Queensland Urban Indigenous Mental Health Survey (QUIMHS)
Queensland Centre for Mental Health Research
+61 (07) 3271 8688
stayingdeadly@qcmhr.uq.edu.au

The Staying Deadly Survey

QUIMHS Survey – Summary of Findings

Background

There have been concerted efforts to quantify the health gap for Aboriginal and Torres Strait Islander Queenslanders, implement effective interventions, and track health outcomes but these cannot be fully realised without informative data on mental and substance use disorders and their treatment. The Queensland Department of Health engaged the Queensland Centre for Mental Health Research to undertake the Queensland Urban Indigenous Mental Health Survey (QUIMHS), also known by its community name: The Staying Deadly Survey. The project was launched in 2018 in collaboration with the Institute for Urban Indigenous Health (IUIH) and was conducted in the following four stages: (1) survey establishment, (2) pilot study, (3) main survey, (4) results dissemination. The pilot study sought to assess both the suitability of the planned survey and adequacy of the instrumentation. The main survey aimed to quantify the prevalence of selected mental disorders and harmful substance use within Aboriginal and Torres Strait Islander adults residing in Southeast Queensland, the proportion of individuals receiving treatment, the type of service being accessed, and barriers to accessing care. This summary gives an overview of the main findings from the QUIMHS survey.

Ethics

Ethics approval for the main survey was provided by the Townsville Health Services Human Research Ethics Committee (HREC/2020/QTHS/61158) and was ratified by The University of Queensland Human Research Ethics Committee.

Community Consultation

Community consultation for the QUIMHS project was undertaken over five years to provide guidance on culturally appropriate ways of conducting the survey. Community consultation took various forms, including round-table meetings, briefing meetings, steering committee meetings, preliminary testing feedback, and qualitative feedback. This included consultations with:

- The QUIMHS Steering Committee, comprised of both Aboriginal and Torres Strait Islander and non-Indigenous experts in Aboriginal and Torres Strait Islander health and research
- Key Aboriginal and Torres Strait Islander delegates from Queensland Health and its relevant hospital and health services, University of Queensland Poche Centre for Indigenous Health, the Institute for Urban Indigenous Health (IUIH) and its member services
- Aboriginal and Torres Strait Islander participants from the QUIMHS pilot study and IUIH staff who participated in the initial testing of the survey instrument
- Aboriginal and Torres Strait Islander survey interviewers, Aboriginal and Torres Strait Islander Clinical Psychologists and research team members from QUIMHS

Data collection

The main survey was conducted between February and October of 2022. Survey participants were recruited using a mixture of household sampling (doorknocking) and snowball sampling (promotion of the survey through health clinics, community centres, social media, and community events) across Southeast Queensland. Survey interviews conducted by seven Aboriginal and/or Torres Strait Islander Australian interviewers via telesurvey

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or face to face interviews. After 9 months of data-collection, 406 adult Aboriginal and Torres Strait Islander Australians had completed the QUIMHS survey interview.

Findings

Mental disorder and harmful substance use prevalence: Over 46% of participants were found to experience either a mental disorder or harmful substance use in the 12 months prior to the survey. Major depressive episodes and post-traumatic stress disorder were the most prevalent disorders with approximately 25% and 20% of the sample experiencing each disorder, respectively. Approximately 16% of participants experienced more than 1 disorder in the same time frame. One in two participants had experienced suicidal thoughts and one in five participants had attempted suicide at some time in their life.

Service use: Of participants experiencing a mental disorder or harmful substance use in the 12 months prior to the survey, over half (66%, approx.) had accessed a health service in that time. Participants preferred accessing Aboriginal Community Controlled Health Services over mainstream services for all types of health concerns. Of the participants that did not access a health service for their mental disorder or harmful substance use, almost half (47%, approx.) recognised a need for that care. The most common reason for not getting this care was that the type of help participants asked for was not received. People that reported needing more conventional services for mental health treatment such as medication and talking therapy were more likely to have that need met as opposed to those that needed services such as social interventions and skill development.

Covid-19 impact: QUIMHS data collection occurred during the COVID-19 pandemic while SEQ was experiencing elevated community transmission. Participants indicating that their mental health, physical health, relationships, or time spent doing extracurricular activities and learning had worsened due to the pandemic were twice more likely to experience a mental disorder and harmful substance use than those indicating that these factors had not changed. Those reporting “a great deal” of worry or distress about separation from their family or close friends, cancellation, or restriction of significant life events, or being unable to participate in recreational activities because of COVID-19 were twice as likely to experience a mental disorder and harmful substance use compared to those who reported no worry or distress for those items. When asked about the impact of the pandemic on their access of services, approximately one in five of all participants stated they needed more support for their mental health because of the COVID-19 pandemic. Flexible access options (such as telehealth or telephone services) were rated highest amongst factors that made accessibility to mental health and substance use services easier.

Implications

QUIMHS is the first epidemiological study conducted at this scale to report on mental disorders and harmful substance use prevalence and service use within a community residing, urban Aboriginal and Torres Strait Islander population. Findings have indicated high rates of mental disorders and harmful substance use faced by Aboriginal and Torres Strait Islanders in Southeast Queensland, and important gaps and barriers within the mental health services they accessed. This project provides the opportunity for stakeholders involved in the identification, management, and prevention of mental and substance use disorders to respond to these findings and consider how they may be used to better inform the resourcing and planning for mental health services.

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Since the survey, Queensland Health has been quick to act by investing in the development of Aboriginal and Torres Strait Islander community controlled specialised mental health service hubs in Southeast Queensland.

Acknowledgements

We would like to express a heartfelt thank you to all Aboriginal and Torres Strait Islander survey participants who demonstrated vulnerability, courage, and resilience in sharing their stories. Their contribution has allowed us to take one step further in our shared endeavour to improve community wellbeing. We would also like to extend a special recognition and thank you to our seven Aboriginal and Torres Strait Islander interviewers who undertook their work with integrity, sensitivity and with a determination to improving the mental health outcomes of their community.

For more information on the QUIMHS survey outcomes, the full report is available at **https://espace.library.uq.edu.au/view/UQ:1c4e5ce**.

For other queries about the QUIMHS project, please contact Dr Alize Ferrari, Principal Research Investigator at (07) 3271 8687 or email at **a.ferrari@uq.edu.au**.