Impact of COVID-19 on the sector Survey Report

April 2020

Part 1: SNAPSHOT

Introduction

Australia's response to the COVID-19 pandemic is having far-reaching impacts on millions of Australians, and Suicide Prevention Australia is looking to support the suicide prevention sector and the communities they work with.

In mid-April, Suicide Prevention Australia launched a survey to help inform the National Suicide Prevention Adviser about the impact the COVID-19 pandemic is having on program and service delivery within the sector. The goal was to gather intelligence to inform the national response as well as provide an opportunity to identify ways to build sector capacity during this challenging period.

More than 50 organisations responded to the survey, providing important intelligence concerning shifts in the ways they deliver their services; changes in demand; their training and capacity building needs; and early results from their own research concerning the impact of COVID-19 related changes on the consumers they support.

Key Highlights

52 survey responses

Service demand has increased

Key challenges

Lack of face-to-face support

Technology accessibility, literacy & security

Funding & resourcing to adapt
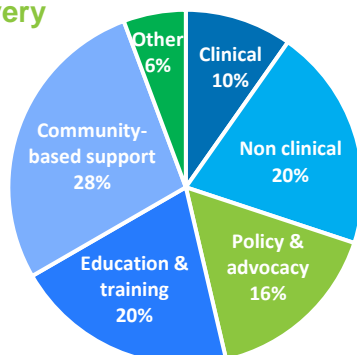
Innovations

Agile operating models

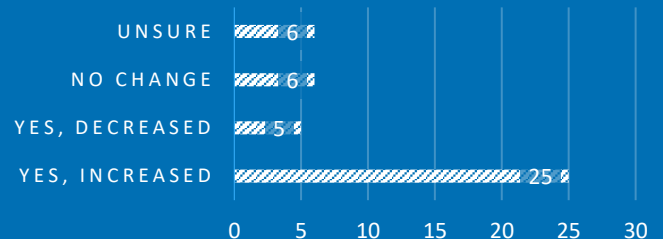**Online & digital modes of delivery**
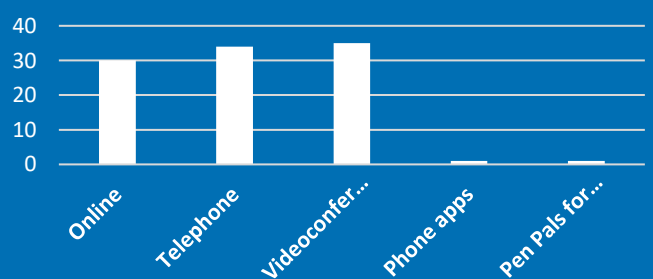
Service mapping exercises

Types of services provided

Pie chart:
- Clinical 10%
- Non clinical 20%
- Policy & advocacy 16%
- Education & training 20%
- Community-based support 28%
- Other 6%

SURVEY PARTICIPANTS

- LARGE ORGANISATIONS: 1000-5000+ EMPLOYEES — 12
- MEDIUM ORGANISATIONS: 200-999 EMPLOYEES — 8
- SMALL ORGANISATIONS: 0-199 EMPLOYEES — 32

(axis: 0, 10, 20, 30, 40)

SERVICE DEMAND INCREASE

- UNSURE — 6
- NO CHANGE — 6
- YES, DECREASED — 5
- YES, INCREASED — 25

(axis: 0, 5, 10, 15, 20, 25, 30)

SERVICES ARE PROVIDING ALTERNATIVE METHODS OF CONTACT

Bar chart (axis: 0, 10, 20, 30, 40):
- Online
- Telephone
- Videoconfer…
- Phone apps
- Pen Pals for …

Early findings

Many respondents, particularly those from smaller organisations, reported challenges associated with transitioning to virtual modes of delivery, whether due to resistance from their consumers (who expressed a preference for in-person support) or due to a lack of capacity or skills with technology.

Other respondents, however, have shared their experience of innovation; where their organisation has quickly adapted to new ways of working and supporting their clientele. Suicide Prevention Australia will seek further information concerning these responses, which are useful case studies of responding to changing circumstances in a positive, agile way.

Our results suggest the suicide prevention sector would benefit from additional support with:

- Communicating with their clients about the benefits of telehealth as an alternative to face to face contact
- Learning from larger, better resourced organisations about adapting services and programs to virtual modes of delivery
- Using technology more effectively

These are early insights and this is only the first iteration of a survey Suicide Prevention Australia intends to conduct regularly while physical distancing requirements are in place. In the meantime, we are hopeful the intelligence captured in this report provides useful context and guidance for the next phase of support for the sector. Suicide Prevention Australia will also be using these results to better inform, support and boost the capacity of our members during this period.

Part 2: SUMMARY RESULTS

Small Organisations

Service demand has increased among small organisations
More than half of respondents report an increase in service demand (57%), 10% report a decrease, 13% report no change and 3% report unsure.

Services are offering alternative methods of contact to face-to-face contact
Respondents are providing a variety of alternative methods not involving face-to-face contact such as online (59%), telephone (53%) and videoconferencing (62.5%).

Challenges

Lack of face-to-face support due to COVID-19 response measures in place

Respondents from small organisations identified the inability to provide face-to-face service delivery as a significant challenge. In most cases, small organisations advised this mode of delivery is core to their service provision. Many of their existing customers had expressed reluctance to use telehealth or phone services over face-to-face service delivery, and many lack access to mobile phones or computers. Respondents also expressed concerns about adapting group support settings to online platforms.

There is a digital divide in connection and accessibility

Respondents from small organisations report that many of their consumers are vulnerable people who lack access to phones or internet (e.g. wi-fi is not always available in aged care settings or community agencies), leaving them at risk of social isolation and inaccessible service provision. Respondents further report difficulties in achieving stable network connections as frequent dropouts are occurring, issues with technology literacy among staff and consumers, and concerns for ensuring confidentiality over webchat services.

Lack of funding & resources to adapt timely to alternative methods of service delivery

Respondents identified concerns in their ability to adapt to online platforms, and they are ineligible for government supports which have been provided through COVID-19 response measures, due to the small size of their organisation (e.g. some are run by volunteers).

Small organisations who rely on additional resourcing from volunteers have experienced reduced capacity as many volunteers who have children or have had changes to their work have had to cease engagement.

Difficulties engaging youth in support

Respondents report challenges in parents not valuing alternative methods of service delivery in the same way as face-to-face support. Respondents further report youth prefer face-to-face contact over alternative methods.

Support needed to manage the impact of COVID-19 on service delivery

33% of respondents from smaller organisations reported they require information, training or capability support to manage the impact of COVID-19 on service delivery. Respondents identified the need for:

- Financial support (e.g. to source new technologies, support transitions to online and digital platforms, and replace lost capacity and resourcing)
- Technology support (e.g. resources on what online/videoconferencing platforms exist, technology literacy training for staff and consumers)
- Hygiene packs and wellbeing packs for vulnerable community groups

Innovations

Some smaller organisations have responded to the challenge of the COVID-19 pandemic as an opportunity for innovation. These respondents reported adoption of agile operating models and quick transition from face-to-face delivery to online and digital methods. Others have expanded operating hours to meet increased service demands and provide flexible solutions based on needs.

Intelligence from consumers

Increase in feelings of isolation

Respondents report clients are uncertain, confused and frustrated with the transition from face-to-face support to alternative methods, with many feeling isolated and experiencing heightened anxiety due to physical distancing measures currently in place. The restrictions limit people's ability to self-care and engage in their routine wellbeing activities, to support their mental health.

Young people are risk

Respondents identified young people as particularly affected by physical distancing requirements and their effect on their education, employment and family relationships. One respondent had surveyed 500 young people, with the survey identifying education and family stress as the top two issues for young people during the pandemic. A significant proportion of the young people responding advised that they had become unemployed, and were unclear on some aspects of the response to COVID-19.

Medium Organisations

Service demand has increased among medium organisations
37.5% of respondents reported an increase in service demand, 25% unsure and 12.5% no change reported.

Services are offering alternative methods of contact to face-to-face contact
Respondents are providing a variety of alternative methods not involving face-to-face contact such as online (37.5%), telephone (75%) and videoconferencing (62.5%).

Challenges

Physical distancing measures have impacted ability to provide services

Respondents identified that due to lockdown of facilities, people they previously supported are not able to access support. This is particularly concerning for clients with disabilities who are unable to receive support due to their facilities not allowing visitors, in adherence with physical distancing regulations.

Technology accessibility and literacy

Respondents from medium sized organisations identified access to technology and people's understanding of the technology as key barriers to service provision.

Increase in contact with other health and social services

50% of respondents from medium sized organisations noticed changes in their interactions with health and social services, in particular an increase in contact via telephone or videoconferencing facilities.

Support needed to manage the impact of COVID-19 on service delivery

75% of medium organisations reported no information, training or capability support is needed to manage the impact of COVID-19 on service delivery.

Feedback respondents received from their consumers

Lack of understanding

Respondents reported that consumers with cognitive impairments are struggling to understand the nature of the pandemic and COVID-19 response measures.

Increased anxiety and isolation

Respondents reported consumers are experiencing an increase in anxiety at not being able to participate in wellbeing activities and are grieving a loss of social connection.

Large Organisations

Service demand has increased among large organisations
A majority of respondents (58%) reported an increase in service demand, with 25% unsure whether there had been a change in demand.

Services are offering alternative methods of contact to face-to-face contact
Larger organisations are providing a variety of alternative methods not involving face-to-face contact such as online (58%), telephone (83%) and videoconferencing (75%). Additional methods reported include phone apps and traditional forms of communication such as pen pal exchange programs for older Australians.

Challenges

Technology reliability, security and literacy

Similar to the challenges experienced by small and medium organisations, large organisations are also facing connectivity issues, consumer technology literacy challenges, and concerns of ensuring technology security (confidentiality) and reliability of information.

Difficulty transitioning group support to alternative methods

Larger organisations have experienced challenges in moving group support settings online, in particular for vulnerable communities where face-to-face connection is a key driver in effectiveness e.g. men's behaviour change programs.

Lack of face-to-face contact impacting quality of service provision

Respondents from larger organisations identified challenges in their ability to provide an accurate risk assessment of a person's level of safety without face-to-face contact.

Staff wellbeing

Respondents reported challenges in ensuring the wellbeing of staff while working remotely.

Increases in family violence and homelessness

One respondent from a larger organisation reported service spikes due to an increase in reported domestic and family violence incidents; an increase in newly homeless communities; and a need to support vulnerable communities who are unable to access social welfare assistance.

Developing timely responses

Respondents are challenged by the need to develop and implement responses/plans within a continually changing landscape.

Support needed to manage the impact of COVID-19 on service delivery

58% of large organisations reported that they did not require any additional information, training or capability support to manage the impact of COVID-19 on service delivery, while 16% reported a need for support. Respondents who required a need for support advised they required assistance with:

- ICT to strengthen connectivity with staff and consumers

- Consistent and reliable information sharing

- Public announcements informing consumers of the impact COVID-19 measures are having on normal business operations, and encouraging patience with service disruptions

Innovations

Service mapping exercise

One respondent reported conducting a service mapping exercise with local community services, organisations and charities to understand what support they needed (e.g. financial support or volunteer resourcing). As a result they established a rapid response grant to help fund essential community supports, established food distribution networks to service newly homeless and vulnerable communities, developed a neighbourhood campaign to ensure community connectedness, transitioned gatekeeper training to an online platform and are currently developing webinars.

Redeployed workforces

As many local services rely on volunteers who are commonly seniors who are unable to be involved during the pandemic, one respondent redeployed council's workforce to respond to community needs. They are further coordinating local initiatives to house newly homeless community members and providing more support to their domestic and family violence services.

Volunteers identifying at risk people in communities

One respondent reported using a 'call out' to community for volunteers to assist and inform their service of vulnerable members in the community that need support.

Using online technologies

Respondents reported developing online forums and Q&A sessions to adapt to the impact on service delivery.

Feedback received from consumers

Increased isolation

A number of respondents reported face-to-face service provision is becoming increasingly limited and consumers are becoming isolated.

About this report

Suicide Prevention Australia has reviewed all open text responses and summarised key themes for the purposes of this report.