OzHelp Submission to the Senate
Community Affairs References Committee

*Inquiry into the accessibility and quality of mental health services in rural and remote Australia*

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1. Introduction

OzHelp welcomes this inquiry and will be keenly tracking its progress and outcomes. Access to services and supports is something that those of us who live in a capital city take for granted. Suicide is the leading cause of death in 15 to 44 year-old people (ABS, 2016), close to twice as likely for people living in remote and very remote areas than people living in major cities (AIHW, 2017), 3 times more likely for men than women, and more than twice as likely for Aboriginal and Torres Strait Islander people than non-indigenous Australians (ABS, 2016). It’s clear that preventative measures need to reach a socially, culturally and geographically broad range of people. Through ground-breaking, online screening and educational tools, backed up by real time supports via phone or face to screen technology, OzHelp is making suicide prevention accessible to workers nation-wide, regardless of workplace size, location or remoteness.

OzHelp has been in the business of frontline suicide prevention for 16 years, focussed on reaching workers in male dominated industries. We provide face-to-face and online health screening, support and counselling and deliver training directly and through our licensees. We have extensive experience in delivering services in regional and remote Australia such as our work with JKC Australia’s LNG project outside of Darwin, barge workers off the coast of Western Australia and other workers in the Pilbara region, and workers from central Queensland to Bourke, Mudgee and the NSW South Coast, to name just a few.

Our strategy for the last two years has been to build our online services so that we can have a broader reach. A key element of this expansion has been to leverage the benefits of online engagement coupled with direct human-human engagement. We have deployed a demo of our health screening and support tool at ozhelpconnect.org.au.

Whether via our digital platforms or our face-to-face services, OzHelp aims to provide a pathway for people to more readily engage with health and community services. Our engagement model is focussed on breaking through barriers to help-seeking, and generating greater awareness of and interest in health and wellbeing.

While each of the terms of reference of this inquiry are of interest and relevance to OzHelp, this submission aims to highlight our experience in relation to two key areas: attitudes towards mental health services; and opportunities that technology presents for improved service delivery. Our interest in being heard in the process of this inquiry is rooted in three core beliefs that drive OzHelp’s service delivery.

OzHelp believes:

Suicide is preventable;

Optimal wellbeing is achievable; and

Early intervention supports should be available to everyone regardless of geographic location.

We would welcome an opportunity to appear at your committee to talk about our experience in delivering mental health services in rural and remote Australia.
2. OzHelp’s Focus

OzHelp’s core objective is to prevent the suicide of working people in metropolitan, rural and regional Australia. OzHelp’s service delivery model is centred on the premise that employers have a vital role in the health and wellbeing of their workforce and the wider community in which they operate. We partner with these workplaces to increase awareness of the importance of health and wellbeing and to improve help-seeking behaviours across the workforce. We believe that every workplace can play a role in reducing the incidence of suicide in Australia.

OzHelp’s service delivery model, founded on a solutions focussed approach, revolves around the notion of redirecting the focus towards what people want, wellbeing, rather than solely on preventing what people don’t want, such as poor mental health. Research shows that wellbeing is the single most important predictor of good self-rated health (Akkaway et al, 2016), suggesting that measurable improvements in self-rated health are likely to be achieved by programs that have this more positive health promotion focus (Wilson, 2018).

3. Attitudes Towards Mental Health Services

As OzHelp’s client base is predominantly workers in male dominated industries. A significant portion of this group consider mental health to be something to ignore, whereas physical health, being more tangible, is a lot more approachable (Hall & Partners Open Mind, 2012). Many men have the perspective, especially in rural Australia, that approaching a mental health service is in itself an admission of weakness or not being strong enough to deal with challenges independently (Hall & Partners Open Mind, 2012). OzHelp’s experience is that an initial engagement with clients that has the dual focus of: physical health; and goals oriented (wellbeing), opens the door for those more challenging topics such as mental health and suicide. OzHelp frontline staff are highly skilled at taking these small opportunities to engage with our clients further, and start the process of building resilience and capacity to support the health and wellbeing of those around them.

Leveraging this experience and the evidence base that supports it, OzHelp works with employers and communities to reduce the stigma around mental health and help-seeking behaviours. In doing so we have been able to reach into pockets of the population that consider mental health services to be for “other” people. Rural and regional Australia represents a significant portion of this target group and OzHelp’s growing digital capacity is breaking down the barriers and creating more palatable ways for people to start on their help-seeking journey.

4. Opportunities that Technology Presents for Improved Service Delivery

Research indicates that the internet is commonly the first place a man will go to seek answers as it provides an anonymous platform to gain information and determine options without disclosing their vulnerability (Hall & Partners Open Mind, 2012). From this starting point OzHelp has carefully designed its online services to appeal to the broadest possible audience. The added benefit of the initial client interface being digital is that it provides a cost efficient way of reaching a large scale audience unhindered by geographical location or remoteness. Recent research into the return on investment from investment in mental health reform, conducted by Mental Health Australia and KPMG, found that e-Health interventions have the potential to deliver a short term return on investment of 1.60 for every $1 spent (Mental Health Australia & KPMG, 2018).
In the course of delivering its online facilitated services, OzHelp has learned three key lessons:

4.1. Whole of Person Approach

It’s important to approach a person’s broader health and wellbeing in the effort to improve mental health and prevent suicide. OzHelp’s whole of person focus recognises that mental health is not a discrete element of a person’s health. The intersection of a person’s mental health with their physical, emotional and social wellbeing provides a vital opportunity to engage with hard to reach and reluctant help-seekers, for example males and those living in rural and remote areas. Our focus on all elements of a person’s health and our unique service delivery model that is tailored to engage those portions of the population that tend to be averse to seeking support, allows us to build capacity across communities and contribute to increased awareness of health and wellbeing matters on a broader scale.

4.2. Digital Platform Enabling Human Interaction

In the field of digital health solutions, online platforms that are leveraged to enable human interaction provide best practice digital delivery of services. Research has shown that a mix of self-service (via a digital platform) and human service channels (human-human interaction) improve client engagement on a number of levels including client loyalty and retention (Barrett, Davidson, Prabhu & Vargo, 2015), user commitment to a task (Scherer, Wünderlich & Wangenheim, 2014) and user trust in the service being delivered (Wunderlich, Wangenheim & Bitner, 2012).

OzHelp has developed and implemented a model that moves from self-service engagement with an online tool to screen and raise awareness around health and wellbeing, to direct telephone or face-to-screen contact supporting the outcomes of the online experience. This avenue provides the client with the opportunity to receive supports that are responsive to their individual needs in an environment that maximises ability to control the extent to which they choose to engage, while optimising their access to tailored information.

4.3. Positive Wellbeing Focus Engages Whole Population

In general the large proportion of the population who consider themselves to be of reasonable health, tune out of the mental health public dialogue if they don’t have an explicit interest in it. OzHelp’s approach of engaging people on the basis of a wellbeing focus, not only allows us to equip those who at some stage will dip into periods of compromised health, but also to reduce stigma and build capacity within communities to respond in a more productive way to mental illness. OzHelp’s approach engages the whole population rather than only those who consider themselves to be unwell. This broadens the reach of suicide prevention awareness and gets whole communities involved in the national dialogue and action around mental health.

A flow on benefit of OzHelp’s broadening reach via digital platforms is the access it provides to large amounts of health and wellbeing data. De-identified, this data allows OzHelp to facilitate and participate in research projects that seek to better understand the population that it serves. Currently, OzHelp is partnered with the University of Wollongong in an evaluation project to ensure our service delivery is in line with best practice in mental health service delivery.
It’s important to note that connectivity, specifically rural and remote access to reliable internet services, is vital to ensuring that technology is a feasible vehicle for the optimisation of mental health services. Research conducted by Flinders University’s Centre for Research Excellence in the Social Determinants of Health Equity, found that only 12% of those living in the most socio-economically disadvantaged outer regional areas have access to fibre-to-the-premise or fibre-to-the-node technology (the best broadband solution available), compared with 88% of those living in the least socially disadvantaged outer regional areas (Centre for Research Excellence in the Social Determinants of Health Equity, 2017). While this research reflects 2016 data and may well have changed with the progress of the National Broadband Network rollout, the significant gap is indicative of inequality that is experienced.

OzHelp’s partnership with employers helps to mitigate this limitation through the propagation of the notion of a collective responsibility for mental health and health and wellbeing in general. The reduced stigma around mental illness and greater openness towards health and wellbeing that this generates helps to broaden avenues for engagement with services.
References


Wilson, C. (2018, February). OzHelp programme is world-leading in its approach. Statement made by Dr Coralie Wilson, Head, Personal and Professional Development, Graduate Medicine, School of Medicine, Faculty of Science Medicine and Health, University of Wollongong.