

Our state of mind in 2020: mental health for doctors

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Mental health issues are driving Australians to visit their GP more than any other health concern. [Almost half of all Australians](#) will experience a mental illness in their lifetime, yet only 54% of these will ever access treatment. It's clear the mental health agenda has come a long way, but still has a long way to go.

To mark [World Mental Health Day](#), this panel looks at the current state of mental health care in Australia. Is the system set up to support this growing issue? What role does technology play? And how can we look after the mental health of our all-important health care

workers?

Panellists

Dr. Louise Stone, GP and clinical associate professor at ANU Medical School

Dr. Geoff Toogood, Cardiologist, founder of CrazySocks4Docs and Beyond Blue speaker

Dr. Samineh Sanatka, post-doctoral fellow with Black Dog Institute and University of Newcastle

Jason Threthowen, CEO of Headspace

Dr. Grant Blashki, GP and lead clinical advisor at Beyond Blue

Key insights

2020 has tested our collective resilience with catastrophic bushfires, devastating floods, and now a global pandemic. The effects of these events have touched almost every aspect of our lives, from our economic stability, to our health and our family dynamics, and as a result our mental health has taken a significant hit.

Dr Louise Stone, GP and clinical associate professor at ANU Medical School, said that while natural disasters tend to bring people together, pandemics drive people apart. "The hardest thing about pandemics is that people have difficulty connecting with others and that makes life incredibly challenging."

[Medicare data](#) from April to June 2020 shows a 30% increase in the number of patients who've visited GPs for a mental health consult compared to the same period in 2019. And this increase has been reflected in online mental health support services.

"Since March 2020, we've had a 40% - 60% jump each month compared to the month last year on contacts with our support service," said **Grant Blashki, GP and lead clinical advisor at Beyond Blue**.

He pointed out that 2020 has been a “triple whammy” for many people. “You've got the loss of jobs, you've got worries about infections and then our family life's been turned upside down.”

Beyond Blue has also seen an increase in the number of young people seeking support from their online services, particularly the web chat feature. “50% of these young people have never spoken to anyone about their mental health challenges before so that's been a really positive thing.”

Help-seeking levels still worryingly low

Despite this increase in awareness and uptake, studies show that [54% of people don't seek treatment](#) for mental health conditions. Dr Stone noted there are many barriers to seeking out mental health treatment, one of the most prevalent reasons being our capacity for inward reflection.

“We're not all good at what we call mentalizing, having that capacity to look at the way we think and feel.” She shared her experience of working with farmers and miners, many of them men, who didn't have the emotional vocabulary to describe what was going on for them.

Dr Stone adds that mental illness often breeds feelings of guilt and shame. “The nature of the illness makes you feel ashamed, makes you feel that you're not worthy, that you're not good enough. And that is a huge impediment to just getting in that door.”

“It requires a lot of courage and I really recognize how hard it is to get into a waiting room and be prepared to share something with me as a GP and treat me as though I'm trustworthy,” she said.

GPs have been a crucial “anchor” in 2020

Dr Blashki observed that GPs have played an important “anchoring” role during this challenging time, helping to provide continuity and a sense of calm.

“People's worlds have been turned upside down, unlike anything I've seen in my lifetime,” he said. “In many cases the care GPs provide isn't cognitive behavioural therapy or any clever psychological technique, it's just a bit of containment and anchoring and feeling like there's some order in the world.”

But providing this constant support can take a toll and GPs have not been prioritising their own mental health, the panel noted.

“What's happened is that there's been a delayed response in health care workers actually seeking support themselves because they've been focused on everyone else”, said **Jason Threthowen, CEO of Headspace**.

He stressed that it's more important than ever to have dedicated support for clinicians on the frontline and to ensure that GPs are checking in on themselves. “I think COVID is a really good reminder that we're all vulnerable at some stage, and we're all vulnerable now.”

Breaking the stigma among healthcare professionals

[Beyond Blue's National Mental Health Survey](#) found 3.4 per cent of doctors experience very high levels of psychological distress, higher than the general community, and 10 per cent have experienced suicidal thoughts. Yet [four in ten GPs](#) reported they have delayed seeking treatment in the past two years.

“We know that a lot of doctors carry around this idea that our colleagues would judge us if we said we had a mental health problem, would think we were less competent, and would report us to the medical board. All those things create a wall of shame that is very difficult to break,” said Dr Stone.

As a GP who has battled both depression and anxiety, **Dr Geoff Toogood** has experienced stigma and discrimination at many levels.

“I faced significant stigma, both from outside and a lot from inside. I remember going to the waiting room in my general practice, petrified that someone would recognise me,” he admitted.

His experience led him to start [Crazy Socks for Docs](#), an awareness movement that aims to break down the stigma around mental health and reduce doctors’ suicide rates around the world.

“One of the things I hope that comes out of this pandemic is some people realize it's they may get anxious going to work, and they may struggle with what's going on, and they may have a bit more empathy for their colleagues if they're feeling the same way.”

His advice for GPs who are seeking mental health treatment is to remember they are the patient. “You might be a highly informed patient, but you need to still be the patient. Listen to your doctor and take the advice. They're going to help you on the journey.”

Burnout affecting junior doctors’ mental health

[A recent study](#) by the Black Dog Institute and UNSW Sydney found more than a quarter of junior doctors are working unsafe hours that double their risk of developing mental health problems and suicidal ideation.

“Many junior doctors have said they’re struggling to keep up in a fast paced work environment,” **said Dr. Samineh Sanatka, post-doctoral fellow with Black Dog Institute and University of Newcastle.** Lack of sleep, long hours and a constant cycle of learning and training is taking a toll on energy levels and mental wellbeing.

To address this growing concern, The BlackDog institute and NSW Health have created [an app purpose built for junior doctors](#) to access information and support for mental health.

“There are no superheroes on this planet,” Dr Sanatka points out. “At the end of the day, we're people and we're providing services to other people and we’ve got to make it work on both sides of the equation.”

The panel agreed that there were unreasonable expectations put on junior doctors to be resilient and that this was an important step to help change that perception.

“We often think of resilience as being how bouncy a ball is, and we tell junior doctors that they need to be super balls and bounce anywhere they like,” added Dr. Stone. “I think we have to watch our language because it gives them the impression that they're failing. And that's really dangerous.”

Integration is key for e-mental health success

When it comes to the delivery of mental health treatment, the panel agreed that e-mental health has obvious benefits, but must be carefully coordinated with face-to-face methods of treatment.

Dr Stone acknowledged e-mental health has a great deal of potential but raises concerns around accessibility and warned we are treading on dangerous ground by removing a therapeutic relationship from the equation.

“Just because it's there, doesn't make it accessible,” she reasoned. “There are gates to get into e-mental health that people don't often acknowledge.”

“In order to access a lot of these programs, you have to have reasonably good literacy, you have to have access to a device that's preferably private, and you have to have some Wi-Fi accessibility. A lot of the apps are normed against city-dwelling people and people who are fluent in English,” she added.

Dr Blashki agreed with this point and said there's a disconnect between general practice and e-mental health support, and there needs to be increased focus on integration.

“In the same way that we've been trying to integrate face-to-face services between hospitals and GP clinics forever, e-mental health should be as integrated as possible,” he said.

“I think e-mental health has got huge potential and we're seeing an absolute explosion of different apps and websites, ranging from diagnosis to management to helping find prognosis to monitoring. We're only just scratching the surface of what's going to be possible, but it's very exciting in terms of accessibility, scale, and 24-hour availability of mental health treatment,” Dr Blashki concluded.