

# A GUIDE FOR CHARTERED ACCOUNTANTS:

---

Engaging with people experiencing mental  
health problems and financial difficulties.

---



[www.mhfa.com.au](http://www.mhfa.com.au)



## TABLE OF CONTENTS:

|   |   |
|---|---|
| Purpose and use of this guide                                       | 2 |
| Foreword by Simon Grant FCA   | 2 |
| Knowledge of mental health problems                                 | 3 |
| The links between mental health problems and financial difficulties | 4 |
| • The impact of financial difficulties on mental health             | 4 |
| • The impact of mental health problems on financial difficulties    | 4 |
| The impact of stigma  | 4 |
| Support of clients with mental health problems                      | 5 |
| Communication tips for Chartered Accountants                        | 5 |
| • General communication skills                                      | 5 |
| • When a client has memory and concentration problems               | 6 |
| • When a client is distressed                                       | 6 |
| • When a client is confused or out of touch with reality            | 6 |
| • When a client is behaving aggressively                            | 7 |
| • When there is a concern about safety                              | 7 |
| Disclosure of mental health problems to financial institutions      | 7 |
| Policies and procedures for Chartered Accountants                   | 8 |
| Self-care resources for Chartered Accountants                       | 8 |
| References  | 8 |



## Purpose and use of this guide

This guide is designed to assist Chartered Accountants (CAs) to identify, refer and support a client who is experiencing financial difficulties and mental health problems. It is a general set of recommendations and may not be appropriate for every client who is experiencing financial difficulties and mental health problems. Be aware that each individual and situation will be different and it is important that you keep this in mind when using these guidelines.

## Definitions of mental illness and mental health problems

**‘Mental illness’** is a diagnosable illness that affects a person’s thinking, emotional state and behaviour, and disrupts the person’s ability to work or carry out other daily activities and engage in satisfying personal relationships.

**‘Mental health problems’** is a broader term including mental illnesses, symptoms of mental illnesses that may not be severe enough to warrant the diagnosis of a mental illness, as well as mental health-related crises such as having thoughts of suicide.



## Foreword

**Simon Grant FCA**

CA ANZ Head of Members

Research has pointed to a strong association between mental health problems and financial difficulties.

In some cases, people who suffer financial stress can develop mental health problems and vice versa. Members frequently engage with people experiencing financial difficulties and are under enormous pressure.

This guide has been prepared by Mental Health First Aid Australia after consultation with Chartered Accountants Australia and New Zealand as a tool to assist our members to understand the signs and effects of mental illness, and to interact with and support clients suffering from a mental illness.

We recognise that through their important role in the community, our members can develop close working relationships with their clients. This guide is not intended to enable members to diagnose or treat mental illness, however it may help them have sensitive conversations. Members should also encourage their clients who may have a mental illness to seek support or treatment from appropriately qualified mental health professionals.

We work closely with our members and understand the demands placed on them. We also recognise that it is increasingly important for individuals and businesses in the community to understand and effectively manage the health of individuals, staff and clients.

This guide focuses on the promotion and facilitation of information about mental health and wellbeing. Importantly, it recognises that each individual situation is different. It provides a range of considerations for members and their clients to support people suffering financial difficulties and mental health problems.

We trust you will find this guide useful.

Simon Grant FCA  
CA ANZ Head of Members



## Knowledge of mental health problems

There is a strong association between mental health problems and financial difficulties.<sup>1,2</sup> CAs may have concerns about the wellbeing of clients that are experiencing financial stress. CAs can benefit from developing knowledge and skills to be able to respond appropriately to people experiencing mental health problems. This guide outlines information that can help CAs identify, refer and support clients experiencing mental health problems and financial difficulties.

Early identification of and intervention for mental health problems is important, because this can limit their impact on the individual. You may find it helpful to familiarise yourself with the following mental health first aid guidelines, which provide information on how to provide mental health first aid for developing mental health problems and mental health crises (downloadable from [www.mhfa.com.au](http://www.mhfa.com.au)):

- Depression
- Trauma
- Psychosis
- Panic attacks
- Suicide.

There are some specific signs that CAs may notice that could indicate that their client may be experiencing mental health problems. These signs include changes in usual behaviour, displaying unusual behaviour, lack of clarity of thought, not attending appointments, not returning phone calls, not keeping proper records, not meeting repayment schedules and avoiding discussions with financial institutions or advisors. The box following outlines some of the other signs that a CA may notice that indicates their client may be experiencing a mental health problem.

## Signs of a mental health problem

These signs are only an indication that there may be a problem and not every person with mental health problems will show all of these signs. CAs should keep an eye out for significant changes in the person's thoughts, feelings and behaviours that persist over time and impair their functioning.

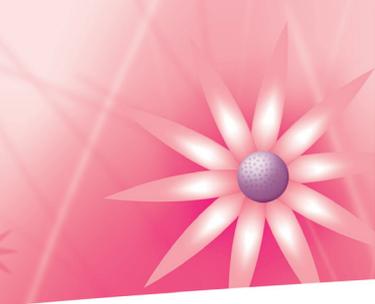
### Behavioural

- Not getting things done
- Erratic behaviour
- Withdrawing from others
- Reduced participation in work or other usual activities
- Inability to concentrate
- Indecisiveness
- Difficulty with memory
- Loss of confidence
- Conflict with peers, family or friends
- Excessive fear or worry

### Physical

- Tired all the time
- Sick and run down
- Headaches
- Persistent/resistant muscle aches and pains
- Slower reaction times
- Appearing agitated
- Weight loss or gain
- Dishevelled appearance
- Gastro-intestinal problems

This information is taken and adapted from the Mental Health First Aid Manual, 4th Edition<sup>3</sup>



## The links between mental health problems and financial difficulties

Mental health problems can contribute to financial difficulties and vice versa, e.g. failing to pay bills because of depression or experiencing suicidal thoughts due to financial difficulties. However, having mental health problems is not necessarily an indicator of an inability to manage money.

The cycle of mental health problems and financial difficulties can be intensified for people who have difficulty navigating unfamiliar financial and health systems. This may include people from culturally and linguistically diverse and Aboriginal and Torres Strait Islander heritage. Familiarity with cultural considerations is important when working with people from cultures different to your own (go to [www.mhfa.com.au](http://www.mhfa.com.au) for a copy of *Guidelines for providing mental health first aid to an Aboriginal and Torres Strait Islander*).

## The impact of financial difficulties on mental health

Financial difficulties can have a negative impact on mental health and addressing financial problems early can reduce this impact. However, be aware that financial stability may not be an immediate goal for some clients in the early stages of recovery from mental illness. It is also important to know that the way a client perceives their financial situation is what impacts on their mental health, rather than their actual situation. A client who is managing their affairs may still be experiencing financial difficulties and distress.

Financial difficulties may also impact on the mental health of the person in a number of less obvious ways, including:

- Isolation and lack of support due to the inability to pay for participation in social activities
- Worsening of mental health problems due to an inability to pay for treatment
- Stress caused by the processes that institutions use to recover debt.

Be aware that when a client sees no way back from their financial difficulties they might become suicidal or attempt suicide. If you think a client is at immediate risk of suicide, ring emergency services or a crisis help line (refer to the section entitled *When there is a concern about safety* on page 7). You should prepare yourself for the possibility of a client becoming suicidal by being familiar with the mental health first aid guidelines for helping a person who is experiencing suicidal thoughts and behaviours (download at: [mhfa.com.au](http://mhfa.com.au)).

## The impact of mental health problems on financial difficulties

The symptoms of mental health problems may exacerbate financial difficulties. For example, a client may not complete financial tasks because they forget, lack the motivation to pay bills and keep proper records, make poor financial decisions, or feel overwhelmed by financial tasks, such as communicating with creditors, opening mail, etc.

### Specific sources of financial difficulties for people with mental health problems may include:

- Debt incurred to support a drug or alcohol problem
- Increased medical expenses
- Gambling problems
- Overspending when in a manic or depressed state
- Poor money management due to paranoid thoughts, e.g. withdrawing money from the bank to keep it 'safe'.

## The impact of stigma

Intelligent, capable people going through a difficult time can experience mental health problems, like many other people in the community. Unfortunately, the myths surrounding mental health problems can lead to stigma which can make people reluctant to acknowledge their mental health problems and seek help. They may be concerned about the negative impact of other's perceptions about their ability to run their business or their earning capacity. This stigma can have a negative impact on how they deal with financial difficulties. Be aware of any stigmatising attitudes that you may hold and understand how these may affect clients with mental health problems.



## Support of clients with mental health problems

Know how you can support clients in a way that promotes recovery of mental health. You should also know how to reduce stressors that may exacerbate current mental health problems. Clients with mental health problems are likely to need fluctuating levels of support, as mental illness can be episodic and varies in severity over time.

Adopt a flexible approach to appointments when working with clients who you are concerned may have mental health problems, e.g. extra time for the appointment, shorter and more frequent appointments, increasing the number of sessions.

When working with the person to develop financial strategies, you should consider the following:

- The person’s level of understanding
- The person’s capacity for decision-making
- The person’s ability to engage meaningfully with financial institutions
- The person’s ability to implement realistic strategies or repayment plans
- The long-term impact of the mental illness.

Be aware that a client’s financial decisions may be influenced by their support person or others.

### Resources

Be familiar with the following resources and encourage clients with mental health problems to use them:

- National and local help lines, e.g. Lifeline (13 11 14)
- Local mental health services
- Disability support services
- If there is risk of harm (e.g. suicide or aggressive behaviour), emergency services, including the police, ambulance services, the local mental health crisis team or emergency department.

## Communication tips for CAs

*This section is about communicating with a client with mental health problems and financial difficulties, both over the phone and when meeting with them face-to-face. In cases where it is only applicable to phone or face-to-face communication, this is indicated.*

Personal attitudes, beliefs and judgements influence communication, therefore it is important to be aware of your own attitudes about mental health problems and how these might affect your ability to respond to a client non-judgmentally. You should endeavour to set aside any negative beliefs and avoid expressing any negative reactions and judgements, in order to focus on the needs of the client you are assisting.

### General communication skills

Know how to communicate effectively with clients with mental health problems. Take time to listen to the client, allowing them enough time to think and talk, by:

- Letting them set the pace and style of the conversation, as far as possible
- Listening non-judgmentally so that they can feel like they have been heard and understood
- Showing empathy, by using statements such as, “this must be very difficult for you”, and conveying acceptance
- Conveying genuineness, i.e. your body language and tone of voice match what you are saying
- Respecting their feelings and opinions, even if you do not agree with them.

Use the following communication skills:

- Ask questions that indicate care, e.g. clarifying questions to show that you understand what they are saying.
- Check your understanding by re-stating what has been said and summarise facts and feelings.
- Listen not only to what they have said, but how it is said, i.e. tone of voice.
- Use prompts, such as “I see” and “Ah”, when necessary to show that you are listening.
- Be patient, even when they may not be communicating well, may be repetitive or may be speaking slowly and unclearly.
- Allow pauses and silences to give them time to think or gather their thoughts.



To facilitate communication:

- **Avoid** attempting to say something positive which may be perceived as trivialising their experiences, such as “put a smile on your face” or “lighten up”
- **Avoid** attempting to say something supportive which may be perceived as belittling or dismissing their feelings, such as “you don’t seem that bad to me” or “get your act together”
- **Avoid** speaking in a tone of voice which may be perceived as patronising
- **Avoid** labelling their feelings for them
- **Avoid** pressuring them to talk about their feelings
- **Avoid** being critical or expressing frustration at them for being in a negative emotional state
- **Avoid** interrupting them when they are speaking, especially to give your opinion
- **Avoid** using a hostile or sarcastic tone when their responses are not what you expect
- **Avoid** confronting them, unless it is necessary to prevent harmful or dangerous acts.

If a client is unable to communicate effectively, discourage them from making any financial decisions until they are able to communicate effectively. If speaking over the phone, offer to call them back at a better time.

You should be familiar with and listen for signs that may indicate that a client is:

- Having memory or concentration problems
- Distressed
- Confused or out of touch with reality
- Aggressive
- Behaving in a way that leads to concern for safety.

If a client is displaying one or more of the above signs, offer relevant information, e.g. contact details for Lifeline or the local mental health service. If after listening non-judgmentally the client remains in a negative emotional state, offer to contact a support person.

## When a client has memory and concentration problems

Clients with mental health problems may have memory and concentration problems. Where this is the case, giving simple and concise information about their situation and repeating information can be helpful. If needed, provide the client with a written plain language summary of the information and options discussed during the appointment. If appropriate, you should also encourage them to record important information in a diary.

## When a client is distressed

CAs should have a list of statements that their staff can paraphrase, using their own words, to help guide telephone conversations when talking to clients who appear to be distressed, e.g. “It is understandable that you are anxious at a time like this given everything that is happening for you at the moment”, or “Lots of people say that going through financial difficulties can be very stressful”, or “It can be important to talk to someone about what is happening. Is there someone who can give you that support?”

## When a client is confused or out of touch with reality

When talking over the phone with a client who is confused or out of touch with reality, ask them to find a spot that is quiet and free from distractions. You should also try to find a spot that is quiet and free of background noise.

Tailor your interaction to the way the client is behaving. If they are confused, respond to them by communicating in a simple and concise manner. It is important to be patient and allow time for the client to process the information and respond to what has been said, repeating things if necessary.

If the client is out of touch with reality, be sensitive to this and reassure them that you are there to assist. Delusions and hallucinations seem very real to the person experiencing them. While not agreeing with the client’s delusions and hallucinations, acknowledge how they may be feeling, e.g. “that must be difficult for you” or “I can see that you are upset”.

So as not to worsen the situation, you should:

- **Not** assume they cannot understand what is being said
- **Not** raise your voice as if speaking to someone who is hard of hearing
- **Not** dismiss, minimise or argue with them about their confusion, delusions or hallucinations
- **Not** act alarmed, horrified or embarrassed by their confusion, delusions or hallucinations
- **Not** laugh at their confusion, delusions or hallucinations
- **Not** encourage or inflame any paranoia.

When working with a client who is confused or out of touch with reality, you should be aware that they may be frightened by their thoughts and feelings and this fear may lead them to deny that anything is wrong. If this happens, encourage them to talk to someone they trust.



## When a client is behaving aggressively

If a client is behaving aggressively it is important not to take the aggressive behaviour personally and understand that they may be feeling confused or frightened. Be aware that their symptoms or fear causing their aggression might be exacerbated if certain steps are taken, e.g. involving the police.

If the person becomes aggressive, assess the risk to yourself, the person and others. Ensure your own safety at all times so that you can continue to be an effective helper. If you feel unsafe, seek help from others. Do not stay with the person if your safety is at risk.

The following strategies can be helpful when working with an aggressive client:

- Remain as calm as possible and avoid nervous behaviour, e.g. shuffling your feet, fidgeting, making abrupt movements.
- Use positive words, such as 'stay calm', rather than negative words, such as 'stop shouting'.
- Speak to them slowly and confidently with a gentle, caring tone of voice.
- Explain to them that although you would like to help them, it is not possible when they are (state the unacceptable behaviour, e.g. yelling).
- Consider taking a break from the conversation to allow them a chance to calm down.

So as not to increase fear or aggressive behaviour, you should:

- **Avoid** raising your voice or talking too fast
- **Avoid** responding in a hostile, disciplinary or challenging manner
- **Avoid** arguing with them
- **Avoid** threatening them
- **Avoid** restricting their movement (e.g. if the meeting is face to face and they want to pace up and down the room).

After an encounter with a client who is behaving aggressively, take a break and discuss it with a supervisor.

## When there is a concern about safety

If you are concerned about the safety of a client, or others, you should:

- Take any threats or warnings seriously, particularly if the client believes they are being persecuted
- Explain that this cannot be kept confidential
- Consider terminating the interview
- Seek assistance from a colleague
- Contact the local mental health service and the authorised third party, if there is one, to discuss your concerns about the client. Unless there is a serious risk of harm, you will need to get prior consent from the client.
- Take any necessary protective action, e.g. contact the police or mental health crisis team.

If the contact is by phone, also try to ascertain the client's whereabouts.

### Ensure your own safety first.

If you feel unsafe, seek help from others. Do not stay with the person if your safety is at risk.

## Disclosing mental health problems to the financial institution

People may be reluctant to tell financial institutions about their mental health problems, e.g. because of shame, fear of being refused credit or because they have other worries about how the information will be used.

However, most financial institutions have policies about assistance for people who are experiencing financial difficulties. Know about these policies and the positive role that financial institutions can play for people with financial difficulties and mental health problems.

While attitudes to mental health problems are changing, there may still be repercussions for individuals in disclosing mental health problems to third parties. However, if a client wishes to disclose mental health problems to a financial institution, you should:

- Encourage them to decide what they hope to achieve by disclosing and check if this is realistic.
- Advise them to ask to speak to a specialist team member at the financial institution who is experienced in working with people with mental health problems and financial difficulties.



# MENTAL HEALTH FIRST AID AUSTRALIA

- Inform them that they may be asked to provide evidence of their mental health problems in order to reach the most suitable solution to the financial difficulties.
- Encourage the use of any available forms to communicate information about how the client's mental health problems impact on their financial difficulties.
- Inform them that, if they do disclose their mental health problems, the financial institution staff may not necessarily understand the impact of mental health problems on financial difficulties.
- Encourage them to keep records of who they have spoken to, what was said and when.
- Hearing about the lived experience of people who have had mental health problems and financial difficulties, as well as learning about the impact of mental health problems and financial difficulties on the family of the client.

Information for clients should include external resources and community services relevant to people with mental health problems. This should be regularly updated. Any website for people with financial difficulties should have a link to information which assists people in a mental health crisis, e.g. Lifeline, beyondblue.

## Policies and procedures

Where possible and practical, CAs should develop policies and procedures that are adapted to supporting clients with mental health problems. These policies and procedures should cover the training of staff and information resources for clients.

Training of CAs and staff could include:

- Basic mental health and counselling skills, which are informed by contemporary thinking and best practice in the mental health sector

## Self-care resources for CAs

Working with people with mental health problems and financial difficulties can be stressful. For this reason, if you are having difficulty coping, make use of any support services that are available in the community.

## References

1. Butterworth P, Olesen SC, Leach LS. The role of hardship in the association between socio-economic position and depression. *Aust N Z J Psychiatry.* 2012;46:364–73.
2. Butterworth P, Rogers B, Windsor T. Financial hardship, socio-economic position and depression: Results from the PATH Through Life Survey. *Soc Sci Med.* 2009;69:229–37.
3. Kitchener BA, Jorm AF, Kelly CM. *Mental Health First Aid Manual.* 4th ed. Melbourne: Mental Health First Aid Australia; 2017



## Development of this guide for CAs

This guide is a modification of guidelines that were originally produced for financial counsellors using the Delphi method, which is a systematic way of assessing the consensus of a panel of experts. Details of the methodology can be found in Bond K, Chalmers K, Jorm A, Kitchener B, Reavley N. Assisting Australians with mental health problems and financial difficulties: a Delphi study to develop guidelines for financial counsellors, financial institution staff, mental health professionals and carers. *BMC Health Services Research.* 2015;15(218).

This guide was modified specifically for Chartered Accountants. There is a suite of guidelines about how to best assist a person with mental health problems and financial difficulties. The suite of guidelines includes guidelines for financial counsellors, financial institution staff, mental health professionals and other support people. These guidelines can be downloaded at: [mhfa.com.au/mental-health-first-aid-guidelines](http://mhfa.com.au/mental-health-first-aid-guidelines)

Although this guide is copyright, it can be freely reproduced for non-profit purposes provided the source is acknowledged. Please cite this guide as follows:

Mental Health First Aid Australia. *A Guide for Chartered Accountants: Engaging with people with mental health problems and financial difficulties.* Mental Health First Aid Australia: Melbourne; 2017.