

EXECUTIVE SUMMARY

The 'Wellbeing on Call' project was an innovative collaboration between SuperFriend and five organisations in the superannuation and insurance industry. Supported by WorkSafe's WorkWell Mental Health Improvement Fund, its aim was to protect and promote the mental health and wellbeing of Victorian contact centre workers.

Introduction

The 250,000 contact centre employees in Australia are at higher risk of poor mental wellbeing for a variety of reasons. As a group they are younger with less formal training, and their workplaces face unique challenges including poor job design, excessive performance monitoring, lack of leader support, lack of variety in work, and lack of access to leave and training. As a result, they are more likely to report job strain, leading to higher staff turnover and intention to leave, absenteeism, and anxiety and depression.

The Wellbeing on Call program was designed to promote the mental health and wellbeing of Victorian contact centre workers. It was funded through a grant awarded to SuperFriend via WorkSafe's WorkWell Mental Health Improvement Fund.

Five organisations within the superannuation and insurance industry participated in the program: UniSuper, Sunsuper, Link Group, MLC Life Insurance and Concentrix. It was overseen and delivered by SuperFriend, with assistance from The Strengths Lab and Pracademia.

Co-design

Wellbeing on Call embraced and applied the principles of co-design. In interviews, workshops and observations facilitated by Symplicit, participants raised questions and generated ideas around leadership, performance, psychological capital, training and resources, and culture and values. This made it possible to tailor the program to the unique demands of their workplaces.

Program details

What was it?

The Wellbeing on Call program was an integrated suite of training and activities designed to promote and enhance wellbeing across participating organisations. It was informed by positive psychology approaches/principles and consisted of:

- Mental health and wellbeing workshops and webinar
- Team psychological capital workshops and coaching calls
- Strengths-based coaching workshops and coaching calls
- Networking sessions
- Mentally healthy workplaces webinar, and
- Job design webinar.

Who took part?

The program was tailored to three distinct roles within each organisation:

Team Members working in the contact centre managing calls, chat and emails, directly supporting customers

Team Leaders directly responsible for the oversight and wellbeing of Team Members

Human Resource (HR)-based staff involved in strategic oversight (including Occupational Health and Safety).

How was its success measured?

To get an accurate gauge of impact, the delivery of the program followed an experimental design. In each organisation, a participating team (Team Members and their Team Leader) received the interventions, and an additional control group consisting of Team Members and their Team Leader did not.

Data collection from the project primarily took the form of surveys (Team Members) and interviews (Team Leaders and HR-based staff). Both participants and the control group provided this feedback at the very beginning, immediately after the program had finished, and at the final evaluation four months later.

Impact

Mental health literacy

Team Members who took part in the program gained important practical skills related to mental health literacy, becoming more adept at recognising and responding to the signs of mental illness. At the end of the program, participating Team Members were more likely to look after their diet and engage in exercise/physical activity. In interviews, Team Leaders consistently described increased ability to effectively identify and talk to members of their team who might be struggling with mental health issues. They saw value for their organisations in the shared commitment of taking part in the program.

Leadership

Every participating Team Leader reported greater leadership confidence following the program. This stemmed from greater mental health literacy, learning more about their team, and from implementing practical strategies in the workplace. The program's strengths-based coaching was particularly popular. The follow up survey responses from the Team Members confirmed that while Team Leaders were not implementing all the post-intervention strategies, they continued to hold regular discussions about strengths.