

# Needs Assessment Summary

## LOW INTENSITY MENTAL HEALTH SERVICES



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health system for the Gold Coast.”*

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# Low Intensity Mental Health Services

Low intensity mental health services aim to target the most appropriate psychological interventions to people experiencing or at risk of developing mild mental illness (primarily low acuity anxiety and/or depressive disorders). Defining target populations, educating consumers and providers and developing low intensity service models will contribute to improved outcomes for a wide group of consumers. Within a stepped care approach, low intensity mental health services target lower intensity mental health needs. This enables the provision of an evidence based and cost-efficient alternative to the higher cost psychological services available through programs such as Better Access and other primary mental health care services.

## Local health needs and service issues

- Flexible evidence based services are required and could include the adaptation of existing groups and alternative service models.
- Promotion of low intensity services to General Practice to support complementary use with other primary health interventions
- Develop effective pathways to increase accessibility to evidence based electronic (digital) mental health services.



## Key findings

- While there are a broad range of quality online and telephone services (eMH services) available for people with low acuity mental health issues, there is limited data on local usage.
- There is limited integration of eMH services as complementary service options within existing primary health care service delivery.
- Consultation indicates effective early intervention can prevent deterioration but there are limited soft entry point models (coaching, wellness focussed, peer-support) that focus on social and community connectedness.
- From a client perspective, a significant positive impact on recovery can be gained by General Practitioners referring to services that fit the needs of the client. For example, treatment options can be augmented using community based self-help groups and soft entry services that use activities to engage clients and build their skills and confidence.



## Prevalence, service usage and other data

The National Mental Health Commission estimate there were approximately three million Australians with a mild-moderate mental illness in 2014<sup>1</sup>. This equates to an estimate of around 77,000 people in the Gold Coast community.

Low intensity services can include online, telephone, individual and group based interventions. As depicted through the below service mapping table, there are myriad telephone and online services that could be accessed by people on the Gold Coast. While there is limited local usage data for these services a 2015 sample from Beyond Blue's telephone counselling service indicated approximately 44% of calls from the Gold Coast related to depression (26%) and anxiety (18%).

Access to online low intensity service options requires internet connectivity, which may present a barrier for some people. In 2016, Gold Coast households that did not access the internet was 11.4%, lower than the state average of 13.6%. Within the Gold Coast the areas with the most households that did not access the internet were in Coolangatta (15.6%, 3,194 households) and Gold Coast North (14.9%, 3,915 households)<sup>2</sup>.

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<sup>1</sup> National Mental Health Commission, 2014: The National Review of Mental Health Programmes and Services. Sydney: NMHC Published by: National Mental Health Commission, Sydney.

<sup>2</sup> Australian Bureau of Statistics, 2016, Gold Coast (SA 4), Quick Stats

# Service Mapping

Services	Number in GCPHN Region	Distribution	Capacity Discussion
Low intensity groups (funded by GCPHN)	15 per year for target groups – CALD, LGBTIQAP+, Dual Diagnosis.	Good geographic spread across the Gold Coast, however service base is around the Southport area	Due to the paucity of local service usage, it is unclear if there are significant capacity issues with telephone or online services.
Counselling helplines and websites.	10 national help lines (men's line, Veterans and veterans families counselling service, Qlife, CAN, Carers Australia, eheadspace, 1800 Respect, Relationships Australia, Counselling online, Child abuse prevention service).	Online and telephone services. Public knowledge of these services and connectivity capacity would drive uptake/demand.	It is challenging to access information on the number and coverage of evidence based support groups.  Issues may arise during peak periods of call volumes and web activity. Potential access barriers include internet infrastructure and associated costs, digital literacy and consumer and health provider awareness.
Information and referral helplines and websites.	9 national (MindHealthConnect, Mi networks, SANE Australia, beyond blue, ReachOut.com, R U Ok? Black Dog Institute, Mental Health Online, Commonwealth Health Website).	Online and telephone services. Public knowledge of these services and connectivity capacity would drive uptake/demand.	
eTherapy.	57 (online programs recommended through MindHealth Connect to promote eTherapy and self-care).	Online. Public knowledge of these services and connectivity capacity would drive uptake/demand.	

# Consultation

Various consultation activity was undertaken across the 2015-16 period with the Gold Coast community, clinicians and service providers. Mechanisms included broad scale community briefing, consumer journey mapping, one to one interviews, industry presentations, working groups and co-design processes.

## Service provider consultation

- Getting the right treatment at the right time can be a way of getting the most out of a low intensity service. Delay in acknowledging need and seeking treatment combined with stigma and discrimination contribute to poor client outcomes.
- The ability of the GP to maintain an awareness of local services and confidently refer clients has a significant positive impact on recovery. It means that the care of the GP can be augmented with services that best fit the needs of the client. Examples are community based self-help groups and soft entry e-services that use activities to engage clients and build skills and confidence.
- If GPs know about and refer patients to online, self-help, low intensity services, it can assist the recovery journey.
- Balanced against service provider feedback, a comment received from a GP is - “if patients are able to articulate what their needs are this is associated with a level of satisfaction, but sometimes they don’t want what is offered so it is difficult to find the most appropriate solution or referral pathway”.

## Service user consultation

Service users report the identification and development of flexible evidence based services, support groups and group sessions would add value to existing available options. Additionally, a campaign to inform General Practice about the services available would add value for consumers. Digital mental health services do fulfil a need for some consumers, and effective pathways can increase the accessibility of these evidence based electronic services.

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