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**Mental
Health
Council**
OF TASMANIA



COVID-19 Impacts and Emerging Themes within the Mental Health Sector

Monthly Report, September 2020
Report 5

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About Us

The [Mental Health Council of Tasmania](#) (MHCT) is the peak body for community managed mental health services in Tasmania. We represent and promote the interests of our Members and work closely with Tasmanian Government agencies and Primary Health Tasmania to ensure sectoral input into public policies and programs. We have a strong commitment to enabling better mental health care access and outcomes for every Tasmanian. Our purpose is to improve mental health for all Tasmanians, and our vision is for all Tasmanians to have awareness of, and value, their mental health and wellbeing.

In response to the global COVID-19 pandemic, Federal and State government responded rapidly by implementing a raft of COVID-19 restrictions and social distancing measures in mid-March 2020. In order to clearly understand the impacts on the mental health sector, consumers and their families and friends, MHCT developed a COVID-19 Response and Recovery Strategy. The Strategy incorporates extensive and ongoing consultation which allows MHCT to map how these restrictions and their eventual easing are impacting mental health service delivery in our state. In addition, through engagement with service providers delivering psychosocial supports to the broader population in response to COVID-19, MHCT is also gaining understanding around whole-of-population mental health.

MHCT COVID-19 Response and Recovery Strategy

The strategy consists of three priority groups and through regular consultation and data collection aims to track how COVID-19 is impacting on the mental health sector, consumers, families and individuals experiencing psychological distress due to the pandemic.

- ▶ The **COVID-19 Mental Health Sector Network** aims to track the impacts of COVID-19 restrictions on Tasmanian Mental Health Sector service providers during the restriction period and beyond into the recovery phase. The Network provides a platform to identify the impact of COVID-19 on service delivery, workforce and client needs and will identify and track emerging issues. The network will provide a mechanism to provide direct and timely information to government, agencies and other key stakeholders as COVID-19 restrictions continue and as services respond to the lifting of restrictions.
- ▶ The **COVID-19 Psychosocial Supports Working Group** aims to provide a platform to capture data and evidence of cross-service collaboration to support people who have no history of mental-ill health, but due to the impacts of COVID-19 are experiencing varying levels of psychological distress. The Working Group members will capture shared data and emerging themes to inform State and Federal Government and relevant agencies on the level of demand and need in the Tasmanian community for psychosocial supports and services during the COVID-19 restriction period, into the recovery phase and beyond.
- ▶ The **COVID-19 Mental Health Consumer, Carer, Family and Friends Network** aims to monitor the impact of COVID-19 on people with pre-existing mental health needs prior to the COVID-19 pandemic along with their families, friends and carers. The Network will provide a platform for sharing the voice of lived experience during the COVID-19 restrictions and into the recovery phase. Network members will provide information on emerging themes and issues experienced by people with mental ill-health, their friends and family in relation to COVID-19 restrictions and beyond into the recovery phase. The Network will provide direct and timely information to government, agencies and other key stakeholders as COVID-19 restrictions continue and begin to ease.

Executive Summary

MHCT's COVID-19 September Monthly Report provides insights into the impacts on the mental health sector and the Tasmanian community during a time when Tasmania has remained stable in response to the pandemic. However, borders continue to remain closed and growing apprehension has emerged with regard to the impacts of changes to JobKeeper, JobSeeker and the outcomes of the Federal Budget.

During September, the data gathered through MHCT's COVID-19 networks has indicated an increase in suicidal ideation among new referrals. This suggests that firstly we are now starting to see the impacts of the pandemic on people's mental wellbeing, but also that people are seeking help. However, we must not lose sight of those in our community who may be struggling silently. It is therefore important that our sector and community are well equipped to support people experiencing suicidal distress through approaches to community awareness raising and access to appropriate supports and services.

MHCT has also heard from our COVID-19 Mental Health Sector Network members that there is continued pressure on services. This is in part due to workforce fatigue and recruitment challenges along with new clients presenting with complex social and economic needs that are impacting on their mental wellbeing. In addressing this form of situational distress among Tasmanians, we need to explore innovative strategies for prevention and early intervention, including strategies to increase protective factors and reduce risk factors associated with the distress.

Key actions for consideration

- Explore evidence-based approaches to support suicide prevention initiatives within the whole of population and across the state.
- Address the continued pressure on the community mental health sector, including strategies to support workforce recruitment and configuring services to meet the needs of people experiencing situational distress.
- Refocus on mental wellbeing and prevention, with initiatives and strategies that support people to stay well including employment, health and social initiatives.

Identified impacts during September 2020

Mental Health Service Providers

- From responses to the Mental Health Sector Network survey, service providers noted that anxiety, depression and increased alcohol and drug use were noted as being most frequent presenting issues among new referrals. Family violence and suicidal ideation were also noted as frequently presenting issues.
- In September, service providers noted the types of supports new clients were referred to most commonly, these supports included: acute mental health services such as RHH, ACMHS, CAMHS and private mental health inpatient services, family violence and/or relationship services, alcohol and other drug services, NDIS funded psychosocial supports
- In September service providers continued to provide a mix of service delivery methods including telehealth, face to face supports both onsite and via outreach.

(note: due to limited sample size, results may not be indicative of the whole community mental health sector)

What is driving reduced service capacity?

Since June 2020, the COVID19 Mental Health Sector Network has indicated that service providers are seeing increases in demand, however capacity to support demand has not increased at the same rate. In identifying the causes of these issues further MHCT has heard that workforce fatigue and challenges in recruitment, along with new clients presenting with a range of complex social factors are key aspects contributing to limitations in service capacity.

It is understandable that the pandemic has impacted on the mental wellbeing of all Tasmanians, and with the continuing uncertainty and social and economic impacts of the pandemic, as MHCT's monthly data reports suggest, Tasmanians are experiencing psychological distress related to complex social and economic factors.

Most commonly, these factors have included challenges with substance use, family relationships and violence, and financial distress. To support new clients, several service providers indicated that they are coordinating wrap around supports which sit outside their core service functions. One service provider explained that what should be a 1-hour session is now taking up to 3 hours of work, this then in turn means that other people are missing out on support.

Further work should be considered in how the mental health system may be configured to alleviate these pressures on service providers. In a time when psychological distress is expected to peak in the last half of 2021, work should be done now to consider options for services that can address the symptoms of a person's situational distress, for example, greater focus on early intervention psychosocial services and services that provide coordination of wrap around supports for individuals.

Additionally, MHCT has heard from service providers of the difficulty in recruiting. A sweep of seek.com.au suggests that currently there are 44 vacancies for mental health specific roles across the state. MHCT has heard from providers that recruitment has often come from interstate, however due to the pandemic, this has stalled. Challenges with recruitment and retention in the sector was identified as an issue even before the pandemic but now with increased demand on services, recruitment has never been more important.

Consumers, Carers, Family and Friends

- Consumer representative groups have noted a decline in people wanting to participate in consumer representative roles, where a year ago it was quite a competitive space.
- Consumer representative groups continued to note an increase in anxiety and/or experiencing higher levels of stress due to ongoing uncertainty relating to the pandemic.
- Consumer representative groups noted that at times some consumers are unable to afford the gap payment for their private or primary mental health provider and therefore are looking towards support from public mental health services. Additionally, this has caused consumers to limit the number of appointments to their mental health provider which in turn impacts on managing their mental health.

Addressing loneliness and isolation

Within the first week of lock down, Flourish implemented a state-wide service to their members: Coffee Catch ups. Facilitated by Tash Smyth, each meeting is an hour long, starting with the members discussing how their week has been, giving them the opportunity to vent or celebrate successes. In turn, this gave the other members the opportunity to offer support or advice. With the assistance of the Community Managed Mental Health and Alcohol and Other Drug Sector COVID-19 Technology Fund facilitated by MHCT, Flourish was able to provide regular attendees with a data allowance, ensuring those who were particularly isolated had the opportunity to engage and forge new connections at a time when feelings of isolation and loneliness were most significant.

The results:

As restrictions lifted, the Coffee Catch ups continued with new friendships and social connections formed within a non-judgmental and easily accessible environment. Within this supportive environment, the Coffee Catch ups began to take on a peer support element with members assisting each other through mentoring and giving participants a more meaningful and purposeful role that they may have not had the confidence to pursue before.

As restrictions have relaxed, the anxiety of face to face interactions has not necessarily decreased. Carrying on from the success of the virtual Coffee Catch ups, Flourish introduced a small account with coffee shops in the North and North West of the state where members could participate in 'in person' Coffee Catch ups. The initiative supported people in coming out from behind the comfort of their screens within a supportive space and minimising anxiety stressors in a gentle way.

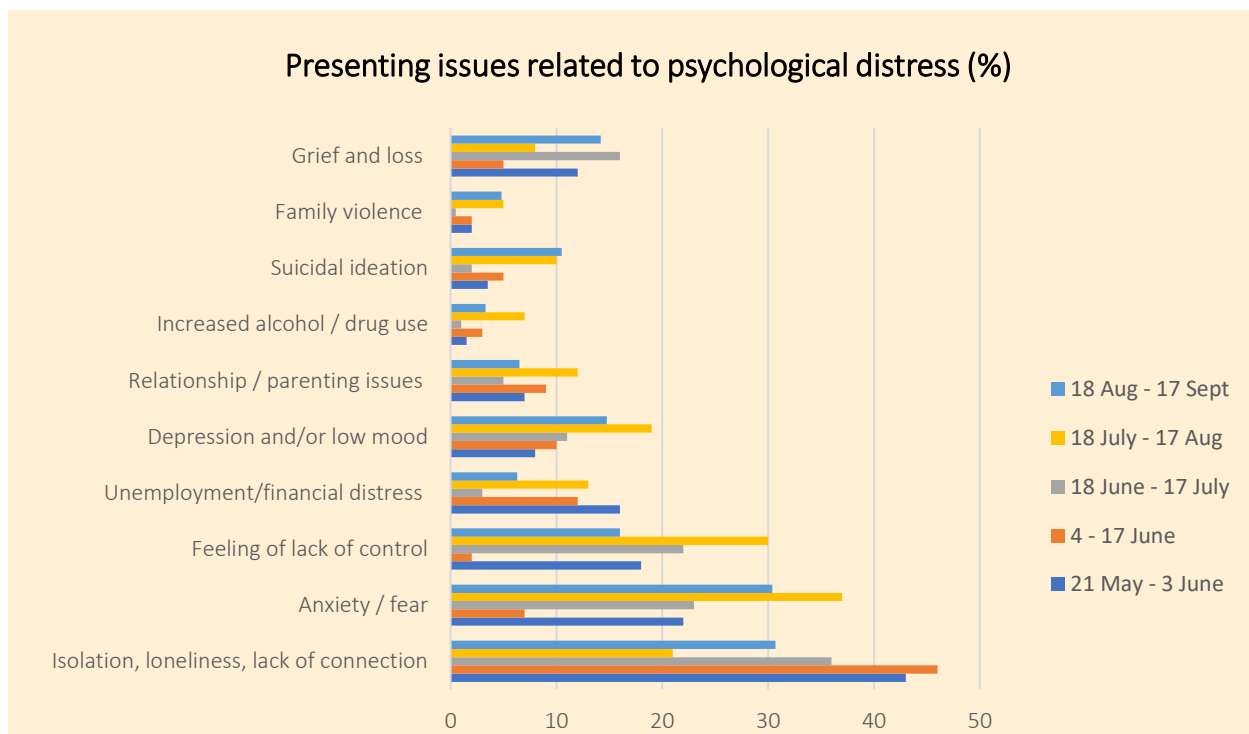
The success of the Coffee Catch ups has led Flourish to employ two part time Recovery Peer Workers. Their role within the organisation is to continue to facilitate and support the Coffee Catch ups. So far in the pipeline there is also the possibility of a book club.

The key takeaway:

The Coffee Catch ups have developed into a strong peer support network based upon kindness, friendship, social bonds and connections as well as the ability to welcome two new staff members to the Flourish family. They are also becoming a key highlight to Tash's week.

Impacts on the mental health of Tasmanians

- Based on the data provided to MHCT, 68.7% of interactions with psychosocial service providers were related to psychological distress. The reasons and issues contributing to psychological distress within the community are indicated in the table below. Of note; grief and loss has considerably increased since mid-August. Anxiety/fear and feeling of loneliness continue to remain the most common presenting issues related to psychological distress.
- The presenting issue of suicidal ideation has been increasing since mid-July 2020, albeit a relatively smaller percentage than other presenting issues (10% 18 July – 17 Aug, 10.5% 18 Aug – 17 Sept).



- 49.3% of interactions indicated that they would like to receive follow up support from the psychosocial support service.
- 65.3% of interactions were advised on self-directed strategies such as mindfulness, self-soothing, diet and exercise.
- 19.5% of interactions were referred onward for further support in relation to psychological distress, of which 11.3% were referred to Adult Community Mental Health Services (ACMHS) and Child and Adolescent Mental Health Services (CAMHS). 31.8% of interactions were referred to Community Managed Mental Health Services.

Economic Impacts on Mental Health and Wellbeing

With the recent release of the Federal Budget, now is a good time to reflect on how COVID-19 has impacted upon the economy and individual employment, and what effect this may have upon the mental health of Tasmanians.

Previous studies that have investigated the impact of economic downturns, such as the Global Financial Crisis in 2007, highlight the correlation between job loss and a decrease in individual mental wellbeing. Job insecurity also had a negative impact, exacerbating existing mental illnesses. These impacts can lead into a self-perpetuating cycle, as individual competencies decline, financial difficulties increase, employment opportunities are restricted by fewer choices, and the risk of experiencing mental ill-health increases. All of which makes it more difficult for an individual to find new employment, and the cycle repeats.

It is important to note, however, that it is not just the workforce who are affected but also children within these families. With the loss of employment, the risk of living in poverty increases, with research showing that children who experience socioeconomic adversity endanger their social, academic and occupational potential as they grow into adulthood.

These impacts were shown to increase the rates of individuals experiencing depression, anxiety, substance abuse and suicide. Australia's experience of the Global Financial Crisis was somewhat alleviated, however, with the introduction of the stimulus package released by the Rudd Government in February 2009. We have not been so lucky with the economic impact of COVID-19.

Early modelling at the outset of the pandemic in Australia, warned of an increase in rates of mental ill-health and suicide, with some statistics warning that rates could increase by up to 25-50% if urgent action was not taken. With the implementation of the JobSeeker and JobKeeper schemes, providing individuals with employment or an income, these mental health risk factors have appeared to be reduced. Yet, with the release of the Federal Budget, the weakening of JobKeeper payments with more stringent conditions, the reduction of JobSeeker payments so they are once again below the poverty line, and with JobKeeper expected to finish in March, along with the JobSeeker Coronavirus Supplement, it is predicted these changes will push 740,000 more Australians into poverty, with an expected 2.1million coming off JobKeeper over the next months. Many of whom are not guaranteed a job to return to.

It is MHCT's hope that the proposed JobMaker, raised within the Federal Budget, to provide a financial incentive for employers to hire individuals on JobSeeker, will assist to cover the shortfalls of JobSeeker and JobKeeper in the months to come. Which in turn may alleviate the psychological distress associated with job and economic loss and insecurity. However, the consensus is, if JobKeeper could be extended beyond March 2021 and the raised rate of JobSeeker sustained, it would go a long way in tackling some of the mental health risk factors caused by COVID-19.

Support numbers

If you are struggling and need to talk to someone, please call:

- Tasmanian Lifeline (8am – 8pm) - 1800 98 44 34

If you or someone you know is experiencing distress, please call:

- Lifeline - 13 11 14
- Kids Helpline - 1800 55 1800
- Mental Health Services Helpline - 1800 332 388

Further information

MHCT welcomes further discussion to support the mental health and wellbeing of all Tasmanians and to ensure the community managed mental health sector is well equipped to meet service demand. MHCT invites government and community stakeholders, MHCT members and other interested stakeholders to contact us to discuss the findings from the September 2020 monthly report or to access the documents below:

- Psychosocial Supports Working Group collated data report 18 July – 17 August 2020

Mental Health Council of Tasmania
29 October 2020