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The Treasury
Langton Crescent
Parkes ACT 2600
Australia

30 January 2020

2020-21 Pre-Budget Submission

Please find attached the Pre-Budget Submission from Swiss 8

Swiss 8 is happy discuss any aspect of this submission in further detail.

Yours faithfully,

A handwritten signature in black ink, appearing to read "A. Sutter", written over a horizontal line.

Adrian Sutter
CEO
Swiss 8



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INTRODUCTION

Swiss 8 welcomes this opportunity to provide a submission in advance of the 2020–21 Commonwealth Government Budget.

Swiss 8 is a Health Promotion Charity, founded by Australian Combat Veterans. Our primary function is to build proactive mental health tools for veterans. These tools have extended utility for the general public who fall within the Swiss 8 target demographic. All tools are created to reduce and prevent the rapidly increasing presence of anxiety and depression, leading to suicide.

The exponential increase in cases of anxiety and depression in Australians is putting growing strain on the mental health care system. The average wait time for an initial psychiatric assessment is now averaging 6-12 months.

Current treatment models are attempting a “one size fits all” solution. These models are proving ineffective with 18-45 males from blue-collar workforces. That includes, and is magnified in, young, male, non commissioned, combat corps veterans. This demographic is the most susceptible to mental health stigma and as such, in a reactive system, are the least likely to come forward when experiencing mental health problems. This demographic is not responding to the language and delivery methods currently being offered by clinicians. This demographic is the most likely to take their own lives. This is our target demographic.

The recommendations made in this submission provide the opportunity to build a proactive and preventive model of mental health for both veterans, and the general public. These recommendations address the needs of this high risk demographic. These recommendations are low cost, with high ROI, using a combination of digital delivery with physical interaction.



RECOMMENDATIONS

Recommendation 1. - Distribute a digital awareness campaign supported by print collateral.

Swiss 8 will create and distribute a digital awareness campaign, teaching males in high suicide risk demographics the benefits of preventative mental health tools.

The language used by current clinicians and the messages they are trying to enforce around “safe spaces” and “trigger warnings” not only misses the mark with this demographic but also alienates the audience and exacerbates any stigma. To get through to this demographic we must acknowledge the language they already use, often including profanity and jargon, in order to achieve subject cut through.

To achieve this, the campaign will be delivered by demographic peers. All who have mental ill-health lived experience. This creates a bond with the desired audience and gives license to accept the message being delivered.

The campaign should be distributed on platforms that are frequently used by this target demographic. Youtube, Social media, Google display ads etc.

The messaging in this digital campaign should be replicated by supporting print collateral. These pamphlets should be distributed to GPs, mental health practitioners and employers of high-risk demographic employees. Military, Mining, Construction etc.

Cost to execute.

\$500,000 to execute the 12-month campaign.



Recommendation 2. - Invest in the delivery of this preventative model.

The Swiss 8 app has been developed using health concepts, scientifically proven to improve and prevent anxiety and depression. It has been tested with a veteran audience in this high risk demographic. Now investment is required to deliver this preventative tool to the wider veteran audience. Then, in stages, release to the civilian public in this high risk demographic.

Being a digital asset, this becomes a low-cost model with extensive reach. An estimated \$10 per user per month to deliver unlimited programming through this preventative intervention to the first 5000 users. \$8 per user per month, up to 12,000. \$5 per user per month up to 50,000 users. This is far below the treatment cost for patients on a reactive model.

A digital platform is readily scalable. With the current iteration in app stores now, scaling to exponentially bigger audiences is achieved with simple server upgrades and easily on-boarded development teams.

Cost to execute over 3 years:

Year 1 - \$600,000

Year 2 - \$1,152,000

Year 3 - \$3,000,000



Recommendation 3. - Alleviate isolation and loneliness through a physical connection.

Humans have evolved as tribal animals. We require social interaction and group bonding.

In 2020, depression as a result of isolation and loneliness is fast becoming the most lethal health concern faced by our society.

Military veterans transitioning out of the military experience high rates of adjustment disorder as a result of this tribal separation and isolation. The same is seen in FIFO workers and males in isolating, blue collar jobs.

With the rise of automation and robotics, Swiss 8 predicts adjustment disorder to be the fastest-growing mental health diagnosis of the next two decades. A government, serious about developing a proactive and preventative mental health care model, must consider the percentage of people in this high-risk demographic that will be impacted by the automation of blue-collar jobs.

With a growing sense of isolation and loneliness, we turn to the internet and digital connectivity. Unfortunately, digital connectivity is creating more problems than its solving. The digital connection has resulted in physical disconnection. The app model makes this intervention accessible in geographically isolating locations, creating digital connectivity. However, the digitally connective benefits must be counterbalanced with a physical interaction program. The tribal environment must be recreated.

To do this Swiss 8 will partner with sporting teams and groups that are proven favourable with this high risk demographic. Rugby Union, NRL, AFL, Surfing clubs, rifle ranges and hunting clubs etc. An in-app promotion campaign will be developed to encourage users to join these clubs and reengage physically with their peers in a non-work environment. A non-work environment that is not the pub.

Cost to execute over 3 years:

Year 1 - \$240,000

Year 2 - \$240,000

Year 3 - \$240,000



CONCLUSION

Total budget requirements:

Year 1 - \$1,340,000

Year 2 - \$1,392,000

Year 3 - \$3,240,000

For a total of \$5,972,000 over three years, the Federal Government can offer an innovative and accessible approach to mental health care. Building a long term and proactive model with an ROI of over \$400,000,000 according to the KPMG Investing to Save findings. This model targets, and speaks directly, to the most at risk demographic for suicide.

These recommendations can leverage Defence, DVA, and Health portfolio budgets.

This budget submission is minimal in comparison to previous allocation for veteran wellness centers around the country. Centers that do not appeal to, nor will be used by this high risk demographic.

It is time to start building models that are targeted to high risk, yet niche, demographics. Its is time to include these demographics in the discussion when building interventions for them. We must ensure that we are not wasting valuable resources on projects that achieve no cut through.

For any correspondence regarding this submission, please email Adrian Sutter - adrian@swiss8.org or call 0410200495.