use³. Most importantly, the continuum approach acknowledges every individual’s capacity to move from illness to wellness. This makes the mental health continuum relevant to policymakers seeking to make real change.

2. Measuring all components of wellbeing in culturally appropriate ways

Measures of mental wellbeing should measure the whole person. Holistic approaches include many components of overall wellbeing such as physical health, emotional health, social connection, financial security, and a sense of meaning. This approach is reflected in the World Health Organization’s conceptualisation of wellbeing that includes physical health, mental health, and how individuals engage with their community⁴. Holistic approaches also need to be relevant across our many cultural conceptualisations of wellbeing. For example, Social and Emotional Wellbeing is central to First Nations peoples’ health and comprises knowledge and wisdom that

cannot be quantified by Western psychometrics. The New Zealand Government's 'Living Standards' Framework includes specific indicators related to cultural capability and belonging, including Māori connection to ancestral marae (meeting grounds). We recommend that Australia's Measuring What Matters Framework include First Nations ways of knowing and conceptualisations of Social and Emotional Wellbeing.

3. Recognising how to modify mental wellbeing

Significant evidence suggests that people can move from mental ill health (languishing) to mental wellbeing (flourishing) by satisfying three Basic Psychological Needs^{5,6} (BPNs; see Figure 1):

- **Autonomy** – feeling that one's choices and actions are made freely and authentically
- **Competence** – feeling capable of achieving what you want to achieve
- **Relatedness** – experiencing genuine connection with others

BPNs have significant potential to be used in national and international models of mental wellbeing because they appear to be universal. We know that the importance of satisfying these needs holds across disparate cultures and is independent of differences in how individuals value each need⁷. People who have high levels of satisfaction of these three Basic Psychological Needs (BPNs) are less likely to experience current symptoms of depression and anxiety in the short term, and also later in life^{8,9}. BPN satisfaction is also linked to indicators of productivity, such as engagement in education¹⁰ and work¹¹. BPN satisfaction can reduce the impact that socioeconomic status has on both physical and mental wellbeing¹² and the impact of workplace bullying on workplace engagement¹³.

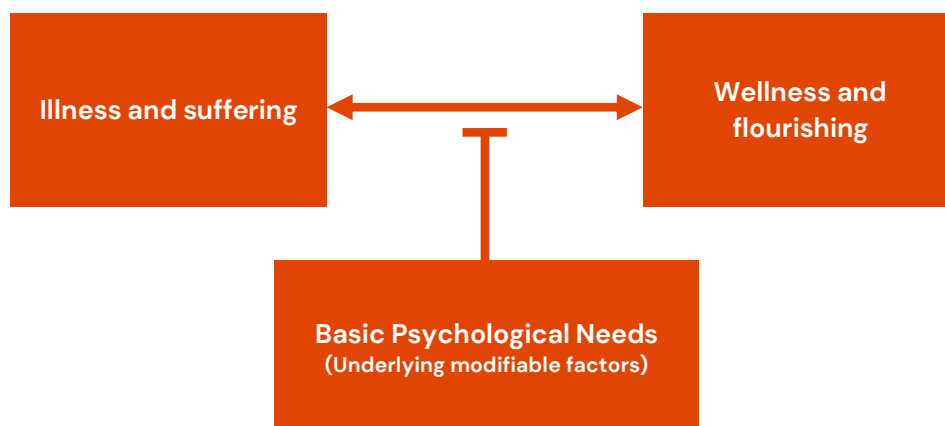


Figure 1. The top of the model depicts the mental health continuum between illness and wellness, along which all people move throughout their life. The bottom of the model shows Basic Psychological Needs, which influence where a person falls along the continuum. Importantly, Basic Psychological Needs represent underlying modifiable factors that can be targeted by policymakers.

Enhancing our capacity for action

A significant limitation of existing indicator frameworks is their narrow ability to inform action. Indicator frameworks often identify areas or types of ill health without also offering ways of making things better. We can enhance our capacity for action by identifying modifiable underlying factors that not only measure but explain wellbeing. A framework that measures wellbeing in a holistic and culturally appropriate way and includes modifiable underlying factors would empower governments and policymakers in two ways:

1. By identifying what types of changes are likely to improve a given aspect of mental wellbeing
2. By estimating the impact that various policy options might have before arriving at a final decision.

As outlined above, Basic Psychological Needs (BPNs) offer modifiable underlying factors in mental wellbeing. BPNs offer policymakers “universal” factors that can improve Australians’ mental wellbeing, akin to the role that nutrition, sleep, and exercise play in the physical health of a nation. Measuring and improving BPN satisfaction in the Australian population could have wide-ranging effects on the health and prosperity of our nation.

The simplicity of BPNs can offer policymakers a simple touchstone when deciding on a course of action by asking: **Will this give people choice, help them build important skills, and do so in a socially connected way?**

Measuring and supporting BPN satisfaction can also enhance the global benchmarking of Australia’s mental wellbeing. BPNs cut across many of the OECD indicators, including many where Australia is performing below the OECD average. Having a say in government, controlling the hours one works, and gender wage disparities all relate to autonomy. Students’ skills in science, maths, and reading, are central to young Australians’ sense of competence, as is educational attainment in adults. Trust in others, trust in government, social support, and social interactions are all facets of relatedness.

A large national survey that includes representative groups from different ages, genders, locations, education levels, and cultural and linguistic backgrounds could quantify how well Australians are able to meet their psychological needs. Using this data, policymakers can identify which psychological needs are going unfulfilled, predict how satisfying needs will impact the various components of wellbeing, and design policy to target these needs. For example, this survey data could be used to quantify the effect of increased autonomy on emotional health in the Australian population. This can help policymakers estimate how emotional health might improve if they increase consumers’ ability to choose important aspects of their healthcare. **This is one of numerous ways that measuring modifiable underlying factors, such as BPN satisfaction, can turn indicator frameworks into tools for action.**

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Appendix:

Measuring illness, wellbeing, and psychological needs

Here we outline several well-validated psychometrics that could be used to measure each of our recommended indicators (see Figure 2). These measures were selected in line with the CIVITAS principle of minimising core indicators to reduce complexity and streamline decision-making.

Measuring mental wellbeing: The Comprehensive Wellbeing Assessment

Developed in 2021 during the COVID-19 pandemic, the 40-item Comprehensive Wellbeing Assessment (WBA) offers a multidimensional measure of wellbeing. The WBA provides an overall wellbeing score, along with 'subscale' scores for six interrelated yet distinct components of wellbeing: emotional health (comparable to OECD subjective wellbeing), physical health, social connectedness, meaning and purpose, character strengths, and financial security. *Full details of the WBA can be accessed here:*

<https://www.frontiersin.org/articles/10.3389/fpsyg.2021.652209/full#B44>

—> *Note.* An important first step in adopting this measure would be validating it in a wide range of Australian cultural communities to ensure it represents the needs of all Australians. This is especially important for our First Nations peoples, whose knowledge and wisdom of wellbeing may not be captured in such measures.

Measuring BPN satisfaction: the Basic Psychological Need Satisfaction Scale

The Basic Psychological Need Satisfaction Scale (BPNSS) is a 21-item questionnaire that measures the extent to which people experience autonomy, competence, and relatedness in their daily life. A score can be computed for each psychological need and used independently. The BPNSS comes in a general version to measure overall need satisfaction, along with domain specific versions to inform policy areas that deal with workforce engagement and the quality of interpersonal relationships. *Full details of the BPNSS can be accessed here:*

<https://selfdeterminationtheory.org/basic-psychological-need-satisfaction-scales/>

Measuring mental illness and suffering

A comprehensive mental illness assessment is likely beyond the scope of a wellbeing framework. For parsimony, we recommend capturing two key facets of mental ill health: (1) the severity of common mental health symptoms that comprise psychological distress; and (2) the presence of drug and alcohol use and suicidal ideation as key risk indicators for worsening mental ill health.

- **Depression Anxiety Stress Scales (DASS-21):** The DASS-21 provides an overall measure of psychological distress, along with subfactors that measure the most common symptoms of mental illness that are prominent across mood, anxiety, and trauma-related mental disorders. The DASS-21 has well-established cut-off and clinical significance indicators for inpatient, outpatient, and non-clinical populations. *Full details of the DASS-21 can be accessed here:* <http://www2.psy.unsw.edu.au/dass/>

- Alcohol Use Disorders Identification Test (AUDIT) and Drug Use Disorders Identification Test (DUDIT)** – these widely used questionnaires provide an overall measure of risky alcohol and drug use. Each is a brief measure that has been used extensively and is comparable to other measures of alcohol or drug use. *Full details of the AUDIT can be accessed here: <https://www.jsad.com/doi/abs/10.15288/jsa.1995.56.423> and full details of the DUDIT can be accessed here: https://www.sciencedirect.com/science/article/pii/S0740547215000239?casa_token=9k_mn4CYpCEsAAAAA:oHZZzIGyNTPBLaZiZnL1OakbsKOV0O-_rFbiZOFWhV3cTHScVdK-tTP-XyLXEbak2FaCJ2WV#bb0015*
- The Suicidal Ideation Attributes Scale (SIDAS)** – The SIDAS is a brief, validated measure that assesses the severity of suicidal ideation. The SIDAS is widely used in research and assesses the primary established facets of suicidal thought. *Full details of the SIDAS can be accessed here: <https://pubmed.ncbi.nlm.nih.gov/24612048/>*

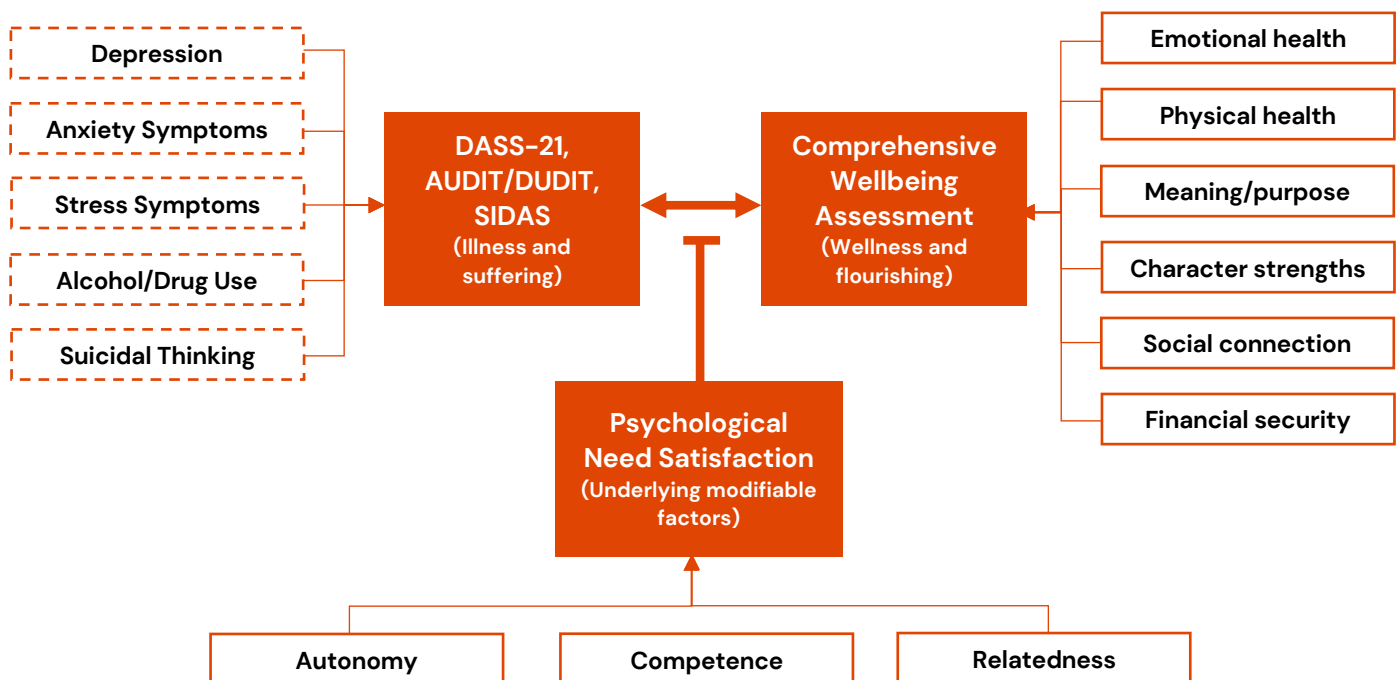


Figure 2. On the left of our model of mental wellbeing, mental ill health comprises common mental illness symptoms, along with risky alcohol/drug use and suicidal ideation. At the centre, Basic Psychological Needs provide modifiable underlying factors that both influence and predict an individual or group’s place on the mental health continuum, thereby enabling policymakers to (1) identify points of action to improve wellbeing; and (2) predict the potential impacts of taking such actions. On the right, a multidimensional measure of wellbeing allows policymakers to (1) measure many aspects of wellbeing over time; and (2) measure the specific impacts of targeting the modifiable underlying factors through policy change.