Improving Rural and Remote Mental Health Services

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Proceedings
Improving Rural and Remote Mental Health Services

PAPERS PRESENTED

- “Providing Mental Health Services Over 236,000 kms” - S Lucking, Gascoyne Mental Health Service, WA.

- “An Interactional Model for Rural Mental Health Services: The Effectiveness of the Role of Allied Health Professionals” - L Hodgson and J Jackson, Australian Rural and Remote Allied Health Taskforce, Qld.

- “Deliberate Self-Harm in the South West of WA: Preliminary Results of an Intervention Study” - S Aoun, Edith Cowan University, WA & T Lavan, South-West Regional Mental Health Team, WA.

ISSUES IDENTIFIED

- Mental health services are consistently recognised as one of the major deficits in rural and remote health services and the availability of management and support for people with mental illness remains a problem. This is especially the case in relation to early diagnosis and intervention, which are the keys to effective management.

- In recognition of the reality that urban approaches to mental health services are often not feasible or appropriate in rural Australia, there should be trials of models of rural mental health service delivery which reflect the cultural, structural and geographic circumstances of rural and remote Australia.

- These models should explore approaches which focus on:
  - rooming in;
  - multidisciplinary and multiskilling activities;
  - telepsychiatry;
  - providing information in a form comprehensible to the target audience;
  - consumer support networking;
  - the resourcing of outreach work;
  - links between rural and teaching hospitals; and
  - transport options.

- There is often an interaction between these approaches and their effectiveness is usually enhanced when linkages are made.
• Information programs are still needed to remove what is often seen in rural areas as the stigma of mental illness and to enhance the perception of the use of mental health services as a positive option.

• Special priority continues to be needed to address suicide and risk-taking behaviour in rural Australia, where morbidity and mortality rates markedly exceed those in urban areas. Initiatives which feature intervention strategies in both community and hospital settings, and have a focus on individuals at risk, are likely to lead to improvements in the current situation.