

# POSITION STATEMENT – THE IMPACT OF COVID-19

## SANE'S POSITION

The COVID-19 global pandemic has presented an unprecedented disruption for communities, and, in particular, for people affected by complex mental health issues, along with their families and friends.

Despite this, we know that people affected by complex mental health issues have developed resiliency and insights and it is essential that policymakers and practitioners draw upon the lived experience and wisdom of this group in formulating a response to the pandemic.

Services must be redesigned, respectful of human rights and informed by real-time data to ensure they meet the holistic, bio-psycho-social, long-term needs of people affected by complex mental health issues during the COVID-19 pandemic.

## SANE AUSTRALIA

SANE Australia is a national mental health charity working to make a real difference in the lives of people affected by complex mental health issues\*. SANE's vision is for an Australia where people affected by complex mental health issues live long and fulfilling lives, free from stigma and discrimination.

Founded in 1986 in Melbourne by Margaret Leggatt and Anne Deveson as the Schizophrenia Australia Foundation, SANE Australia's focus is on supporting the approximately four million Australians directly affected by complex mental health issues. This includes adults aged 18 and over living in Australia who identify as having a complex mental illness or an experience of complex trauma or very high levels of psychological distress. For every person affected by mental health issues, there is a network of additional people impacted, including carers, family, friends and colleagues who often play a critical role in supporting their recovery.

SANE's work includes promoting mental health literacy, destigmatising poorly understood mental health issues, online peer support and information, specialist helpline support, research and advocacy. Established twenty years ago in 1999, SANE Australia's StigmaWatch program pioneered stigma-reduction through tackling media representation of mental illness and suicide. The Dax Centre and the Anne Deveson Research Centre (ADRC) also form part of the SANE Australia group.

## CONTEXT

As a result of the COVID-19 pandemic, members of the general population are now experiencing the social isolation, anxiety and lack of access to services that most people living with complex mental health issues have experienced for decades. Many in the latter vulnerable group have had their pre-existing symptoms amplified or experienced a return to trauma. There are, however, people within this group who have developed resiliency and insights such that they are currently managing very well in the face of the pandemic.

At the same time, it is important to acknowledge that people with complex mental health issues are at increased risk of even poorer health and social outcomes due to the pandemic and require appropriate support. Without significant government investment and service refinement, systems that were failing to meet demand prior to the pandemic, risk being inundated and further underservicing people.

### SANE'S CURRENT WORK

As mentioned above, SANE's approach conceptualises complex mental health issues as encompassing an individual's experience of a 'complex mental illness,' or an experience of complex trauma or high levels of psychological distress. SANE acknowledges that not everyone conceptualises mental ill-health or distress through a medical framework. SANE aims to be inclusive of a range of experiences that people may have. SANE also sees people with lived experience as experts in what they need to support their own mental health and wellbeing and acknowledges that we can learn a lot from individual's experiences of managing complex mental health issues pre-pandemic in a time of pandemic.

SANE's services are based on the principles of trauma-informed care and we believe that there are many aspects of this approach that are relevant in providing support during a pandemic. Trauma-informed care focuses on the principles of safety, transparency and trustworthiness, choice, collaboration and empowerment.

Against this background, SANE Australia continues to provide information, support and counselling to Australians affected by complex mental health issues through its telephone [Help Centre](#); moderated peer to peer online [Forums](#); [SANE.org](#) online information and self-help resources, and social content which leverages the wisdom of lived experience working alongside SANE's Peer Ambassadors.

### WHAT ACTION IS NEEDED?

#### Provide holistic, trauma-informed and continuous support

- In the event of a pandemic, all existing services should continue to be offered via alternative mechanisms and ensure that:
  - physical and mental health are integrated with actions to support financial security, housing, social connection, meaningful work and education
  - mental health and health sector responses are not siloed from other approaches that might help to meet people's psychosocial needs at this time and in the recovery phase
  - support is trauma-informed in both its delivery and approach
  - adequate personal protective equipment (PPE) is available for mental health workforces to continue to operate face-to-face service, when required.
- The public and private system should work together flexibly to ensure they meet the needs of people affected by complex mental health issues.
- With any increased shift to Telehealth, it is essential that equity issues are addressed around access to devices, data limits and bandwidth connectivity.
- As restrictions ease, people affected by complex mental health issues should be able to retain the choice to source support online or via Telehealth if this is their preferred method of engagement. Those who wish to continue to be able to receive face to face services should be able to do so as should people wishing to have a combination of Telehealth and face to face services.
- All services should include and value people with lived experience and their carers in the design and delivery of their adapted services.

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- Peer to peer support should be made available across the system, including online.
- Care coordination is imperative but is often not well resourced. Consideration should, therefore, be given to strengthening these approaches during the event of a pandemic to assist in navigating a changing service landscape.

### Address stigma and discrimination

- In thinking through the medium to longer term ramifications of the pandemic, it is important to reflect on learnings from other major economic events, like the Global Financial Crisis. Evidence from Europe found that in periods of economic recession, stigma and discrimination rise and competitive job markets tend to further disadvantage people with mental health issues, particularly those which are severe and complex in nature.
- Public campaigns need to address that some people affected by complex mental health issues feel that they are not as worthy of care and support at this time (a component of self-stigma) and that they are a burden on an already overstretched health system.

### Targeted communication

- Official government communications regarding mental health support during the pandemic should include key messages for those with pre-existing complex mental health issues and include links to services, specialist helplines and peer-to-peer support such as those offered by SANE.
- The communication of public information regarding the mental health service response must be trauma-informed both for those who have existing trauma as well as those who are experiencing the pandemic as trauma.
- Poor mental health outcomes, including the potential tragic outcome of suicide, need to be acknowledged but should not be presented as inevitable. Messaging needs to convey that suicide can be prevented with timely and appropriate action.
- Services should proactively communicate altered arrangements and keep clients abreast of ongoing changes.

### Improved data requirements

- There is a woeful lack of real-time data on mental health outcomes during the pandemic in contrast to the excellent reporting of public health data and this needs to be addressed as a key priority and include:
  - temporary psychological distress attributable to COVID-19
  - service utilisation by people affected by complex mental health issues such as hospital admissions, emergency, ambulance data, primary care presentations
  - suicide attempts and self-harm.
- The performance of other health and social systems that are known to impact mental health such as housing, employment and family violence should also be monitored and inform the mental health response.

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- Accountability metrics should be adapted to assess how health and human services systems are performing.
- Data cited should include an acknowledgement that these statistics might be masking the extent and impact of issues when services are unable to be accessed at this time due to other barriers.

### *\*Complex Mental Health Issues*

In referencing “people affected by complex mental health issues”, SANE Australia is referring to people living with a complex mental health issue being those people who a) identify as having a diagnosis of a complex mental illness, and/or have experienced complex trauma, and/or have high levels of psychological distress; and b) the close family, friends and colleagues of those living with a complex mental health issue.

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## FURTHER READING

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