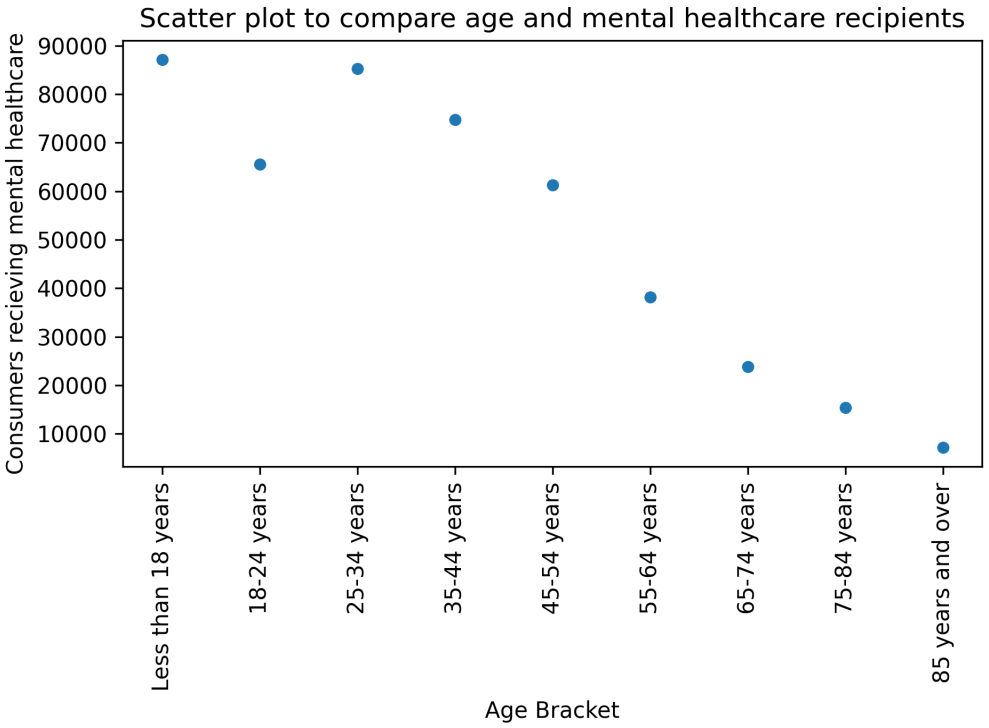
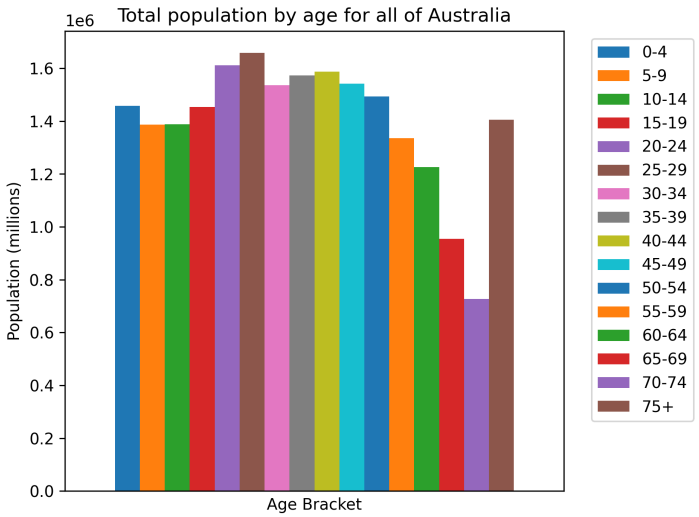
Age

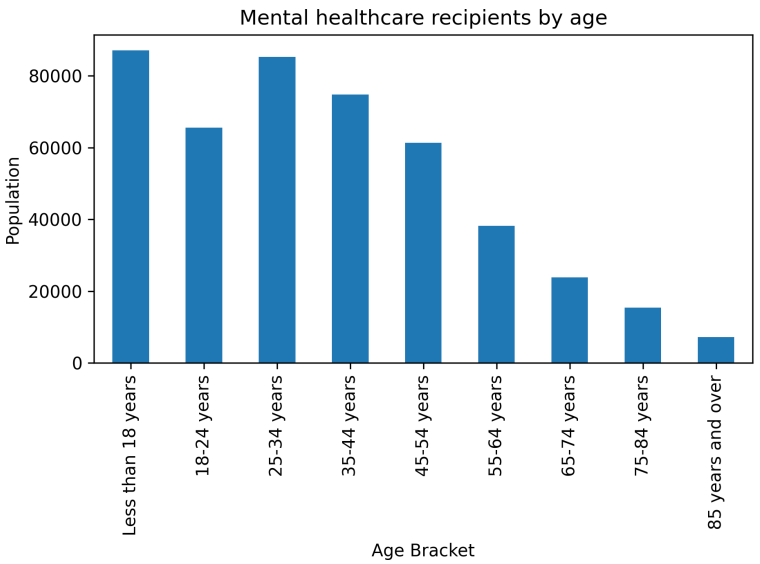
Key results



At first glance, Figure X suggests that there is a negative correlation between accessing mental healthcare and age, implying that younger individuals are more prone to mental health conditions. To analyse this further, it is possible to calculate the Pearson correlation coefficient. By averaging the bin values and conducting the calculations in Python, the Pearson r value is -0.942, with a p-value of 0.0001. This suggests that there is a very strong negative correlation between age and consumers receiving mental healthcare, implying that younger individuals are more prone to poor mental health outcomes.

At this point, it is important to note that the population distribution of the age brackets must be identified in order to ensure that the healthcare numbers are not influenced by how many people are in each age bracket.





The histograms above suggest that the distribution of the population between the age brackets does not align with the age groups accessing mental healthcare, with the total population by age being largely symmetrical, while the mental health care recipients by age being noticeably skewed to the right, favouring the younger population. This leads to the conclusion that either younger people have poorer overall mental health, or are more open to discuss and seek health care for mental illness.

In order to discuss this effect in the context of Victoria, the total population distribution by age must be repeated for the state:

When comparing the distribution for Victoria to the one for Australia, it is clear that the population distribution by age for the two regions is extremely similar, suggesting that the impact of age on mental health is not dissimilar between Victoria and all of Australia.