

30 November 2022

Employment Taskforce  
Treasury  
Langton Crescent  
Parkes ACT 2600

Submission via: [Consultation hub](#) (late submission by prior arrangement)

## Re: Employment White Paper - Consultation

headspace National welcomes the opportunity to provide a submission for the Employment White Paper consultation.

headspace, the National Youth Mental Health Foundation, provides early intervention mental health services to 12–25-year-olds across Australia. headspace centres form the largest national network of youth mental health services, with over 150 centres embedded in local communities across metropolitan, regional and remote areas.

Through headspace, young people can access multidisciplinary support in-person and online across four core streams: mental health; physical health (including sexual health); alcohol and other drugs; and work and study.

### Focus of the headspace Submission

Our submission responds to the following Terms of Reference.

- 2.1: Building a sustainable care economy in the context of an aging population and other drivers of demand for care services.
- 2.3: The transformation associated with digitalisation and emerging technologies.
- 5.2: Improving labour market outcomes for those who face challenges in employment, including First Nations people, those who live in rural and remote areas, younger and older Australians, people with disability, and those who may experience discrimination.
- 6: The role of collaborative partnerships between governments, industry, unions, civil society groups and communities, including placed-based approaches.

**Attachment 1** provides headspace's responses to these Terms of Reference, which reflect two main aspects of our work with young people across Australia:

*Supporting young people who face barriers to employment:* almost one in five young people aged 17-25 accessing headspace centres (over 5,000 young Australians annually) are not engaged in any form of employment, education or training. headspace provides young people with integrated vocational and mental health support that is focused on helping them remain engaged in work and/or study.

*Addressing critical mental health workforce shortages:* many headspace centres struggle to attract and retain the workforce they need to provide the holistic care and support that young people need. Sector-wide shortages are acute and projected to worsen. Immediate action is needed to increase the number

and capacity of qualified mental health workers Australia-wide. Even with immediate action, it will take several years for attraction and training initiatives to deliver increased numbers of qualified staff.

headspace would welcome the opportunity to discuss any aspects of our submission further, to assist the consultation process.

Yours faithfully,

**Jason Trethowan**  
Chief Executive Officer

## Attachment 1 - headspace National submission for Employment White Paper

### Introduction: supporting young people to thrive

Young people are at a critical stage of life vocationally, as they move from late adolescence into early adulthood and navigate the challenges of completing school, making career choices, seeking employment and training and beginning employment. Many young people find this stage of life challenging, with young people aged 15 to 24 years at particular risk of disengagement from education, employment and training.

Young people are also at a time of heightened vulnerability to mental health problems<sup>1</sup>.

Young people who are disengaged from employment and education are at increased risk of long-lasting negative outcomes including socio-economic exclusion, long-term welfare dependency, and poor mental health.<sup>2,3</sup> Participation in education or employment is recognised as a strong protective factor for young people's mental health, whilst non-participation is a major risk factor.<sup>4</sup>

Scarring from unemployment contributes to extended periods of unemployment, lower wages on re-employment, and increasing the probability of experiencing unemployment again.<sup>5</sup> This contributes to lost lifetime earnings, productivity and associated reduction in taxation revenue.

During 2022, young people told headspace that employment and education are key priorities. When asked what they are most looking forward to in the future, 54 per cent of young people surveyed said "developing their career" and 21 per cent said "further study". 14 per cent of respondents indicated that youth unemployment was one of the issues that most urgently needs to be addressed.<sup>6</sup>

Given the concern that young people have about their future employment and study opportunities, and the negative consequences of disengagement in work and study, it is critical that young people have access to integrated, collaborative and cross-sectoral vocational supports to achieve their work and study goals.

It is also necessary to build a sustainable youth mental health workforce to ensure that young people have the support they need to be socially and economically engaged over their life course.

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<sup>1</sup> Gore, F.M., Bloem, P.J., Patton, G.C., Ferguson, J., Joseph, V., Coffey, C., Sawyer, S.M., & Mathers, C.D. (2011). "Global burden of disease in young people aged 10–24 years: a systematic analysis." *The Lancet* 377(9783): 2093-2102.

<sup>2</sup> Powell, A., Salignac, F., Meltzer, A., Muir, K., & Weier, M. (2018). Background report on young people's economic engagement. Sydney, Centre for Social Impact, UNSW.

<sup>3</sup> Gore, F.M., Bloem, P.J., Patton, G.C., Ferguson, J., Joseph, V., Coffey, C., Sawyer, S.M., & Mathers, C.D. (2011). "Global burden of disease in young people aged 10–24 years: a systematic analysis." *The Lancet* 377(9783): 2093-2102.

<sup>4</sup> Holloway, E., Rickwood, D., Rehm, I., Meyer, D., Griffiths, S., & Telford, N. (2017). "Non-participation in education, employment, and training among young people accessing youth mental health services: demographic and clinical correlates." *Advances in Mental Health* 16(1): 19-32.

<sup>5</sup> Cassidy, N., Chan, I., Gao, A., & Penrose, G. 2020, Long-term Unemployment in Australia, Reserve Bank of Australia. Retrieved from: <https://www.rba.gov.au/>.

<sup>6</sup> headspace National. (2022). *Youth Mental Health Survey*. (publication pending).

## **Term of Reference 2.1: Building a sustainable care economy in the context of an aging population and other drivers of demand for care services.**

Building a sustainable care economy relies on addressing acute workforce shortages in the mental health sector, so that it has the capacity to support the increasing numbers of people facing barriers to participating in work and broader society.

The Productivity Commission estimated that mental ill health costs the Australian economy \$70 billion each year. This includes indirect costs of welfare support for people unable to work, as well as the loss of their potential contribution to the economy.

Demand for youth mental health services has increased and is continuing to do so. Since 2013/14 the number of occasions of service delivered by headspace centres has more than doubled.<sup>7 8</sup>

### ***Attraction and retention of the youth mental health workforce***

As highlighted by the Jobs and Skills Summit, and reflected in the Treasurer's budget observations, there are acute workforce challenges across health, social care and aged care sectors, nationally and internationally.

The mental health and wellbeing workforce is facing acute and enduring staff resourcing challenges. Despite decades of federal and state mental health workforce strategies and reviews, recruiting and retaining enough mental health workers remains an obstacle to providing consumers with appropriate access to services.<sup>9</sup> Specifically, there are shortages of workers across most occupations providing support and treatment to people experiencing suicidality, mental distress and/or ill-health.<sup>10</sup>

headspace centres are experiencing difficulty attracting and retaining staff, with a national survey finding that 87 per cent have difficulty attracting and retaining staff.<sup>11</sup> These challenges reflect those widely documented across the broader mental health sector, as highlighted by, for example, the Jobs and Skills Summit, the Royal Commission in Victoria and the Productivity Commission Inquiry into Mental Health.<sup>12 13</sup>

Nationally, major shortfalls exist across most mental health professional groups, and are likely to worsen over time. Even professional groups where supply currently appears stable will only remain so where there are sufficient pipelines (a ready pool of potential qualified candidates), coupled with long term recruitment and retention strategies.<sup>14</sup>

Additionally, extensive health and social care reforms at national and jurisdictional levels have increased roles for mental health clinicians and support workers, leading to increased competition within and between sectors for same pool of expertise.

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<sup>7</sup> Volume of centres, occasions of service and young people, 2013-2021

<sup>8</sup> headspace National. (2022). *An overview of youth mental health and our impact in FY 2021-2022*.

<sup>9</sup> RCVMS, Final Report Vol.4, section 33.1

<sup>10</sup> NMHWS – Consultation Draft ACIL Allen, 2021

<sup>11</sup> headspace service provider staff data collated August 2021

<sup>12</sup> State of Victoria. (2021). *Royal Commission into Victoria's Mental Health System, Final Report, Volume 4: The fundamentals for enduring reform*. Chapter 33.

<sup>13</sup> Productivity Commission. (2020). *Mental Health*. Canberra. Volume 2, chapter 16.

<sup>14</sup> State of Victoria. (2021). *Royal Commission into Victoria's Mental Health System, Final Report, Volume 4: The fundamentals for enduring reform*. section 33.1.

The volume and complexity of headspace client presentations impacts workforce wellbeing and retention. Like other mental health workers, the headspace workforce reports feeling burnt out, overworked, undervalued and not fairly remunerated<sup>15</sup>, and many feel insufficiently skilled to support young people presenting with increasingly complex needs. As a result, there are a large number of vacancies, attrition and absences which then increase pressure on remaining staff, in centres largely operating at or beyond capacity. This in turn leads to increased wait times and inconsistent provision of holistic, multidisciplinary care and support for young people.

Australia relies heavily on overseas-trained mental health professionals. This is no longer a sustainable means to resolve shortages, particularly in the aftermath of COVID-19 pandemic.<sup>16 17</sup>

headspace centres have also found it difficult to recruit professionals that are equipped to meet the needs of First Nations young people and young people from culturally and linguistically diverse backgrounds.<sup>18</sup> This can result in recruiting 'available' rather than 'suitable' workers.

To help address these workforce needs, headspace developed the **Early Career Program (ECP)**. ECP places allied health students and graduates in headspace centres and supports them to deliver services, while developing their skills for long term careers in youth mental health, with bespoke packages of training and clinical supervision.

Students and graduates from social work, occupational therapy, psychology masters (and PhD) disciplines are all capable, within their scope of practice and under supervision, of providing a range of evidence-based interventions at headspace. ECP is therefore building the youth mental health workforce that Australia needs for the future, while also delivering a major uplift in service capacity and support for young people now.

The availability, quality and diversity of clinical placements are important in providing trainees with positive experiences, leading to greater numbers of students and graduates pursuing careers in mental health.<sup>19</sup>

ECP participants learn in safe and supportive environments, receive appropriate supervision within their scope of practice, and over an appropriate duration to experience young people progressing in their recovery. These are all critical facets of quality training experiences that are known to reduce attrition and burnout, boost recruitment and retention, and increase the likelihood of sustained careers through to senior clinical practice.<sup>20</sup>

Establishment funding in the 2021-22 Budget supported two intakes of social work, occupational therapy and psychology graduates and associated student clinical placements in 56 headspace centres across three regions (Vic/Tas, QLD and WA). The 2022-23 budget provided one further year of program funding, enabling extension of the program in existing locations but not the planned, phased expansion of the program to all states and territories. headspace continues to advocate for the expansion of ECP Australia-wide to boost service capacity and build the sustainable pipeline of professionals with specialist youth mental health training that Australia needs. Further detail about ECP is provided at **Appendix One**.

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<sup>15</sup> headspace. (2021). network complexity interviews.

<sup>16</sup> Productivity Commission. (2020). *Mental Health*. Canberra. Volume 2, chapter 6.

<sup>17</sup> State of Victoria. (2021). *Royal Commission into Victoria's Mental Health System, Final Report, Volume 4: The fundamentals for enduring reform*. Volume 4. Chapter 33,

<sup>18</sup> Department of Health. (2022). *Evaluation of the National headspace Program: Final Report*.

<sup>19</sup> ACIL Allen. (2021). *National Mental Health Workforce Strategy: Consultation Draft*.

<sup>20</sup> ACIL Allen. (2021). *National Mental Health Workforce Strategy: Consultation Draft*.

***Funding reform***

Short-term funding rounds (of one or two years) and the resulting job insecurity undermine mental health workforce attraction and retention. Funding reform is required to provide more secure employment arrangements, which is essential to improving retention of the mental health workforce.

Short term funding agreements in community mental health and psychosocial services are leading to 'short termism', including introducing uncertainty in terms of the longevity of programs. This can lead to concern in consumers and staff alike, as was noted by the Productivity Commission, 'based on short contract cycles, which make it harder to deliver quality services on a continuous basis to people'.<sup>21</sup>

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<sup>21</sup> Productivity Commission. (2020). Mental health – Inquiry report. Commonwealth of Australia, pp.839-843.

### **Term of Reference 2.3: The transformation associated with digitalisation and emerging technologies.**

headspace's desired impact is to ensure that young people can access the right support, when they need it and how they want to access it.

With technology increasingly playing a role in the way people access and receive services, it is important to accommodate a shift in preferences. However, it is also critical that online options are provided *in conjunction with* in-person services for those that need or want them.

#### ***Use of technology to deliver vocational supports***

Young people experiencing mental health challenges are often reluctant to seek help. The option of anonymous support through online services may encourage some to seek help when they otherwise wouldn't.

Online services also enable people in regional locations access to services where in-person services are not available. They can also be useful in providing 'bridging' support where high demand is driving long wait times for in-person services.

Young people are increasingly turning to online services to access mental health support, including through: teleWeb services; web-based information; directed self-help through web programs or apps; online counselling; and through social media platforms, which are particularly relevant for young people.<sup>22</sup>

headspace offers a range of digital mental health services and vocational support, including **headspace Work and Study Online** (hWS) and **headspace Career Mentoring**, which are specifically focussed on the provision of vocational support.

hWS supports young people whose mental health might otherwise prevent them from participating fully in work and study. It is integrated with clinical mental health and psychosocial support and is delivered via phone, webchat, web video and email.

headspace Career Mentoring is an online mentoring service that connects young people who are living with mental health challenges with industry professionals. Mentoring is provided through video conferencing and/or phone. Further detail about these online vocational supports is provided at **Appendix One**.

In 2021-22, 10,476 in depth sessions were provided to 1,742 young people through the hWS service and there were over 350 live participants and 6000 transcript views for hWS peer and group chats. The past two years have seen the most rapid growth since the program was established in 2017.

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<sup>22</sup> BoysTown. (2015). *Preventing Suicide by Young People: Discussion Paper*.

Publicly available external review<sup>23</sup>, internal data analysis and evaluation<sup>24</sup>, and peer-reviewed academic evaluation<sup>25</sup> have all found hWS to be an effective, efficient, appropriate and scalable service for supporting at risk young people to engage in work and study.

Young people accessing the hWS service in 2021 and 2022 reported that they felt supported in pursuing their work or study goals (93%), and felt more optimistic about their work/study future (83%). Three quarters also experienced a reduction in psychological distress.<sup>26</sup>

Young people are also positive about being able to access this support online, with:

- 89% agreeing that the service provided valuable support
- 89% agreeing that they were able to get assistance at times that suited them.
- 63% agreeing that a benefit of accessing the service was that no travel was required

### ***Maintaining access to in-person services remains important***

headspace considers it important to offer both online and in-person options for young people to access support, because:

- unemployed people and those with low incomes are amongst the groups of people who are less likely to have internet access, as well as those living in rural and regional communities, First Nations young people, and those living with disability.<sup>27</sup>
- a young person who has higher needs may respond better to in-person services, or a combination of both online and in-person services.<sup>28</sup>
- reliance on digital supports alone is unlikely to adequately address the needs of all young people, particularly where a combination of both vocational and mental health supports would be most beneficial to the individual.

headspace offers the **Individual Placement and Support Program** (IPS), which is an in-person service available within 50 headspace centres, and complements the hWS and headspace Career Mentoring programs. IPS supports young people to find, maintain and enjoy work in an area that interests them, by overcoming barriers to employment and building their security and dignity. Appendix One provides further detail on IPS, including the positive outcomes it has achieved.

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<sup>23</sup> See for example KPMG (2020). Digital Work and Study Services Evaluation for the Department of Social Services. Perth.

<sup>24</sup> headspace (2018). The headspace Digital Work and Study Service: Final Evaluation Report.

<sup>25</sup> Rickwood, D., Kennedy, V., Miyazaki, K., Telford, N., Carbone, S., Watts, C., Hewitt, E. (2021). "An Online Platform to Provide Work and Study Support for Young People With Mental Health Challenges: Observational and Survey Study." *Journal for Medical Internet Research, Mental Health*. 8(2):e21872

<sup>26</sup> Survey responses from young people who were accessing or recently accessed headspace Work and Study online, collected in July 2021 and May 2022

<sup>27</sup> State of Victoria. (2021). *Royal Commission into Victoria's Mental Health System, Final Report, Volume 5: Transforming the system – innovation and implementation*.

<sup>28</sup> State of Victoria. (2021). *Royal Commission into Victoria's Mental Health System, Final Report, Volume 5: Transforming the system – innovation and implementation*.

## **Term of Reference 5.2: Improving labour market outcomes for those who face challenges in employment, including First Nations people, those who live in rural and remote areas, younger and older Australians, people with disability, and those who may experience discrimination.**

### ***Specific vocational supports for young people***

There is an indisputable need for tailored, youth-specific supports with soft entry points to clinical and vocational assistance for young Australians living with mental health challenges who are at very high risk of ongoing welfare dependency and social isolation.

Almost one in five young people aged 17-25 accessing headspace centres (over 5,000 young Australians annually) are not engaged in any form of employment, education or training. In many regional and rural areas this figure rises to one in three young people. Of those who shared income data, 39 per cent were not receiving any government supports payment, an indication that they may not be accessing other employment or education support services.<sup>29</sup>

Disengaged young people are at increased risk of long-lasting negative outcomes including socio-economic exclusion, long-term welfare dependency, and poor mental health (noting poor mental health can also be a causal or correlating factor of disengagement).<sup>30</sup>

Accessible, personalised and integrated support has never been more important in the context of COVID-19, which continues to amplify the needs of this vulnerable cohort. In 2020, the youth unemployment rate was the highest it has been in almost 25 years, and an ongoing impact on young people's economic participation and earning potential is forecast.<sup>31</sup>

Even before the height of the pandemic, 77 per cent of young people surveyed by headspace reported negative impacts on their work, study or financial situation; 86 per cent said it had negatively impacted their mood, wellbeing or sleep; and half said it had reduced their confidence of achieving future work and study goals.<sup>32</sup>

### ***Specific vocational supports for priority groups***

Our headspace centres support a diverse range of young people with 8.7 per cent of clients identifying as First Nations, 10.9 per cent come from culturally and linguistically diverse backgrounds and 29.8 per cent of the young people we support identifying as LBTQIA+.<sup>33</sup>

By removing barriers to accessing support – including by providing online and youth-focussed programs and services – headspace has been successful in reaching and helping groups of young people who are at particular risk of mental ill health and/or disengagement from education and employment. In 2021-2022:

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<sup>29</sup> Source: headspace Tableau Server.

<sup>30</sup> Powell, A., Salignac, F., Meltzer, A., Muir, K., & Weier, M. (2018). Background report on young people's economic engagement. Sydney, Centre for Social Impact, UNSW.

<sup>31</sup> Borland, J. (2020). Scarring effects: A review of Australian and international literature. *Journal of Labour Economics*, 23(2), 173-87.

<sup>32</sup> headspace National (2020). *Coping with COVID: the mental health impact on young people accessing headspace services*.

<sup>33</sup> headspace National. (2022). *Year in review*. Melbourne: headspace National Youth Mental Health Foundation.

- First Nations young people accounted for 3.9 per cent of those accessing headspace Work and Study Online (hWS) and 13.3 per cent of those accessing Individual Placement and Support (IPS)
- culturally and linguistically diverse young people accounted for 29.2 per cent of those accessing hWS and 9.6 per cent of those accessing IPS
- young people living in regional or remote areas accounted for 21 per cent of those accessing hWS and 57 per cent of those accessing IPS.

headspace has three First Nations Work and Study Specialists and is actively seeking to increase First Nations representation across its workforce, in order to better collaborate with communities and support engagement and ongoing support for young people who identify as Aboriginal and Torres Strait Islander.

Better community-based training and employment pathways, including recognised qualifications and integration of social and emotional wellbeing practice principles, are desirable to attract, support and retain Aboriginal Support Workers.

As described above in our response to *Term of Reference 2.3: The transformation associated with digitalisation and emerging technologies*, headspace provides dedicated and effective vocational support programs including hWS, headspace Career Mentoring, and centre-based IPS programs.

Descriptions of these are provided in **Appendix One**, and the positive outcomes they are delivering are outlined above.

As also stated above, hWS is also reaching those young people that may not engage or be eligible for mainstream employment services. They provide a soft entry point to social support that are designed to make it easy and attractive for young people to access through the headspace model.

## **Term of Reference 6: The role of collaborative partnerships between governments, industry, unions, civil society groups and communities, including placed-based approaches.**

headspace believes collaboration is vital to providing young people with the support they need.

### ***Place-based collaboration***

Place-based collaboration is central to the headspace centre model. Each centre is run by a local agency supported by a consortium of local service providers and community members that ensures the service is deeply embedded within the local system and community.

Each centre receives dedicated funding to undertake community engagement initiatives and activities, including through employment of **Community Engagement Officers**. This workforce plays an important role in reaching out to young people and the communities that support them, to provide health education, increase mental health literacy and link people to vocational opportunities and supports.

Nationally, headspace Schools and Communities partners with education and health sectors across Australia to build the mental health literacy and capacity of education workforces, and aims to improve the mental health and wellbeing of young people, families and school communities.

Examples of this are the:

- **Mental Health Education Program**, which delivers free mental health education workshops to secondary school communities across Australia. These are aimed at increasing awareness, knowledge and skills in mental health literacy, accessing support and improving wellbeing in secondary students and their parents/carers
- **Be You program**, which provides tools, resources, professional development and consultant support to schools so they can work towards an evidence-based whole of community approach to mental health and wellbeing. Be You also provides guidance for schools on suicide prevention and response, including strategies for supporting students, staff, families and the broader community.

headspace also delivers community postvention support more broadly to enable communities to detect, prevent and reduce risk, increase knowledge, awareness and skills and guide communities through healing and recovery following a suicide. For example, in 2020-21, the NSW Government funded headspace, working in partnership with Lifeline, to establish 12 Community Wellbeing Collaboratives in communities at high risk of suicide, as one of the Government's Towards Zero Suicides initiatives.

Investment is needed in cross-sector service models and partnerships to ensure the diverse needs of Aboriginal and Torres Strait Islander young people are met in a culturally safe way.

For headspace, as an example of a mainstream health service, sustainable and genuine partnerships between local headspace centres and Aboriginal community-controlled health organisations would work toward ensuring First Nations young people are supported in the communities within which they belong. Investment in genuine partnerships would also support and

strengthen, rather than compete with or duplicate, existing local services and programs.<sup>34</sup> The Central Australian Aboriginal Congress advised headspace that:

*“Strengthening community-led initiatives...includes supporting community control of Aboriginal services and programs, connection to family, community, country, language and culture and...culturally secure [social and emotional wellbeing programs]”*

This recommendation is supported by research which demonstrates that improvements in mainstream service delivery for First Nations young people and communities occurs through ongoing community partnerships, including those with Aboriginal community-controlled organisations and Elders.<sup>35</sup>

### **headspace programs as examples of integrated and cross-sectoral models of support**

The **Early Career Program** (ECP) (outlined above in response to Term of Reference 2.1) and **headspace Work and Study Online** (hWS) (see Appendix One) are examples of effective, cross-sectoral service models that respond to individual need and broader issues such as workforce attraction and retention.

ECP is an example of a coordinated national graduate and student program. It leverages headspace’s reputation of having a strong learning culture and being a coveted place for students and early career clinicians to begin their careers in youth mental health careers. headspace’s university partners report that headspace placements are the most competitive placement opportunity for allied health students.

hWS provides clinically integrated mental health and vocational support to young people whose mental health is a barrier to work and study. **Career mentoring**, which is a component of hWS, connects young people with an online mentor and has received positive feedback from both mentors and mentees.

Career Mentoring has developed partnerships with a range of industry organisations to deliver this program. This unique service also delivers impact for partner industry organisations and their staff, building the skills of mentors, furthering mental health awareness and reducing stigma.<sup>36</sup>

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<sup>34</sup> Department of Health. (2015). Implementation plan for the National Aboriginal and Torres Strait Islander health plan 2013–2023. *Commonwealth of Australia*.

<sup>35</sup> Wright, M., Getta, A. D., Green, A. O., Kickett, U. C., Kickett, A. H., McNamara, A. I., & O’Connell, M. (2021). Co-designing health service evaluation tools that foreground first nation worldviews for better mental health and wellbeing outcomes. *International journal of environmental research and public health*, 18(16), 8555.

<sup>36</sup> headspace National. (2021). *Our contribution to the mental health and wellbeing of young people in Australia*.

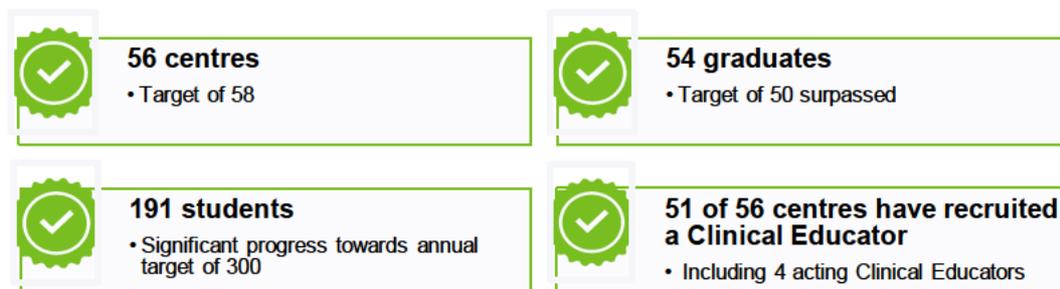
## Appendix I – headspace Early Career Program

The **headspace Early Career Program (ECP)** places allied health students and graduates in headspace centres and supports them to deliver services, while developing their skills for long term careers in youth mental health, with bespoke packages of training and clinical supervision.

During two-year placements, graduates provide evidence-based interventions, supported by clinical supervision and professional learning to establish them as youth mental health clinicians. Students also offer increased clinical capacity under supervision whilst progressing their studies. In addition to building the youth mental health workforce that Australia needs, this program delivers a major uplift in service capacity and support for young people immediately.

ECP participants learn in safe and supportive environments, receive appropriate supervision within their scope of practice, and over an appropriate duration to experience young people progressing in their recovery. These are all critical facets of quality training experiences that are known to reduce attrition and burnout, boost recruitment and retention, and increase the likelihood of sustained careers through to senior clinical practice.<sup>37</sup>

ECP has completed two intakes of social work, occupational therapy and psychology graduates and associated student clinical placements in 56 headspace centres across three regions (Vic/Tas, QLD and WA). The program is designed to be rolled-out Australia-wide to boost service capacity and building the sustainable pipeline of professionals with specialist youth mental health training that Australia needs.



Graduates have reported positive experiences in relation to recruitment and orientation for the program and the blended learning content. Centre stakeholders have also reported positive impacts including relationship building between headspace National staff and Centres.

### Since January 2022:

*“Social Work students have had a positive impact on Access Calls and have just started intake appointments and single session therapy, this has been a great boost to our Centre’s Capacity especially with staff absences due to the cold/flu season and COVID”*

**54** Early Career Program graduates have delivered **4,375** occasions of service

**118** student clinicians have delivered **2,611** occasions of service to young people

<sup>37</sup> ACIL Allen. (2021). National Mental Health Workforce Strategy: Consultation Draft.

## Appendix II – headspace vocational supports

**headspace Work and Study Online** (hWS) is a national digital program that integrates employment and education support with clinical mental health and psychosocial support for young people whose mental health would otherwise prevent them from participating fully in work and study. Young people’s challenges are often interlinked. hWS offers a broad and integrated response that is consistent with best practice for this vulnerable cohort.<sup>38,39</sup>

Work and study assistance is provided by hWS Specialists with diverse backgrounds (e.g. community workers, disability employment workers, career advisors) and clinical staff provide support to young people as well as working closely with the non-clinical staff.

Support is provided via phone, webchat, web video conferencing and email, typically for a period of around three months.

hWS works closely with young people across their work/study journey. It supports them with things such as identifying work/study goals, maintaining a work/study placement, overcoming barriers to employment, building their security and dignity, and improving their life chances at a time when they face huge challenges.

### Expanding access to services

hWS is able to provide clinically integrated work and study support to young people who:

- live in areas with limited in-person support options (such as rural and remote areas)
- want support but also want to maintain anonymity
- may not engage or be eligible for mainstream employment service providers
- prefer communication via technology rather than in-person e.g. due to mental ill health.

### headspace Work and Study Online FY2021-22

|   |  |   |
|---|--|---|
|  | Direct service delivery to 1700 young people p/a | <ul style="list-style-type: none"> <li>○ 1,742 young people serviced</li> <li>○ 10,476 in depth sessions</li> <li>○ 93% overall satisfaction</li> </ul> |
|  | Work & Study Peer and Group Chats                | <ul style="list-style-type: none"> <li>○ 6,000+ transcript views</li> <li>○ 350+ live participants</li> </ul>   |
|  | Online content and activities                    | <ul style="list-style-type: none"> <li>○ 479,000 resource views</li> </ul>  |

*“I love that mental health was an integral part of this service. It was so freeing to talk openly about my mental health and anxiety and receive advice on my mental health that ended up contributing to my success in my job hunt”*

<sup>38</sup> Holloway, E., Rickwood, D., Rehm, I., Meyer, D., Griffiths, S., & Telford, N. (2017). Non-participation in education, employment, and training among young people accessing youth mental health services: demographic and clinical correlates. *Advances in Mental Health*, 16(1): 19-32.

<sup>39</sup> Gmitroski, T., Bradley, C., Heinemann, L., Liu, G., Blanchard, P., Beck, C., Mathias, S., Leon, A., & Barbic, S.P. (2018). Barriers and facilitators to employment for young adults with a mental illness: A scoping review. *BMJ Open*, 8(12).

hWS has had positive outcomes, including being an effective, efficient, appropriate, and scalable service for supporting at risk young people to engage in work and study.<sup>40 41</sup>

- 72 per cent of young people completing 10 support sessions achieving a work or study outcome in the program.<sup>42</sup>
- 82 per cent felt that the service helped them to understand how mental health and wellbeing issues were impacting on their work and study situation.



94%

of young people were satisfied with the service they received  
felt supported in pursuing their work/study goals

93%

feel more optimistic about their work/study future

83%

felt supported in managing their mental health and wellbeing

Survey responses from young people who were accessing or recently accessed headspace Work and Study online, collected in July 2021 and May 2022 (n=200)

*“The headspace worker that helped me was amazing. She helped me figure out what to study and helped me with my resume. I’ve been stuck in a rut for years after leaving school and she finally helped me out of it.”*

*Program participant*



*“The Digital Work and Study Service [is] an amazing program that I strongly believe should be expanded to the rest of the country - anyone should be able to access services like these given the current state of youth unemployment in Australia.”*

*Program participant*

<sup>40</sup> KPMG (2020). *Digital Work and Study Services Evaluation For the Department of Social Services*. Perth.

<sup>41</sup> Rickwood, D., Kennedy, V., Miyazaki, K., Telford, N., Carbone, S., Watts, C., Hewitt, E. (2021). An Online Platform to Provide Work and Study Support for Young People With Mental Health Challenges: Observational and Survey Study. *Journal for Medical Internet Research, Mental Health*. 8(2):e21872

<sup>42</sup> Kennedy V, Miyazaki K, Carbone S, Telford N, Rickwood D. (2018). *The Digital Work and Study Service: Final Evaluation Report*. Melbourne: headspace National Youth Mental Health Foundation.

## headspace Career Mentoring

headspace Career Mentoring connects young people aged 18-25 years, who are living with mental health challenges, with industry professionals. The program supports up to 150 young people each year. The young person and their mentor meet fortnightly over a period of six months via video conferencing and/or the phone with the aim of enhancing the young person's employment and career opportunities, supporting them to find, maintain and enjoy work in an area that interests them, whilst furthering mental health awareness and reducing stigma within industry organisations.

headspace Career Mentoring supports up to 150 young people each year to work with a trained career mentor.

headspace has trained over 250 mentors to work with young people to build confidence and skills as they enter the world of work, acting as a sounding board and source of support at an important transition point.

During 2021-22, 776 mentoring sessions were provided to support 142 young people.

98%

of young people were satisfied with their mentor and the service they received

59 per cent of young people who weren't working gained a job during their time with the service.

90%

felt more confident starting work

The majority of funding for hWS and headspace Career Mentoring ceases in June 2023 and headspace is seeking additional funding from the Australian Government to enable it to maintain the number of young people it can support through these vocational programs.

93%

developed new skills

93%

felt more optimistic about their work future

*"I definitely feel more confident in my ability to apply for jobs and also my techniques for job searching are stronger. I also realised further study was something that would really benefit me in my future and I have commenced some."*  
– young person

*"Mentoring through the headspace program continues to be one of the most fulfilling things I do, and I have loved developing a strong relationship with my mentee. I am so proud and happy to provide support to young people."*  
– headspace mentor

### **Individual Placement and Support Program**

headspace Work and Study Online and headspace Career Mentoring complement the support offered through the **Individual Placement and Support Program (IPS)**. Like headspace Career Mentoring, above, IPS supports young people to find, maintain and enjoy work in an area that interests them, by overcoming barriers to employment and building their security and dignity. This improves the life chances of a cohort facing long-term welfare dependency and socio-economic disadvantage.

The program provides integrated clinical support and career mentoring to young people whose mental health is a barrier to finding or participating fully in work. Support can include help preparing resumes and job applications, support in managing work/study stress, and career planning support.

IPS is funded by the Australian Government to operate in 50 headspace centres and headspace is seeking additional funding from the Australian Government to expand the IPS program to all current headspace centres.

The IPS employment services model is an effective and cost-effective way to increase workforce participation among young people experiencing mental ill-health, and divert them from the Disability Support Pension.<sup>43</sup> The Productivity Commission stated that the IPS model has been found to outperform conventional approaches to employment support for people with mental ill-health and recommended that IPS programs should continue to be rolled out nationally and integrated with mental health services.<sup>44</sup>

Young people who access IPS are more likely to gain employment and maintain employment for at least 26 weeks, than young people who utilise Disability Employment Services (DES) and jobactive. In 2018, Orygen published the findings from a randomised control trial of IPS delivered to young people experiencing first episode psychosis, finding that those who had received IPS had a significantly higher rate of being employed (71.2 per cent) than those who did not receive IPS (48 per cent).<sup>45</sup> Additionally, IPS clients achieve strong mental health outcomes with an estimated 80 per cent achieving a significant decrease in psychological distress and/or a significant increase in social and occupational functioning and/or quality of life.<sup>46 47</sup>

### **Work and Study in headspace centres**

Using the Individual Placement and Support (IPS) model, Work and Study is also available at select headspace centres, integrating in-person vocational and clinical support.



<sup>43</sup> Orygen Youth Health Research Centre. (2014). *Tell them they're dreaming: work, education and young people with mental illness in Australia*. Parkville Victoria.

<sup>44</sup> Productivity Commission. (2020). *Mental Health*. Canberra. Report Number 95.

<sup>45</sup> Killackey, E., Allott, K., Jackson, H., Scutella, R., Tseng, Y., Borland, J., Cotton, S. (2019). Individual placement and support for vocational recovery in first-episode psychosis: Randomised controlled trial. *The British Journal of Psychiatry*, 214(2), 76-82. doi:10.1192/bjp.2018.191

<sup>46</sup> KPMG (2020). Digital Work and Study Services Evaluation For the Department of Social Services. Perth.

<sup>47</sup> Rickwood, D., Kennedy, V., Miyazaki, K., Telford, N., Carbone, S., Watts, C., Hewitt, E. (2021). An Online Platform to Provide Work and Study Support for Young People With Mental Health Challenges: Observational and Survey Study. *Journal for Medical Internet Research, Mental Health*, 8(2):e21872.