

MEDIA RELEASE



Thursday, 6 December 2018

CRRMH welcomes key recommendations outlined in Senate Report

The Centre for Rural and Remote Mental Health (CRRMH) welcomes key recommendations outlined in a Report from The Senate Community Affairs Reference Committee on the Inquiry into the 'Accessibility and quality of mental health services in rural and remote Australia'.

The CRRMH made a [submission to the Senate Inquiry](#) and CRRMH Director Professor David Perkins and Research Leader Hazel Dalton provided evidence at the Inquiry in Parliament House earlier this year.

Director of the CRRMH, Professor David Perkins said it was particularly pleasing that the report was the unanimous conclusion of a multi-party Senate committee and included many of the CRRMH's recommendations.

"Following on from our Submission, we feel that many of our recommendations have been included. In particular, we welcome the key recommendation to develop a national rural and remote mental health strategy which seeks to address the low rates of access services, workforce shortage, the high rate of suicide, cultural realities, language barriers and the social determinate of mental health in rural and remote communities," he said.

The strategy led by the National Mental Health Commission is subject to an implementation and monitoring framework which requires reporting regularly to government and to Parliament on progress.

Professor Perkins said it was also pleasing to see that The Report emphasised that rural communities are not all the same and that they need to be involved in planning mental health and suicide prevention strategies for their localities.

"This is something the CRRMH advocates strongly as can be seen in our [Position Paper on Rural Suicide and its Prevention](#)," Professor Perkins said.

The Report also raises the issue of the short-term nature of current service contracts which subsequently do not encourage long- term commitment or develop services or careers in rural communities.

It also highlights the need to address the inadequate services for Aboriginal people and communities.

One of the recommendations states that every Primary Health Network (PHN) should have an Aboriginal board member and there should be strong partnerships and active cooperation with community controlled aboriginal health services.

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“We know that Primary Health Networks are a critical player in this process and need to be supported to become strong and effective coordinating agencies,” Professor Perkins said.

“It was also encouraging to see the focus on supporting rurally based mental health staff.

“Fly-in fly-out and telemental health solutions should supplement rather than replace resident services in rural communities,” he said.

The CRRMH looks forward to the Government’s endorsement of the recommendations outlined and hopes to play a key part in the development and implementation of a strategy for rural mental health and suicide prevention.

Click here to read the full report from The Senates Community Affairs References Committee - [Accessibility and quality of mental health services in rural and remote Australia](#)

If you or someone else is in immediate danger, call 000 or go to your nearest hospital emergency department.

If you’re concerned about your own or someone else’s mental health, you can call the NSW Mental Health Line on 1800 011 511 or Lifeline on 13 11 14.

For best practice guidelines on Mental Health and Suicide Reporting, visit: <http://www.mindframe-media.info/>

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