



Mental Health
Australia

LIVING IN RURAL AND REMOTE AREAS AND MENTAL HEALTH



All Australians should have the opportunity to access appropriate help and support for their mental health, no matter where they live.

However, many outer metropolitan, rural, regional and remote Australian communities only have variable access to medical mental health supports through limited workforce, visiting locums or telehealth appointments. There are similar difficulties accessing community mental health workers.

We also know there is significant underfunding across many mental health services, in particular, community mental health services, services for Aboriginal and Torres Strait Islander people and services in regional and remote areas.

If governments can act, then the workforce, economic and health benefits of positive policy changes and reform, (including and beyond the mental health service system) will have a huge impact on the mental health of our rural and remote communities and the people who live in them.

#EveryElectionIssue

#MentalHealthInMind



THE FACTS

How does living in a rural or remote area impact our mental health?

The [Productivity Commission Inquiry into Mental Health Final Report](#) found that “Access to mental health professionals, especially specialist care, falls dramatically outside of major capital cities...”

The lack of referral pathways to mental health professionals outside major cities is clear. This explains in part why people in remote and very remote areas of Australia are more likely than those in cities to use medication only, rather than accessing psychological support services.

Research undertaken prior to the COVID-19 pandemic between [Mental Health Australia and the Royal Flying Doctor Service](#) (RFDS) also tells us that:

- Schizophrenic psychosis, depressive disorders, and drug psychosis were the three main reasons for RFDS transfers of people with mental disorders
- 61% of people transferred by the RFDS with mental disorders were male
- The age range of people transferred by the RFDS with mental disorders were between four years and 85 years of age, with the mean age being 35-39 years.
- Aboriginal and Torres Strait Islander people are 1.2 times more likely to die from mental disorders than non-Indigenous people, and 1.7 times more likely to be hospitalised.
- Aboriginal and Torres Strait Islander young people aged 12-24 years are three times as likely to be hospitalised with mental illness as non-Indigenous young people, and
- Mental health disorders are associated with early death from other illness such as cardiovascular disease, diabetes, cancer, and avoidable injury.

#EveryElectionIssue

#MentalHealthInMind



WHAT CAN THE GOVERNMENT DO?

Most recently, in our submission for the [Inquiry into the provision of GP and related primary health services to outer metropolitan, rural, and regional Australians](#), Mental Health Australia called for equity of access to mental health support across the country and continually advocates to government that this will require multiple systemic interventions including but not limited to ensuring:

- the workforce is in place to provide the right services
- the funding structures incentivise the workforce to offer the right services in the right location
- services are integrated across physical and mental health
- adequate access to digital health services.

Addressing these issues will make a start on improving access to mental health services in outer metropolitan, rural, regional and remote Australia.

#EveryElectionIssue

#MentalHealthInMind



LOOKING FOR MORE DETAIL OR RESOURCES?

September 2021 - Mental Health Australia Submission to Inquiry into Provisions of GP and Primary Health Services to outer metropolitan, rural, and regional Australians

[Submission to Inquiry into Provisions of GP and Primary Health Services to outer metropolitan, rural, and regional Australians | Mental Health Australia \(mhaustralia.org\)](#)

2021 - Royal Australian College of General Practitioners - General Practice Health of the Nation
RACGP - Health of the Nation

May 2018 - Mental Health Australia - Submission to Senate Community Affairs inquiry into accessibility and quality of mental health services in rural and remote Australia

[Submission to Senate Community Affairs inquiry into accessibility and quality of mental health services in rural and remote Australia | Mental Health Australia \(mhaustralia.org\)](#)

June 2017 - Mental health outlook poorer for rural and remote Australians

[Mental health outlook poorer for rural and remote Australians | Mental Health Australia \(mhaustralia.org\)](#)

Report of the PHN Advisory Panel on Mental Health

<https://www.health.gov.au/resources/publications/report-of-the-phn-advisory-panel-on-mental-health>

September 2018 - Australian Institute of Health and Welfare - Rural and Remote Health.

<https://www.aihw.gov.au/reports/rural-remote-australians/rural-remote-health/contents/access-to-health-care>

Mental Health Australia would like to thank its member organisations and key stakeholders for contributing to this extensive body of work on how living in outer metropolitan, rural, regional and remote Australia can impact mental health and particularly service provision. If you are a member of Mental Health Australia and would like to add to these resources, please contact info@mhaustralia.org

#EveryElectionIssue

#MentalHealthInMind