## Submission on the National Mental Health Workforce Strategy 2021-2031

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## Overview

Volunteers contribute extensively to the mental health workforce. Despite its aim to facilitate a "whole-of-community, whole-of-life and person-centred" approach to mental health, the Consultation Draft of the new National Mental Health Workforce Strategy 2021-2031 does not include volunteers or their contributions to the broader mental health landscape.<sup>1</sup>

The Workforce Strategy utilises a broad definition of the mental health workforce, acknowledging the need for a broad, collaborative approach to the provision of mental health services and supports. This definition includes services delivered by volunteers. Further, including volunteer roles would facilitate other key objectives of the Workforce Strategy, particularly in improving perceptions of careers in mental health services, and creating avenues for training and employment opportunities. If the Workforce Strategy is to achieve its stated aim, volunteers must be included.

- Volunteers should be included in data collection efforts as part of the proposed data strategy for the mental health workforce.
- Volunteers support a diverse range of services including suicide prevention, supporting those experiencing perinatal anxiety and depression, supporting new parents, targeting loneliness and social isolation, identifying and responding to family violence, mental health education, advocacy, peer advisory, and sector development. The contributions of volunteers in the mental health workforce should be recognised.
- The contributions of volunteers to the mental health workforce would not be possible without the appropriate support. Ensuring that this resourcing is considered in workforce planning and budgeting is essential to planning for the sustainability of the sector.
- Volunteering should be included as a means of improving the attractiveness of the mental health sector. Volunteering is relevant to all three of the Workforce Strategy's priority areas, namely, to raise awareness, reduce stigma, and improve the reach of training programs.

## Introduction

#### About the National Mental Health Workforce Strategy 2021-2031

The National Mental Health Workforce Strategy 2021-2031 (the Workforce Strategy) was initiated in December 2018. The Workforce Strategy aims to recognise the work of people in mental health settings, other health and social services settings, and in the broader community, and to plan measures to sustain a comprehensive workforce to respond to the prevention, intervention, and recovery needs of Australians experiencing mental ill-health. A final strategy is due to be submitted to the government in late 2021.

<sup>&</sup>lt;sup>1</sup> https://acilallen.com.au/uploads/media/NMHWS-ConsultationDraftStrategy-040821-1628234534.pdf, 8



#### About this submission

We welcome the opportunity to provide a submission to the consultation on the new Workforce Strategy. We respond to the Consultation Draft, and accompanying Background Paper, prepared by ACIL Allen and released for public consultation on 14 August 2021.

This submission was drafted by Volunteering Australia in collaboration with the State and Territory peak volunteering bodies. The peak volunteering bodies reached out to member organisations operating in the mental health space to seek their views on the role of volunteers. These views have been drawn upon in this submission.

## The aim and objectives of the Workforce Strategy

#### The aim of the Workforce Strategy is:

To develop an appropriately skilled mental health workforce of sufficient size that is suitably deployed to help Australians be mentally well by meeting their support and treatment requirements at the time and in the way that best meets their needs.<sup>2</sup>

In service of this aim, the Workforce Strategy considers a broad definition of the mental health workforce, which includes those who work in mental health settings, other health and social services settings, and in the broader community.<sup>3</sup> The Workforce Strategy also aims to facilitate interfaces between service providers, which allow 'components of care' to be brought together to create models which are suitable to address the broad range of mental health issues experienced by Australians.

Volunteering Australia supports this conceptualisation of the mental health workforce, acknowledging the need for a broad, collaborative approach to the provision of mental health services and supports. In its breadth, this definition includes a number of volunteer-supported services. However, neither volunteers nor the work they contribute are mentioned in the Consultation Draft.

#### National Strategy for Volunteering

Volunteering Australia has been funded by the Australian Government to develop a National Strategy for Volunteering. The National Strategy for Volunteering will complement the aims and objectives of other national strategies, plans, and initiatives where volunteers and volunteering play an important role. This includes overarching national strategies such as the National Preventative Health Strategy and the National Disability Strategy, and national workforce strategies, such as the National Mental Health Workforce Strategy. The National Strategy for Volunteering will involve extensive engagement with the volunteering ecosystem and will be delivered in December 2022.

 <sup>&</sup>lt;sup>2</sup> https://acilallen.com.au/uploads/media/NMHWS-ConsultationDraftStrategy-040821-1628234534.pdf
<sup>3</sup> *ibid*



## The omission of volunteering in the Consultation Draft

#### Volunteers in the mental health workforce

Volunteers contribute extensively to the provision of mental health services. While a lack of comprehensive national data on the mental health workforce is noted in the Consultation Draft, what data is available suggests that the contribution of volunteers is significant. According to the Australian Charities and Not-for-profits Commission, 64,811 people volunteered for mental health and crisis intervention charities and not-for-profits in 2019.<sup>4</sup> Further, while not limited to mental health specifically, the ABS estimates that 606,700 volunteers worked in a health or welfare organisation in 2020.<sup>5</sup>

While these figures illustrate the scale of volunteer involvement in the mental health sector, comprehensive data collection on how many volunteers are engaged in the mental health workforce and what kinds of roles they occupy is crucial to the development of a robust, evidence-based strategy for the sector.

#### The contributions of volunteers

The contributions of the volunteer workforce were recognised in the recent Productivity Commission Inquiry into Mental Health. The report identifies major volunteer involvement in suicide prevention, perinatal anxiety and depression, supporting new parents, targeting loneliness and social isolation, identifying and responding to family violence, and providing a range of services through neighbourhood houses and community centres.<sup>6</sup> Volunteers are also engaged in ongoing mental health education, advocacy, and strategic work, via participation in lived experience advisory groups, peer advisory roles, sector development activities, as key members of strategic working groups and as board members and chairs. For example, Mental Illness Education ACT (MIE-ACT) use volunteer educators with lived experience to deliver sessions to schools to raise awareness, increase understanding, and reduce social stigma around mental illness.

In some service areas, volunteer involving organisations are among the largest providers. Lifeline, one of the largest volunteer involving organisations in the mental health space, engages 10,000 volunteers across Australia.<sup>7</sup> In 2018, these volunteers answered 739,481 calls and initiated 5,840 emergency interventions for Australians in need of crisis support.<sup>8</sup> This makes Lifeline Australia's largest suicide prevention service provider.<sup>9</sup> These services are especially critical during major

<sup>5</sup> Australian Bureau of Statistics, General Social Survey 2020 (Table 10.1),

<sup>&</sup>lt;sup>4</sup> https://www.acnc.gov.au/node/6191054

https://www.abs.gov.au/statistics/people/people-and-communities/general-social-survey-summary-results-australia/latest-release

<sup>&</sup>lt;sup>6</sup> https://www.pc.gov.au/inquiries/completed/mental-health/report/mental-health.pdf

<sup>&</sup>lt;sup>7</sup> https://www.lifeline.org.au/resources/data-and-statistics/

<sup>&</sup>lt;sup>8</sup> https://www.lifeline.org.au/media/krdfx53w/submission-to-the-productivity-commission-of-inquiry-into-mental-health-2019.pdf

<sup>&</sup>lt;sup>9</sup> https://www.lifeline.org.au/resources/data-and-statistics/



emergencies like the COVID-19 pandemic. The volunteer hours that have supported Lifeline's crisis helpline increased from 19,764.62 per month in 2019 to 23,940.80 per month in 2021, peaking at 25,682 in August 2021.<sup>10</sup> These numbers illustrate the crucial role volunteers have played in supporting the mental health of Australians during the pandemic.

Volunteers also play an important role in the broader mental health landscape, particularly in prevention and recovery. Because they are unpaid, the relationships between volunteers and service users are distinct from those formed with paid staff. This dynamic is often a highly effective, but largely unrecognised component of supporting a person on their recovery journey. For example, the Connections Program previously delivered by VolunteeringACT provided one-to-one support for people experiencing social isolation and those on a mental health recovery journey. The program matched and introduced participants to volunteer Friendship Mentors based on common interest and compatibility factors, enabling participants to choose their own goals to work on and have the support of a friend to help them achieve them and reconnect with their community. The friendship model has been extremely successful, with a consistently high level of engagement from a large number of volunteers, strong support from referring agencies, integration within the wider mental health support system, and demonstrating strong, sustainable outcomes and positive feedback from participants.<sup>11</sup>

Volunteers working in the mental health space are often positioned to pick up on early warning signs of increasing mental distress or deterioration in mental wellbeing. This unique relationship provides a vital contribution to early support mechanisms, with the potential to prevent issues escalating to crisis point and often to reduce the need for more complex and costly interventions and treatments.

Given the importance and scale of volunteer involvement in the sector, the inclusion of volunteers in the Workforce Strategy is necessary to realise its goal of integrating workforce planning across the mental health landscape.

#### Paid vs. volunteer roles

Volunteering Australia also notes the difficulties of separating volunteer roles with those appropriately occupied by paid staff. Of particular concern is peer support work, which is currently undertaken by both volunteers and paid workers.

Although it is important that peer support work is valued as a profession, there is validity in having peer support functions as both a part of the paid workforce as well as in strictly voluntary roles. For example, volunteer peer support roles are common in youth organisations. headspace, a leading organisation in the youth mental health space, engages Youth Advisory Groups consisting of young volunteers in most of their centres. Similarly, youth mental health provider Orygen recruits volunteer peer support workers to spend time with current mental health patients. These roles

<sup>&</sup>lt;sup>10</sup> Data on volunteer hours provided to Volunteering Australia by Lifeline Australia

<sup>&</sup>lt;sup>11</sup> https://www.volunteeringact.org.au/wp-content/uploads/2021/07/VolunteeringACT-Response-to-Issues-Paper-on-Promoting-Inclusion-04.06.21.pdf, 3, 6; https://www.volunteeringact.org.au/services/connections-mentoring-program/



provide opportunities for young people to be actively involved in mental health programs and policy, and are appropriately voluntary.

It is also important to recognise volunteers with lived experience of mental illness who undertake volunteer roles in mental health settings as part of their own mental health recovery journey. In some cases, this could be a complete transition over time from being a program participant to becoming a volunteer mentor themselves. A study of MIE-ACT found that consumer mental health educators experienced significant benefits, emphasising the unique value of peer support, the personal meaning gained from educating others about mental illness, the benefits of validation and catharsis through telling their story, and the skills gained.<sup>12</sup> To maximise opportunities for mental health consumers and carers, the Workforce Strategy must be flexible enough to incorporate a suite of workforce definitions and options that empower people to make the right choice for their individual support needs.

The circumstances in which volunteer involvement in peer support and other roles in mental health services is appropriate demands further interrogation. This will first require a comprehensive understanding of the roles undertaken by volunteers in the sector and the expectations placed upon them.

Examining these roles will be crucial to future workforce planning, to ensure both that workers and volunteers are treated fairly in the mental health sector, and that the workforce has the capacity to meet the needs of Australians. Volunteer roles must be included in the Workforce Strategy if this is to progress.

#### Planning for volunteer engagement

Although volunteers contribute their time without financial gain,<sup>13</sup> there are costs associated with running volunteer-supported programs. Volunteer involving organisations must attract, recruit, train, manage, and support volunteers throughout their engagement with the organisation. According to a recent estimate, Lifeline provides 233,240 hours of training in crisis support and mental health first aid to its volunteers, at a value of \$9,730,772.<sup>14</sup> The contributions of this training to the mental health workforce would not be possible without appropriate resourcing.

Like paid workers, volunteers who support mental health services may also experience negative effects caused by burnout, compassion fatigue, and vicarious trauma. In some circumstances, volunteers can be at heighted risk for experiencing the adverse effects of working in a trauma environment. Research has found that crisis support volunteers working in community-based

<sup>&</sup>lt;sup>12</sup> Shelly Read and Debra J. Rickwood, "Volunteering as a community mental health educator: Positives and negatives for recovery," *Australian e-Journal for the Advancement of Mental Health (AeJAMH)* 8, no. 2 (2009): 5, doi:10.5172/jamh.8.2.194

<sup>&</sup>lt;sup>13</sup> https://www.volunteeringaustralia.org/resources/definition-of-volunteering/

<sup>&</sup>lt;sup>14</sup> https://www.lifeline.org.au/media/krdfx53w/submission-to-the-productivity-commission-of-inquiry-into-mental-health-2019.pdf



organisations often have limited training and their support needs are at risk of being overlooked.<sup>15</sup> Safe volunteer engagement in the mental health sector therefore requires high-quality and rigorous training and supervision for volunteers. Ensuring that this support is resourced appropriately is essential to planning for the safety, efficacy, and sustainability of the sector.

A cohesive workforce strategy must include both paid staff and volunteers, must plan to support and resource both, and must facilitate interfaces between services. The omission of volunteers limits the reach and effectiveness of the Workforce Strategy.

# The attractiveness of the sector and pathways to employment

Another major focus of the Workforce Strategy is improving the attractiveness of the mental health sector to prospective workers. Volunteering is a demonstrated pathway to employment, which has the potential to play a major role in improving career interest in the mental health sector. The Consultation Draft identifies three issues related to career attractiveness in the mental health sector, namely: lack of *awareness* of opportunity, *stigma*, and low reach of relevant *training* programs. Supporting and promoting volunteering opportunities can address each of these issues.

Volunteering offers avenues to the delivery side of mental health services, which facilitates greater awareness of the career opportunities available in the sector. Volunteering also equips applicants with work-relevant skills and experience. Research undertaken by employment company SEEK found that 95 per cent of employers identify that volunteering is just as credible as paid work.<sup>16</sup> Further, 92 per cent of employers identified that relevant volunteering experience gave a candidate an advantage in job interviews.<sup>17</sup> While increasing exposure to mental health work by diversifying placement opportunities in pre-service training is considered, the potential of volunteer work to provide this exposure is not explored in the Consultation Draft.

Research also indicates that volunteering in a mental health setting can be effective in reducing stigma surrounding mental health.<sup>18</sup> Further, because volunteers often work directly with service recipients, volunteering is likely to be more influential in breaking down prejudice than other activities, such as professional interning or work placement.<sup>19</sup>

<sup>&</sup>lt;sup>15</sup> Samantha L. Howlett and Anthony Collins, "Vicarious Traumatisation: Risk and Resilience among Crisis Support Volunteers in a Community Organisation," *South African Journal of Psychology* 44, no. 2 (2014): 180-190, doi:10.1177/0081246314524387

<sup>&</sup>lt;sup>16</sup> https://www.seek.com.au/career-advice/article/3-reasons-volunteering-can-put-you-ahead-of-the-pack <sup>17</sup> *ibid* 

<sup>&</sup>lt;sup>18</sup> Claudia Hallett, Günter Klug, Christoph Lauber, and Stefan Priebe, "Volunteering in the Care of People with Severe Mental Illness: A Systematic Review," *BMC Psychiatry* 12, no. 1 (2012): 8, doi:10.1186/1471-244X-12-226

<sup>&</sup>lt;sup>19</sup> Juliá-Sanchis, Rocío, Ángela Sanjuan-Quiles, Miguel Richart-Martínez, and Julio Cabrero-García, "The Impact of Volunteering in Mental Health Settings on Nursing Students' Attitudes," *Nurse Education in Practice* 44, (2020): 4-5, doi:10.1016/j.nepr.2020.102726



Finally, volunteer involving organisations provide training to their volunteers, which can be greatly beneficial to a potential career in mental health services. Lifeline is a clear example, training 1,372 crisis support volunteers in 2018.<sup>20</sup> This training is highly valuable for workers in mental health settings, in other health and social services settings, and in the broader community. Ensuring appropriate resourcing of these programs would improve the capacity of the mental health workforce and expand opportunities for paid employment.

### Recommendations

Based on the evidence presented on volunteering in the mental health workforce, Volunteering Australia makes the following recommendations:

- 1. **Include volunteers in data collection efforts** as part of the proposed data strategy for the mental health workforce.
  - In implementing Action 2.1.1, data on volunteers should be included ("Define what data are required, for what purpose, where data are currently held and what additional collections are required to improve reliability, accessibility and comprehensiveness"<sup>21</sup>).
- 2. **Recognise the contributions of volunteers** in key service areas including suicide prevention, supporting those experiencing perinatal anxiety and depression, supporting new parents, targeting loneliness and social isolation, identifying and responding to family violence, mental health education, advocacy, peer advisory, and sector development.
  - Volunteer roles should be included when implementing Action 3.1.1 ("Identify components of care (subsets of models of care) that meet the needs of consumers and carers."<sup>22</sup>).
  - The need to reassess which types of roles should be paid, and which voluntary, should be acknowledged in Priority Area 3.2 ("Define nationally consistent scopes of practice for the mental health workforce"<sup>23</sup>).
- 3. Include volunteering as a means of improving the attractiveness of the mental health sector. Volunteering is relevant to all three priority areas, namely, to raise awareness, reduce stigma, and improve the reach of training programs.
  - The promotion of volunteering opportunities should be included under Action 1.2.1 (to "Increase the awareness of pathways into, and within, the mental health workforce for both vocationally and higher education trained occupations including across work settings"<sup>24</sup>).

<sup>&</sup>lt;sup>20</sup> https://www.lifeline.org.au/media/krdfx53w/submission-to-the-productivity-commission-of-inquiry-into-mental-health-2019.pdf

<sup>&</sup>lt;sup>21</sup> https://acilallen.com.au/uploads/media/NMHWS-ConsultationDraftStrategy-040821-1628234534.pdf, 12

 <sup>&</sup>lt;sup>22</sup> https://acilallen.com.au/uploads/media/NMHWS-ConsultationDraftStrategy-040821-1628234534.pdf, 16
<sup>23</sup> *ibid*

<sup>&</sup>lt;sup>24</sup> https://acilallen.com.au/uploads/media/NMHWS-ConsultationDraftStrategy-040821-1628234534.pdf, 8



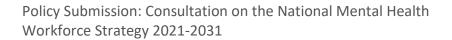
- Existing volunteering programs which provide exposure and training opportunities to volunteers should be recognised, and properly resourced to ensure best practice in their volunteer support and development policy.
- Volunteering should be mentioned as a possible implementation activity under Priority Area 1.2 (*"Develop student placements, internships, volunteering opportunities, and student employment opportunities to increase exposure to potential future careers in mental health."*<sup>25</sup>).

## Conclusion

Volunteering makes many important contributions to the mental health workforce, and to the defined aims of the National Mental Health Workforce Strategy 2021-2031. Unless the work of volunteers is properly defined, fully recognised, appropriately supported, and adequately resourced, the Workforce Strategy cannot plan for the "whole-of-community, whole-of-life and person-centred" approach to mental health that is central to its aims.<sup>26</sup>

<sup>&</sup>lt;sup>25</sup> https://acilallen.com.au/uploads/media/NMHWS-ConsultationDraftStrategy-040821-1628234534.pdf, 10; bold text added by Volunteering Australia

<sup>&</sup>lt;sup>26</sup> https://acilallen.com.au/uploads/media/NMHWS-ConsultationDraftStrategy-040821-1628234534.pdf, 8





## Authorisation

This submission has been authorised by the Chief Executive Officer of Volunteering Australia.

Mr Mark Pearce Chief Executive Officer

## Endorsements

This position statement has been endorsed by the seven State and Territory volunteering peak bodies.



## About Volunteering Australia

Volunteering Australia is the national peak body for volunteering, working to advance volunteering in the Australian community. The seven State and Territory volunteering peak bodies work to advance and promote volunteering in their respective jurisdictions and are Foundation Members of Volunteering Australia.

Volunteering Australia's vision is strong, connected communities through volunteering. Our mission is to lead, strengthen, promote, and celebrate volunteering in Australia.



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