

# Fab Abs

## Recent Research Abstracts

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### TELEPHONE COUNSELLING

Watson, Robert, J; McDonald, John. (2004). A rural perspective of telephone counselling and referral. *Australian Journal of Primary Health*, 10 (2), 97-103.

A telephone survey was used to examine rural residents' perceptions and knowledge of a well-established national telephone counselling and referral service (Lifeline). Residents in rural Australia generally experience poorer access and availability of health-related services than do their metropolitan counterparts. They may also have problems with confidentiality and stigmatization with what services are available in their community. Although this was a non-comparative study, it was reasoned that these barriers to help-seeking behaviour in rural areas would mean non-metropolitan residents would know and value a service like Lifeline which provides equitable and anonymous support to all Australians. The results showed that the service was known, valued and strongly supported by the respondents. The findings also support the belief that telephone counselling and referral has an important and unique place in rural health support and referral. (authors affiliated to University of Ballarat)

Donovan, Robert J; Gibbons, Leonie; Francas, Mark; Zappelli, Rhonda. (2006). Impact on callers to a men's domestic violence helpline. *Australian and New Zealand Journal of Public Health*, 30 (4), 384-385.

Interviews were conducted with 49 men who had contacted the Men's Domestic Violence Help Line (MDVHL) in Western Australia to ascertain the effect of the telephone contact. Of the 49, 38 men had attended an individual or group counselling session while 11 had not. All but one of the 38 who had attended follow-up counselling claimed, in response to an open-ended question, that there had been changes in their thinking or behaviour as a result of the counselling. Similarly, of the 11 who made telephone contact only with the MDVHL, all but one claimed there had been changes in their thinking or behaviour as a result of the helpline call. The responses among the latter group making telephone contact only regarding changed behaviour or thinking included more control of anger ( $n = 4$ ), less anger ( $n = 2$ ) and trying different strategies ( $n = 2$ ). Further, 41 of the 49 reported that their life had improved since calling the helpline. The authors conclude that even allowing for some demand effects and the relatively small size of the sample, the overall results support at least the short term efficacy of telephone counselling *per se* as well as the use of a helpline to direct perpetrators to appropriate face-to-face services.

Cartwright, Duncan; Hughson, Sally. (2005). Exploring loneliness: The experiences of rural and metropolitan Australia. *Auseinetter* no.25 no.3 Dec 2005: 36-39.

Data collected from 27,000 callers to Lifeline, where the reason for contact was loneliness, are examined in this article. The data was collected in 2003-04 from Lifeline's 42 telephone counselling centres located across Australia, including 32 in rural and regional areas. The article discusses types and effects of loneliness and the following aspects of the profile of callers: rural-metropolitan comparison; gender and relationship status; age; support structures and health concerns; and help seeking behaviour. The findings suggest that the drift from rural to urban areas may be creating a lonelier society for many older rural Australians. The critical age for greater susceptibility to loneliness for both men and women was found to be 35 to 44 years. Traditional assumptions about the protective effects of relationships were not supported by the data. The findings do, however, support the presumption that telephone counselling is an effective way to promote help-seeking behaviour among lonely people.