

## **Submission to the Productivity Commission's Draft Report on Mental Health**

The following relates to *Section 4: Increasing the participation of people with mental illness in education and work*, specifically the section *For tertiary students with mental ill-health*. We have provided information in response to Information Requests 18.1-18.3.

UNSW is currently developing a Student Mental Health and Wellbeing Strategy, to guide the redesign of mental health and wellbeing-related communication, culture and services. We have attached the current draft of this strategy as an addendum to this submission. This (draft) Strategy was created in accordance with best practice, research to ensure evidence-based recommendations, and student/staff co-design.

### **Information Request 18.1: GREATER USE OF ONLINE SERVICES**

UNSW sees online tools as an effective adjunct to existing mental health and wellbeing resources and services. Crucially, they act not as a replacement for in-person services, but as an additional tool that tertiary institutions can use to help support students.

Students have varying needs and preferences, and a core component of accessibility is providing a wide range of services, to suit a wide range of students. Students may prefer face-to-face, phone or online services; our aim is to provide evidence-based services for all three.

Internet-delivered CBT has been shown to be [effective, acceptable and practical](#) healthcare, and should be utilised to help university mental health services meet growing demand. However, it is essential that online services are not seen as a potential cost-cutting measure by university administration.

Online services are highlighted in UNSW's (draft) Student Mental Health and Wellbeing Strategy, as Initiative 6 within Theme C2: Accessible.

### **Information Request 18.2: WHAT TYPE AND LEVEL OF TRAINING SHOULD BE PROVIDED TO EDUCATORS**

Within tertiary institutions, student-facing staff act as crucial gate-keepers. They act as common touchpoints for students, and often as *trust points* as well. Within universities, student mental health issues can be precipitated by other factors, such as academic performance. Furthermore, decline in academic performance is often a manifestation of mental ill-health in students. Thus, students may present to staff with an ostensibly academic issue, which reveals an underlying mental health and wellbeing concern. Given students present to a wide range of staff across the university and its myriad services, we view it as essential that all staff are trained appropriately for their role. The role of staff is expanded upon within Theme B2: Mental Health Literacy, in the Strategy.

Not only should staff be mental health-literate and well-versed in available services and appropriate referral pathways, it is imperative that they are adequately supported in their capacity to assist students. Clear escalation procedures and triage systems (seen in Themes C1 and C3 of the Strategy) help to alleviate some of this burden, and mitigates the risk that staff are tasked with a level of responsibility beyond which they are qualified.

Additionally, staff, decision-makers and gate-keepers need to be literate regarding student mental health and wellbeing and understand the impact of their actions. Student-facing staff need to be well-versed in available services and appropriate referral, and feel supported in their capacity to assist students.

### **Information Request 18.3: INTERNATIONAL STUDENTS ACCESS TO MENTAL HEALTH SERVICES**

International students are a known at-risk cohort, and are disproportionately represented in statistics regarding mental ill-health, suicide attempts and deaths by suicide. Anecdotally, staff at UNSW have reported that visa requirements exacerbate distress and mental ill-health. Where a staff member would usually recommend a domestic student under-loads and takes fewer classes at university that semester/term, they cannot recommend the same to an international student because their visa requirements stipulate they must have a full-time course load.

UNSW has a preferred OSHC provider, and requires all international students to have OSHC cover prior to commencing study. However, many students' OSHC accounts are linked to their parents emails, details or bank accounts. This creates trepidation surrounding the use of mental health services that are covered by OSHC, because of the stigma in their culture or the fear of their family finding out. Thus, external services are rendered too costly, because the student may opt to pay out of pocket. The provision of effective, accessible and culturally appropriate internal services for mental health and wellbeing is an essential element of addressing mental ill-health within the international student cohort.

The Strategy suggests myriad approaches specifically designed to improve health promotion and help-seeking amongst international student cohorts. Namely, the creation of resources in different languages, ensuring cultural and communicative endeavours to improve mental health promotion take into account students' different backgrounds and cultural norms. Furthermore, services should improve accessibility through ensuring hiring practices reflect the diversity within the student body; UNSW Counselling and Psychological Services and the Health Service now employ mandarin-speaking psychologists and general practitioners.

There are also discussions with our preferred OSHC provider underway, to effectively “myth-bust” or mitigate concerns regarding parental notification of OSHC use, which we hope will decrease fear surrounding help-seeking and service uptake.