

# What are the factors influencing adults visiting a rural Safe Haven or other mental health services when in crisis?

## Abstract

### Objective:

This study aimed to explore the factors, including past experiences that influence the decision-making process of adults visiting a rural Safe Haven or other mental health, drug and alcohol (MHDA) services when in a crisis.

### Methods:

This qualitative study used a descriptive phenomenological approach to explore the experience of individuals accessing a rural health service in New South Wales in 2024. Semi-structured interviews were conducted with seven purposefully selected participants aged 18 and above with experiences of attending a rural Safe Haven, an alternative to presenting to an Emergency Department as part of the NSW Health Towards Zero Suicides Initiative.

### Results:

The mean age of participants was 54 years (range 27-68yrs). Four participants identified as male. Six persons had previously presented to an Emergency Department for mental health concerns and had been cared for by the community mental health team. Four persons had experience

of being an in-patient on a mental health unit. Thematic analysis of the participant's experiences identified four key themes shaping access and decision making: i) **Kindness and Support**, ii) **Options and Choice**, iii) **Rejection** and iv) **Deciding and Access**.

### Conclusion:

Findings highlighted the importance of simple human-centred interpersonal factors and service culture in shaping individual's help-seeking behaviour during a crisis. Conversely the absence of these factors may deter a person from accessing a service when in future crisis. Understanding these barriers and enablers has resulted in key recommendations including the need for staff being provided support, supervision and training around crisis intervention and that peer staff should be considered to be a part of these trauma informed multi-disciplinary teams. Persons who have presented in crisis should be offered independent follow up support and the opportunity to provide de-identified feedback on the care they received.

### Keywords:

Safe Haven, emergency, crisis, mental health, rural, trauma



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Martin Davis is a Registered Nurse who has clinical experience within the emergency mental health care system. Martin used a descriptive phenomenological approach to explore the experiences of individuals in mental health crisis accessing a rural Safe Haven alternative to the Emergency Department health service in New South Wales.