



Inquiry into fly in, fly out and other long distance commuting work practices in regional Queensland

***beyondblue* Submission**

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Summary

beyondblue applauds the Queensland Government's initiative in holding this parliamentary inquiry into fly in, fly out (FIFO) and other long distance commuting work practices in regional Queensland. **We believe that workplace mental health is a national priority health issue.** Poor mental health impacts on individuals, their friends, families and communities as well as businesses and the Australian economy. To reduce the personal, social and economic costs of depression and anxiety, workplaces need to protect the mental health of workers and support people experiencing depression and anxiety to recover and stay well. *beyondblue* is committed to working with government, business leaders, employers and employees to promote good mental health. We want every workplace to be mentally healthy. Our approach is to provide information, training and resources suitable for all workplaces, as well as responding to the unique issues and needs of particular sectors and employees.

FIFO workers are one such group. **The mental health of FIFO workers is a significant national issue that has impacts and implications for the workers, their families and communities where FIFO workers reside and fly out from.** There is significant anecdotal evidence and emerging research on the challenges of FIFO work and the associated stresses. FIFO work takes place in a range of industries including oil and gas, mining, construction and transport. The diversity of these industries (on shore, off shore, remote camps, camps in existing townships, variation in swing lengths), combined with the workforce's rapid expansion, add to the complexity of establishing a sound evidence base on this workforce.

Current research on the mental health of FIFO workers and their families is limited and somewhat conflicting, leading to some uncertainty about whether this population group experiences mental health conditions at the same, or higher rates than the general population. While the exact prevalence of mental health conditions in FIFO workers is currently unknown, **there is a clear recognition that there are a range of general workplace stress factors and specific aspects of the FIFO role that may put workers, their families and communities at risk for mental health problems.** Such factors include social isolation, disruptions to normal family life and routines, rostering arrangements and job strain created by high demands and low control over their work and life while they are on camp. The current downturn in the resources industry, which is leading to redundancies among the FIFO workforce, greater levels of uncertainty, and reports that FIFO workers are not willing to 'speak up' about their workplace and/or mental health concerns, may also add to an already stressful work environment.

Access to mental health support and services is also a key issue for FIFO workers, in particular the ability to access timely, comprehensive and consistent care in remote communities, including specialist mental health assistance when required. The relative lack and variety of services may be further compounded by the general reluctance among men to seek treatment from mainstream services, much of which is caught up around notions of masculinity. Being in a male-dominated working environment has the potential to contribute to low levels of help-seeking for mental health difficulties.

A range of responses is required to ensure FIFO workers enjoy the same benefits as other workforces. General workplace mental wellbeing initiatives should be complemented by more tailored programs and services that are fit-for-purpose, acceptable to the demographic profile of the FIFO workforce, and innovative and flexible enough to deal with the variety of people's circumstances and needs. We believe any recommendations from this Queensland FIFO inquiry also need to be considered from a broader national context. This should involve all States and Territories and consider the findings and recommendations from the 2014/15 Western Australian inquiry into mental illness in FIFO workers and the recommendations from the 2012 Commonwealth inquiry into the use of FIFO workforce practices in regional Australia.

beyondblue recommendations

beyondblue is available to work with the Queensland Government on ways to improve the mental health of FIFO workers their families, with an emphasis on preventing depression, anxiety and suicide, and assisting people who become unwell to access effective self-help, peer-to-peer support, and brief and low-intensity interventions that enable them to recover and remain well.

***beyondblue* recommends the Queensland Government:**

- 1) Views the issue of the mental health and wellbeing of FIFO workers, their families and their communities as a national, all government issue, and seeks to facilitate a national response. This response should incorporate the recommendations from the 2012 Commonwealth inquiry on FIFO work practices, and the findings from the 2014/15 Western Australian inquiry on FIFO workers. A national approach to improving the mental health of the FIFO workforce is essential, as many FIFO workers travel interstate, and FIFO employers work across multiple states/territories.
- 2) Funds research with respect to:
 - a) the mental health impacts of FIFO work, to better understand prevalence rates, worker experiences, including what the stressors are for these workers, and what helps them to function effectively
 - b) suicide risk and behaviours among FIFO workers, including the role of relationship problems prior to death
- 3) Meets with *beyondblue* to discuss innovative solutions that could be tailored to this workforce including the NewAccess Program. *beyondblue* would be keen to discuss the potential value of this model for FIFO communities, with the view to possibly conducting a pilot. A targeted *beyondblue* Roadshow could also visit Queensland FIFO communities, as recently undertaken in the Pilbara region of Western Australia.
- 4) Partners with industry associations to develop and implement a collaborative approach to improving the mental health and wellbeing of FIFO workers.

***beyondblue* recommends FIFO employers:**

- 5) Demonstrate via their senior management team an active commitment to the mental health of their workers as an industry priority.
- 6) Create mentally healthy workplaces, through developing a Heads Up mental health action plan. This practice must also be extended to all sub-contractors.
- 7) Integrate the Heads Up mental health action plans into existing safety management systems of their operations and those of any sub-contractors.
- 8) Develop clear policies and procedures on supporting people experiencing mental health conditions, including facilitating access to health services and responding to mental health crises.
- 9) Facilitate access to e-mental health treatment programs.
- 10) Promote awareness of the *beyondblue* Man Therapy website.
- 11) Promote awareness of the *beyondblue* Support Service and resources available for FIFO families.

beyondblue is a national, independent, not-for-profit organisation working to promote good mental health. Our vision is that all people in Australia achieve the best possible mental health. We create change to protect everyone's mental health and improve the lives of individuals, families and communities affected by depression, anxiety and suicide.

This submission has been informed by *beyondblue*'s extensive experience in workplace mental health, which includes research, education and training, partnering with industry and industry associations, and recently launching the national 'Heads Up' initiative.

The health impacts on workers and their families from long-distance commuting, particularly mental health impacts and the provision of health services in mining communities

The mental health of FIFO workers and their families

Research on the mental health of FIFO workers and their families is currently limited and somewhat conflicting – some research suggests that these workers may be more likely to experience mental health conditions,¹ while other research indicates that this population group may be less likely to experience mental health conditions compared to other employment types,² and the general population.³ The different research outcomes on the mental health of FIFO workers most likely reflects methodological differences across studies – for example, the type and number of workers included in the research, measurement tools used, and timeframes for the study. Large-scale, high quality research is needed to better understand the mental health of this workforce, including specific FIFO-related factors that impact on mental health and wellbeing outcomes.

While the prevalence of mental health conditions in FIFO workers is currently unknown, there is a clear recognition that they are likely to be specific aspects of the FIFO role that puts workers, their families and communities at risk for mental health problems. These factors include social isolation, disruptions to normal family life and routines and shift rosters. The demographic profile of FIFO workers also overlaps with the age when men are more likely to experience depression and anxiety,⁴ and when the most number of deaths by suicide occur.⁵

Generally, depression and anxiety do not result from a single cause or event, but arise from a complex interplay of biological, psychological, environmental and social factors. The *beyondblue*-commissioned systematic literature review on “*Workplace mental illness and substance use disorders in male-dominated industries*” confirmed that there are a broad range of risk factors for depression and anxiety in people working in male-dominated industries such as mining.⁶ These include individual, team, work and individual/workplace interface factors – as outlined in [Table 1](#).

Individual
<ul style="list-style-type: none"> • Demographic characteristics <ul style="list-style-type: none"> ○ Being a younger worker ○ Being more junior in the work team, unit, company ○ Being male
<ul style="list-style-type: none"> • Life experiences <ul style="list-style-type: none"> ○ Negative life events (e.g., death of a close family member, divorce)
<ul style="list-style-type: none"> • Individual characteristics <ul style="list-style-type: none"> ○ Job unsuitability ○ Attitudes towards work, associated with job security ○ Believing that alcohol will lead to positive experiences ○ Expectations of, or actual job changes
<ul style="list-style-type: none"> • Disparity in occupational status: <ul style="list-style-type: none"> ○ Manual workers were more at risk than non-manual workers ○ Unskilled workers were at significantly more risk than skilled workers ○ Lower status occupations were significantly more likely to be at risk than higher status occupations ○ Blue collar workers were at significantly more at risk than white collar workers
Team
<ul style="list-style-type: none"> • Poor workplace relationships <ul style="list-style-type: none"> ○ Lack of line manager support ○ Poor supervision combined with job stress

○ General lack of support and cooperation at work
● Permissive drinking norms
Work
● Work demands; job demands and job overload
● Poor employment conditions and job insecurity
● Limited work role; inability to use one's skills/decision-making capacity
Individual/Workplace Interface
● Work/life imbalance (e.g., little time to unwind after or see family between shifts, unpredictable work hours, excessive overtime)
● Job demands/overtime/negative work-related life events

Table 1: Risk factors for depression, anxiety disorders and substance use disorders in male-dominated industries

Research explicitly focusing on FIFO workers suggests that these risk factors may be important contributors to mental health conditions in this population group. Specific workplace-based risk factors reported by some FIFO workers include difficulties in completing jobs within the allocated timeframes; workloads being unrealistic; and having a lack of control over their work and life while they are on camp (for example, the Western Australian inquiry into FIFO work reports the regimented nature of FIFO life – including not being able to decide when and what to eat, what time to go to bed, and the nature of activities available off-shift – are a source of stress).^{7,8} Other common adverse effects of FIFO work which are reported in the literature, and align with the risk factors for experiencing mental health conditions, include:⁹

- High stress levels and poor health, including binge drinking, recreational drug use and obesity
- Poor quality relationships which lead to increased separation and divorce
- Family disruption and stress
- Reduced social and community interaction
- Feelings of loneliness and isolation.

It is also important to consider substance use among FIFO workers. The systematic literature review on mental illness and substance use in male-dominated industries indicated that alcohol problems appear to be more concentrated in the construction industry and among manual workers, with higher prevalence rates also evident in manufacturing, mining and transport industries.¹⁰ A complex relationship can exist between mental health problems and substance use – alcohol and other drugs may be used to ameliorate the symptoms of mental health problems and, conversely, can contribute to severity of symptoms. At other times, they can co-exist within the same person in an apparently unrelated way. The consequences of mental health conditions and substance use may be exacerbated when they occur concurrently.¹¹

There is little empirical data on the **prevalence of suicide in the FIFO workforce.**¹² Some research has suggested that miners who die by suicide may be more likely to experience relationship problems prior to their death, compared to other workers who die by suicide.¹³ While this research requires further exploration, and applies to all mining workers, rather than just FIFO workers, the finding may have practical implications for both workplace policies and support programs (for example, providing additional assistance to FIFO workers experiencing relationship problems).

It is important to note that, while the existing research provides indications of which risk factors may disproportionately impact on FIFO workers, **further research is needed to better understand the mental health of this workforce, including the factors that may negatively and positively contribute to mental health and suicide risk.** Further research is also needed to assess the impact of FIFO working arrangements on families, as the current evidence suggests that FIFO work practices can have positive, negative or few effects on children and family relationships, depending on the circumstances.¹⁴ The effects of FIFO work

appear to vary according to workplace-related factors such as culture, rosters and recruitment practices, as well as community and home environments and individual characteristics.¹⁵

Access to health services

The impact of FIFO working arrangements on access to health care services is not well documented.

Some feedback from health professionals suggests that a lack of available and consistent health care for FIFO workers is negatively impacting on the identification and effective management of health problems.¹⁶ Evidence presented to the recent Western Australian inquiry into FIFO work suggests that many FIFO workers do not access mental health services, as they fear that their employment will be terminated.¹⁷ The complexity of disclosing a mental health condition at work, and accessing health services with the support of an employer, may be heightened within FIFO workplaces – for example, it is not clear what the obligations are of employers in facilitating access to health services. This is problematic when employees in a remote location experience a mental health crisis and need immediate care. Within the FIFO workforce it may also be more difficult for employers to make reasonable adjustments to an employee's work, due to the remoteness and specialised nature of many roles. It is important that FIFO employers develop clear policies and procedures on how they will support people experiencing mental health conditions, including facilitating access to health care, and that these be supported by senior management. It is also essential that FIFO workers can access early intervention programs and services, to prevent the escalation and impact of mental health conditions.

There is an important role for e-mental health programs in improving access to mental health treatment among FIFO workers. Randomised controlled trials have demonstrated that e-mental health programs are as effective as face-to-face treatment for people with mild to moderate depression and anxiety (including social phobia, panic disorder and generalised anxiety disorder).^{18,19,20,21} The MindSpot Clinic - <http://mindspot.org.au/> - is an example of an existing evidence-based e-mental health program which provides assessment and treatment services for anxiety and depression. The Clinic provides guidance from a MindSpot therapist, which is accessed online and/or via telephone, and is available for free. **E-mental health services can overcome many of the barriers experienced by FIFO workers in accessing face-to-face care**, as they enable workers to access services confidentially, at a time and location that suits their needs. It is important that FIFO employers and the government enable and support access to these programs, by providing high-quality internet access at FIFO sites.

When considering the availability and use of mental health care services within FIFO communities and workers, **broader research findings assessing men's use of mental health services is relevant**. This research demonstrates that men use all services within the health care system to a lesser extent than women.²² The 2008 National Survey of Mental Health and Wellbeing study found that in the previous year, only 27.5 per cent of males with a mental disorder and recent symptoms had accessed services for their mental health problems, compared with 40.7 per cent of females.²³ Subsequent research indicates that treatment rates have increased significantly in recent years, however these treatment rates are not reported by gender.²⁴

There are a number of **barriers that contribute to men's willingness and ability to seek help for depression and anxiety** – these include high levels of self-stigma, a perceived lack of skills and support, a need for control, and a preference for action over introspection. These barriers to using mental health services may be exacerbated in FIFO workers.

To **increase men's use of health services for depression and anxiety**, *beyondblue*-commissioned research suggests that:

- Men are provided with tools, such as checklists, to support them to identify problems and take action
- Health messages are delivered in line with the world-view of men, and in ways that are personalised but non-confronting, and provide permission to connect with others
- Language used to describe depression and anxiety focuses on 'taking action' / 'acting', rather than 'help seeking' or 'needing help', which may be perceived as being passive and emasculating

- Framing depression and anxiety as ‘routine but serious’ health conditions which require monitoring, similar to the monitoring of cholesterol levels and blood pressure.

These evidence-based strategies should be used when designing and delivering healthcare services targeting the mental health and wellbeing needs of FIFO workers.

The effects on families of rostering practices in mines using FIFO workforces

The Western Australian inquiry into FIFO work suggests that **high compression rosters, where more time is spent away from home, has been linked to negative impacts on family relationships**. It also contributes to the remoteness and social isolation experienced by workers.²⁵ To better understand the impact of different rostering practices on families, more research is needed.

In the meantime, **the existing research which assesses the broader impact of FIFO working arrangements on families, should be considered**. While these research findings are sometimes conflicting and inconclusive,²⁶ some research suggests that:

- There may be relationship difficulties associated with FIFO working arrangements in general, including difficulties in communication; unmet expectations while workers are at home; an unequal share of family responsibilities; and role conflicts. Despite these difficulties, families generally report accepting and coping with the FIFO arrangements, and the benefits, including high salaries and extended time at home, may justify and/or outweigh the costs.²⁷
- There does not appear to be significant psychological impacts of FIFO arrangements on children. The limited research available indicates that rates of depression, anxiety, and the level of family functioning, do not significantly differ between FIFO families and a comparable community-based sample.²⁸
- FIFO workers may be as healthy, or healthier, than ‘daily commute’ workers, and have comparable long and short-term stress levels.²⁹
- Compared with locally resident miners, FIFO miners report higher levels of sleep disturbance, and more interference from work in the ability to perform social and domestic activities (such as participating in sport, attending the doctor, looking after children).³⁰

While additional research is needed to better understand the impact of FIFO working arrangements on families and workers, and in particular the impact of different rostering practices, it is important to note that this working arrangement may be the preferred type of employment for workers and families, depending upon their life stage.

The effect of a 100% non-resident FIFO workforce on established communities

The impact of a 100% non-resident FIFO workforce on established communities is not well understood. However, the existing research that has investigated the effect of FIFO workforce practices more generally, suggests that **their impact on established communities may include:**^{31,32}

- tensions between FIFO workers and residents – residents have a long-term commitment to the community, but may feel that they ‘bear the burden’ of sustaining and improving the community
- increased costs associated with housing and daily living
- FIFO workers being a ‘burden’ on local services and infrastructure, that are unable to meet demands
- different patterns of crime and violence, impacted on by excessive alcohol and other drug use
- mental health problems
- increased numbers of fatigue-related injuries and accidents
- family-related problems, including violence, break-ups and parenting problems
- low levels of community cohesion and connectedness.

These problems may be exacerbated when there are 100% non-resident FIFO workforces, with the additional problem of local residents not being able to access the employment options in their local region.

Strategies to optimise the FIFO experience for employees and their families, communities and industry

Increasingly workplace mental health is being recognized as a significant issue for businesses. Research undertaken by PricewaterhouseCoopers (2014) found that untreated mental health conditions cost Australian employers \$10.9 billion every year through absenteeism, reduced productivity and compensation claims.³³ Conversely, **investing in workplace mental health and wellbeing via targeted strategies to support employee mental wellbeing is estimated to provide a return on investment of \$2.30 for every dollar spent.**³⁴ Overall, the evidence indicates that workplaces where the staff believe management values their mental health and wellbeing tend to experience less absenteeism and turnover and achieve greater productivity.³⁵

beyondblue initiatives and programs that support employee mental health

Workplace mental health has been a priority for *beyondblue* since its inception in 2000, and *beyondblue* has a range of initiatives and programs to support the mental health and wellbeing of FIFO workers and their families, and reduce suicide.

Heads Up (www.headsup.org.au)

Heads Up is an Australian-first initiative of *beyondblue* and the Mentally Healthy Workplace Alliance¹ launched in July 2014, which supports Australian businesses and workers to create more mentally healthy workplaces. Mentally healthy workplaces are those which are considered friendly and supportive, promote a positive workplace culture, minimise workplace risks related to mental health, support people with mental health conditions, and prevent discrimination.³⁶ **They have been demonstrated to provide better support and protect employee mental health, and be more productive.** Mentally healthy workplaces are also more likely to have management and human resource practices which support the recruitment and retention of people with a mental health condition.^{37,38} This includes policies related to equal employment opportunities, work health and safety, diversity, return to work and leave arrangements, and the delivery of mental health awareness training to staff and managers.

Through Heads Up, FIFO employers can support the mental health and wellbeing of their staff, by developing a tailored and practical action plan for creating a mentally healthy workplace, based on their specific needs. The interactive step-by-step Heads Up guide helps employers and employees to identify priority areas of action, implement strategies to address these priorities, and review and monitor the outcomes. The flexibility of Heads Up provides employers with the ability to respond to specific concerns within their workplace – for example, the Western Australian FIFO inquiry reports that FIFO supervisors often feel that they are not adequately trained to deal with mental health issues, and this negatively impacts on people’s willingness and ability to seek help.³⁹ Heads Up can respond to issues such as this, through delivering training programs on how to recognise and respond to mental health problems at work.

Tailored Heads Up action plans can be developed at any level of an organisation including corporate strategy, division, site, shift, crew and team. Health and Safety Representatives can also integrate the Heads Up action plan as another component of existing safety management systems and messages. These plans can therefore be directly relevant to the particular needs and circumstances of FIFO employees and employers. Heads Up action plans can also link directly to support materials and resources from members

¹ The Mentally Healthy Workplace Alliance is a tripartite alliance of business, government and the mental health sector which is committed to improving the mental health of Australian workplaces. Founding Alliance members include the National Mental Health Commission, Australian Chamber of Commerce and Industry, Australian Psychological Society Ltd, *beyondblue*, Black Dog Institute, Business Council of Australia, Comcare, Council of Small Business Organisations of Australia, Mental Health Council of Australia, Safe Work Australia, SANE Australia, and University of New South Wales. The Alliance has now been recently joined by Super Friend and the Australian Industry Group.

of the Mentally Healthy Workplace Alliance and can be expanded to include specific supports and resources available from employers.

Some examples of key issues that can be addressed through a Heads Up action plan include:

Priority area	Example strategies
Increase awareness of mental health conditions	Provide information (e.g. fact sheets/pamphlets in staff rooms) to everyone in the workplace about mental health conditions – prevalence, signs and symptoms, and available services and support
Reduce stigma	Promote the personal stories of people who have experienced and recovered from a mental health condition
Increase the skills and confidence of everyone in the workplace to approach someone they are concerned about	Provide mental health awareness training to staff and managers, either online or face-to-face.
Encourage employees with mental health conditions to seek treatment and support early	Provide information about available services and support, such as face to face services, information lines, e-therapies/programs or an Employee Assistance Program, to encourage people to seek treatment and support early. In remote locations promote and provide rapid access to mental health services with equivalent levels of management support as for a physical injury.
Make adjustments to job roles, schedules or workloads to support someone with a mental health condition	Make changes in the workplace to support someone with a mental health condition stay at or return to work (e.g. allowing time off to attend appointments with health professionals, adjusting working hours, avoiding unnecessary shift changes).
Support employees with mental health conditions to stay at or return to work	Develop and implement return to work or stay at work plans, tailored for employees’ needs
Monitor and manage work hours and schedules	Encourage employees to speak up at an early stage if they feel their tasks are excessive and to seek guidance about priorities
Avoid excessive workloads	Regularly review employee workloads at team meetings and during formal and informal catch-ups
Increase job control	Give employees a chance to have input into how tasks are completed and more control over the method and order of their tasks
Ensure clarity on job roles	Ensure that all employees have an up-to-date job description which includes role purpose, reporting relationships and key duties expected of them
Reward effort and recognise achievements	Provide regular feedback on task performance. Recognise whenever a task is done well and give constructive feedback on areas for improvement

The Heads Up website also includes a range of practical resources that are relevant to individuals within a workplace, including people with mental health conditions, managers and organisational leaders, as well as the self-employed. These include interactive online resources (e.g. How to have a conversation with someone you are concerned about), case studies, videos (e.g. people who have had a personal experience of a mental health condition), brochures and fact sheets.

beyondblue is working closely with industry associations and Alliance partners to promote Heads Up within the resources sector. *beyondblue* has a partnership with the Australian Mines and Metals Association to promote mentally healthy workplaces across their membership. The Mental Health Working Group of the Chamber of Minerals and Energy has also workshopped material developed by Heads Up with a view to adapting the principles for effective mental health strategies for the resources sector.

Case study – BHP Billiton Iron Ore implementing Heads Up⁴⁰

BHP Billiton Iron Ore has developed a new Mental Wellness Standard, to provide a coordinated approach to proactively manage the mental health and wellbeing of employees. This Standard is based on Heads Up, and addresses the priority areas of: raising awareness of mental health; improving workplace culture; and building skills by enhancing people's capability to seek support if they need it, and take action if they notice a workmate having a tough time.

Case study – Sodexo 'I Hear You' campaign

Sodexo Australia has launched a campaign 'I Hear You' to raise awareness of mental health issues and encourage employees to reach out for help by bringing issues into everyday conversations. The initiative is aimed at ensuring meaningful and immediate support is available in times of personal crisis. It provides direct access to trained telephone crisis supporters at Lifeline. Sodexo is now expanding this campaign to include training and initiatives such as Heads Up.

[beyondblue Support Service – 1300 22 4636 - www.beyondblue.org.au/getsupport](http://www.beyondblue.org.au/getsupport)

The *beyondblue* Support Service provides all Australians with the opportunity to talk through their concerns with a qualified mental health professional. The service is delivered via a 24/7 telephone service, a web chat service from 3pm to 12am (AEST), and an email response service. **FIFO workers and their families can receive a one-on-one counselling session focussed on addressing their immediate concern, and receive information and advice on continuing to seek help.** The service has recently been independently evaluated and demonstrated to reduce levels of distress and increase motivation to take action for mental health concerns.

[NewAccess – www.beyondblue.org.au/newaccess](http://www.beyondblue.org.au/newaccess)

NewAccess is a *beyondblue* demonstration project that provides a support service to help people tackle day-to-day pressures. This early intervention program provides easily accessible, free and quality services for people with symptoms of mild to moderate depression and/or anxiety who are currently not accessing mental health services. Trained and clinically supervised coaches operate like personal trainers, providing individual tailor-made support programs incorporating relevant areas such as problem solving, goal setting and dealing with worries. Importantly, the program teaches people self-help techniques, that enable them to lead their own recovery. Additionally, NewAccess links clients into local community networks and engages them with other service providers should they require it - for example, employment, financial or housing assistance.

The program is currently being piloted and evaluated in three regions across Australia – Canberra, metropolitan Adelaide, and North Coast New South Wales. It is the result of four years of research and collaborative discussion in Australia and has been adapted from the highly successful UK Improving Access to Psychological Therapies (IAPT) initiative. IAPT is a National Health Service program rolled out across England and proven to improve mental health outcomes. Before the end of the pilot in 2016, *beyondblue* intends to have proven the effectiveness of New Access for a national rollout. Interim evaluation findings for the New Access pilot have been promising - the non-medical model is encouraging men to seek help in higher numbers (39 per cent of all clients are men) and we are achieving an average recovery rate of 68 per cent - well in excess of the UK IAPT benchmark of 50 – 55 per cent.

While NewAccess is currently not being delivered in Queensland FIFO communities, **this unique service delivery model has the potential to provide preventative and early intervention services to meet the needs of FIFO workers.** It can be delivered either face-to-face or over the phone, which makes it suitable for FIFO workers. The program could also be delivered to the partners of FIFO workers, to help them better manage the challenges of a FIFO lifestyle.

Man Therapy - www.mantherapy.org.au

beyondblue's Man Therapy campaign encourages men to take action against depression and anxiety. At www.mantherapy.org.au, men can assess their wellbeing, get answers to frequently asked questions about mental health and receive action-oriented advice on dealing with depression and anxiety. The campaign and website feature the fictional Dr Brian Ironwood, a straight-talking 'man's man' who combines humour with serious messages about mental health.

FIFO workers can use the Man Therapy website to:

- learn the signs of depression and anxiety
- know the range of treatment options
- develop a personal action plan

beyondblue Roadshow

From February 2014 to May 2015 the *beyondblue* National Roadshow is travelling over 50,000 kilometres across every state and territory in Australia, visiting hundreds of communities and encouraging all Australians to 'Take 1 step' for better mental health. In response to requests from community groups, industry organisations and local governments, in May 2015 the Roadshow is visiting the Pilbara in Western Australia, to support mine workers and communities. With the support of BHP Billiton Iron Ore, Rio Tinto Iron Ore, Woodside Energy, ESS Compass and Sodexo, ***beyondblue* is talking directly with FIFO workers and their employers about mentally healthy workplaces.** By openly discussing mental health and sharing stories, the Roadshow will help breakdown the stigma associated with seeking support for mental health problems. A similar Roadshow could visit FIFO workplaces in Queensland.

Programs and services for FIFO families

beyondblue provides a suite of programs, services and resources which support the mental health and wellbeing of the partners and children of FIFO workers. This includes:

- **pregnancy and early parenthood information and resources** – www.beyondblue.org.au/resources/for-me/pregnancy-and-early-parenthood - through the National Perinatal Depression Initiative *beyondblue* has developed a range of tools to support parents during pregnancy and early parenthood.
- **Youth *beyondblue*** – www.youthbeyondblue.com - *beyondblue's* youth program aims to empower young people and encourage them to share their experiences with their peers. One example of a Youth *beyondblue* resource is the BRAVE program, which is an online prevention and treatment program for anxiety (see: <https://brave4you.psy.uq.edu.au/>)
- **Parenting Information** - <http://www.beyondblue.org.au/resources/family-and-friends/parents-and-guardians> - *beyondblue* has a range of information resources for parents regarding how to support healthy child development and respond effectively to children experiencing emotional or behavioural difficulties.
- **Separation resources** – information booklets on separation have been developed, targeting both [women](#) and [men](#). These booklets provide practical information and tips on how to better manage the separation process and where to go for further assistance.

The effectiveness of current responses to impacts of FIFO workforces of the Commonwealth, State and Local Governments

beyondblue's strategies which support the mental health and wellbeing of FIFO workers and their families are delivered through funding from the Commonwealth and State and Territory governments, and with donations from the Movember Foundation. The most recent independent evaluation of *beyondblue*, conducted in 2014, demonstrated that we are a highly efficient and effective organisation, and have deep reach and penetration into both the general community and workplace settings.⁴¹

beyondblue's Workplace and Workforce Program has also been recently independently evaluated. Interim findings indicate that the Heads Up initiative has contributed significantly to the broader awareness of mental health in Australian workplaces - 16 per cent of the Australian working population is aware of the Heads Up marketing strategy, and 22 per cent are aware of the Heads Up website. The Heads Up initiative has had a positive impact on depression and anxiety in Australian workplaces with, over the course of the evaluation period:

- five per cent more Australian workplaces indicating they had implemented workplace mental health programs or policies
- the average number of mental health practices, programs and policies in Australian workplaces increasing from 3.87 to 4.49 per workplace
- a significant improvement in the perceived mental health of workplaces among managers and employees (from 64 per cent describing their workplace as 'mentally healthy' at benchmark to 73 per cent at evaluation).

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