

13 April 2014

Mental Health Commission  
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Dear Mental Health Commission

**RE: Submission on *the National Review of Mental Health Programmes and Services***

The National Farmers' Federation (NFF) welcomes the opportunity to comment on the *National Review of Mental Health Programmes and Services*.

The NFF strongly supports the work of the National Rural Health Alliance (NRHA), driving improved outcomes for rural health, and has consulted their expertise in the development of this submission.

Farmers and their families are confronted with a number of potential stressors which may place strain on their mental health:

- economic change leading to financial insecurity and vulnerability;
- stress caused by natural disasters such as drought, flood and bushfires;
- possibility that social stigma in small communities may provide a barrier to people seeking help for mental health issues – although this phenomenon may be offset by the support and cohesiveness often characteristic of small rural communities;
- 'living at work' which offers farming families little opportunity for a break from their working environment;
- occupational hazards such as increased risk associated when working with machinery and stock, a higher incidence of injury (potentially leading to untreated pain) and zoonoses;
- lack of leisure time and long working hours (in 2006, over half of farmers reported working more than 49 hours per week compared to 18 per cent of the overall population)<sup>1</sup>; and
- stoic attitudes and cultural norms which promote a strong work ethic and rugged individualism, but may discourage individuals from seeking help.

It is important to understand that there is a large body of evidence relating to the effect on health, especially mental health, of individuals not being in control of their destiny. Australian agriculture is quite frequently a setting in which the farmer does everything right in relation to

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<sup>1</sup> Agriculture in Focus: Farming Families, Australia (2006), ABS

a wheat crop, for example, only to see the weather or international prices or the exchange rate intervene between them and a good financial outcome. Persistent exposure to such realities as these are likely to mean that individuals concerned and their families are regularly at greater risk of mental illness.

Like others in rural and remote areas, farmers and their families have lower levels of access to specialised mental health services. In 2008 the Mental Health Council of Australia reported that the rate of usage of MBS item numbers for mental health services in regional areas was 40-90 per cent of that in major cities; and in remote areas it was 10-30 per cent of the rate in major cities.

New data from the Australian Institute of Health and Welfare, however, indicates that access to community mental health services, through community nurses or run out of a State-funded community health centre may be available – is more evenly distributed across remoteness areas (ASGC-RA 1-5) than items funded through the Medical Benefits Schedule (MBS). One of the main reasons for this is the inefficient distribution of GPs, with some areas having none at all, in the circumstance in which use of the MBS items is by or through referral by a GP.

The NFF and its members welcomed the recent announcement that \$10.7 million of the recent (February 2014) drought assistance package was for improved access for farm families to social and mental health services. The stressors encountered by farmers and their families, coupled with their limited access to mental health services, may leave them particularly vulnerable to developing mental health problems.

- In 2008, the Australian Institute of Family Studies found that among farmers who were in drought, 17 per cent had mental health issues compared with 8 per cent who had not experienced drought in the three previous years.<sup>2</sup>
- In 2008, South Australia's Flinders University School of Social Work showed that prolonged drought and increased social isolation are linked to rates of suicide among male farmers that are almost 50 per cent higher than the average in rural communities<sup>3</sup>. That study showed that 34 in every 100,000 male farmers commit suicide – much worse than the 24 per 100,000 among rural men generally (a rate which in itself is significantly higher than the national average).
- There is some evidence that families struggle and attempt to keep it together to survive a crisis but may need more support once it is over, when widespread public and media support may be diminished.
- Farmers are more likely than many other population groups to drink at risky levels. Risky drinking is both a contributor to and symptom of mental health problems. Among farming communities in rural Victoria, an estimated 54 per cent of men and 22 per cent of women reported drinking at high-risk levels at least once a month compared to 20 per cent of the general population.

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<sup>2</sup> Submission to the Productivity Commission Inquiry into Drought Support Australian General Practice Network, [http://www.pc.gov.au/\\_\\_data/assets/pdf\\_file/0018/85122/subdr170-part2.pdf](http://www.pc.gov.au/__data/assets/pdf_file/0018/85122/subdr170-part2.pdf)

<sup>3</sup> Submission to the Productivity Commission Inquiry into Drought Support Australian General Practice Network, [http://www.pc.gov.au/\\_\\_data/assets/pdf\\_file/0018/85122/subdr170-part2.pdf](http://www.pc.gov.au/__data/assets/pdf_file/0018/85122/subdr170-part2.pdf)

The NFF supports targeted intervention through a multifaceted response. Some examples are outlined below:

- Mental Health First Aid (MHFA), to raise awareness of mental health issues in the broader community and support early intervention. Providing MHFA training to financial counsellors, agribusiness personnel, vets and other people who interact with farmers on a day-to-day basis has been shown to improve their ability to recognise a mental disorder, increase their level of confidence in providing help to someone with a mental health problem, decrease social isolation and positively change their beliefs about treatment.<sup>4</sup>
- Continuing professional development, mentoring and support so that local health professionals are better equipped to provide mental health treatment and support where possible.
- Country Women's Association of Australia branches are invaluable networks which, among other work, support positive mental health of older people, women and families in rural and remote communities. Where they exist, Men's Sheds also play a very valuable role. Studies show that at least two-thirds of all farmer suicides occur in older age groups, mainly those over the age of 55. Groups such as Men's Sheds have particular benefits for older people in rural areas, by decreasing social isolation, enhancing self-esteem, increasing access to health information and navigating ways through structures of the health system.
- Online and telephone-based mental health services support people with mental health disorders through mobile phone, computer and online applications, ranging from the provision of health information to real-time interaction with clinicians trained to assist people experiencing mental health issues. Lifeline, Kids Helpline, MensLine Australia, and beyondblue are examples of such services. Such support is valuable in circumstances where people may refrain from seeking help in person for fear of the attached stigma.
- eHealth systems can enable local health professionals and their patients to gain access to mental health professionals who are not on-site. Telepsychiatry has been quite successful, especially where it is used for follow up after earlier face-to-face consultation(s).

The NFF also supports the work of the National Centre for Farmer Health (NCFH), as one of the most exciting initiatives in agricultural healthcare in more than a generation. It is a new university research, service delivery and education centre that provides national leadership to improve the health and well-being of farmers, farm workers and their families across Australia. It is a partnership between Deakin University and Western District Health Service and is based in Hamilton.

The five core activities of the National Centre for Farmer Health are:

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<sup>4</sup> Enhancing the Knowledge and Skills of Advisory and Extension Agents in Mental Health Issues of Farmers (2010), Centre for Rural and Remote Area Health, University of Southern Queensland, Toowoomba, QLD, Australia, [http://www.rrh.org.au/publishedarticles/article\\_print\\_1593.pdf](http://www.rrh.org.au/publishedarticles/article_print_1593.pdf)

1. Professional Training and Education;
2. Applied Research and Development;
3. IT Information Hub;
4. Agri-Safe Programs; and
5. Sustainable Farm Families - dissemination of research results

The Centre runs and operates a range of programs that address farmer health, well-being and safety issues. The Centre was unfortunately forced to wind back many of its programs this year, including Sustainable Farming Families, due to a lack of funding. The NFF believes that initiatives such as the NCFH are tangible and critical ways to help the farm sector respond to the range of challenges and need ongoing government support.

It will be important for mental health services and capacity to develop in sync with regions such as Northern Australia as their population grows. If you have any questions regarding this submission, please contact NFF Rural Affairs Manager, David McKeon on 02 6269 5666.

Yours sincerely



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