

# 2022 RACGP curriculum and syllabus for Australian general practice

## Mental health

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### Rationale

#### Instructions

This section provides a summary of the area of practice for this unit and highlights the importance of this topic to general practice and the role of the GP.

Mental illness covers a range of disorders including anxiety disorders, affective disorders, eating disorders, psychotic disorders, personality disorders and substance use disorders. However, mental health is a much broader concept of wellbeing and is impacted by other determinants including a person's access to services, living conditions and exposure to adverse childhood experiences and trauma.<sup>1</sup> For Aboriginal and Torres Strait Islander peoples, wellbeing is a holistic concept that encompasses the importance of connection to land, culture, spirituality and ancestry and how these affect the wellbeing of the individual and the community.<sup>2</sup>

It is estimated almost half of all Australians will experience a mental health disorder at some point in their life.<sup>3</sup> In 2017–18, approximately 20% of Australians aged 16–85 years reported experiencing a mental health disorder. Anxiety-related conditions are the most common, affecting 13.1% of Australians, followed by affective disorders which affected 6.2%.<sup>3-5</sup> Medicare data shows 10.7% of Australians accessed Medicare-subsidised mental health-specific services in 2019–20, up from 6.2% in 2009–10.<sup>6</sup> Children and adolescents are significantly affected by mental illness with one in seven four- to 17-year-olds having had a mental health disorder in the last 12 months.<sup>7</sup>

The burden of mental health concerns in Aboriginal and Torres Strait Islander peoples is 2.4 times the rate of non-Indigenous Australians, with risk factors including socioeconomic disadvantage, trauma, discrimination, widespread grief and loss and separation from culture.<sup>8-10</sup> While rates of mental illness in rural areas are similar to those across the country, self-harm and suicidality increases with remoteness.<sup>11</sup> Access to services can be limited in rural and remote areas and stigma relating to mental illness and reluctance to seek help may be higher.<sup>12</sup> Stressors in rural areas include fewer employment opportunities, lower incomes, less financial security, housing instability and greater exposure to natural disasters.<sup>11</sup>

The COVID-19 pandemic has seen an increase in stress and anxiety in the general population and an exacerbation in symptoms for those with pre-existing mental health concerns. There have been increases in calls to Lifeline (up 18.4%), Kids Helpline (up 10.5%), and Beyond Blue (up 30.7%) in April 2021 compared to April 2019, and an increased demand for Medicare Benefits Schedule-subsidised mental health services.<sup>13</sup>

Mental illness contributes a high proportion (23%) of the non-fatal burden of disease in Australia and in 2019 there were 3318 deaths in Australia attributed to suicide.<sup>12,14</sup> People with mental illness are more likely to develop physical illness with higher rates of arthritis, asthma, back problems, cancer, chronic obstructive pulmonary disease, cardiovascular disease, kidney disease and osteoporosis.<sup>15</sup> This is a result of lifestyle, socioeconomic and system-level factors including social stigma, lack of health service integration, a lack of physical health monitoring and medication side effects.<sup>15</sup> Adverse social experiences and trauma in childhood including the trauma associated with parental mental health disorders, domestic violence, abuse and neglect and childhood mental illness have been linked to poor physical, mental and socioeconomic outcomes in later life. However, early intervention with children and families can help prevent these adverse outcomes.<sup>16</sup>

Much of the care for patients with mental health disorders, particularly for high prevalence disorders such as anxiety and depression, falls to general practice. The 2020 RACGP Health of the Nation survey found that psychological issues, including depression, anxiety and sleep disturbance, are the most commonly seen presentations in general practice with 64% of general practitioners (GPs) reporting it as one of the three most common reasons for patient presentations.<sup>17</sup> GPs see people throughout their lifecycle and play a critical role in psychoeducation, prevention, case finding, early intervention,

support and treatment for patients with mental health conditions and the physical health conditions and associated social issues that often accompany them.

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## Competencies and learning outcomes

### Instructions

This section lists the knowledge, skills and attitudes that are expected of a GP for this contextual unit. These are expressed as measurable learning outcomes, listed in the left column. These learning outcomes align to the core competency outcomes of the seven core units, which are listed in the column on the right.

<b>Communication and the patient–doctor relationship</b>	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> <li>use non-judgemental and destigmatising language in discussing mental health concerns with patients and their families and carers and in assessing social factors which impact on mental health such as unemployment, isolation, marginalisation, bullying and domestic violence</li> </ul>	1.1.1, 1.1.2, 1.2.3, AH1.3.1, AH1.4.1, 1.2.1, RH1.4.1
<ul style="list-style-type: none"> <li>discuss the common behavioural, psychological, pharmacological and interventional treatments for mental health disorders, using language appropriate to the patient's and carer's level of education and understanding</li> </ul>	1.1.1, 1.1.2, 1.1.3, 1.4.3
<ul style="list-style-type: none"> <li>develop rapport with children by demonstrating curiosity about their activities and interests, home life, interactions with parents and caregivers and links to the community in order to prioritise assessment of their psychosocial wellbeing</li> </ul>	1.1.1, 1.1.3, 1.2.2, 1.4.3, 1.4.4
<ul style="list-style-type: none"> <li>use a structured consultation approach such as the HEADDSS framework for developing rapport and assessing psychosocial wellbeing in adolescents</li> </ul>	1.1.1, 1.1.2, 1.1.3, 1.2.2, 1.4.1, 1.4.3
<ul style="list-style-type: none"> <li>negotiate a mental health plan including non-pharmacological and pharmacological treatments with the patient, carers and health professionals, considering patient and carer preferences, concerns and resources</li> </ul>	1.4.1, 1.4.2, 1.4.3, AH1.4.1, RH1.4.1

<b>Applied knowledge and skills</b>	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> <li>use screening tools and psychometric instruments to aid identification, assessment and monitoring of patients with mental health disorders</li> </ul>	2.1.6
<ul style="list-style-type: none"> <li>identify and differentiate the common mental health disorders in general practice utilising skills in psychiatric history-taking and mental status assessment</li> </ul>	2.1.1, 2.1.2, 2.1.4
<ul style="list-style-type: none"> <li>undertake a sensitive and thorough suicide and self-harm risk assessment in children, adolescents, adults and the elderly</li> </ul>	2.1.3
<ul style="list-style-type: none"> <li>identify patients who would benefit from e-mental health programs and assist patients in accessing and utilising these resources</li> </ul>	2.2.1, 2.2.2, 2.3.1
<ul style="list-style-type: none"> <li>institute preventive and management strategies to address physical illness comorbidity in patients with mental illness</li> </ul>	2.1.6, 2.1.7

<b>Population health and the context of general practice</b>	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> <li>identify relevant belief systems and cultural contexts that may impact on treatment and care of patients with mental illness, including Aboriginal and Torres Strait Islander patients, people from culturally and linguistically diverse backgrounds, and/or patients living in rural and remote areas</li> </ul>	3.1.1, 3.2.1, 3.2.3, 3.2.4, AH3.2.2, RH3.2.1
<ul style="list-style-type: none"> <li>undertake screening for mental health concerns in vulnerable groups or life stages such as the elderly, pregnant women, women in the postnatal period, children and young people, and those impacted by trauma or natural disasters</li> </ul>	3.1.1, 3.1.4, 3.2.2, 3.2.3, AH3.2.2
<ul style="list-style-type: none"> <li>advocate to mitigate the effects of social determinants of health and barriers to healthcare and wellbeing that exist for patients with mental illness</li> </ul>	3.1.1, 3.1.4, 3.2.1, 3.2.2, 3.2.3, 3.2.4, AH3.2.1, AH 3.2.2, RH 3.2.1
<ul style="list-style-type: none"> <li>prioritise appropriate screening and preventive health strategies for people with mental health conditions and facilitate access to appropriate multidisciplinary care</li> </ul>	3.1.1 3.2.2, RH3.1.1

<b>Professional and ethical role</b>	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> <li>develop and implement self-care strategies and avenues for debriefing when caring for mental health patients</li> </ul>	4.1.1, RH4.2.1, 4.2.4, 4.2.3, 4.3.1, RH4.2.1
<ul style="list-style-type: none"> <li>reflect critically on their skills in managing mental health issues in patients and families</li> </ul>	4.1.1, 4.1.4, 4.2.2

<b>Organisational and legal dimensions</b>	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> <li>use appropriate Medicare billing and government initiatives to fund efficient and effective mental healthcare</li> </ul>	5.2.4
<ul style="list-style-type: none"> <li>describe the legal considerations and rights of the patient with a mental health problem in relation to confidentiality and consent to treatment</li> </ul>	5.2.3
<ul style="list-style-type: none"> <li>institute time management strategies to assist in managing mental health disorders, which are often complex</li> </ul>	5.1.3

## Words of wisdom

## Instructions

This section includes tips related to this unit from experienced GPs. This list is in no way exhaustive but gives you tips to consider applying to your practice.

**Extension exercise:** Speak to your study group or colleagues to see if they have further tips to add to the list.

1. Psychological disorders can present in a wide variety of ways, and most presentations – even with clear cut physical diagnoses – have a psychosocial or emotional component to consider. Remember to include mental health conditions in your differential diagnoses.
2. Regularly remind yourself that children suffer from mental health disorders and other adverse childhood experiences that can have long-reaching implications into adulthood. Include psychosocial wellbeing assessment into routine consultations with children and their parents, and be alert to the impact of parental mental health issues on children in their care. Be prompt to offer support and appropriate early intervention to children and their parents/caregivers.
3. Don't be afraid that if you ask about suicide you will 'put ideas into people's heads'. There is no evidence for this, and patients usually find it a relief to be able to talk about it.
4. Mental health work can be challenging and put us at risk of vicarious trauma. Remember to look after your own wellbeing and mental health and keep an eye out for your colleagues.
5. Acknowledge your skill level and personal limitations and be prepared to consult with others and/or refer a patient on if you don't feel comfortable managing them.
6. It is VERY unlikely you will be able to address mental health concerns adequately in a 15-minute appointment. If you see a lot of patients with mental illness, you will need to think carefully about your appointment schedule and how best to allocate time.

## Case consultation example

### Instructions

1. Read this example of a common case consultation for this unit in general practice.
2. Thinking about the case example, reflect on and answer the questions in the table below.

You can do this either on your own or with a study partner or supervisor.

The questions in the table below are ordered according to the [RACGP clinical exam assessment areas](https://www.racgp.org.au/getmedia/f93428f5-c902-44f2-b98a-e56d9680e8ab/Clinical-Competency-Rubric.pdf.aspx) (<https://www.racgp.org.au/getmedia/f93428f5-c902-44f2-b98a-e56d9680e8ab/Clinical-Competency-Rubric.pdf.aspx>) and domains, to prompt you to think about different aspects of the case example.

Note that these are examples only of questions that may be asked in your assessments.

**Extension exercise:** Create your own questions or develop a new case to further your learning.



Sofia, aged 36, works part-time in an administrative role at the local council and has two children aged eight and five. She saw your colleague a few weeks ago and had a series of blood tests for fatigue, which were all normal. She has come to see you today because this feeling of overwhelming fatigue is getting her down, and she is now sleeping badly which is making things even worse. She is feeling irritable with the kids and her partner, and is frequently tearful.

Questions for you to consider		Domains
<p>What communication skills could help you to engage Sofia in sleep management strategies?</p> <p>What communication techniques could you use to encourage Sofia to try behavioural strategies to manage her symptoms?</p> <p>How would your communication be different (or the same) if Sofia was an Aboriginal or Torres Strait Islander woman? Or if her first language was not English?</p>	1. Communication and consultation skills	1,2,5
<p>What further information do you need for a full mental health assessment?</p> <p>What social issues (employment, relationship, financial) may be impacting on Sofia's physical and psychological wellbeing?</p> <p>What screening or assessment tools could help you in this situation?</p> <p>What if Sofia was elderly? What if her youngest child was six weeks old?</p>	2. Clinical information gathering and interpretation	2
<p>What are the diagnostic criteria to make a diagnosis of major depression? If you diagnose depression, how would you explain this to Sofia as a cause of her fatigue?</p> <p>What are the criteria for other mood disorders that may present in this way, such as adjustment disorder or dysthymic disorder?</p> <p>How might your differential diagnosis for Sofia's fatigue be different if Sofia was over 60?</p>	3. Making a diagnosis, decision making and reasoning	2

Questions for you to consider		Domains
<p>What are the pros and cons of available pharmacological therapies to help Sofia to sleep?</p> <p>What e-mental health resources or modules could you suggest?</p> <p>If you decided Sofia was depressed and would benefit from medications, what would you try first, and why? How would you explain to her how to take the medication and what side effects and benefits to expect? What would your approach be if Sofia was pregnant or breastfeeding?</p>	4. Clinical management and therapeutic reasoning	2
<p>What behavioural and psychological strategies could you suggest for Sofia to manage her symptoms?</p> <p>Who could you refer Sofia to in your practice or local community? How would you address any issues about access to services, especially if you were working in a rural or remote region?</p> <p>What might be the impact of Sofia's condition on her family/children?</p>	5. Preventive and population health	1,2,3
<p>How would you approach the situation if you considered Sofia's children to be at risk due to her mental state?</p> <p>How could you get feedback on your consultation with Sofia or your management plan?</p> <p>How would you identify and address any gaps in your knowledge and skills?</p>	6. Professionalism	4
<p>What are the Medicare requirements for a GP mental health treatment plan?</p> <p>What strategies do you have in your practice to check if patients come back for their planned review?</p>	7. General practice systems and regulatory requirement	5
N/A	8. Procedural skills	2
<p>How would you manage the situation if Sofia was adamant that there must be a physical cause for her symptoms and was unwilling to consider a mental health cause?</p>	9. Managing uncertainty	2
<p>How would you assess Sofia's risk of self-harm or suicide?</p> <p>How could you assess Sofia's risk of experiencing domestic violence?</p> <p>What would you do if you found out that Sofia was at high risk of suicide or if her children were at risk?</p>	10. Identifying and managing the significantly ill patient	2

## Learning strategies

### Instructions

This section has some suggestions for how you can learn this unit. These learning suggestions will help you apply your knowledge to your clinical practice and build your skills and confidence in all of the broader competencies required of a GP.

There are suggestions for activities to do:

- on your own
- with a supervisor or other colleague
- in a small group
- with a non-medical person, such as a friend or family member.

Within each learning strategy is a hint about how to self-evaluate your learning in this core unit.



#### On your own

Look at the [e-Mental Health in Practice \(http://www.emhprac.org.au/resources/\)](http://www.emhprac.org.au/resources/) website. Choose an e-mental health program and enrol in and complete the program.

- *What skills did you learn?*
- *How would you go about explaining these mental health strategies to a patient?*

Review three consultations where you developed a mental health treatment plan.

- *Did the plans meet the Medicare requirements? Did you consider the patients' preferences, beliefs and cultures when formulating the plans? Did you consider social factors that may be impacting the patient's mental health or may affect recovery (eg unemployment, isolation, relationship difficulties, domestic violence, marginalisation)? Did the plans contain adequate mental health assessments and risk assessments? Did your referral letters have enough information?*
- *Have you also addressed the patient's physical health needs, undertaken routine screening and discussed important lifestyle issues, such as smoking cessation and harmful alcohol use?*

Identify a child who has presented with a mental health issue. Review the history of these presentations. Compare this to the Emerging Minds [framework for child mental health assessments \(https://emergingminds.com.au/online-course/a-gp-framework-for-child-mental-health-assessment-5-12-years/\)](https://emergingminds.com.au/online-course/a-gp-framework-for-child-mental-health-assessment-5-12-years/) (free registration required).

- *How did your history relate to the framework? How could you improve in the future?*
- *How do children present differently to adults?*
- *What additional information do you need?*



#### With a supervisor

Role-play how you would explain managing the sleep-wake cycle and sleep hygiene to a patient.

- *What resources can you use to help? What resources does your supervisor use?*

Discuss a case in which the patient did not respond adequately to your first choice of antidepressant.

- *What are your second line options?*
- *How would your supervisor manage this situation?*



- *What influences your choice of first- and second-line drugs?*

Present a challenging case to your supervisor or mentor. For example, a patient with borderline personality disorder, schizophrenia or complex trauma who has difficulties regulating their emotions, who attends frequent appointments or misses appointments, self-harms or doesn't follow treatment. This doesn't need to be a recent patient but could be one that sticks in your mind from when you were a medical student or junior doctor.

- *How does your supervisor or mentor deal with these types of difficulties?*
- *What services or treatment modalities are available to help the patient?*
- *How can you create safe boundaries in your consultations?*



### **In a small group**

Have each person in the group discuss a mental health case that they found difficult (eg communication, diagnosis, management, time management, system issues, access to care/referral issues).

- *What were the challenges? How could things have been done differently?*
- *What have others in the group done to address these issues?*
- *Mental health diagnoses such as depression and anxiety need nuanced approaches. A one-size-fits-all approach rarely works. How can you tailor your approach based on the patient's individual circumstances (eg perinatal, Aboriginal and Torres Strait Islander, comorbid substance use)?*
- *Would engaging and communicating with carers and their support networks have helped in these situations?*

Have each person review and present to the group an online resource, e-mental health website or mental health app. Discuss how useful it is, and its pros and cons.

- *Are there resources that are better suited to children, adolescents, adults, older people, Aboriginal and Torres Strait Islander patients or people from different cultural and linguistic groups? How could you incorporate these in your practice?*
- *Are there any websites you could use to work with patients on behavioural strategies to manage their symptoms?*



### **With a friend or family member**

Explain to a friend or family member the fight or flight physiological response to fear. Use simple, non-medical language. Explain the impacts of the fight or flight response in panic or anxiety disorder or post-traumatic stress disorder.

- *Did your family member or friend understand your explanation? Ask them to repeat the explanation back to you to see how well you got your message across.*

Describe and teach a simple relaxation technique such as slow breathing or mindful breathing (there are free simple scripts available online), or use an app such as Smiling Mind, Insight Timer or similar.

- *Ask your friend or family member for feedback on both your explanation and their experience of the activity. Did they find your explanation clear? Was there anything they did not understand? What was their experience of the technique? Were there any positive or negative experiences?*

Talk about mental health first aid with a friend or family member. Describe what it is and how it can help someone who is struggling with mental health. A good explanation is available on the [Better Health Channel](http://www.betterhealth.vic.gov.au/health/healthyliving/Mental-health-first-aid#bhc-content) (<http://www.betterhealth.vic.gov.au/health/healthyliving/Mental-health-first-aid#bhc-content>).

- *Did your family member or friend understand your explanation? Ask them to repeat the explanation back to you to see how well you got your message across.*
- *What is their understanding now about the signs that someone might be in distress? How would they approach the person? What helpful phrases could they use? What things do they now know might be unhelpful?*
- *Ask them how they would approach the situation if they thought a friend was suicidal.*

## Guiding topics and content areas

### Instructions

These are examples of topic areas for this unit that can be used to help guide your study.

Note that this is not a complete or exhaustive list, but rather a starting point for your learning.

- Communicate with patients presenting with mental health concerns in a sensitive and non-judgemental way that considers their life stage, education, previous experiences, belief systems and cultural context. Consider the specific concerns of:
  - Aboriginal and Torres Strait Islander patients
  - people from culturally and linguistically diverse backgrounds
  - LGBTIQ+ people
  - patients living in rural and remote areas
  - people living with disability
  - children and adolescents
  - elderly patients.
- Use communication strategies to manage distress, de-escalate emotionally charged situations, manage acute stress and grief reactions and provide emotional support.
- Use language appropriate to the education and understanding of patients and carers to explain behavioural treatments for common mental health presentations. These may include:
  - managing the sleep-wake cycle and sleep hygiene
  - the benefits of physical activity, good nutrition and reducing alcohol and other drugs
  - planning activities and scheduling pleasant events
  - relaxation techniques and mindfulness meditation
  - plans to prevent relapse.
- Recognise psychiatric emergencies, such as an acutely psychotic patient or a patient at high risk of suicide and be aware of local resources and services to manage the emergency safely.
- Undertake a risk assessment for patients presenting with mental health concerns that includes:
  - risky behaviours (eg drug and alcohol use, dangerous driving, disordered eating)
  - deliberate self-harm
  - suicidality (suicidal ideation, intent, plans and means)
  - potential harm from others (eg domestic violence)
  - potential harm to others.
- Take a thorough biopsychosocial history, undertake a mental state examination and a general examination, and where appropriate, use screening and assessment tools to identify mental health conditions. Work with patients and carers to develop a management plan that aligns with the patient's personal and cultural values, and that considers non-pharmacological and pharmacological strategies and referral to appropriate services and supports. Mental health conditions include:
  - grief and complicated grief
  - adjustment disorder
  - anxiety disorders:
    - generalised anxiety disorder
    - panic disorder
    - hyperventilation
    - acute stress disorder

- post-traumatic stress disorder
    - phobic disorders, including agoraphobia and social anxiety
    - obsessive compulsive disorder
  - mood disorders:
    - major depression
    - bipolar disorder
    - antenatal/perinatal/post-natal depression
  - complex mental health disorders, including:
    - personality disorders
    - complex post-traumatic stress disorder
    - somatoform disorders
    - medically unexplained illness
  - psychotic disorders such as:
    - drug-induced psychosis
    - schizophrenia
    - schizoaffective disorder
  - eating disorders and related conditions, including:
    - anorexia nervosa
    - bulimia
    - body dysmorphia.
- Through history and examination, identify mental health and behavioural disorders in children and work with the child and parents/caregivers to develop a management plan and referral to appropriate services, supports and resources. Disorders include:
    - anxiety and mood disorders
    - attention deficit/hyperactivity disorders
    - autism spectrum disorder
    - conduct disorders.
  - Be familiar with e-mental health resources, identify patients who may benefit from using them and support them to use the programs.
  - Develop a comprehensive mental health treatment plan for patients who meet Medicare criteria that facilitates a team approach to care and includes appropriate behavioural, psychological and pharmacological strategies as well as safety-netting and review-planning.
  - Demonstrate awareness of the medico-legal issues of confidentiality and consent as they apply to patients with mental health disorders.
  - Complete an assessment order/certification for an involuntary admission for a patient with a serious mental health disorder in accordance with the relevant state legislation, in appropriate circumstances.

## Learning resources

### Instructions

The following list of resources is provided as a starting point to help guide your learning only and is not an exhaustive list of all resources. It is your responsibility as an independent learner to identify further resources suited to your learning needs, and to ensure that you refer to the most up-to-date guidelines on a particular topic area, noting that any assessments will utilise current guidelines.

### Journal articles

A succinct overview of e-mental health resources and how to use them in general practice.

- Orman J, O'Dea B. [e-Therapy in primary care mental health \(https://www1.racgp.org.au/ajgp/2018/april/etherapy\)](https://www1.racgp.org.au/ajgp/2018/april/etherapy). Aust J Gen Pract 2018;47(4):168–72.

A person-centred approach to making a diagnosis and considering the predisposing, precipitating and perpetuating factors that need to be considered in formulating a comprehensive management plan.

- Stone L, Waldron E, Nowak H. [Making a good mental health diagnosis: Science, art and ethics](http://www1.racgp.org.au/ajgp/2020/december/making-a-good-mental-health-diagnosis) (<http://www1.racgp.org.au/ajgp/2020/december/making-a-good-mental-health-diagnosis>). Aust J Gen Pract 2020;49(12):797–802.

A practical guide to management strategies in general practice, especially while waiting for specialist input.

- Su and Stone. [Adult survivors of childhood trauma: complex trauma, complex needs](http://www1.racgp.org.au/ajgp/2020/july/adult-survivors-of-childhood-trauma) (<http://www1.racgp.org.au/ajgp/2020/july/adult-survivors-of-childhood-trauma>). Aust J Gen Pract 2020;49(7):423–30.

## Online resources

A useful resource on how to assess suicide risk and manage a suicidal patient.

- General Practice Mental Health Standards Collaboration. [Suicide prevention and first aid: A resource for GPs](https://gpmhsc.org.au/guidelinessection/index/fd093e3b-ceff-4e0d-81c0-b04dfba936d1/suicide-prevention-and-first-aid) (<https://gpmhsc.org.au/guidelinessection/index/fd093e3b-ceff-4e0d-81c0-b04dfba936d1/suicide-prevention-and-first-aid>).

Contains screening test proformas, patient worksheets and information sheets.

- Black Dog Institute. [Psychological toolkit](http://www.blackdoginstitute.org.au/education-services/health-professionals/psychological-toolkit/) (<http://www.blackdoginstitute.org.au/education-services/health-professionals/psychological-toolkit/>).

Information and guidelines on a range of youth mental health issues.

- headspace. [Information and guidelines](https://headspace.org.au/health-professionals/information-and-guidelines/) (<https://headspace.org.au/health-professionals/information-and-guidelines/>).

Guidelines for those who want to broaden their knowledge and skills in e-mental health.

- Therapeutic Guidelines. [Major depression](http://www.tg.org.au/) (<http://www.tg.org.au/>).
- The Royal Australian College of General Practitioners. [Mental health guidelines \(e-mental health, work-related mental health conditions, complex trauma and trauma-informed care, and PTSD\)](http://www.racgp.org.au/clinical-resources/clinical-guidelines/guidelines-by-topic/mental-health-1) (<http://www.racgp.org.au/clinical-resources/clinical-guidelines/guidelines-by-topic/mental-health-1>).

Patient information, telephone advice and a chatline, with excellent resources for patients.

- [Beyond Blue](http://www.beyondblue.org.au) (<http://www.beyondblue.org.au>).

## Learning activities

Modules on a variety of mental health topics, including depression, providing psychological supports in disasters, eating disorders, intimate partner violence, managing insomnia, borderline personality disorder. The following are particularly useful for exam preparation and for learning skills in youth mental health.

- The Royal Australian College of General Practitioners. [gplearning](http://www.racgp.org.au/education/professional-development/online-learning/gplearning) (<http://www.racgp.org.au/education/professional-development/online-learning/gplearning>):
  - GPMHSC Youth Mental Health
  - Mental health MCQs
  - check, unit, 571, May 2020: Mental health
- This module can be used for level 1 mental health skills training.
- ThinkGP. [Mental Health Skills Training](http://www.thinkgp.com.au/education/mental-health-skills-training) (<http://www.thinkgp.com.au/education/mental-health-skills-training>).

Many useful courses on child mental health and wellbeing (free registration required).

- Emerging Minds. [Emerging Minds Learning](https://learning.emergingminds.com.au/) (<https://learning.emergingminds.com.au/>).

A toolkit with information, advice and practical tools for professionals who work with, or care for, children who have had adverse childhood experiences.

- Emerging Minds. [Adverse Childhood Experiences Toolkit](https://emergingminds.com.au/resources/toolkits/adverse-childhood-experiences-aces-toolkit) (<https://emergingminds.com.au/resources/toolkits/adverse-childhood-experiences-aces-toolkit>).

Accredited online training modules for GPs working with young people.

- headspace. [GP's and general practice at headspace](https://headspace.org.au/health-professionals/gps-and-general-practice-at-headspace) (<https://headspace.org.au/health-professionals/gps-and-general-practice-at-headspace>).

## Other

A searchable gateway with links to a large variety of e-mental health services and information for patients.

- [Head to Health](http://www.headtohealth.gov.au) (<http://www.headtohealth.gov.au>).

A mental health wellbeing module designed to help Aboriginal and Torres Strait Islander people aged 18 years and over to learn to manage mild, moderate and severe symptoms of depression and anxiety.

- [MindSpot](https://mindspot.org.au/indigenous-wellbeing) (<https://mindspot.org.au/indigenous-wellbeing>).

A social and emotional wellbeing self-help app specifically developed for Aboriginal and Torres Strait Islander people.

- Black Dog Institute. [iBobbly app \(http://www.blackdoginstitute.org.au/resources-support/digital-tools-apps/ibobbly\)](http://www.blackdoginstitute.org.au/resources-support/digital-tools-apps/ibobbly).

**This contextual unit relates to the other unit/s of:**

- [Abuse and violence \(https://www.racgp.org.au/curriculum-and-syllabus/units/abuse-and-violence\)](https://www.racgp.org.au/curriculum-and-syllabus/units/abuse-and-violence)
- [Addiction medicine \(https://www.racgp.org.au/curriculum-and-syllabus/units/addiction-medicine\)](https://www.racgp.org.au/curriculum-and-syllabus/units/addiction-medicine)
- [Child and youth health \(https://www.racgp.org.au/curriculum-and-syllabus/units/child-and-youth-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/child-and-youth-health)
- [Doctors' health \(https://www.racgp.org.au/curriculum-and-syllabus/units/doctors-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/doctors-health)
- [Justice system health \(https://www.racgp.org.au/curriculum-and-syllabus/units/justice-system-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/justice-system-health)
- [Migrant, refugee and asylum seeker health \(https://www.racgp.org.au/curriculum-and-syllabus/units/migrant-refugee-and-asylum-seeker-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/migrant-refugee-and-asylum-seeker-health)
- [Pregnancy and reproductive health \(https://www.racgp.org.au/curriculum-and-syllabus/units/pregnancy-and-reproductive-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/pregnancy-and-reproductive-health)