

Submission to the Productivity Commission Inquiry into the Economic Impacts of Mental ill-health.

**Response to Issues Paper: The Social and
Economic Benefits of Improving Mental Health,
Productivity Commission, January 2019**

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Summary

OzHelp Foundation considers that all workplaces should have access to the types of mental health and suicide prevention services and supports which organisations such as OzHelp provide. This means:

- Easily accessible workplace services which are focused on proactive prevention and early intervention, with ability to escalate quickly to intensive interventions where needed
- Empowerment and support for employees to grow life skills and resilience, to engage in self-care, and to look out for each other
- A co-designed approach between employers, management and employees which overcomes barriers caused by stigma and discrimination
- Access to data and benchmarking information which enables employers to track the mental, physical, social and emotional wellbeing of their own workplaces, as well as to compare the wellbeing of their workplaces with like organisations.

OzHelp Foundation considers that all workplaces should have access to mental health and suicide prevention services.

Savvy employers need to move beyond “wellness programs” and Employee Assistance Programs – the ambulance at the bottom of the cliff – to focus on the physical, mental, social and emotional needs of their employees. Distress, anxiety and depression in the workplace can be heightened by all manner of factors, whether it be work-life balance, lack of social connectedness, bullying, discrimination, absence of meaningful work, or personal finances.

Given how much of our waking time is spent at work, and how much of an impact our work has on our lived environment – with family, friends, work colleagues and community – the strong relationship between our working lives and personal health and wellbeing needs to be nurtured and supported.

Most CEOs and Boards claim that their most valuable asset is their staff. If that is to be lived out, they therefore need to wrap their supports and services around the needs of staff – as teams and individuals. If scarce resources are to be spent on those highest priorities which reap economic rewards, then investment in mentally healthy workplaces must be a priority

However, implementation of a mentally healthy workplace approach across industries have been slow to gather momentum relative to traditional workplace health and safety programs which have tended to focus on physical safety.

OzHelp agrees that businesses that invest in mental wellbeing are likely to increase profitability through a more productive workforce, and to recruit and retain skilled employeesⁱⁱⁱ. These benefits accrue through reduced absenteeism and presenteeism, reduced staff turnover (and consequently reduced recruitment, backfilling and training costs) and increased participation and productivity. They also benefit employees, their families and the communities in which they live and socialise.

OzHelp considers that strong evidence about what works has been identified, including through the work of the National Mental Health Commission (NMHC)ⁱⁱⁱ and the Mentally Healthy Workplace Alliance (MHWA)^{iv}, with substantial resources, tools and support available for businesses (large and small), Boards, managers, and employees through the Heads Up campaign^v.

Progress has been made in increasing the focus on mental wellbeing through work health and safety, however **in many workplaces the focus on physical health and safety still far outweighs the focus on mental wellbeing**. Workers, who may be highly stressed for a range of reasons, may be offered wellness programs such as exercise classes and dietary advice, yet OzHelp's experience is that the people who would benefit the most from such programs are those who are least likely to take them up. OzHelp's holistic approach and its pathways of support makes it possible to bridge the gap with high risk individuals by providing personal support and counselling to identified individuals to aid in their ability to follow up on necessary and suggested action.

While the **significant productivity and profitability improvements available through developing a mentally healthy workplace should be incentive enough for employers** to engage in effective programs, OzHelp considers that **more needs to be done by governments and employers** through use of positive incentives for change, as well as levers or interventions for those workplaces which do not and cannot demonstrate a mentally healthy workplace.

Given the disjointed and inconsistent approach to ensuring mentally healthy workplaces, governments should intervene to ensure mentally healthy workplaces through registration, accreditation, certification and regulatory compliance requirements. Governments, employers, regulators – even all the partners involved in the MHWA – cannot succeed alone; they need the evidence and experience built up by organisations such as OzHelp which can provide hands-on implementation support within the workplace and thus work with employers and employees in a non-threatening way.

OzHelp was established to respond to deaths by suicide among hard to reach workers – those least likely to seek help: blue collar workers in male dominated industries and beginning in the building and construction industries. Over time, OzHelp has expanded into other male dominated industries such as forestry, mining, farming, logistics and transport, and subsequently into broader workforce sectors, including police, education, the insurance industry, local councils and the public service.

Our services have developed so that now OzHelp takes a holistic approach to worker wellbeing, recognising the interconnections between suicide prevention, mental, physical, social and emotional wellbeing, and the social determinants of health (e.g. financial security, family relationships, stable housing). Our increasing use of technology also has enabled us to expand our programs so that any employer can access our services, even in hard to reach, high risk and remote settings such as remote and geographically spread cattle stations. Our evidence based programs continue to demonstrate their impact on the lives of people, both at work and in their daily lives.

However **hard to reach workers in male dominated workplaces remain OzHelp's first priority**, and this focus is backed up by recent research which shows they are up to 7.5 times more likely to die by suicide than the general population^{vi}.

It is for this reason that OzHelp recommends that incentives be provided to enable our holistic and wellbeing programs to be delivered in all workplaces over time, to provide support and care for those at risk and beginning with those industries where workers are identified as highest risk – with young male blue collar workers, with a particular focus on regional and rural areas, the Aboriginal and Torres Strait Islander workforce and people in trauma-related professions, being the highest priorities.

OzHelp also recommends normalising training within all workplaces on wellbeing and suicide prevention including training on identification of indicators of risk among work colleagues.

OzHelp considers that, while the impact of suicide on families and communities has been identified in the Productivity Commission Issues Paper, *The Social and Economic Benefits of Improving Mental Health* (January 2019), further consideration needs to be given to the economic impact of suicide either in the workplace, or of a work colleague away from the workplace – what is referred to as “the ripple effect” (see below). This ripple effect needs to take into account the impact of suicide on a job, a team, a worksite and a company. While a thorough costing study has not been undertaken, organisations which OzHelp has worked with estimate costs as high as \$1.5 - \$2 Million for each employee who dies by suicide.

OzHelp is optimistic that this inquiry will be a circuit breaker in setting new and clear directions for improving mental health and wellbeing in the workplace. However, the development and examination of evidence of what works – domestic and international – cannot cease when the inquiry is completed.

OzHelp therefore considers that health and wellbeing at work should be established as a Medical Research Future Fund Mission and that substantial research funding should be provided in this area should including for development of a National Institute in Work Health and Wellbeing.

Case Study

A model of care that leverages a public and private partnership to apply limited resources to gain maximum impact.

OzHelp's model of care and support includes a strong emphasis on leveraging limited resources to gain maximum impact through vehicles such as public-private partnerships, engaging funders, employers, employees and providers.

For example, a part of its suicide prevention plan, the Northern Territory Department of Health provided OzHelp with a \$10,000 grant to provide services into remote cattle stations. OzHelp used the funds to partner with Consolidated Pastoral Company (CPC), a large, privately owned, Australian business which operates vast cattle stations covering more than 5.8 million hectares and managing more than 370,000 cattle, in Western Australia, the Northern Territory and Queensland.

In December 2018, OzHelp staff drove to Katherine where they then were flown by CPC to two remote stations to deliver a hybrid of the Workplace Tune Up (WTU) program to 38 people. Of these, 28 people completed the WTU with 14 individual support follow-ups. CPC was so pleased with the results that they have now asked OzHelp to develop a program to roll out across all 17 stations in the NT and WA.

This project is an excellent example of the broad reach of OzHelp into remote Australia, as well as demonstrating that a little funding can go a long way – the \$10,000 from the Northern Territory Health Department has been leveraged to provide a multiplier effect through the partnership with CPC and is enabling better access for services for people living in rural and remote locations who otherwise would not get access to virtually any types of wellbeing services.



The feedback on the program was overwhelmingly positive. The gratitude displayed by workers was extremely humbling. These are people in locations that sit very clearly in the category of hard to reach, isolated workers. Workplaces do not have services on their doorstep, to even be seen by a doctor could be at least an hour away by air.

Cristene French, OzHelp Regional Manager NT

Performance, reports and benchmarks

One of the benefits of the OzHelp approach is that our data systems enable organisations to benchmark themselves against other similar companies.

“Finally, a program that pro-actively screens and supports the individual health and well-being of our employees while at the same time giving us a comprehensive benchmarked data report on the whole workforce.”

**HR Business Partner –
Defence Industry**



The Workplace Tune Up (WTU) online assessment tool provides employers with a benchmark report that provides an initial snapshot of their workforce's overall health and wellbeing.

The WTU report measures individual workplaces against industry benchmarks that are based on a number of validated and reliable measures including: the Warwick-Edinburgh Mental Wellbeing scale (WEMWBS), the Australian type 2 diabetes risk assessment tool (AUSDRISK), the Stanford Presenteeism Scale (SPS-6) and chronic disease risk assessment.

The data in the initial report is de-identified and is intended solely to give a snapshot of an organisation's mental and physical wellbeing. The responses from participants are collated and analysed, with a report to management on:

- The priorities for action as identified by employees (which may be different from what management had perceived to be the priorities) and
- Benchmarking information on where the organisation sits when compared to other similar workplaces.

The WTU is endorsed by Nutrition Australia (ACT) and was designed in collaboration with the University of Wollongong Graduate School of Medicine.



OzHelp provided wonderful support to the project and had a very positive impact on many workers who faced significant personal challenges during the journey – we are really grateful for that.

Vince Kenny, General Manager Construction, for the giant Inpex Ichthys oil and gas onshore project

Solutions

OzHelp's overarching recommendation is that holistic mental health and wellbeing programs should become normalised in all workplaces over time.

Accreditation, standards, awards and regulation

1. A mixture of accreditation, standards, awards and regulation should be developed and implemented to ensure programs such as OzHelp's holistic health and wellbeing programs are increasingly available and become normal in all workplaces over time, to promote mentally healthy workplaces and provide support and care for those at risk.

- This should begin with those industries where workers are identified as highest risk – with young male blue collar workforces, with a particular focus on regional and rural areas, the Aboriginal and Torres Strait Islander workforce and people in trauma-related professions, being the highest priorities.
- Over time, all workplaces should be required to undertake a risk assessment of mental health and safety, beginning with a particular focus on those most at risk, and to implement a planned response to those risks.
- Training should occur within all workplaces on wellbeing and suicide prevention including identification of indicators of risk among work colleagues.
- Any mandatory requirements on mental health in the workplace should adopt a holistic, whole of person approach which does not separate out mental wellbeing and which is stigma-free, safe and non-discriminatory.
- The approaches adopted should be developed with substantial engagement and participation of people with lived experience, as well as families and other support people.

Employers

2. Employer engagement and participation in the system of accreditation, standards, awards and regulation should be required, with public leadership from industry champions who already are well advanced in developing mentally healthy workplaces.

- Employers should lead development and implementation of non-stigmatising and non-discriminatory programs in the workplace where employees have the opportunity to co-design the approach and participate in a way which focuses on their sense of self, their wellbeing, and their support for each other.
- These programs should be based on the best practice principles identified by the Mentally Healthy Workplace Alliance (MHWA) and, once it is developed, adopt the approaches proposed in the National Workplace Mental Health Handbook (see below).
- Workplaces should be benchmarked (de-identified) with like workplaces on their workplace mental health and wellbeing so that they can gain a true picture of their performance and opportunities for improvement.
- Demonstrated leadership in developing a mentally healthy workplace should be included in accreditation and standards applied to organisations, and a system of industry awards should be developed and given a high profile.
- Boards should require development of a mentally healthy workplace as a standard inclusion in CEO performance agreements. The Australian Institute of Company Directors could provide leadership on good practice and good governance in this area.
- Head contractors should have moral and financial responsibility for the health and wellbeing of subcontractors.

Partnering with the insurance industry ^{vii}

With mental ill-health taking up an increasing proportion of claims within the insurance industry, numerous opportunities are arising with parties interested in improving mental health outcomes, most notably through life insurers such as TAL, Super Funds such as CBUS and workers compensation providers such as Allianz. Life and workers' compensation insurers are looking to invest in preventive programs in a manner that can reach and support their customers within high risk industries via innovative means. This model of funding and reaching at risk individuals represents an excellent example of innovation in funding source and in leveraging opportunities to engage at risk individuals with services.

Government

3. The Australian Government should support and fund the National Workplace Initiative (NWI), which is the culmination of five years of collaboration by the MHWA, to:

- Develop a definitive National Workplace Mental Health Handbook, detailing “what works” and clear, step-by-step processes for taking action: the Handbook should support employers and managers to enable them to better manage engagement with people with lived experience, their families and other support people and should be based on the National Framework for Recovery-oriented mental health services: Guide for practitioners and providers – a guide developed for clinical settings but one well suited to be developed into a resource for businesses, large and small.
- Develop a suite of simple, practical implementation guidance material
- Engage expert organisations such as OzHelp Foundation to provide hands-on implementation support, to help workplaces navigate, develop, implement and measure workplace mental health strategies.

4. Recognising the challenges for small businesses, government support should be provided to enable them to participate in mentally healthy workplace initiatives: there will be a return on investment for governments through increased productivity, taxation revenue and reduced costs through the health and welfare systems.

- This should include incentives which support those small businesses which demonstrate commitment to developing a mentally healthy workplace, through voluntary, accreditation or certification arrangements, or through support for participation in programs which enable small businesses to demonstrate their ability to participate in government programs and tenders.

5. Governments should increasingly promote the implementation of health and wellbeing programs in businesses including through the introduction of registration, accreditation, certification and regulatory compliance requirements.

- Nationally agreed standards of effective workplace based prevention programs should be developed, with funding to assist with the delivery of ‘healthy living programs in workplaces’ which are focused on the needs of individuals as additional to any existing broad health promotion programs.
- Funding and access to tenders from all governments should include weighting for assessment of demonstration of a mentally healthy workplace.

6. Government should fund the development of an awards program – potentially using a Star Rating system, with different requirements between industries, and between the size of businesses –to enable public identification of the mental health of different workplaces, through a participatory approach involving employers, employees, unions and other key stakeholders.

This could be led by the MHWA and overtime would develop into a highly useful resource for potential employees.

7. Governments and the insurance industry should work together to create incentives and levers to ensure insurers engage with organisations providing services such as OzHelp to provide hands-on implementation support in improving the focus on prevention and early intervention in mental health and wellbeing.

- This should include joint funding between government, employers and the insurance industry to identify evidence of the costs to businesses of suicide among the workforce – the “ripple effect” – and to demonstrate the benefits of wellbeing and suicide prevention programs in the workplace.

8. The Australian Government should allocate substantial funding from the Medical Research Future Fund (MRFF) to establish a Research Mission in workplace health and wellbeing and to develop further evidence of best practice in the workplace.

- This should include funding for a new National Institute for Work Health and Wellbeing to establish a Centre of Excellence in workplace physical, mental, social and emotional wellbeing, and to support translation of evidence into practice.
- It should include a strong focus on developing evidence about the impact of workplace mental health and wellbeing programs on economic and social participation, productivity and the Australian economy.

About OzHelp

OzHelp is currently connected with more than 300 workplaces in high risk and hard to reach industries and numerous industry bodies. Outcomes reported in the past twelve months that are indicative of the effectiveness of OzHelp's programs in building the capacity of mentally healthy workplaces through increasing awareness, reducing stigma, reaching and identifying at-risk people, improving help seeking behaviour and providing early interventions are:

2,894

Provisions of support and counselling

2,634

Health screening and interventions

4,940

People received mental health training

19,243

People reached through active health promotion

6,509

Instances of community engagement and relationship building

The suite of programs and services that OzHelp provides in mental health and suicide prevention are designed to build individual resilience and capacity for self-help. Our partnership development work is designed to provide a more integrated, coordinated and efficient approach to reducing suicide and improving mental health and wellbeing in workplaces, with a strong emphasis on train the trainer approaches – the identification of Champions or Ambassadors in organisations, to embed ownership of the programs in the workplace.

While OzHelp has been able to substantially expand its services through use of online technology, the model of care involves a combination of online and face-to-face services and support. Our physical and mental health screening and training programs vary in duration and are now available in multiple delivery modes including online. OzHelp programs increase physical and mental health literacy and help-seeking behaviours, and improve the resilience of individuals to access support for themselves and their colleagues.

Importantly, we also provide a pathway of support according to need for employees, either through our own counselling and wellbeing support services, or by referral. Our programs are evidence based, scalable, accessible to any workplace or community nationally and are cost effective.

Healthy solutions through a longstanding partnerships

The founding of OzHelp provides a useful case study of the types of partnerships which can make a real impact in mental health and suicide prevention in the workplace. OzHelp's formation involved an unusual partnership between the Master Builders Association (MBA) and the Construction, Forestry, Mining and Energy Union (CFMEU) when their leadership at the time jointly recognised the imperative of tackling suicide together.

OzHelp's first program was developed for apprentices as part of the CFMEU's Group Training Organisation (CITEA) training and MBA training which focused on improving mental health and life coping skills. The partnership has continued to this day, with representatives from both the MBA and CFMEU occupying Director positions on OzHelp's skills-based Board. They have been supported by other long-term partners such as ACT law firm Meyer Vandenberg and PBS Building (formerly Prestige Building Services).

Ozhelp has delivered a range of evidence-based programs over the past 17 years, with those programs subject to review and update on the basis on evaluation and client feedback.

Workplace Tune Ups (WTUs)



Delivered online and in person as part of a holistic approach to assess the wellbeing of both individuals and workplaces, provide follow-up for those at risk (including referrals to other services where necessary), develop improvement plans with individuals and workplaces, and being accessible from anywhere in Australia.

A.L.E.R.T



45-minute support program to increase awareness and understanding about mental health, resilience and suicide prevention.

ASIST



A two day interactive workshop for managers on suicide first aid.

Wellbeing Training Programs



Hard-Hat Chats and Wellbeing at Work (W@W).

Tradies Tune Ups (TTUs)



Provided face to face in work sites at the start of the working day.

Life Skills Tool Box



Presented as part of apprenticeship training.

Strengthened for Life & Conversations for Life



Full day and half day workshops on suicide prevention delivered face to face.

OzHelp integrates its services with Employee Assistance Programs wherever they are needed across Australia to ensure a seamless approach – a single access point and easily accessed pathway. OzHelp also provides short-term counselling services, with counselling sessions which can be either face-to face or on the phone – whichever is more convenient for the client.

In addition, clients who are identified as at risk through the WTU online assessment will be contacted by phone by a Wellbeing Team Member, to provide support and guidance, to help them develop plans and/or tools to address the concerns they have, or guide them to other services eg. a counsellor, their GP, psychologist, or crisis assessment and treatment team.

OzHelp's business model of combining government funding with employer investment in worker health and wellbeing provides demonstrated potential for significant leverage in the workplace, to ensure the broadest range of workers in industries with high mental ill-health and suicide risk have access to our world leading, data informed, holistic health and wellbeing products and services.

Response to the Productivity Commission

OzHelp will focus its response to the Issues Paper on those issues which are central to our experience and expertise – workplace mental health and wellbeing, and suicide prevention, with a particular focus on the Issues Paper section on Mentally Healthy Workplaces. The Productivity Commission raises the following questions on mentally healthy workplaces, OzHelp has combined some of the questions and responses as they overlap.

1. Types of interventions

What types of workplace interventions do you recommend this inquiry explore as options to facilitate more mentally healthy workplaces? What are some of the advantages and disadvantages of the interventions; how would these be distributed between employers, workers and the wider community; and what evidence exists to support your views?

OzHelp strongly supports the work done by the NMHC and the MHWa in developing the evidence and approach to the development of mentally healthy workplaces. The resources, tools and support provided by Heads Up, to enable employers to participate and succeed in developing mentally healthy workplaces, are excellent.

However, as Harvey et al stated in their seminal 2014 report for the NMHC, Developing a mentally healthy workplace: A review of the literature^{viii}:

“There is often a wide gap between what is published in academic journals and what occurs in workplaces.”

There are programs in place to support people with mental ill-health and wellbeing issues to gain access to work, indeed the benefits of stable, supportive work on people’s mental wellbeing have been identified as substantial. The Federal Government does and should play an important role in this area. There is no doubt these supports can be improved. There are few mechanisms available to track the impact of the workplace on people’s lives. A poor workplace culture can have a huge impact on individual health and wellbeing. In addition, and particularly for young people, the transition from education to work – often accompanied by moving from the parental home, being self-supporting and developing relationships – is a highly challenging stage within life. The benefits and challenges of the workplace can either support resilience or break it down.

OzHelp applauds those who have come forward – initially with the ACT Government, the Master Builders Association and the CFMEU – to support the work OzHelp has undertaken in working with and supporting those at risk in the workplace. Importantly, this approach has focused first on the needs of the individual, not first on the needs of the employer. If the needs of the individual are met, that flows on to benefits for the employer – both financially and as caring employers.

Hence there may be some benefits in systemic wellness programs such as exercise classes, advice on diet, and slogans in the lift about organisational values. However, our experience is that those most in need do not participate and do not respond to these types of approaches.

OzHelp therefore recommends that non-stigmatising and non-discriminatory programs should be developed and delivered in workplaces where employees have the opportunity to co-design the approach and participate in a way which focuses on their sense of self, their wellbeing, and their support for each other.

Workplaces should be benchmarked (de-identified) with like workplaces on their workplace mental health and wellbeing so that they can gain a true picture of their performance and opportunities for improvement. Priority should be given to those industries and sectors which are most at risk, but over time the requirement to participate in these types of programs, and to benchmark with others, should be extended across all Australian businesses.

Recognising the challenges for small businesses, government support should be provided to enable them to participate; there will be a return on investment for governments through increased productivity, taxation revenue and reduced costs through the health and welfare systems. OzHelp supports Australian Government funding for the National Workplace Initiative (NWI), which is the culmination of five years of collaboration by the MHWA, to:

- Develop a definitive National Workplace Mental Health Handbook, detailing “what works” and clear, step-by-step processes for taking action
- Develop a suite of simple, practical implementation guidance material
- Engage expert organisations such as OzHelp Foundation to provide hands-on implementation support, to help workplaces navigate, develop, implement and measure workplace mental health strategies.

Ambassadors

OzHelp’s approach involves training and development of ambassadors within organisations, to embed programs on a lasting basis within the workplace. Ambassadors are trained to:

- Rollout programs and be a contact point for staff
- Identify issues and respond
- Refer staff where necessary to company and area specific referral pathways.

They undertake mental health awareness training including:

- Delivery of the ALERT program to the workforce
- Delivery of Wellbeing @ Work
- Rollout of the Workplace Tune Up program.

Mechanisms are put in place to ensure ambassadors engage in, are supported by, and learn from ongoing Network with other ambassadors.

Why does it work?

OzHelp delivers a partnership involving whole program design in best practices in corporate wellness:

- Active support and participation by senior leadership
- Workplace health as a shared responsibility
- Engagement of key stakeholders
- Participatory planning and design
- Targeted workplace health interventions
- High levels of program engagement
- Innovative marketing and communications
- Evaluation and monitoring
- Commitment to ethical business practices
- Is sustainable

2. Employer pursuit of potential gains

Are employers pursuing the potential gains from increased investment in workplace mental health which have been identified in past studies? If so, which employers are doing this and how? If not, why are the potential gains not being pursued by employers?

OzHelp's practical experience indicates that employer engagement, and their realisation of potential gains, is patchy. Our experience is that many employers consider they have gone far enough by meeting work health and safety requirements. They do not appreciate the potential gains of engaging more fully with individuals within their workforce, nor understand the impact which their workplace may be having on employees, often manifesting issues which sit outside the workplace eg. relationships, financial hardship, work/life balance.

OzHelp has worked closely with a range of organisations in a number of different sectors where they have realised the significance of developing a mentally healthy workplace based on the needs of individuals. This includes:

<p>Government: Australian ACT Northern Territory</p> <p>Primary Health Networks: Western NSW PHN</p> <p>Local government: Goulburn Mulwaree Council Bourke, Orange, Mudgee, Brewarinna, Shellharbour and Bega Valley Regional Councils (NSW)</p> <p>Education: CIT (ACT)</p> <p>Transport: Solstad Offshore (service and supply shipping WA) Jim Pearsons Transport (trucking) Transport Canberra</p>	<p>Regulators: SafeWork NSW National Safety Commissioner National Heavy Vehicle Regulator Skills Canberra</p> <p>Construction industry Fulton Hogan (National) Monadelphous (NT) Kaefer (Construction NT) Downers (Construction NT) GEOCON (Construction ACT) Hindmarsh (Construction) Lend Lease (Construction) PBS Building (Construction National)</p> <p>Agriculture: Consolidated Pastoral Company (National)</p>	<p>Mining: Woodside (WA) Cooper and Oxley (WA) Fortescue (WA) INPEX. JKC joint venture (Oil and Gas – NT)</p> <p>Utilities: ACTEW AGL EVO Energy</p> <p>Emergency services Australian Federal Police Association, Australian Federal Police (National)</p> <p>Insurance: TAL</p> <p>Manufacturing: Ampcontrol (National) Timberlink (National)</p>
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Where employers are not vigorously pursuing the potential gains from increased investment in workplace mental health, OzHelp considers this is due to a lack of leadership, and a lack of understanding by leadership, on the benefits of developing a mentally healthy workplace. Many organisations approach workplace mental health as a “tick-the-box” issue rather than realising the potential benefits to them. In many industries, OzHelp still finds a strong “them and us” culture between management and employees. Management expects employees to perform their duties regardless of what is going on in their lives (and in the workplace), employees are concerned about stigma and discrimination – including lack of future promotion opportunities – if they expose themselves and their vulnerabilities.

OzHelp supports the approach by the MHW that workplaces that support the mental health of all employees can reduce absenteeism and presenteeism and increase employee engagement and productivity.

Fundamentally, the MHW identifies commitment and leadership support as the first key to success^{ix}:

“Creating a mentally healthy workplace needs to be as important for organisations as creating a physically healthy workplace. Ultimately, workplace health is a leadership issue, and change must start at the top. Organisational leaders play a critical role in driving policies and practices that promote mental health. They are able to positively influence workplace culture, management practices and the experience of employees.”

OzHelp recommends that demonstrated leadership on developing a mentally healthy workplace should be included in accreditation, certification, standards and regulations applied to organisations, and should be a standard inclusion in CEO performance agreements. The Australian Institute of Company Directors could provide leadership on this issue.

An awards program – potentially using a Star Rating system, with different requirements between industries, and between the size of businesses – should be funded and developed to enable public identification of the mental health of different workplaces. Over time, this would develop into a highly useful resource for potential employees. Funding and access to tenders from all governments should include weighting for assessment of demonstration of a mentally healthy workplace.

3. Carers and the workplace

What are some practical ways that workplaces could be more flexible for carers of people with a mental illness? What examples are there of best practice and innovation by employers?

A practical and desirable way to create more flexible workplaces for carers of people with a mental illness would be to include in the proposed *National Workplace Mental Health Handbook*, to be developed under the proposed National Workplace Initiative from the MHW, guidance for employers on how to enable engagement and participation of families and other support people as carers.

The engagement and participation of families and other support people within the mental health system is widely regarded as a best practice approach (albeit there remain significant gaps between theory and practice). It is not OzHelp’s experience that this is widely practiced across workplaces more broadly, and indeed most employers are likely to have little knowledge about how best to go about doing this, and what their duties and responsibilities are in this area.

OzHelp therefore recommends that funding for the NWI should include requirements to include in the proposed *National Workplace Mental Health Handbook*, and subsequent education and training, guidance for employers and managers to enable them to better manage engagement with people with lived experience, their families and other support people. That guidance should be based on the *National Framework for Recovery-oriented mental health services, Guide for practitioners and providers* – a guide developed for clinical settings but one well suited to be developed into a resource for businesses, large and small.

The choice of involving a carer is a matter for individuals: “Nothing about us without us” means individual employees make decisions about whether to involve their families and other support people.

Where employees choose to involve their families or other support people, those people – carers or whatever other term they may be known by – should be Implementing, delivering and evaluating supports, systems and services, where consumers, carers and professionals work in an equal and reciprocal relationship, with shared power and responsibilities, to achieve positive change and improved outcomes.

Best practice and innovation by employers can be facilitated by adopting the concepts and practices of employers engaging with carers encapsulated in the *National Framework for Recovery-oriented mental health services: Guide for practitioners and providers* :

“Recovery-oriented approaches offer a transformative conceptual framework for practice, culture and service delivery in mental health service provision. The lived experience and insights of people with mental health issues and their families are at the heart of recovery-oriented culture.... Recovery approaches challenge traditional notions of professional power and expertise by helping to break down the conventional demarcation between consumers and staff. Within recovery paradigms all people are respected for the experience, expertise and strengths they contribute. Recovery-oriented approaches focus on the needs of the people who use services rather than on organisational priorities.”

The recovery framework consists of 17 capabilities, grouped into five fields of practice known as ‘practice domains’, with Domain 1 – Promoting a culture and language of hope and optimism – being the overarching domain and integral to the other domains.

The framework was endorsed by all Australian Governments in 2013 with a commitment to its promotion and implementation by all services. The National Framework is a powerful and comprehensive tool which was developed through a thorough consultative process. It remains as relevant today as it was six years ago: indeed, its comprehensive and effective implementation would overcome many of the barriers which still impede effective and safe engagement and participation by people with lived experience, their families and other support people. As the National Framework concludes:

“Application of this framework will contribute to improved mental health and wellbeing as people are supported in new ways to lead fulfilling and contributing lives. The framework will foster new and innovative service designs, and in particular services designed and operated by people with lived experience of mental health issues. All Australian jurisdictions and all mental health services have a responsibility to promote and implement the framework.”

Where the individual consents, and yet there is exclusion of families and other support people, this can be highly stigmatising and discriminatory for those involved, and runs counter to the principles of the recovery framework and **Capability 2F: Responsive to Families, Carers and Support People**⁴¹:

“Recovery-oriented practice and service delivery recognises the unique role of personal and family relationships in promoting wellbeing, providing care, and fostering recovery across the life span, and recognises the needs of families and support givers themselves.”

Capability 2F includes the following core principles:

- A person’s ability to fulfil their roles and responsibilities within significant relationships can promote and sustain personal recovery efforts; a person’s parenting roles and responsibilities are particularly important.
- The important roles played by family members, carers, peers and significant others is acknowledged and supported in contributing to the wellbeing of people experiencing mental health issues.
- Families, carers, significant others and peers are viewed as partners.
- Mental health practitioners and services acknowledge and are responsive to the needs of families, friends and other carers for information, education, guidance and support for their own needs as well as to enable them to assist a person’s recovery.
- Choices about the involvement in personal recovery of family and significant others rests with the person living with mental health issues, with due consideration for what is age appropriate.

An important element of a family oriented approach to recovery is to include not only people with lived experience but also families and other support people in training and development about how they can effectively engage and participate, as well as in them contributing their knowledge and experience in the training and development of the clinical and non-clinical workforce

OzHelp recommends that workplace approaches to mental health and wellbeing should include substantial contributions from people with lived experience, as well as families and other support people.

Supporting AFP Members

A partnership approach between the Australian Federal Police, Australian Federal Police Association (AFPA) and OzHelp.

The AFPA has advised OzHelp that, while it is impossible to measure the actual cost in social, emotional and economic terms of the death of an AFP Officer by suicide, internal estimates for the cost of replacement of an Officer (from a Human Resources perspective only) accrue to \$1.5 - \$2.0M. This figure does not account for the consequent emotional impact on the people around the Officer nor economic loss of productivity.

The AFPA, on behalf of its 4,500 members, is partnering with OzHelp to introduce a comprehensive mental health early intervention program to improve the mental health and resilience of its members and reduce the risk of mental illness and suicide of AFP members. This package of additional supports will address the stresses and transition points that affect AFP personnel's social, emotional and mental wellbeing, effectively complementing the clinical programs already in place.

Key to the success of the OzHelp early intervention approach is that it comes from outside of the chain of command and hence overcomes the internal AFP cultural issues of non-reporting due to stigmatism, mistrust of the chain of command and consequent career risk. In simple terms the Officers (Members) are more likely to talk to a trusted support worker than anyone from within the chain of command, recognising that 'talking' about the issues impacting a person's mental health is the first step in ensuring ongoing wellbeing and reducing the risk of harm and suicide.

The key components of this program allow AFP Members to access trusted external support specialising in the specific issues facing the AFP workplace and include:

- Holistic health assessment across the whole workforce, not just those who present with concerns of mental ill health.
- Education and information provided by experts on mental health and wellbeing focused on risk factors and protective factors specific to AFP personnel.
- Establishment of trauma informed in group mentoring program to assist members to navigate through trauma, transition and internal investigation.
- Emergency Assistance Program incorporating access to psychologists and counsellors specialising in the specific AFP workplace and emergency services demographic.

4. Workplace interventions

How can workplace interventions be adapted to increase their likelihood of having a net benefit for small businesses?

OzHelp agrees with the Issues Paper statement that “small businesses could find it particularly challenging to implement measures to make their workplaces more mentally healthy, given their limited resources and smaller size over which to spread the fixed cost of any initiatives. Of interest, is the extent to which industry associations, professional groups, governments and other external parties can and should assist small, and other, businesses to reduce implementation barriers and costs.”

OzHelp’s experience with small business largely has been with subcontractors: building and construction sites tend to subcontract with small business for a majority of their work.

In these circumstances, OzHelp recommends that it is reasonable for these head contractors to take responsibility for the health and wellbeing of their subcontractors.

For other small businesses, OzHelp recommends that the Australian Government provide incentives to support those organisations which demonstrate commitment to developing a mentally healthy workplace, through pursuit of accreditation or certification arrangements, or other actions to demonstrate their ability to participate in government tenders where those tender arrangements require demonstration of commitment to develop and maintain mentally healthy workplaces.

This recognises that Governments can use their investment and purchasing power to effectively promote good WHS practice, including mentally healthy workplaces: however, for small business, this can be a burden which may exclude them from opportunities which are more easily attained by big business because of their economies of scale. Hence small businesses may need financial or other supports to achieve standards in mentally health workplaces and remain competitive and profitable.

5. Role of other parties

What role do industry associations, professional groups, governments and other parties currently play in supporting small businesses and other employers to make their workplaces mentally healthy? What more should they do?

To quote the Global Wellness Institute:

“As the human race accumulates material abundance, vast stores of knowledge, and ever increasing volumes of information, we are also facing a quagmire of socioeconomic, health, geopolitical, resource, and climatic challenges. There is a rising epidemic of an unwell workforce, which our global economy and local communities can scarcely afford...”

“The world’s 3.2 billion workers are increasingly unwell: they are growing old; they suffer more chronic disease; they are stressed, unhappy, and sometimes unsafe at work; and they face significant economic insecurity. The economic burden of unwell workers – in both medical expenses and lost productivity – is enormous, possibly reaching 10-15 percent of global economic output.”^{xiii}

OzHelp considers that the issue of mentally healthy workplaces needs to be escalated to the point where Industry and Professional Associations, Governments and large companies play a role in working together to take action. As the Issues Paper has identified, this is a massive issue and has a major impact on productivity, profitability and growth.

The challenge is to move from being “nice to do” to being “have to do”.

OzHelp considers that the predictions about the future by the Global Wellness Institute, in its 2016 article, *The Future of Wellness at Work*, are worthy of consideration:

- Companies and governments will be highly motivated to reverse the current trend of an unwell workforce.
- Wellness at work is a sustainable movement that will gain momentum across the world in the coming 5-10 years.
- Workplace wellness programs – as we know them today – will disappear.
- Individuals will take more responsibility for their own wellness in the context of work.
- Companies must adopt a culture of wellness as the default, not the exception, if they want to attract and retain good people.
- Companies will recognise that doing right by employees and the community is good business.
- Governments will become more aggressive about mandating wellness, including in the workplace.
- The healthiest workplaces will be a destination where people go to improve their own wellness.

As the Global Wellness Institute states, wellness at work must be viewed through a wider lens. To prepare for the future of work and to harness the potential of wellness, they propose a new vision for wellness at work:

“Wellness at work is the right to work in a manner that is healthy, motivating, and edifying. Everyone – workers, managers, and business owners – should endeavor to work in a way that improves our own wellness and the wellbeing of others.”

There are three key areas identified by the Global Wellness Institute where action needs to be taken now to improve wellness at work, no matter what industry or country, the size of organisations, or the resources available.

Physical Environment: Every workplace and occupation has its own health hazards and risks. Employers and governments must set, apply, and enforce appropriate standards to reduce on-the-job illnesses, injuries, and deaths, and also to address growing issues such as “sick buildings” and indoor air quality. However, meeting minimum safety standards is not enough. Forward-looking companies are now infusing wellness-enhancing features into buildings and workspaces and are using workplace design and natural elements to encourage healthy behaviors, collaboration, and creativity among workers.

Personal: Caring employers need to move beyond “wellness programs” to address the most pressing health and wellness needs of their employees, whether it is work-life balance, safe drinking water, a living wage, or managing personal finances. Many factors in our workplaces can be improved to ensure that the relationship between our working lives and personal lives is positive and mutually reinforcing. We need to recognize and address the huge impact that workplace culture and stress can have on our personal wellbeing and health behaviors. In addition, when we find meaning, purpose, and impact through our work, our individual wellness is enhanced and we become better employees.

Social & Community: Our social interactions and relationships at work – with coworkers, clients, managers, partners, and the community – have a profound impact on our own wellness and that of others. Having friendships and trust at work not only increases our productivity as workers, but also improves our personal wellbeing. Leaders and managers have an outsized role in establishing workplace culture. Those who value and care for employees as their organization’s most important asset; who set an example for empathy, honesty, openness, and healthy behaviors; and who focus on a purpose-driven (rather than profit-driven) mission can be a major source of motivation and wellness for their employees.

OzHelp recommends that governments should increasingly mandate wellness in businesses including through registration, accreditation, certification and regulatory compliance requirements.

OzHelp recommends that nationally agreed standards of effective workplace based prevention programs should be developed, with funding to assist with the delivery of ‘healthy living programs in workplaces’ which are focused on the needs of individuals as additional to any existing broad health promotion programs.

Further, OzHelp recommends that employer associations should take a leadership role in requiring employers to place greater emphasis on, and resources into, evaluating their workplace wellbeing programs, to provide evidence of what is effective and what is not – where they should be investing and where they should disinvest.

6. Differences between sectors or industries

What differences between sectors or industries should the Commission take account of in considering the scope for employers to make their workplaces more mentally healthy?

Clearly OzHelp's extensive experience and evidence is that workplaces with hard to reach people – those who are least likely to seek support – and at highest risk of suicide, should be the priorities for action.

Males are more likely to die by suicide, but females are more likely to attempt to suicide and have higher rates of mental ill-health. About 75 percent of deaths by suicide are among males^{xiii}. However, females are hospitalised at a much higher rate than males for intentional self-harm, particularly in the teen years (recognising that self-harm is not necessarily related to attempted suicide).^{xiv}

In 2016, suicide was the leading cause of death among people aged 15–24 (34%), followed by land transport accidents (21%). For people aged 25–44, it was also suicide (21%), followed by accidental poisoning (12%).^{xv}

There has been substantial evidence that those employed in male-dominated occupations such as construction, forestry and agriculture – particularly young blue collar workers – have higher rates of suicide than the general employment population, with recent research finding that men who work in male-dominated occupations are 7.5 times at a higher risk of suicide, while for women in those industries the increased risk was only small.^{xvi}

According to the ABS, there are seven male dominated industries in Australia:

Industry	Male
1. Construction	88%
2. Mining	85%
3. Transport/Warehouse	77%
4. Utilities, local government, electricity, gas, water	75%
5. Manufacturing	73%
6. Agriculture, Maritime, Fishing	71%
7. Wholesale Trade	65%
AVERAGE Male	76%

OzHelp operates in all of these areas.

OzHelp's focus began in the building and construction industries, and high risk, hard to reach industry sectors remain OzHelp's priority. However, as OzHelp has expanded its services into other industry sectors, increasingly the evidence from our work is that all workplaces would benefit from the types of services OzHelp provides.

In many industries, people at risk do not come forward because they are afraid that they will be subject to stigma and discrimination – for example, feedback to OzHelp from emergency workers has been that they are loathe to self-report issues of distress, anxiety or depression because they face the prospect of being taken out of their roles and being labeled for the future, meaning that they are challenged to achieve future positions and promotions.

Yet the evidence shows that, each year, one in five people in the workplace has a mental health issue – hence there will be someone or many people in a workplace who will experience mental health challenges each year. Almost half the population will experience a mental health issue at some time in their life. Almost everyone is touched by suicide or suicidal behaviour. Virtually everyone at some stage experiences trauma, to differing degrees. Each person's experience is different, and each person's experience is legitimate.

Employers therefore need to ensure that workplaces are safe – to maximise safety – for everyone.

Those who identify as having lived experience of mental ill-health are not necessarily the most vulnerable. They may have specific needs and require specific supports, but there may be others – some with their lived but not necessarily declared experience and others who have had none – who in challenging circumstances discover they are vulnerable.

Work Health and Safety practice (and workplace laws apply across Australia to psychological distress and injury) comes from the perspective that the greatest focus should be on the environment each person is going into, rather than on the individual person. But when a person shows signs of psychological distress there is a requirement for organisations to focus on the supports that person needs.

The message should be very clear – the workplace approach should be focused on the need to ensure a safe working environment for everyone – realising that the needs of individuals will be different and those different needs must be recognised and met.

OzHelp recommends that, over time, all workplaces should be required to undertake a risk assessment of mental health and safety, beginning with a particular focus on those most at risk (eg. young blue collar workers, particularly in rural and remote areas; Aboriginal and Torres Strait Islander peoples; and those who are likely to experience traumatic circumstances in their employment such as Police and Emergency Services workers), and to implement a planned response to those risks.

Program Profile

The NSW Police Force has developed and implemented the Workforce Improvement Program which is focused on prevention and early intervention of both physical and psychological injury.

The innovative approach taken in the program is to recognise that at some stage all police will be traumatised and that therefore everyone needs to know how to manage that trauma when it happens. That includes:

- A systemic focus on officer wellbeing
- Making people more aware of their own wellbeing
- Their obligations to themselves
- Their obligations to each other
- The risks they are likely to face
- How those risks can be managed
- Follow up after an event, including debriefing on what went well and what could be improved

Initiatives such as the RECON clinics, which are delivered by experts in the fields of physiotherapy, strength & conditioning, psychology and diet, have been very successful in reducing the time taken for officers to get back to operational duties or meaningful work when injured in the workplace.

The RECON program has three streams:

- RECONDITIONING, where the Recon team works with injured officers to develop a plan for their recovery, focusing on both work and outside of work functional goals, as well as empowerment for future maintenance, health and injury reduction
- RECONNECT, which draws on the link between structured exercise and improvements in mental health, to achieve improvements in many areas of their mental health including sleep, anxiety, depression, stress and trauma
- RESTART, a prevention program which aims to equip officers with the knowledge, motivation and tools to keep them happy, healthy and injury free, and to prevent relapse.



7. Workers' compensation schemes

Are existing workers' compensation schemes adequate to deal with mental health problems in the workplace? How could workers' compensation arrangements, including insurance premiums, be made more reflective of the mental-health risk profile of workplaces?

OzHelp notes that the number of serious workers' compensation claims linked to mental ill-health in 2014-15 was similar to that recorded in 2000-01, whereas claims linked to most other causes had fallen significantly over that period^{xvii}.

OzHelp appreciates the strong focus of workers' compensation on return to work (RTW) and the significant benefits which flow to the individual, the employer and the insurer from successful RTW programs. However, it is considered that greater benefits would flow to all parties if there were a stronger focus in the first instance on incentives to prevent mental ill-health in the workplace and promote mentally healthy workplaces.

OzHelp recommends that governments and the insurance industry should work together to create incentives and levers to ensure insurers engage with organisations providing services such as OzHelp to improve the focus on prevention and early intervention in mental health and wellbeing.

OzHelp notes the proposal to trial a risk rated approach in this area. In principle, OzHelp supports the proposal for a trial. However, OzHelp notes concerns that any trial must avoid stigmatising employees and gaming of the system ie. by discouraging or screening out employers to employ people who have a history or likelihood of mental ill-health problems.

Other Issues

8. Mandating work mental wellbeing and suicide prevention programs

The Commission Issues Paper also makes the following point:

“Another factor which could influence the adoption of measures to facilitate mentally health workplaces is the regulation of workplace health and safety (WHS) by the Australian, State and Territory Governments. Such regulation sets requirements on how the wellbeing of employees is protected in workplaces. However, identifying, assessing and addressing risks to mental health in the workplace is likely to be more complex than for physical health because many of the risk factors — such as job demand and control, imbalance between effort and reward, and bullying and harassment — are not as easily identified and addressed (Harvey et al. 2014).”

OzHelp’s experience supports this assessment: however, the types of services provided by organisations such as OzHelp help to overcome the barriers to identification of risk by the approach and assessment taken to overall health and wellbeing. This stigma-free, safe and non-discriminatory approach is inclusive and embracing: not talking down but talking with, not saying what you “should” do but asking “what do you think would work for you?”

OzHelp recommends any mandatory requirements on mental health in the workplace adopt a holistic approach which does not separate out mental wellbeing and which is stigma-free, safe and non-discriminatory.

Good News Stories (page 29) gives examples of how OzHelp has reached out to people who often are hard to reach and averse to seeking help, but who also tend to be those who are stressed and struggling the most in their workplaces. OzHelp’s approach – focused on building life skills, resilience and a strong sense of self, as well as a shared care for each other in the workplace – has resonated strongly in workplaces across the country.



9. The ripple effect and suicide ideation in the workplace

OzHelp recognises that suicide and attempted suicides are not confined to issues of mental ill-health but rather traverse a much broader spectrum of anxieties and stresses.

OzHelp considers that while the Issues Paper has highlighted the importance of suicide, attempted suicide and self-harm (which is not necessarily related to suicide or attempted suicide), further work is required on the impact of suicide and attempted suicide in the workplace – the ripple effect.

The ripple effect occurs within work teams, work places and organisations. It is the impact of someone's death on those around them – causing increased presenteeism and absenteeism, the need for backfilling of positions, and recruitment and training of new employees.

OzHelp does not have hard data on the costs of the ripple effect within industries. However, several of our partners who have experienced suicide among their workforce (including, at times, in the workplace) have estimated the lost productivity costs of each death as being between \$1 million and \$2 million.

OzHelp therefore recommends that the Productivity Commission seeks out further evidence of the costs to businesses of suicide among the workforce – the ripple effect – to demonstrate the benefits of wellbeing and suicide prevention programs in the workplace.

Where that evidence does not exist, government, employers and the insurance industry should fund and work together to identify evidence of the costs to businesses of suicide among the workforce – the “ripple effect” – and to demonstrate the benefits of wellbeing and suicide prevention programs in the workplace.

10. Translating evidence into practice: the National Institute for Work Health and Wellbeing

While significant evidence has been built up over time on the potential benefits of developing and maintaining workplace wellbeing – including a mentally healthy workplace – there currently is no centre of excellence charged with developing, collating, translating, distributing and monitoring the impact of what is happening and what works, including both domestic and international evidence.

The establishment of the Medical Research Future Fund (MRFF) provides a burgeoning opportunity for establishment of such a centre.

The MRFF supports new research, including translation research, with a key focus on Research Missions in priority areas – already covering cancer, genomics, mental health, dementia and ageing, cardiovascular health, traumatic brain injury and Indigenous health with a commitment of \$1.4 billion – with ambitious objectives that are only possible through significant investment, leadership and collaboration, including the discovery of new techniques and treatments, healthier Australians, new jobs and business growth.

The Australian Government should allocate substantial funding from the MRFF to establish a Research Mission in workplace health and wellbeing and to develop further evidence of best practice in the workplace. This should include funding for a new National Institute for Work Health and Wellbeing to establish a Centre of Excellence in workplace physical, mental, social and emotional wellbeing, and to support translation of evidence into practice.

It should involve a strong focus on developing evidence about the impact of workplace mental health and wellbeing programs on economic and social participation, productivity and the Australian economy.

Evaluation Outcomes

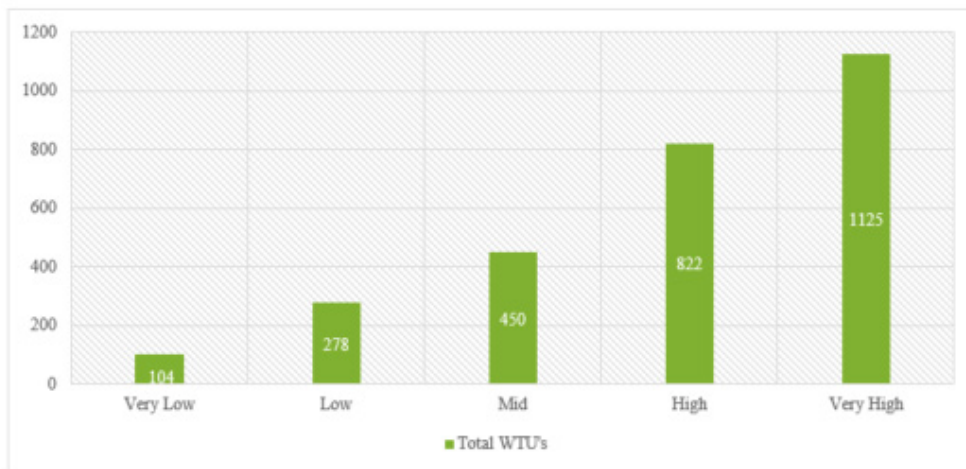
OzHelp undertakes ongoing evaluation of its programs and services, including through assessment of survey data and feedback from clients – employers and employees. Some of this evaluation feedback is included below.

Productivity

The following table displays results for total Workplace Tune Up participants in all industry groups and indicates productivity as linked with wellbeing as measured by the Stanford Presenteeism Scale (SPS6) which is used as part of the WTU assessment process.

The SPS-6 evaluates the impact of health problems on individual work performance and overall perceived productivity for knowledge-based activity. The results from this six-item instrument are utilized for monitoring and measurement of interventions and improvement of employee health status and productivity.

Employees with a low score are physically present in their jobs but may “experience decreased productivity and below normal work quality” due to their personal wellbeing. Employees with a high score indicates increased presenteeism/productivity which is defined as having “a greater ability to concentrate on and accomplish work”



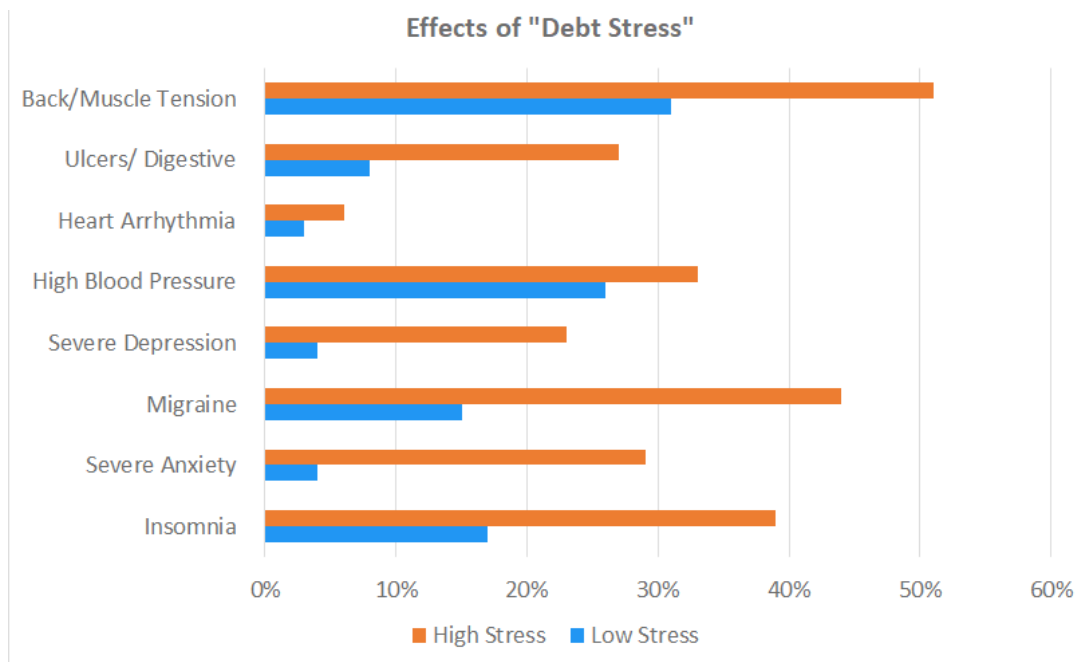
+ The Stanford Presenteeism Scale (SPS-6; 2001 version) is jointly owned by Merck & Co., Inc., and Stanford University School of Medicine.

What this tell us

Of the total sample size of 2,779 employees, 13.7 percent have low, or very low productivity directly related to low wellbeing.

Financial Stress

In working with one client, OzHelp was able to identify that 25 percent of employee participants rate as having Poor Financial Health which is likely to be impacting on mental health. This is 40 percent above the industry benchmark. rather traverse a much broader spectrum of anxieties and stresses.



This identified a previously unidentified area of focus for this employer, which is now putting in place training on financial literacy and budgeting, as well as on sleep fatigue (another priority identified through the process).

And the answer was – breakfast

Another employer thought that smoking was a major issue among its workforce. Through its WTUs, OzHelp was able to identify that a major concern was about employees starting early each day and not being able to have breakfast before they commenced work. The employer was able to quickly remedy this problem by providing breakfast packs to employees in the workplace.

Conversations for Life and ALERT

The evaluation feedback for Conversations for Life over the period from July to December 2018, found that 84% of participants reported an increase in skills to engage in supportive conversations with people experiencing difficulties or having thoughts of suicide. Furthermore, 48% of participants also reported an increased willingness to engage in these types of conversations.

Similar evaluation feedback from OzHelp's ALERT program yielded 86% of participants stating they had a greater awareness of the warning signs of anxiety, depression and suicide, and 87% reported an increase in awareness of protective factors that may assist in supporting a person experiencing anxiety, depression or suicidal ideation.

The Future

OzHelp's vision is for a future where employers and employees measure and demonstrate their success in ensuring a mentally healthy workplace, where employees are supported to live contributing lives in thriving industries, occupations and communities.



OzHelp's view is that this will not occur rapidly without increased government intervention and regulation, and that the Australian economy will continue to underperform until that intervention occurs and is enforced.

While many initially may not appreciate a more enforced approach, the subsequent flow-on benefits to employers, employees, families, communities and the Australian economy will be able to be demonstrated and will in turn provide evidence of the wisdom of such an intervention.

Good News

Many clients give us positive feedback on the impact OzHelp has had on their lives and actions they have taken as a result.

Recent comments have included:

- *"I have stopped drinking and have an appointment with GP to discuss sleep and drinking."*
- Another who felt he was being bullied at work told us that he has approached management and they actually listened and did something about it, and provided more resources. He also reported that his sleep is now much better
- *"I made an appointment with GP based on the WTU recommendations."*
- Another reported that he had made changes based on links from WTU and that his sleep was already getting better.

"Thank you for your email and for your calls. I'm sorry that I wasn't able to take them as I was at work. I really appreciate you taking the time to reach out to me after my OzHelp check. I have since been to the doctor for back pain and talked to the doctor about mental health, so have started working through everything. (I also read through the resources which you have provided, thank you again for those.) Since taking the test I am already feeling much better. A large amount of that stress at the time was caused by a disagreement between a close friend and I which has been resolved. I have organised regular check ins with my doctor and have booked to see a physio so should start to be feeling better physically and mentally over the coming weeks. Thank you again, I very much appreciate you reaching out to me."

Male, Insurance Industry, mid 20s, Sydney

Client sent text saying that he felt a bit embarrassed going to EAP as he was feeling so much better now after talking to OzHelp staff following WTU and didn't feel like he needed to contact the EAP provider this time and would save those in case he had another 'episode' same time this year.

Male, Building and Construction, early 40s, VIC

Recently an MBA apprentice carpenter walked into the OzHelp office with his boss at 8am asking for counselling. The apprentice stated that he had already participated in the LifeSkills program and the Workplace Tune Up and felt that he could trust OzHelp to help him deal with his issues as a result. The issues he presented with were suicidal ideation and depression. Following on from our support he has connected with his GP and has begun engaging more with his girlfriend, friends and family. He has also developed future career goals and wants to help young people the same way he has been helped by OzHelp.

Male, Apprentice, ACT

While on site delivering a program, a participant approached a member of the Wellbeing Support Team during a break to discuss issues he was having with his mental health and how it was impacting his physical and emotional health. The participant spoke of having had experienced suicidal ideation in the past, however, this was the first time he had ever talked to someone about his mental health issues. After some conversation it was suggested that he seek counselling. He took up the suggestion and commenced his journey to better health and wellbeing.

Male, Apprentice, ACT

Building Relationships with Employers

In October 2018 OzHelp met with two senior managers from a relatively large building group. The company was expanding rapidly and looking to develop better systems of support for their workers. They indicated that they had approached OzHelp as a result of the positive reputation we held within the industry. Following this meeting an ALERT presentation was delivered later in the year to Team Supervisors, further consolidating our relationship with them and building trust and confidence. A number of support calls followed from this presentation, with positive feedback about the quality and responsiveness of OzHelp's support. Fast forward to late December and OzHelp presented an 'Intro' talk to 200+ staff. It was clear from the introduction by Senior Management to this talk that OzHelp was already held in high regard. Further support conversations were generated by this presentation.

OzHelp's Programs and Services

OzHelp was formed following the death by suicide of four young apprentices in the ACT in 2001. Those deaths sparked a significant response from a range of people and organisations in the ACT resulting in the formation of OzHelp Foundation in 2002 with initial funding from the ACT and Federal Governments.

The principles supporting OzHelp's approach involved moving away from telling people what they "should" do – the traditional approach at that time – recognising that the people who need the help the most also are the ones who tend not to take any notice of a list of "shoulds". Instead OzHelp's approach involved offering counselling and training in life skills to apprentices and in the workplace in non-discriminatory ways. This included resilience building, how to look after yourself and look out for your mates, budgeting skills, and a heavy emphasis on field officers with counselling skills visiting apprentices and on the job.

OzHelp has continued to develop innovative programs and services over the past 17 years, with the organisation moving into new geographic locations, such as Queensland (later becoming Mates In Construction), Tasmania (OzHelp Tasmania), regional NSW, Northern Territory and Western Australia. With the organisation's move into mobile applications and on-line services, OzHelp now is able to offer its services all over Australia and has been delivering services in all states and territories. The demand for our work has continued to increase considerably over time, our organisation now delivers programs and services to more than 36,000 people in workplaces around Australia each year and the number of clients continues to grow rapidly.

OzHelp's suite of services and programs have been designed for people in workplaces who are regarded as at "high risk" of suicide and "hard to reach" groups for mental health services.

OzHelp's evidence based training programs utilise a program content structure that can be adapted to meet the needs of different industries and workplaces. This adaption would include case study information and role plays relevant to the industry/type of business and workforce composition. Course promotional materials and participant materials can be adapted to include industry specific imagery and information to ensure that the content is relevant and relatable for participant groups. Course content adaption guidance is taken through early stakeholder meetings to ensure maximum levels of participant attendance and engagement.

OzHelp has a network of trainers across Australia delivering services to businesses and individuals in the building, construction and mining industries and more recently to additional sectors including education, veteran affairs, forestry and real estate sectors. OzHelp's delivery approach and content is adaptable and flexible to the specific business needs of any organisation and the unique cultural requirements of the individual workforces. OzHelp has staff located in four states and has effectively and efficiently managed contractual relationships with the Australian Department of Health since 2007 as part of the National Suicide Prevention Strategy in the delivery of their suicide prevention and mental health training to employees and Managers within workplaces around the country.

In addition to this contract, OzHelp also manages a substantial contract with the ACT Department of Health and a smaller annual contract with NT Health. Both contracts have very specific and time sensitive delivery and reporting requirements that must be managed effectively.

Workplace Tune Ups (WTU)

Workplace Tune Ups (WTUs) are a vital component of OzHelp's holistic approach to health and wellbeing as they lay the platform for identification of risk and subsequent follow-up both personally with individuals and in the workplace.

The WTU online assessment tool provides employers with a benchmarking report that provides an initial snapshot of their workforce's overall health and wellbeing. The WTU report measures individual workplaces against industry benchmarks that are based on a number of validated and reliable measures including: AUSDRISK, diabetes risk assessment, chronic disease risk assessment, WEMWBS wellbeing scale and several others. The data in the initial report is de-identified and is intended solely to give a snapshot of an organisation's mental and physical health. The WTU is endorsed by Nutrition Australia (ACT) and The Heart Foundation and was designed in collaboration with the University of Wollongong Graduate School of Medicine. The report outlines:

- The impact of workplace practices on the mental health of employee
- Average wellbeing scores compared to industry benchmarks
- Overall physical and mental health ratings of individual workplaces
- Productivity of the participating organisations linked to employee wellbeing
- Recommendations that would form the basis of a Workplace Mental Health Development Plan

OzHelp has robust online systems and processes in place to generate detailed online reports for individual workplaces to create a meaningful baseline for meaningful follow up visits and discussions from our qualified practitioners who would follow up with individualised feedback that would enable the development of Mental Health Development Plans for organisations that includes:

- Policy and processes
- Management of risk in the workplace
- Support Services
- Education and Training

OzHelp utilises a comprehensive knowledge management platform Salesforce, for data collection and reporting of activity relating to all of our programs. OzHelp is able to collect and report on a range of Performance Measures including: demographic measures, outcomes, outputs, throughout measures, other measures, feedback and evaluation measures and financial reporting.

Scope of Workplace Tune Ups

Fulton Hogan is a large infrastructure construction, roadworks and aggregate supplier company in New Zealand, which is also active in wider Australasia.

In 2017, Fulton Hogan had 102 appointments with its EAP provider. Based on the first 4-5 months of its contracting with OzHelp, the rate of engagement with formal counselling has increased significantly.

Taking into consideration the role of the 299 support and mentoring interactions carried out by the OzHelp Wellbeing Support team, completed health and wellbeing screenings (446) and the capability building of the workforce through training (402), the reach and impact of the program is significant.

Overall total number of touches between OzHelp and staff in the first five months is circa 1,250.

Tradies Tune Ups (TTU)

The TTU meets an important need in workplaces and communities by facilitating the gathering of information regarding shifts in health risks amongst primarily blue collar workers. The TTU is able to do this through providing accessible preventive health services to workers and industries that contribute to the de-stigmatisation of mental health issues and increase capacity to respond within individuals and communities.

TTUs occur in the workplace, with strong support from employers, OzHelp staff encourage all individuals to take proactive measures for both their physical and mental health during TTUs. At the time of the TTU all participants are made aware of available support services, including OzHelp support services, and offered follow up supports or referred as appropriate.

From July to December last year, OzHelp conducted 51 TTU sessions in the reporting period, screening 627 participants. Of these sessions, 44 were conducted in building and construction workplaces, 1 in other blue-collar workplaces and six in non-blue-collar workplaces. OzHelp's workshops use a strength-based approach to:

- build the capacity of participants to respond to challenges in their lives
- increase participants' awareness of the support services available and
- enhance their capacity to support others and seek out supports.

During TTUs, OzHelp staff encourage all individuals to take proactive measures for both their physical and mental health. Participants are made aware of all available support services as determined by the client's presenting needs. OzHelp staff also make recommendations to clients in relation to their health and wellbeing and these are made based upon the client's desired outcomes and presenting issues identified during the TTU.

Specific data related to help seeking behaviour is difficult to acquire, however, willingness to engage in additional support can be seen as a good proxy, as can accepting referrals.

Based on national figures every ten TTU sessions generates seven support contacts. Using only ACT data we also know that, of the 627 participants in TTUs in that six month period, 25 percent received a referral for further supports, thus 1 in 4 participants are referred elsewhere post TTU.

This included 10 crisis interventions with individuals who were either suicidal or at high risk of poor mental health outcomes.

More generally, encouragement, whether subtle or overt, to access health, welfare and support services, underpins every OzHelp client engagement. OzHelp's core objective of engagement with its clients is to break down barriers to help-seeking behaviours. OzHelp's frontline staff are highly skilled in identifying the source of those barriers and finding ways to continue to engage with people to increase clients' willingness to seek supports.

At multiple points across their interface with our services OzHelp clients are given the opportunity to self-refer for further supports. Referrals are always based on client needs and wherever possible and practicable they are referred to mainstream services.

Where there is still reluctance we will refer internally until clients are ready to engage with the broader health, welfare and support services available in the ACT.

OzHelp uses a range of strategies to encourage engagement with mainstream services and to break down barriers to help-seeking behaviour in our client group. Additionally, a key component of our interventions is to increase the skill base and awareness of those we interact with so that they might be more able to identify when a work mate, friend or family member needs additional support and services.

At a more systemic level, a key component of OzHelp's approach is to increase participants' preparedness to support others in their health and wellbeing. In doing so we aim to reduce the stigma associated with needing help while increasing the capacity and competency of peers to be supportive of each other and in the broader community.

Following TTUs most participants appear visibly energised and motivated to make positive changes. Most notably participants are observed frequently to encourage others to participate in the TTU as they exit. OzHelp also regularly receives feedback from co-workers, family members, HR managers, and employers regarding the significant positive benefits they believe have come from the TTU.

Throughout those six months, OzHelp used its Session Rating Scale (SRS) with all counselling and support clients to give them an opportunity to provide feedback on the usefulness of the session from their perspective using a rating scale ranging from "There was something missing in the session today" to "Overall, today's session was right for me". The SRS was completed in 296 service occasions and the average rating for sessions overall was 8.4.

Applied Suicide Intervention Skills Training (ASIST)

ASIST is a two day interactive workshop in suicide first aid created by LivingWorks Australia and which LivingWorks states "has saved and changed hundreds of thousands of lives around the world"^{xviii}.

Participants learn to recognise when someone may be at risk of suicide and respond in ways that help increase their immediate safety and link them to further help. ASIST aims to enhance a caregiver's abilities to help a person at risk avoid suicide. It is intended that ASIST participants will be better prepared to:

- Reflect on how their attitudes and beliefs about suicide affect their intervention role.
- Discuss suicide with a person at risk in a direct manner.
- Build a collaborative approach to intervention focused on safe outcomes.
- Review immediate suicide risk and develop appropriate safeplans.
- Demonstrate skills required to intervene with a person at risk of suicide.
- Identify resources available to a person at risk of suicide.
- Make a commitment to improving community resources.
- Recognise that suicide prevention is broader than suicide first aid and includes life-promotion and self-care for caregivers.

Conversations for Life

Conversations for Life® is a specific suicide prevention program for Managers interested in keeping people they care for safe and connected.

The program was developed by the Lifeboat alliance with ConNetica and the Salvation Army Hope for Life, in conjunction with the Centre for Mental Health Research at the Australian National University. This half-day, facilitator led program focuses on the communication and influencing skills required to help people that may be overwhelmed with issues, and not waiting for them to be in a crisis situation. The program continues to be independently evaluated by the Australian National University. Results indicate that:

- There was a statistically significant increase in perceived knowledge about preventing suicide subsequent to the training with participants' perceived increase in skills of nearly 40%
- Before the training participants were willing to engage with others, but were less confident in their skills to do so. After the training the level of perceived skills matched more closely the participants' high level of willingness to engage, Participants willingness to engage was rated at 80% at the completion of the course,
- A very high percentage of people who completed the post-course survey indicated that they were satisfied with the course and/or the course presenter, the course material was easy to understand, the course was relevant, and they would recommend the course to others. Course satisfaction received a rating from participants of 90.5%.

Conversation for Life clients have included Pharmacy Guild of Queensland, University of the Sunshine Coast, ACT Department of Education, Centrecare WA, Forest Industries Australia, Essential Energy, Catholic Education Office, Canberra and Goulburn, and JKC Australia. This program is accredited by the Pharmacy Guild, ACT Education Department and NSW Education Department.

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