Tipsheet

Supporting Mental Health Access for Diverse Communities

Improving Access and Building Trust in Mental Health Services for Diverse Communities

People from migrant, refugee, and other diverse backgrounds often face significant challenges when accessing mental health support. These barriers are not only systemic but also cultural, organisational, and interpersonal.

Key Barriers to Access

While stigma and taboos around mental health can discourage help-seeking, many of the obstacles are embedded within the mental health system itself. Diverse communities face common issues such as high service costs, long waitlists, and limited availability in regional areas. However, they also encounter additional barriers, including:

- Limited visibility of safe, inclusive services
- Complex systems that make navigation difficult
- Use of Western, clinical, or academic language in service promotion
- Unwelcoming or inflexible frontline staff
- Environments that lack cultural safety, accessibility, or responsiveness
- Shortage of bi-cultural, disabled, or gender-diverse professionals with lived experience
- Inadequate uptake of diversity, inclusion, and cultural awareness training
- Systemic pathologising of disability and gender diversity

To overcome these barriers and build trust, mental health services must embed equity, accessibility, and inclusion at every level. This means designing systems and environments that reflect the identities, needs, and lived experiences of all community members.

The following strategies offer practical guidance for inclusive responsive services and to build trust and accountability to the diverse communities they serve:

Embed Accessibility and Inclusion

- Ensure leadership reflects community diversity and champions inclusive practice
- Recognise intersecting forms of discrimination (e.g. racism, ableism, sexism)
- Make services physically, digitally, and attitudinally accessible

Deliver Flexible, Person-Centred and Community-Led Models

- Streamline intake processes and remove eligibility barriers
- Offer flexible options like peer support, home visits, and non-fixed appointments
- Prioritise care aligned with individual recovery goals
- Support community-led solutions beyond clinical treatment

Communicate Clearly and Follow Up

- Provide transparent service information (scope, duration, capacity)
- Use plain English and community languages across written, visual, and video formats
- Reduce user burden with reminders, proactive followup, and continuity of care

Create Inclusive and Culturally Safe Environments

- Reflect inclusion through visual cues (e.g. flags, posters, acknowledgements of country)
- Train frontline staff in cultural humility and genderaffirming practice
- Cater to collectivist cultures and a range of disability access needs

Strengthen Workforce Diversity and Capacity

- Employ staff who reflect the communities they serve
- Integrate peer workers and lived experience practitioners
- Provide training in cultural humility, trauma-informed care, neuro-affirming practice, and LGBTIQA+ awareness
- Foster psychological safety to reduce burnout and model compassionate care

Staying Accountable to Communities

Building trust requires more than consultation—it demands structural commitment and shared power. Services must continuously listen, learn, and evolve alongside the communities they support.



Centre Lived Experience and Co-Design

- Involve people with lived experience in service design, delivery, and evaluation
- Establish advisory panels with representatives from diverse groups
- Offer paid opportunities for lived experience contributions
- Partner with community leaders and organisations

Provide Transparent Feedback Mechanisms

- Use inclusive language and accessible formats (e.g. Auslan, Easy English)
- Offer multiple feedback channels (online, in-person, anonymous)
- Ensure two-way communication to close the feedback loop
- Regularly review engagement methods to improve reach and relevance

"A key non-negotiable for better engagement is increasing representation within the workforce by diversifying staff to reflect the communities they serve."

"Workforce capacity building is a key priority. This should be done in collaboration with people who have lived experience to ensure its relevance and impact."



- Connect with individuals who have lived and living experience – whether consumers, peer support workers, or practitioners – to meaningfully inform decisions and solutions.
- Engage in genuine partnership with community-led organisations (CLOs) and local leaders to foster shared ownership and insight.
- Review your current programs, services, and communications to ensure they use clear, inclusive language and cater to diverse needs with accessible formats, such as Auslan and Easy English.
- Offer multiple, transparent feedback channels including online, in-person, and anonymous options and ensure ongoing two-way communication to close the feedback loop and build trust.

- Actively seek out and champion feedback from underrepresented groups, and make concrete, visible plans to address suggestions or concerns.
- Identify, support, and amplify emerging leaders from diverse backgrounds to increase representation and strengthen engagement.
- Commit to regular reflection and review of your engagement methods so that communication remains relevant, accessible, and effective.
- Share your commitment to accountability, transparency, and equity with your team and wider network to embed these values in everyday practice.

Small, consistent actions – taken today – build the foundation for genuine trust, equity, and community-led change tomorrow.



"Solutions must centre the voices and perspectives of those with lived and living expertise, including consumers, peer support workers and other lived experience practitioners."









Framework to Action

TO SUPPORT IMPLEMENTATION OF

Diverse
Communities
Mental Health
and Wellbeing
Framework
2025 - 2035



Our ten-year Vision

All Victorians can access a safe and inclusive mental health and wellbeing system that responds to, reflects, and embraces diversity.

Diverse communities experience equitable mental health and wellbeing outcomes, supported by a system that values and affirms them, and by having equal access to the foundations of good mental health and wellbeing.





Our Principles

Eight principles have shaped the development of this framework to guide how the Victorian Government works in partnership with communities, services and the broader mental health and wellbeing system over the next decade.



Strengths-based: recognising and respecting the strengths of each person and their lived and living experiences, their families and their communities



Equity: an equitable, safer society free from unfair and avoidable differences in health and wellbeing



Lived and living experiences: empowering people with lived and living experiences to lead and shape system transformation and delivery



Cultural humility: listening and learning from diverse communities and recognising and reflecting on how historical cultural norms have shaped the system



Human rights: promoting and protecting freedom, respect, equity and dignity for everyone



Intersectionality: applying an intersectional lens to mental health and wellbeing policy and practice



Inclusion and accessibility: creating a welcoming and non-discriminatory system where people can bring their whole selves and benefit from opportunity and equity



Accountability: honouring the lived and living experiences, strengths and contributions of diverse communities by maintaining a clear focus on progress and outcomes

Our diverse communities include:

Multicultural communities – People from a variety of migration backgrounds, including migrants, refugees, and asylum seekers, representing diverse cultures, ethnicities, faiths, and languages, whether recently arrived or long established in Australia.

LGBTIQA+ communities – This term covers a range of sexualities, genders, and sex characteristics, including lesbian, gay, bisexual, trans, gender diverse, intersex, and queer people, as well as others not represented by these letters. Some Aboriginal communities use the terms 'sistergirls' and 'brotherboys'.

Disability communities - The definition of disability includes physical, intellectual, psychiatric, sensory, neurological and learning disabilities and chronic health conditions.



Focus Areas

The framework reflects the ambition that every person living in Victoria experiences equitable mental health and wellbeing outcomes. Six focus areas have been identified for ensuring a mental health and wellbeing system that responds to, reflects, and embraces diversity.

- Area 1: Diverse communities experience safe. inclusive, accessible and responsive treatment, care and support – where, when and how people need it.
- Area 2: Diverse communities are supported to actively improve the mental health and wellbeing of their own communities.
- Area 3: Are free from stigma and discrimination when accessing mental health and wellbeing services.
- Area 4: Diverse communities benefit from targeted actions to promote more equitable good mental health and wellbeing.
- Area 5: Diverse communities benefit from targeted actions that prevent and respond to suicide.
- Area 6: Diverse communities lead and see themselves in the mental health and wellbeing system at all levels.

Tipsheet

Mental Health Services partnering with Community-Led Organisations

Community-led organisations (CLOs) are run by and accountable to the people they serve, focusing on empowering and advocating for the needs of community members. In Victoria, they are recognised as vital connectors between diverse communities and mental health services.

CLOs:

- Provide safe spaces for conversations about mental health
- Challenge stigma and promote help-seeking behaviours
- Serve as systemic advocates for their communities
- Influence policy and practice through tailored resources and training
- Amplify the voices of lived experience within the community

"Mainstream organisations should take on the responsibility of proactively reaching out to support CLOs, recognising them as essential partners in mental health service delivery."

Partnering with community-led organisations

Strong partnerships with CLOs are:

- grounded in respect,
- shared leadership, and
- · collaboration.

This ensures mental health services remain culturally relevant, accessible, and effective for diverse communities.

Mental health services can ensure equity and sustainability in partnerships in the following ways.

Recognise and respect **CLOs as experts**

- Treat CLOs as equal partners and not just a way of accessing communities.
- Acknowledge CLOs' deep knowledge and trusted community relationships.
- Co-develop and coand service models.



Embed CLOs into service design, delivery, and evaluation

- Include CLOs in program design, evaluation, and community consultation.
- Collaborate on training and policy review (e.g. cultural competence, inclusive practice).
- Resource CLOs community engagement activities, such as forums or information sessions.
- Co-create accessible materials in appropriate languages and formats (e.g. Auslan, plain English).

Build trust through transparency and shared values

 Align service goals with the priorities of CLOs and their communities.

• Ensure regular, consistent

quarterly meetings, shared

• Be open to feedback and make

changes based on CLO insights.

communication (e.g.

updates) with CLOs.

- Be clear about what your service can offer and what advice or support it needs from CLOS.
- Involve CLOs in decisionmaking, not just consultation.
- lead programs, policies,
- "Take the time to understand the unique challenges we face".

Invest in long term, sustainable partnerships

- · Avoid short-term, tokenistic engagement.
- Develop purposeful, structured collaborations (e.g. shared advisory groups, peer networks, CoPs).
- Create formal partnership agreements (e.g. MoUs) that outline roles, expectations, and shared goals.
- Provide fair remuneration for CLOs' time and contributions.