Accessibility and quality of mental health services in rural and remote Australia



10 May 2018

Committee Secretary Senate Standing Committee on Community Affairs PO Box 6100 Parliament House Canberra ACT 2600

email: community.affairs.sen@aph.gov.au

Dear Sir/Madam.

The Local Government Association of Queensland (LGAQ) welcomes the opportunity to provide a submission to assist the Senate Inquiry into the accessibility and quality of mental health services in rural and remote Australia.

The importance of this issue is reflected in the resolution from the 2017 LGAQ Annual Conference stating:

That the Local Government Association of Queensland lobby the State and Federal Government to enact their respective commitments to mental health and wellbeing by increasing funding, and the availability and accessibility of mental health services and programs in rural and remote Queensland.

LGAQ President, Mark Jamieson, and CEO, Greg Hallam AM met with Hon Steven Miles, Minister for Health and Minister for Ambulance Services on 8 February 2018 to discuss the conference resolution and the broader mental health challenges facing rural and remote communities across Queensland.

This issue is of significant concern for both State and Local Government and was reflected in the shared mutual interest and the urgent need to respond to this concerning health challenge.

The LGAQ has consulted with Queensland councils and provides the attached submission for your consideration.

Should you have any questions regarding the matters raised in this submission, please do not hesitate to contact Mr Robert Ferguson, LGAQ - Senior Advisor - Environmental and Public Health,

Yours sincerely

Simone Talbot ACTING GENERAL MANAGER - ADVOCACY Accessibility and quality of mental health services in rural and remote Australia Submission 19



Senate Inquiry into accessibility and quality of mental health services in rural and remote Australia

LGAQ Submission

Local Government Association of Queensland Ltd

Accessibility and quality of mental health services in rural and remote Australia Submission 19

Submission to the Senate Inquiry into the Accessibility and quality of mental health services in rural and remote Australia

The Local Government Association of Queensland (LGAQ) is the peak body for local government in Queensland. It is a not-for-profit association established solely to serve councils and their needs. The LGAQ has been advising, supporting and representing local councils since 1896, allowing them to improve their operations and strengthen relationships with their communities. The LGAQ does this by connecting councils to people and places; supporting their drive to innovate and improve service delivery through smart services and sustainable solutions; and delivering them the means to achieve community, professional and political excellence.

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1. Executive Summary

The local government sector is a key provider and manager of community facilities and services across Queensland.

Queensland councils oversee more than \$108 billion in community assets. Our daily goal is to strive to build strong, liveable, connected communities in Australia's most diverse and regionalized state.

These operations represent a significant investment in the provision of community infrastructure and services by councils and make a substantial contribution to regional economies and the communities across Queensland. With a workforce of 40,000 working across the state, the local government sector is at the coalface and has a significant vested interest in the wellbeing of their local communities.

The LGAQ acknowledges the Federal Government's commitment to conduct an inquiry into the accessibility and quality of mental health services in rural and remote Australia.

It is understood the inquiry covers:

- a) the nature and underlying causes of rural and remote Australians accessing mental health services at a much lower rate:
- b) the higher rate of suicide in rural and remote Australia;
- c) the nature of the mental health workforce;
- d) the challenges of delivering mental health services in the regions;
- e) attitudes towards mental health services;
- f) opportunities that technology presents for improved service delivery; and
- g) any other related matters.

2. Queensland perspective

The challenges facing rural and remote communities in relation to the provision and operation of mental health services is of significant importance to Queensland councils.

The importance of this issue is reflected in the resolution from the 2017 LGAQ Annual Conference stating:

That the Local Government Association of Queensland lobby the State and Federal Government to enact their respective commitments to mental health and wellbeing by increasing funding, and the availability and accessibility of mental health services and programs in rural and remote Queensland.

In addition, the 2016/17 Indigenous Leaders Forums (Mayors and councillors of the 17 Councils of discrete Aboriginal and Torres Strait Islander councils) also identified the insufficient mental health resources available to their communities and the correlating high levels of local youth and male suicide.

This issue is a priority for both State and Local Government and was reflected in the shared mutual interest and the urgent need to respond to this concerning health challenge.

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3. Response to the Inquiry

(a) the nature and underlying causes of rural and remote Australians accessing mental health services at a much lower rate

Access to services is very limited in rural communities across Queensland. Combined with the stigma of mental health being seen as a weakness makes it difficult for those seeking assistance to access mainstream local facilities offering mental health support.

Feedback from local councils has indicated this perception does exist in small rural and remote communities and represents a considerable obstacle. This is not limited to rural and remote communities with indigenous communities also experiencing many similar challenges.

Indigenous councils also reported similar reluctance to be seen to be accessing mental health services, particularly younger people. Councils reported that some fly-in-fly-out services often positioned themselves in prominent location in the community which discouraged attendance at such a visible location.

Councils suggested that such services would benefit from seeking local guidance on where to provide services (preferably in a general health setting where patient confidentiality would be assured). Councils also urged that the service offering also contain an outreach component which would introduce in a non-threatening manner the nature of services provided, minimise any associated stigma and encourage greater take-up of on-going services.

Recommendation 1: The LGAQ supports the provision of culturally accessible, appropriate and discrete mental health services in rural, remote and indigenous communities.

(b) the higher rate of suicide in rural and remote Australia

Unfortunately, isolation and the feeling of helplessness and despair creates the perfect storm for rural and remote families.

Traditional approaches at responding to these challenges with a range of frequent local community events would provide opportunities to engage with family and neighbours.

'Once upon a time you would invite the property neighbours over on a Sunday and have a big get together or meet on the bank of a river and just have down time'.

The ageing population on rural properties is also a contributor with a significant lack of 'succession planning' with young adults often not wishing to remain or return to the bush in rural and remote Queensland.

With limited health services across many rural and remote communities, often disease burden is found too late and the person would rather suicide then go through the pain or require their family to intensely care for them.

The social disadvantages associated with the discrete indigenous communities (overcrowded houses, minimal employment opportunities, absence of facilities many communities take for granted etc) are well documented and are directly linked

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with the higher than average suicides occurring in their communities, particularly amongst youth.

(c) the nature of the mental health workforce

Feedback from local government has highlighted that mental health services in the rural community are struggling to cope.

Some local government areas are fortunate to have access to the Royal Flying Doctor Service (RFDS) who supply a mental health service, however, funding is inconsistent with ongoing uncertainty of service continuity on a year to year basis.

It has been commented that often the funding period has finished before these valuable services are given confirmation that their funding will continue. This lack of certainty causes anxiety in the community, as they are unsure if the service will continue beyond the current financial year.

Further, relationships between service provider and patients are particularly important when treating mental health issues. Funding uncertainty traditionally lends itself to higher levels of staff turnover which impacts negatively upon the trust relationships between provider and patient.

The challenges facing indigenous communities in providing mental health outreach services is equally critical. The inclusion of these services into existing outreach health services is essential due to the perceptions and stigma surrounding mental health in these communities.

Finding appropriate and sustainable outreach services to respond to the mental health needs of young people living in indigenous communities requires focused attention.

Recommendation 2: The LGAQ supports the provision of recurrent funding for key agencies i.e. RFDS and outreach health services, that offer discrete mental health services in rural, remote and discrete indigenous communities.

(d) the challenges of delivering mental health services in the regions

The service delivery by RFDS is reported to be excellent. The fact that they are fly in and fly out, means that the perception that information will be divulged to anyone else is removed. They are also available on the phone when needed, with this service acting as an excellent follow-up to initial conversations.

To manage this service is a challenge with limited resources. In many cases they only frequent an area once a fortnight or month (regular timetabling be would beneficial). Those that are in mental health crisis are however dealt with by medical doctors rather than mental health professionals that are skilled and trained in their field.

The challenge however is to ensure the service is available when required, not when it is efficiently ideal to deliver the service. As well as an ongoing, predictable and reliable out-patient service, it is important that there be available a quick -response facility that can be activated without notice when circumstances warrant. Examples might be in the event of a local tragedy (such as in Kowanyama where a family fatality occurred in an horrific incident) or an exceptional stressor (such as a natural disaster).

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(e) attitudes towards mental health services

It has been claimed that attitudes to mental health has improved marginally, with progress being made through a range of initiatives that strive towards breaking down the stigmas associated with mental health. It has been commented that organisations such as Beyond Blue has assisted with this ongoing challenge.

Recommendation 3: The LGAQ supports the provision of a range of marketing and online information to address the ongoing stigma of mental health issues in rural, remote and indigenous communities.

(f) opportunities that technology presents for improved service delivery

Technology improvements have definitely improved service delivery, however, this is only beneficial if the internet delivery continues to improve so that this technology can be fully realised.

Skype, Facetime, Messenger, Health Pods are all platforms for talking face to face with mental health professionals, however, slow internet or patchy coverage is interruptive to conversation. Rural property owners and satellite towns will not get access to NBN and are reliant on Satellite Internet Access.

The LGAQ is committed to work towards the connectivity challenges facing communities and identifies this as a high priority for rural, remote and indigenous communities.

Recommendation 4: The LGAQ supports the ongoing investment into enhanced communication technologies to assist with the delivery of a range of support, online tools and information for mental health services in rural and remote communities.

Should you require further assistance in relation to this matter please do not hesitate to call Robert Ferguson, LGAQ - Senior Advisor – Environmental and Public Health

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