

5 April 2019

### **Mental Health inquiry**

Productivity Commission  
GPO Box 1428  
Canberra City ACT 2601

Further to the Issues Paper titled *The Social and Economic Benefits of Improving Mental Health*, and the opportunity to meet with Commissioner Dr Stephen King at Wagga Wagga in January, please find attached an outline of some of the programs focusing on mental health that Marathon Health is currently delivering.

The documents following outline the way these programs work and how they have been successful. They include:

- Condobolin Wellbeing Program
- ConnectALL
- Connected
- Individual Placement Support (IPS) – delivered through **headspace**
- Mental Health First Aid
- Multisystemic Therapy for Child Abuse and Neglect (MST-CAN)
- *NewAccess*
- Partners in Recovery
- Strong Minds

Further to the discussions about our experiences with mental health management with Dr King, these documents highlight where we believe funding in early intervention and well-coordinated supports have had a positive impact on people's ability to participate in and prosper in the community and workplace and contribute to improving both our national mental wellbeing and our economy.

Please do not hesitate to contact me for more information on any of these programs, or to elaborate on our earlier discussions. I can be reached

Thank you for the opportunity to be a part of this important review. Effective investment in mental health across the stepped care spectrum is crucial to ensuring people can receive the right care, at the right time. We hope this inquiry will play a key role in improving mental health outcomes in the future—for the benefit of the individuals affected and the nation as a whole.

Your sincerely

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## Supporting the wellbeing of the Condobolin community

### WHAT IS CONDOBOLIN WELLBEING?

The Condobolin Wellbeing program offers wide-ranging, culturally-sensitive supports covering mental and physical health, healing, housing, education, employment, finance, social life, welfare, domestic violence, and drug and alcohol. The program aims to reform the drivers of poverty, trauma and incarceration impacting Aboriginal people living in Condobolin and reduce their vulnerability.

It is a free program, providing assistance for Aboriginal people under 35 and their extended families. Our Wellness Facilitators work with them in the areas of:

- appointment scheduling and follow-up support
- advocacy and information
- case management
- social and general support
- preparing for work
- support at court
- links to health professionals, specialists and medical supports
- organising referrals and support to access various community services.

Services are provided in a safe and confidential setting at the Wiradjuri Study Centre in the community's Wellbeing Cottage.

The program responds to the trauma within some Aboriginal communities that drive low socio-economic status – incarceration, chronic disease, intergenerational underemployment and limited investment in economic growth for Aboriginal business. It is designed to address the causes, as well as consequences, of poor wellbeing, especially addiction, mental ill-health and domestic violence. It provides the 'glue' between families and existing providers of housing, education, employment, domestic violence, addiction, clinical health and broader wellbeing, optimising outcomes of those services.

### THE MARATHON HEALTH EXPERIENCE

Marathon Health has partnered with the Wiradjuri Condobolin Corporation to run the Wiradjuri Wellness Centre at Condobolin since 2016. Together, we have established the Wellness Model for Aboriginal economic development. In our experience, the Wellness Model empowers Aboriginal people to develop the self-agency required to live a better life through good health and wellbeing. The model puts wellness at the heart of the economic development of Aboriginal communities and has a strong focus early intervention to position children on a positive life trajectory.

### WHAT OUR CLIENTS SAY

*"See Dad, I told you Fiona could help us."*

Teenage participant

*"I love coming up here and cooking and having a yarn."*

Veronica

*"We wouldn't know what to do if you guys weren't here."*

Jocelyn

*"I feel comfortable at the centre."*

Serena

## Forming connections that keep traumatised children at school

### WHAT IS CONNECTALL?

ConnectALL is an early childhood program for traumatised children whose social security and welfare is compromised by parental incarceration, and whose socialisation is impacted by family violence, addiction and racism. The program provides access to targeted multi-disciplinary, school-based physical, social and emotional, and cultural activities to socialise traumatised children who would otherwise be deprived of access to public education.

Children participating in the program were previously absent from school for 55 days or suspended from school for up to 40 days. They are supported by multi-disciplinary team members and have a dedicated space at their school that is culturally appropriate and where the children and their family members feel safe and welcome.

As part of the program, children are socialised to receive and give care; help-seek; problem-solve; develop self-efficacy and participate in the life of the school and the community. Outputs from the program include:

- occupational therapy
- psychological screening
- individual plans for social and emotional health
- mindfulness and drumming lessons
- lesson plans from teachers trained to provide activities which have been demonstrated to have particular benefit for children who have been traumatised.

This approach provides health and education specialists with learning goals for each child and the group as a whole.

### THE MARATHON HEALTH EXPERIENCE

The ConnectALL program was run at Narromine Primary School in 2017-2018 and won the NSW Department of Education and Communities Wudhagararra Award for best school community partnership. The Wudhagararra Awards celebrate and recognise innovation, excellence and achievement in Aboriginal and Torres Strait Islander education in NSW public schools and school communities.

Funding has ceased at Narromine, but the program began operating at Wellington Public School in early 2019. Within a month it had six enrolments, with a target of 15. Both communities are within the catchment of the Wellington Correctional Centre.

The range of matters that traumatise children in extreme poverty include homelessness, starvation, neglect across the spectrum of development and personal growth, anguish, violence, exposure to alcoholism and drug addiction, unreasonable expectations and exclusion from the right to education.

We developed ConnectALL so that children could receive school-based physical, social, emotional and cultural health interactions that allow their experiences in the world of the school to be conditioned by care and respect. Our experience shows that, with access to physical, emotional, social and cultural supports, the children involved spent less time away from school and their suspension rates from school dropped significantly.

### WHAT OUR CLIENTS SAY

*“Early intervention promises to provide our children with better opportunities to realise their potential and position themselves on a positive life trajectory.”*

Darryl Thompson, Principal, Wellington Public School

*“ConnectALL is awesome. The kids love it and it gives them a little more confidence knowing they have support.”*

Mother of a child from Wellington

*“My son has been coming home very happy since taking part in the program.”*

Mother of a nine year old from Wellington

*“ConnectALL has been highly effective in providing a holistic approach to trauma, grief and separation and has enabled the building of positive relationships between parents, children and the school.”*

Denise King, Principal, Narromine Public School

# Case study



## Aboriginal Health – ConnectALL Narromine

January 2016 – December 2018

### BACKGROUND

A 12 year old boy, diagnosed with ADHD had a history of grief and trauma associated with the incarceration of his father.

The boy lives at home with his mother and six siblings and was prone to outbursts of anger and experienced difficulties with emotional regulation.

At school, he displayed low motivation and concentration, was disruptive in class and suspended from school regularly.

The boy had medication for his ADHD, which needed to be administered at school. He needed to eat breakfast before taking his medication so it had time to work before school started.

The boy was identified by the school due to his behaviour issues, and referred into the ConnectALL program. The Care Coordinator met with the boy and his mother in their home and began building a positive rapport.

At the second meeting, information was gathered around his routine and activities. It was discovered that the boy was having trouble sleeping and wouldn't go to bed until around 1am. This caused him to sleep in the next day and rush to school – skipping breakfast and delaying him taking his medication.

During school time the Care Coordinator focused on cultural activities – using traditional stories, paintings and music to build a feeling of inclusiveness in the group. These stories generated discussion based around empathy and emotional intelligence.

The boy has been going to bed earlier and is less rushed in the morning – able to eat breakfast at home.

By being able to take his medication earlier the boy has experienced much smoother transitions into school, reducing behaviour issues and suspensions.

Through cultural interactions and activities he has been more engaged in school and is more motivated in his classes.

Positive leadership and role modelling has achieved confidence and self-esteem improvements to the point where the boy has been elected House Captain.

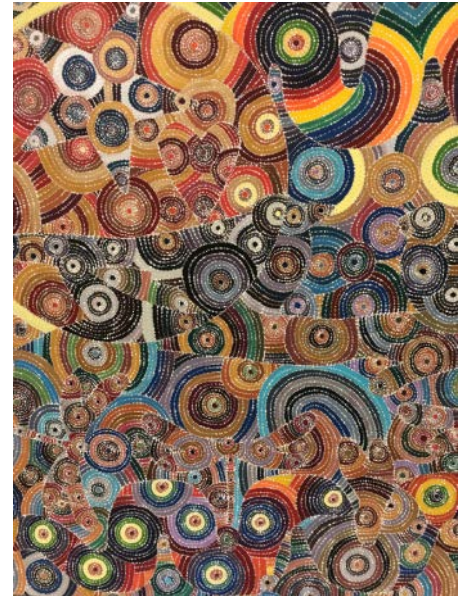
## Connected program scoring goals in the ACT

### WHAT IS CONNECTED?

Connected is a free service for young people up to 25 years old who identify as Aboriginal or Torres Strait Islander or have family who identify as Indigenous and are experiencing symptoms of psychological distress. This may include mild to moderate:

- anxiety
- depression
- social exclusion
- family concerns
- emotional distress
- adjustment or trauma related symptoms
- school refusal
- alcohol and other drug issues.

Connected is all about connecting young people to social, emotional and wellbeing support. It is largely an outreach model of support, where we take the service to a location that is convenient to the young person. In doing so, we can often remove the cultural and accessibility barriers to providing a service that meets their needs.



### THE MARATHON HEALTH EXPERIENCE

Connected provides direct client support, in conjunction with capacity building within Canberra to expand the availability of culturally-appropriate mental health services to Aboriginal and Torres Strait Islander people in the local community.

A Social & Emotional Wellbeing Worker is the first point of contact for the client who assesses their needs, based on the internal tools (referral, intake and program assessment) and will refer the young person on to our Registered Psychologist as required.

There are two ways for young people to access Connected – by an appointment at our Braddon centre, which is co-located with **headspace** Canberra, or by an outreach session with one of our team at an agreed location. Either way, the services is free.

We accept referrals through local community organisations, general practitioners and schools, as well as self-referrals.

### WHAT OUR CLIENTS SAY

***“(He) came back with a completely changed attitude last Thursday. He can sense genuine interest (as against this is my job) at a thousand metres and identified you as being in the former group.”***

From a thank you email sent to our Social & Emotional Wellbeing Worker by a woman whose grandson is in care

## IPS making a difference in the lives of youth in regional NSW

### WHAT IS IPS?

The Individual Placement Support (IPS) program forms part of the Australian Government's Youth Employment Strategy, which aims to tackle the problem of high youth unemployment. It supports young people with a mental illness to find a job they love and to work in a safe environment, with an employer that respects their needs.

The IPS Trial is being delivered from 14 selected **headspace** locations across Australia, including **headspace** Dubbo, which is operated by Marathon Health. In January 2019, Federal Minister for Families and Social Services, Paul Fletcher MP announced the trial would be rolled out to a further 10 **headspace** locations.

The IPS model integrates employment and vocational services with clinical mental health and non-vocational support, and focuses on the individual needs of people with mental illness who are seeking to enter, or remain in, education and/or employment.

Participants are **headspace** clients aged 16 to 25. They can access a variety of individualised supports through the IPS program, including:

- job coaching
- resume preparation
- assistance navigating community support services and Centrelink systems
- effective communication skills and interview techniques
- targeted education and/or employment opportunities
- on-the-job support – for as long as they need it, even after they find employment.

### THE MARATHON HEALTH EXPERIENCE

Marathon Health is one of the largest providers of **headspace** services in Australia, with centres in Dubbo, Bathurst, Orange, Queanbeyan and Canberra and satellite centres in Cowra and Lithgow.

The IPS trial at **headspace** Dubbo has proven highly successful, with our Support Team recording a fidelity rating of 97 out of 125 in January 2019. In a relatively short period of time, Dubbo IPS has become a safe and approachable program for young people to reach into the employment and education sector, many overcoming significant barriers. In our first 18 months, we saw more than 100 clients and achieved a one-in-four success rate in linking young people to employment or training—young people who otherwise may have been at risk of long-term unemployment in Dubbo's competitive employment environment.

### WHAT OUR CLIENTS SAY

*"I can't believe that with the support of the IPS program I have attained a role as the youngest peer support worker."*

24-year-old male placed as a mental health peer support worker in Dubbo

*"I now have a job, a registered car and will be moving into my own one-bedroom unit this weekend."*

19-year-old female placed as a kitchen hand in Dubbo

## Investing in mentally healthy workforces boosts productivity

### WHAT IS MENTAL HEALTH FIRST AID?

With one in five (20%) of Australians aged from 16 to 85 experiencing a mental illness in any year, the responsibility is growing for employers to create mentally healthy workplaces and be aware of the mental health of their employees. Mental Health First Aid training is an accredited training program, designed to keep staff mentally safe by breaking down the stigma, teaching the warning signs and providing knowledge in how to access support for somebody experiencing mental health distress.

A 2018 KPMG study found that mental ill-health costs employers an average of \$3,200 per employee living with a mental illness each year in absenteeism and presenteeism and up to \$5,600 for employees living with a severe mental illness. Mental Health First Aid training is a way for employers to empower their workforce to support staff experiencing mental health distress or mental illness at work. It also enriches their employee value proposition and reduces sick leave by providing local, discreet, caring and professional health and wellbeing services.

### THE MARATHON HEALTH EXPERIENCE

In delivering mental health programs, we aim to empower regional employers to support staff who may be experiencing mental health distress or mental illness at work and to create awareness among all staff of the signs of mental illness. During times of drought, this has been particularly important for supporting both staff and customers in agribusiness. Our programs are proving effective in helping regional employers:

- attract and maintain a well workforce
- offer support to clients and customers, particularly in times of drought and other natural disasters
- provide sustainable employment opportunities in Indigenous communities
- develop and maintain a mentally healthy workplace.

Through our long-standing partnership with the Wiradjuri Condobolin Corporation, we can also help support businesses in Western NSW recruit and support Indigenous workforces in a culturally sensitive and appropriate way.

In addition to Mental Health First Aid training, we can provide short-term, focused services for low income earners who are suffering mild to moderate mental health issues, including anxiety and depression, through Strong Minds (by referral from a GP). Our **headspace** centres also offer support for young people aged 12 to 25.

Other support services we can provide to support healthy workplaces include:

- health assessments
- healthy eating and physical activity education
- diabetes management
- drug and alcohol support
- assistance in setting up workplace health challenges
- injury rehabilitation through exercise physiology
- smoking cessation
- skin cancer education
- bowel cancer screening
- occupational therapy
- workplace resilience workshops
- counselling and psychology
- tailor-made support packages.

### WHAT OUR CLIENTS SAY

*“The training delivered to our organisation gave us a better understanding of how to interact with our rural clients.”*

Branch manager of a national agribusiness company

*“I was surprised how much the team got out of the training, and that we all want to strive to improve workplace wellness.”*

Director, regionally-based accountancy firm

## Intense therapy and a family-based approach to making children safe

### WHAT IS MST-CAN?

Multisystemic Therapy for Child Abuse and Neglect (MST-CAN) is an evidence-based program designed to treat families with children aged from six to 17 and their families who have come to the attention of the NSW Department of Family and Community Services (FACS) due to physical abuse and/or neglect.

MST-CAN works with the entire family in an effort to keep children with their families and help the family resolve clinical and practical concerns so that children can be safe. It aims to prevent abuse and neglect, reduce mental health difficulties experienced by adults and children, and increase natural social supports.

MST-CAN is successful because it:

- is evidence-based
- is delivered in home and community settings
- involves all members of the family
- is delivered at times that are convenient to the family
- addresses the multiple determinants of maltreatment
- provides individualised safety plans for each family
- provides professional training and support
- follows Quality Assurance and Fidelity Measures
- is delivered by licensed MST-CAN providers.

### THE MARATHON HEALTH EXPERIENCE

We have a highly-qualified team delivering MST-CAN, with a supervisor (clinical psychologist), three therapists (clinical psychologists) and one crisis caseworker (social worker) collaborating to address the issues and develop plans with each family to address the risk areas. A key factor of the program's success is that we help families develop plans, written in their own words, to target the high-risk behaviours impacting the lives of the children.

Some of the referral behaviours being addressed:

- medical neglect
- lack of food in the home
- drug use
- multiple police reports
- children not attending school regularly.

Some of the strategies we put in place:

- Reinforcement Based Therapy
- Cognitive Behaviour Therapy
- behaviour modification
- building knowledge of local resources such as food banks, medical services and free activities
- help to identify and build social supports
- knowledge to improve confidence in dealing with services, such as school, police, FACS and housing.

### WHAT OUR CLIENTS SAY

*"I'm a totally different person now. First time clean from drugs since I was 17 years old."*

Aboriginal mother of seven, involved with FACS for seven years



# CASE STUDY



## Aboriginal Health – Multisystemic Therapy for Child Abuse and Neglect (MST CAN)

2018-2019

### BACKGROUND

A single Aboriginal woman with seven children had been involved with Family and Community Services (FACS) for seven years.

The main referral behaviours identified were: medical neglect, lack of food in the home, drug use, multiple police reports on the children, and the children were not attending school on a regular basis.

The woman had a history of drug use and resided in an area known for drug dealing. She had no social supports or skills to liaise with community services such as schools, housing and police.

An MST CAN Therapist and Crisis Caseworker worked together with the mother to identify the issues and develop a plan to address the risk issues. This included:

- Reinforcement Based Therapy to help the woman become drug free.
- Cognitive Behaviour Therapy and behaviour modification.
- Build knowledge of local resources such as food banks, medical services and free activities for herself and the children.
- Help to identify and build social supports.
- Knowledge to improve confidence in dealing with services, such as school, police, FACS and housing.
- Provide help developing a plan, written in her own words, to target the high-risk behaviours of the children.

“

**I'm a totally different person now. First time clean from drugs since I was 17 years old.**

”

The woman has been methamphetamine free for the past four months and marijuana free for three months.

With advocacy to help with dealing with services, the woman was able to secure new accommodation through the Department of Housing and moved to a better location, away from drug dealers and closer to her social support network.

All of the children are enrolled in school and are attending on a regular basis. They have been attending all medical appointments over the past five months.

The woman has safety plans and recovery plans in place and both mother and children are involved in community activities.

There have been no new ROSH reports to FACS in more than five months.

## Providing early access to help prevents potential crises down the track

### WHAT IS NEWACCESS?

*NewAccess*, developed by Beyond Blue, is a free mental health coaching program for anyone aged 16 and over who's stressed, or feeling anxious or overwhelmed about everyday life issues, such as work, study, relationships and loneliness. It is an evidenced-based, innovative early intervention program for people with mild to moderate depression and/or anxiety who are not accessing other mental health services. It allows eligible participants access to up to six free sessions of low-intensity Cognitive Behavioural Therapy (CBT) and follow-up contact after four weeks.

Key features of the <i>NewAccess</i> model	Benefits of the program
<b>Non-clinical workforce of 'coaches' receive on-the-job training and are ready to see their first clients in week seven</b>	Reduces strain on upstream services and creates new jobs
<b>Each full-time coach can see up to 200 clients per year</b>	Integrates into the stepped care service system
<b>Sessions can be conducted via video or telephone</b>	More flexible and greater reach for clients from rural and remote communities
<b>Achieved a 72% recovery rate among participants in its national trial</b>	Measurable service with clearly visible outcomes
<b>Is evidence based, adapted from the UK's successful Improving Access to Psychological Therapies program and piloted and evaluated in the Australian context</b>	Decreases waiting times for more intensive services, ensuring that more people have timely access to the right level of care

### THE MARATHON HEALTH EXPERIENCE

*NewAccess* coaches work with people to understand the issues causing them distress. They support them to overcome difficulties and regain confidence, providing them with practical skills to manage their stress and get back to feeling like themselves.

Marathon Health has successfully recruited and trained its first round of coaches who will deliver *NewAccess* for the Western NSW Primary Health Network (PHN). We have also been contracted to deliver for the Nepean Blue Mountains PHN. Feedback on the process used for Western NSW PHN has been positive, largely because we have a dedicated team leading this project, with the backing of a strong governance model and a commitment to professional standards and staff development.

Our goal in developing *NewAccess* is to recruit a diverse workforce of local people as coaches, including:

- people who identify as Aboriginal or Torres Strait Islander
- people with a lived experience
- people with a rural background
- people looking for part-time employment (0.8 FTE minimum).

### WHAT OUR CLIENTS SAY\*

*"I found the world's best wingman. I felt that he [Access coach] had my back. In the beginning I felt that I could barely get through each day waiting for our next appointment. But like all good wingmen, he did not make me dependent, he just let me know he was there, gave me a couple of nudges in the right direction, and flew beside me."*

Allie

*"As a bloke, I loved the fact that this wasn't all touchy-feely stuff. I reckon it is very clever to fill out survey forms each week, because this turned my mental problems into something tangible that I could understand, measure and work on improving."*

James

\*Comments gathered by Beyond Blue

## Partnering for recovery with community support

### WHAT IS PIR?

The *Partners in Recovery* (PIR) initiative provides coordinated support and flexible funding for people with severe, persistent mental illness and complex needs. PIR works under a community-based recovery model – by strengthening partnerships between clinical and community support services and improving referral pathways, PIR provides better access to ‘wrap-around’ care that is tailored to meet an individual’s needs.

Most people who access PIR have severe and persistent mental illness, and the likely age group is mid-twenties and older. Participants may:

- have been diagnosed with severe and persistent mental illness
- have complex needs that require services from multiple agencies
- require substantial support to engage and access services
- have no existing coordination plans in place (or previous arrangements have failed).

### THE MARATHON HEALTH EXPERIENCE

A PIR Consortium has been established to enhance outcomes and address the needs of local communities. Marathon Health is the lead agency, working in partnership with Lives Lived Well, Aftercare, Western NSW Local Health District, NEAMI and other providers across the region. During 2017-2018 we received more than 140 new requests for services as part of PIR, which is currently transitioning to the NDIS and will continue to support eligible people in their NDIS journey.

Our role has been diverse – covering everything from arranging appointments with key service providers (and reminding clients or helping them get to the appointment) to advocating on their behalf and arranging birth certificates, proof of Aboriginality and other documents. We also help with enrolments into courses and gaining a driver’s licence to create a pathway to employment. We coordinate every little step that it takes to achieve a home and a stable environment. We then help them learn life skills that they may never have been taught or have lost over the years without help, so they can maintain that stability.

For some of our clients—particularly men who have spent the majority of their adult lives in custody—this helping hand and coordination helps keep people off the streets, out of hospital and out of the correctional system. Our participants have told us that this level of support means they don’t have to cope on their own. In the past, some of them have felt that life outside of custody gets too hard and, when they can’t cope on their own, they return to drug misuse and crime and end up back in custody.

### WHAT OUR STAFF SAY

*“We work with the people that no one else wants to work with - people that cannot articulate what they need as they don’t know what it is themselves at times. I have worked with men who have spent the majority of their adult life in custody, have never had their own home and have always turned to drugs and crime to survive - I was their voice.*”

*“I worked with one man for three months before he was released back into the community. He now has a part-time job, his own home and full-time custody of his two sons. This is the longest he has ever been in the community, he is able to be the father he never had and has a purpose in life. I often see him in the community with his children and he always comes up to tell me how great things are. The proud look on his face is priceless.”*

Shana Turner, Team Lead, PIR

# CASE STUDY



## Mental Health – Partners in Recovery (PIR)

June 2018 - November 2018

### BACKGROUND

A 55-year-old Aboriginal woman had attempted to work with services many times in the past, but had always failed.

With a history of drug and alcohol use, trauma, homelessness, she was socially isolated from her family and culture.

She was living on limited financial resources (Disability Support Pension), in an aged care facility – despite not being aged.

The woman had mental illnesses, poor coping skills and minimal understanding or cognitive ability to set goals and tasks and reach them without help.

A Partners In Recovery (PIR) Support Worker met with the client and engaged at her pace and level – building a positive and trusting relationship, using a non-judgmental approach.

The Support Worker established the client's need by using a range of tools:

- Camberwell Assessment of Need Short Appraisal Schedule
- Live Skills Profile
- World Health Organisation Disability Assessment Schedule

The client worked with the Support Worker to establish her goals and discuss how she could realistically achieve them, using goal setting plans.

The Support Worker provided education and advocacy to navigate services including the transition to NDIS – completing forms and liaising with services on the client's behalf.

Since working with PIR the client has stopped smoking and has identified her other recovery goals.

The client has maintained trust in the PIR program and has continued engaging with services – unlike her past history.

The client has had a planning meeting with NDIS, and is awaiting feedback on her transition

## Building stronger minds in rural and regional communities

### WHAT IS STRONG MINDS?

Strong Minds provides access to free and effective psychological services for people aged eight and over. The program delivers short-term, focused services for people who are suffering mental health issues, including anxiety and depression. It can assist people:

- from rural, remote and under-serviced areas (in towns with no or unaffordable Medicare Benefits Schedule providers)
- who self-harm or who are at risk of suicide (including those who have had a suicide attempt and those bereaved by suicide or loss)
- in Aboriginal and Torres Strait Islander communities
- who have experienced trauma
- experiencing, or at risk of, homelessness
- experiencing perinatal depression
- from culturally and linguistically diverse backgrounds
- at risk of, or experiencing, an eating disorder
- who identify as lesbian, gay, bisexual, transgender, and/or intersex
- in carer roles.

Participants are referred to Strong Minds by their general practitioner, psychiatrist or paediatrician, with a Mental Health Treatment Plan.

### THE MARATHON HEALTH EXPERIENCE

We provide Strong Minds in the Western and the Murrumbidgee regions, allowing patients in hard-to-reach groups to access short-term psychological support within a primary health care setting.

#### Strong Minds Western

Designed for people suffering mild to moderate mental health issues

Supports low-income earners

Operated as Access to Allied Psychological Services (ATAPS) until 2017

#### Strong Minds Murrumbidgee

Designed for people experiencing complex and severe mental illness and who would benefit from psychological services

Supports people with advanced chronic illness

For people who engage in risky alcohol and/or other drug use

Has expanded to include mental health sessions at local schools

Has a Therapy Dog working with a provisional psychologist to assist clients experiencing stress, anxiety, depression and symptoms of PTSD

### WHAT OUR CLIENTS SAY\*

*“Thank you for my session yesterday and for listening to me without any judgement. I feel like a different person today. Even though it is many years late, I finally feel peace within.”*

Murrumbidgee client

*“This was a very appropriate session – compassionate, supportive and a positive experience.”*

Female clients from Dubbo

*\*Feedback taken from client survey forms*

# CASE STUDY



## Mental Health – Strong Minds Murrumbidgee

April 2018 - July 2018

### BACKGROUND

An 80-year-old man struggled doing the things he wanted to do in life, due to his complicated health conditions. Having had a stroke a few years ago, he had aches and pains which were causing him anxiety, frustration and depression.

The man became very angry with his wife, and had his walking stick ready to hit her one day, when he decided he needed help.

The man was referred into the Strong Minds Murrumbidgee program after expressing his increasing anxiety, difficulty in achieving daily chores and anger towards his wife.

The client met with a Strong Minds Murrumbidgee Care Coordinator, where he described his goals as being to change the anger he felt about his wife, before it did irreparable damage to his marriage.

The Care Coordinator worked to build a good rapport and listen to the man's concerns. They completed a full assessment of his life.

The Care Coordinator recommended breathing exercises to calm the anxiety, and tools to help the client identify his escalating thoughts and feelings during an argument.

After the sessions, the client was able to identify other ways of looking at each issue with his wife and calm himself down before reacting.

The client was very happy and thankful to have a better relationship and better understanding of his own thoughts and emotions and how to handle conflict.

During the client's sessions he spoke about having his wife attend her own sessions – which did take place.

Both clients have been very happy with the outcomes of their counselling sessions and have found their marriage has greatly improved.