

#### **MATES – An Integrated Industry Intervention Program**

# **Roses in the Ocean Lived Experience Summit 2023**

## **Workshop Field Notes**

#### **MATES** in Construction, Mining, Energy and Manufacturing

Over the last 13 years MATES has focused on reducing the high level of suicide in male-dominated, at-risk industries, through:

- Building peer support capacity through General Awareness and Connector training, Life Skills Toolboxes, and Applied Suicide Intervention Skills Training (ASIST) to Construction, Mining and Energy workers to build their help-offering skills for suicide prevention.
- Providing a 24/7 helpline and case management to support to workers from our partner organisations and client businesses, who are in distress, to connect with specific supports and services.
- Ensuring 'best practice' principles by leveraging research organisations and our Research Reference Group to evaluate our activities and build an evidence base for workplace suicide prevention.

Since our inception in 2008 in QLD, MATES in Construction have expanded our program in all States and Territories, targeting city and regional areas. We have adapted our program for mining, energy, and manufacturing industries in response to the sectors' demonstrated need. MATES is free to access for workers.

Our national, integrated, and holistic approach is evidence-based and adopts a LivingWorks approach to capacity building of work-based volunteers. Our program aims to improve individual and community resilience through educating workforces on the origins of suicidal distress, the value of workplace peer support, and avenues for seeking help.

Through capacity building workshops, prompt critical incident support and a national case management network, we facilitate timely intervention to prevent suicide. The program delivers early intervention and postvention supports to individuals and communities during times of hardship and crisis. The benefits of our program extend beyond work sites, to the wider community, as individual and group learnings are used to support social and family networks.

The MATES program has been shown to:

- Encourage a shift in beliefs about suicide, and a reduction in stigmatising assumptions, through improved suicide prevention literacy (King et al 2019, Sayers et al 2019, Ross et al 2020a, Ross et al 202b)
- Increase the capacity, confidence and willingness of workers to recognise and proactively offer help if they suspect colleagues may be struggling (Ross et al 2019, Ferguson et al 2017)
- Increase the willingness of workers to seek help, either for themselves, or for a family member or colleague (Doran et al 2019; Ross et al 2019, Sayers et al 2019)
- Encourage the trust and willing participation of workers as socially valid and 'good fit' for blue collar industries (Ross et al 2019; Gullestrup et al 2011)

Workshop title: Reducing psychosocial hazards in the workplace

**Participants:** Approximately 50 conference attendees participated either as people with lived experience or representing not for profit or government departments involved in the suicide prevention space.

**Premise:** This workshop aimed to examine how psychological safety in the workplace can impact distress and suicidality, and how leaders within organisations can support suicide prevention in the workplace. MATES strives to establish a Framework for Better Mental Health within male dominated industries that is co-designed with industry leaders, businesses, workers, and specialist service providers. Using a mental health and suicide prevention and awareness approach to support leaders and managers MATES aims to reduce psychosocial hazards specific to male dominated workplaces, including those associated with remote working conditions.

#### How will MATES utilize this feedback from lived experience advocates?

As an organisation founded on the lived experience of suicide within the construction industry, MATES values the continued input of people with lived experience to shape our programs. MATES now operates in Construction, Mining, Energy and Manufacturing, as well as providing support for workers family members and communities.

The 2023 Roses in the Ocean Lived Experience Summit provided useful feedback from people who participated in our workshop. **We would like to give participants an opportunity to view this feedback and provided any additional clarifications or additional points.** 

#### Q. What are the risk factors and barriers to appropriate support at work?

A summary of the responses given by the participants at the workshop are presented below. Please read through each of the statements summarising these insights and then fill in the column on the right to the accuracy of this statement based on your own lived experience.

#### Team psychological safety

Stigma Stigma around suicide, mental health, and seeking support.

**Fear of retribution** Fear of negatives consequences in the workplace, such as HR policies, missing out on a promotion.

**Lack of trust** Participants identified that employees can feel a sense of distrust when accessing services such as EAP, or that supervisors will report that they needed support to HR/others. **Career progression** Employees seeking help feared that their career progression may be impacted as being perceived as not as competent or as a risk to the organisation.

**Conflict – ability to let go** Conflict between people and the ability of individual's themselves to let go of conflict was identified as a risk factor.

#### **Privacy/Confidentiality**

**Lack of anonymity** It was identified that it was difficult to seek support anonymously as everyone knew each other in the workplace. Some participants flagged that they may need to access a service that they are employed in or have in the past.



**Confidentiality and safety** Several participants cited issues surrounding confidentiality in the workplace as a barrier to seeking support in the workplace. One example provided by a participant was a worker's mistake was revealed live on an internal communication system that meant other works were aware that this person made a mistake and eroded psychological safety.

**Working in a service we once accessed** Working in mental health and suicide prevention space, some workers have accessed help in programs that they later were employed in, which presented risk around psychological safety and confidentiality.

#### Cultural/Demographic

**Understanding diversity** Participants brought up that organisations need to consider different 'lenses' including diversity such as neurodivergence (e.g. autism), LGBTQI+, gender, education level, culture, financial etc.

**Cultural/language** Participant noted that there is limited research on CALD populations and suicidality. Participant was from manufacturing sector and identified that this was an issue as manufacturing has a high percentage of people with English as a second language.

**Migrant visa** Unbale to access childcare rebate and some mental health service due to visa restrictions. Fear of deportation on health grounds.

#### Leadership

**Appropriate supervision** Particularly when ensuring safety of those with lived experience operating in the suicide prevention space. It was identified by the workshop participants that leaders and managers had little to no training in how to support and manage lived experience in their workforce and how to integrate these roles successfully and safely.

**Organisational leadership** Leadership was identified as a significant area that influenced psychological safety, workplace culture, HR and WHS policies and accessibility of supports.

#### Organizational policies/structure

**Real flexibility** Many organisations claimed to offer flexible work conditions, but this was often up to individual manger discretion. In reality, workplace flexibility often differed from that of the company line.

**Whole organisation engaged** For organisational values and culture to be reflected in all parts of the organisation, all leaders, managers, supervisors and staff need to be involved and on the same page.

**Inconsistency** Inconsistency between policies, leadership styles, continuity of support services.

**Inappropriate structure** Workplace/ team structures could be a barrier, particularly with integrating lived experience.

**Understanding individual needs and vulnerabilities** It was brought up during the conference on several occasion about having individual response plans for each employee to help organisations ensure safety of all staff, by identifying preventative strategies and responsive strategies tailored to the individual.

**Lived experience pathways** It was discussed that there are limited career pathways for peer workers and limited educational qualifications beyond a Cert IV.



**What is a risk?** Participant brought up that he wasn't sure what the definition of risk is in this context, risk does not have an agreed definition. Participant provided feedback that to mediate risks, a better understanding of what a 'risk' is needed.

#### Organisational culture

**Toxic work culture** Was identified as a significant barrier and affected several of the other points discussed during the workshop.

**Bullying** Bullying both increased psychological distress and limited employees' ability/willingness to seek help. A no-bullying culture was identified as an enabler to employees feeling comfortable accessing support.

**Focus on the right culture** Organizational focus of improving culture was identified as an enabler.

**Values vs Reality** Participants identified that what organisations say they value is often different to what is experienced by employees in the workplace.

**Why do people leave?** Participant provided feedback that it would be useful to look at 'why' people leave roles to identify risks and barriers to providing a safe workplace.

**Tokenism** Participants expressed that hiring one or two peer workers as a form of tokenism to 'check a box' was not real integration of lived experience.

#### Occupational role

**Realistic KPIs** Unrealistic KPIs were identified as a barrier to access workplace supports, and a risk factor for contributing to distress, whilst realistic KPIs were seen as enabler of workplace supports.

**Time and workloads** Important risk factor for distress.

**Mental vs Physical** Focus on both mental and physical health. Understanding of physical needs impact on suicide risk such as sleep.

**Staff turnover** The industry can have a high turnover rate due to worker burnout. Turnover also presents issues with integrating into a new workplace.

**Meaningful work** Some participants brought up the need to have meaning in work and how to create this in a job that may not align to what you are passionate in or allow much control over the role. Some participants disagreed for work to be meaningful as some people work is just a financial means and not a passion.

#### **Psychosocial support**

**Frontline workers/support** Participants felt that greater support was needed for frontline workers, many of whom have their own lived experience, to be psychologically safe in their workplace.

**Ability to have a yarn** Ability to seek help in an informal setting.

**Accessibility: remote, geography, organisation** Access to supports varied by rural and remote locations, different states, by organisation, and within organisations.

**Complex relationships** Different relationship between colleagues, supervisors and service clients can be a barrier.



#### **Economic/Financial**

**Cash flow** Recognised that financial impacts are a risk for distress as well as a barrier to accessing support services.

**Funding** Organizational funding initiatives for support services, outside of EAP, was a significant barrier. This funding barrier also hampered hiring of live experience roles and real integration of lived experience into the organisation.

**Lack of ROI research** Important for getting funding for better organisational practices and supports, ROI research would provide evidence as to why organisations should invest in removing risks and barriers.

#### **Lived Experience specific risks and barriers:**

- Tokenism -how do we integrate roles into the organisation?
- Appropriate supervision Training for supervisors in how to manage lived experience workers they supervise not currently imbedded.
- Funding Long term funding required for integration, career progression, and ongoing education of peer workers is needed.
- Lived experience pathways career progression, varied roles, acknowledgement of other skill sets. Limited career pathways limits integration within organization.
- Working in a service once accessed can be triggering and be psychologically unsafe
- Lack of anonymity -if requiring support as a peer worker in the space you operate

# Q. What else do we need to consider when looking at isolated workplaces (FIFO/DIDO)?

A summary of the responses given by the participants at the workshop are presented below. Please read through each of the statements summarising these insights and then fill in the column on the right to the accuracy of this statement based on your own lived experience.

Responses	
Disconnection – sports, family, pets	Life changes
Feeling of loss	High earners – financial planning
Quality of camp	Job insecurity
Sleep	Displacement
Rosters/hours	Fitting back in
Missing important events	Isolation vs Ioneliness
Day off for own health	No one else relates
Family support	Institutionalized
Access to communication	Fitting back in
Mistakes exposed.	Post career
Cultural safety for first nations people	



## Any Questions to:

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