Appendix J – Supporting people in mental distress



When I was on the street, I would become very fearful and suspicious of everyone, very paranoid – I thought people were trying to hurt me. Everything was brighter, closer, louder – all noise sounded like nails down a blackboard. I trusted no one.

Each person has their own unique experience and needs. It is important to understand the intersectionality between a person's gender, race, sexual identity, culture, experiences and circumstances. Workers may refer to multiple appendices to assist their understanding, engagement and support for each person they engage.

Overview

People experiencing homelessness may exhibit symptoms of mental distress. Mental or psychological distress is when someone has deeply unpleasant feelings, symptoms or experiences which may or may not be due to mental illnessⁱ. Mental distress can occur as a reaction to one particular situation/incident, or a combination of factors that places extra-ordinary stress and pressure on a person. People react differently to highly stressful eventsⁱⁱ.

People in crisis can experience strong emotions, including feeling overwhelmed, tearful, agitated, worried, fearful, angry, helpless or hopelessⁱⁱⁱ. People in mental distress may or may not be experiencing thoughts of suicide or self-harm. Mental distress may impact a person's capacity to concentrate and/or control these emotions. A person may display a range of behaviours such as crying, yelling, raised voice, confusion, impaired judgement, and/or difficulty with seemingly simple tasks.

Supporting people who are experiencing heightened distress can be challenging. It can feel uncomfortable to be in the presence of strong expressions of emotion, but it is important to realise that this is a common reaction to stressful and unexpected events^{iv}. More than 80% of people experiencing homelessness report having experienced life-altering trauma at some point in their lives^v. Homelessness can amplify mental distress due to increased anxiety, fear, depression, sleeplessness and/ or substance use. People may experience feelings of helplessness or hopelessness which can lead them to overlook opportunities for change or relief^{vi}. If mental distress is severe and ongoing it can develop into mental illness. People who have experienced homelessness have a significantly higher rate of mental health conditions (54 per cent) compared to the general population (19 per cent)^{vii}. For more information on supporting people with complex health conditions, see **Appendix K**.

It is important that a worker can identify and understand someone exhibiting symptoms of mental distress. The worker should demonstrate empathy during all interactions and be sensitive to the person's needs, prioritising the person's emotional and physical safety.

If a worker feels that their safety or the safety of others is at risk at any time, they should contact emergency services (000). The worker may also contact a specialist (such as the Mental Health Line) to assist in addition to emergency services.

Engagement strategy

Things to consider before engaging:

- Language has a profound impact on people and the use of inclusive and contemporary language empowers people, minimises stigma and changes culture over time.
- A worker should conduct a general assessment of the person's presentation and behaviour, taking note of any practical needs (like water, food or safety) that the worker can address during the interaction. The assessment should be conducted from an appropriate, safe, and respectful distance.
- Mental distress may be mistaken for alcohol or other drug misuse it is important the worker does not make assumptions and work with the person to address the person's needs.
- A worker must assess their person's safety and the safety of those around them. If there is any imminent risk to self or others the worker should contact emergency services (000) first for a response. After emergency services have been notified a worker can contact the Mental Health Line. All referrals to mental health services go through the Mental Health Line (see below).
- There is a very high prevalence of trauma amongst people who have experienced homelessness.
 Workers should use a trauma-informed approach. A trauma-informed approach maximises:
 - a person's feelings of choice (such as choice over the gender of the professional providing care support or treatment)
 - collaboration (such as asking at the outset what the person needs to happen through the encounter)
 - trust (such as being clear about what will happen and when)
 - empowerment (such as enabling the person to make active decisions with regards to their care, support or treatment)
 - safety (such as ensuring sufficient privacy).
- Unless the worker conducting the interaction is a qualified professional, the worker should only refer and where possible connect the person to appropriate support.

Strategies for engagement:

- Introduce yourself in a friendly manner, stating your name and the agency/organisation you work for.
- Give the person your full attention and do not interrupt the person when they are speaking.
- Provide clear information, using short statements if necessary. Avoid technical language or jargon. Provide short and easy choices.
- Use a gentle, reassuring tone, and be mindful not to let the person's anger or anxiety escalate your own emotions.
- It is important to be aware of your own feelings and model being calm, or at least present a calm exterior^{viii}.
- Use open ended questions (for example "what's happened to make you feel this way?"), keep your questions to a minimum, and give the person time to think before they respond.
- Consider stepping back and providing space to provide a non-verbal cue of 'no pressure'.
- Actively listen and paraphrase what the person is saying. You don't have to agree with what they are saying, but by showing you understand how they feel, you are letting them know you respect their feelings. For example, "it sounds like you are feeling ABC and that you want/plan to XYZ. Have I understood correctly?"
- Reassure the person that there are solutions and support. It is important not to try to rationalise or debate the issues, or pressure the person to see a positive side to their situation, or inadvertently shame the person for feeling hopeless^{ix}.
- Avoid providing opinions or advice, or agreeing/ disagreeing with what they are saying.
- Help the person consider their most urgent needs, and how and when they could be met.
- It is important to remember that the person may feel overwhelmed and present as disorganised when making decisions. You may need to directly assist them to access support (such as making a phone call for them or taking them to an office/service) as they may not be capable at that moment of carrying out simple tasks.

If someone has attempted or is at immediate risk of attempting to harm themselves or someone else, call **Triple Zero (000)** immediately.

RESOURCES

CRISIS SUPPORT			
Name	Service	Contact Details	
<u>13YARN</u>	A 24/7 national crisis support telephone service that provides confidential, culturally safe and appropriate assistance for Aboriginal peoples to speak about their needs or concerns.	Phone: 13 92 76 Email: <u>enquiries@13yarn.org.au</u> Website: <u>https://13yarn.org.au/</u>	
<u>Ask Izzy</u>	A website directory that connects people who are in need with nearby services such as housing, food, health care and legal services in their local area.	Website: https://askizzy.org.au	
Beyond Blue	A 24/7 confidential hotline of mental health professionals that provide support for people affected by anxiety, depression and suicide. A representative will provide information, advice and direct clients to relevant services to seek further support.	Phone: 1300 22 4636 Website: https://www.beyondblue.org.au/	
<u>Lifeline</u>	A 24/7 crisis support telephone service providing crisis support and suicide prevention services.	Phone: 131 114 <u>Sydney metropolitan</u> Phone: (02) 9361 8000 <u>Regional and rural NSW</u> Phone: 1800 422 599	
<u>Link2Home</u>	A statewide telephone service providing information, assessment and referral to specialist homelessness services, temporary accommodation and other appropriate services for people who are homeless or at risk of homelessness. It is available 24 hours a day 7 days a week every day of the year.	Phone: 1800 152 152 Website: https://www.facs.nsw.gov.au/housing/ help/ways/are-you-homeless	
<u>Mental Health</u> <u>Line</u>	 Free 24/7 statewide phone service linking people with NSW mental health services. It is staffed by trained mental health professionals who: offer mental health advice complete a brief assessment make recommendations for appropriate care, including referral to NSW Health mental health services. 	Phone: 1800 011 511 Website: https://www.health.nsw.gov.au/ mentalhealth/Pages/mental-health-line. aspx	

OTHER SUPPORT

Name	Service	Contact Details
<u>Alcohol and</u> <u>Other Drugs</u> <u>Information</u> <u>Service (ADIS)</u>	Provides phone counselling, support, referrals and information for people affected by alcohol or other drugs. Counsellors are trained to work with people concerned about their alcohol and drug use, as well as people concerned about their family or friends.	Phone: 1800 250 015 Website: https://svhs.org.au/our-services/list-of- services/alcohol-drug-service/alcohol- drug-information-service

RESOURCES

Australia's free (even from a mobile), confidential 24/7 online and phone counselling service for young people aged 5 to 25 years. Qualified	Phone: 1800 55 1800
counsellors at Kids Helpline are available via WebChat and phone anytime and for any reason.	Website: https://kidshelpline.com.au
Includes an extensive list of mental health support contacts that could assist someone in mental distress.	Website: www.health.nsw.gov.au/mentalhealth/ services/Pages/support-contact-list.aspx
Provide a calm and non-clinical alternative to hospital emergency departments, for people experiencing distress or suicidal thoughts. Safe Havens operate as a drop in service with no referrals needed.	Website: https://www.health.nsw.gov.au/ towardszerosuicides/Pages/safe-haven. aspx
A mobile service and provides support for people in distress or at risk of self harm in their communities or more familiar environments. People in distress can speak to a peer worker with lived experience or to a mental health clinician. SPOTs are accessed by calling the Mental Health	Phone: Mental Health Line 1800 011 511 Website: https://www.health.nsw.gov.au/ towardszerosuicides/Pages/suicide- prevention-outreach-teams.aspx
Irsm Phetre ApcPwc SL	ncludes an extensive list of mental health upport contacts that could assist someone in mental distress. Trovide a calm and non-clinical alternative to ospital emergency departments, for people xperiencing distress or suicidal thoughts. Safe lavens operate as a drop in service with no efferrals needed. A mobile service and provides support for eople in distress or at risk of self harm in their ommunities or more familiar environments. Teople in distress can speak to a peer worker vith lived experience or to a mental health linician.

i NSW Mental Health Commission (NSWMHC), <u>NSW Budget 2020-21 Analysis: Domestic Violence</u>, NSWMHC website, n.d.

ii Queensland Mental Health Commission (QMHC), <u>Supporting someone in distress</u>, QMHC website, n.d.

iii Ibid. iv Ibid.

v Psychiatric Times, <u>"I Have No One": Understanding Homelessness and Trauma</u>, Psychiatric Times website, 2022.

vi QMHC Supporting someone in distress.

vii Australian Institute of Health and Welfare (AIHW), <u>Mental health – Specialist homelessness services</u>, AIHW website, 2023.

viii QMHC Supporting someone in distress.

ix Ibid.