

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Budget Estimates 2012-2013, 30 & 31 May and 1 June 2012

Question: E12-198

OUTCOME 11: Mental Health

Topic: Lack of access to mental health services in rural areas

Type of Question: Written Question on Notice

Number of pages: 3

Senator: Senator Wright

Question:

In 2010, an evaluation by PricewaterhouseCoopers of the Mental Health Services in Rural and Remote Areas program indicated that there are some gaps in this service. For example, men (such as farmers) were not accessing services, issues with cultural acceptance of the program in the Indigenous and CALD (culturally and linguistically diverse) communities and there was an increasing demand for the service. Has the Department responded to this evaluation?

- a) If so, what was the response and has the program been improved to address the issues raised in the evaluation report?
(i.e. identify the practical changes to the program and provide examples of improvements that have been made to address the concerns in the report).
- In 2010, an evaluation by PricewaterhouseCoopers of the Mental Health Services in Rural and Remote Areas program indicated that there are some gaps in this service. For example, men (such as farmers) were not accessing services, issues with cultural acceptance of the program in the Indigenous and CALD (culturally and linguistically diverse) communities and there was an increasing demand for the service. Has the Department responded to this evaluation?
- b) If so, what was the response and has the program been improved to address the issues raised in the evaluation report?
(i.e. identify the practical changes to the program and provide examples of improvements that have been made to address the concerns in the report)

Answer:

PricewaterhouseCoopers evaluated the Program in 2010, and the Final Evaluation Report (January 2011) was made publicly available in May 2011 on the www.mentalhealth.gov.au website. The report made eight recommendations and one 'opportunity for further investigation' on support services for carers.

The evaluation showed that the Mental Health Services in Rural and Remote Areas program (MHSRRA) Program has made a considerable difference to mental health in rural and remote Australia, not just in relation to increasing access, but also in relation to increasing workforce and reducing the stigma associated with mental health.

The evaluation was positive and recommended continued funding of the program. It made a number of recommendations on the operation of the program, some of which have been implemented and a number of which are under consideration.

The findings of the evaluation were used to inform Minister Butler's decision to extend funding for the Program to 30 June 2013, and will be used to inform future parameters of the Program beyond 2012-13.

Recommendation 8 – Continuation of MHSRRA

Recommendation 8 on continuation of MHSRRA beyond 30 June 2011 has been addressed.

From 1 July 2012 there will be 25 organisations including Medicare Locals, Aboriginal Medical Services and the Royal Flying Doctor Service, funded to deliver mental health services in more than 200 communities in rural and remote Australia.

Recommendations 1, 2 and 7 – Program Focus and Communication

Recommendations 1, 2 and 7 on increased focus on promotion and prevention, children and young people, carers and communication relate to how the MHSRRA Program and mental health programs generally are delivered by the Australian Government in rural and remote Australia. These have broader application than MHSRRA and are being addressed as part of a range of strategies.

Promotion and prevention are funded nationwide through initiatives including beyondblue, school mental health initiatives such as MindMatters and KidsMatter, telephone and web based initiatives such as Lifeline, Anxiety Online and Kids Helpline and youth initiatives such as headspace and e-headspace.

Access to Allied Psychological Services (ATAPS) funding was significantly increased in the 2011-12 Federal Budget with an additional \$69.9 million to be provided over five years to increase the capacity to provide services to an additional 50,000 children and their families. Children under the age of 12 years who have, or are at risk of, developing a mental, childhood behavioural or emotional disorder can receive treatment through the ATAPS child mental health service.

The establishment of Medicare Locals should also assist to improve communication through a number of their key roles including the coordination of primary health care delivery and forming linkages between services, organisations and health professionals to tackle local health care needs and service gaps.

Recommendations 3, 4, 5 and 6 – Program Guidelines, Monitoring and e-Mental Health

Recommendations 3, 4 and 5 relate to increasing flexibilities under the Program Guidelines on innovative service delivery, workforce eligibility and referral requirements. These are receiving active consideration, recognising the particular issues of service delivery in rural and remote areas while balancing the need to ensure service delivery:

- retains its clinical focus,
- remains appropriate and effective and
- is consistent with related primary mental health care programs such as ATAPS.

Beyond MHSRRA, the development of a range of e-mental health options under other Australian Government initiatives is also expanding the accessibility of mental health services for people in rural and remote areas.

Recommendation 6 on improved data collection is currently under active consideration in the context of new reporting templates and database development. In particular this will see greater alignment between MHSRRA and ATAPS data collection and reporting systems.

The report also highlighted that while the funded organisations did not report a large proportion of Culturally and Linguistically Diverse (CALD) clients, data specific to population groups, including CALD clients and Aboriginal and Torres Strait Islander communities, is not collected under this program.