Australia’s Hidden Health Crisis

The National Regional Check In – a report by the Australian Counselling Association
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Every Australian deserves access to mental health care - but sadly, that’s not the reality for everyone. It’s a simple fact that Australians who live in rural and remote areas have poorer health outcomes than those who live in cities, not to mention higher rates of suicide and self-harm.

Right now our system is failing these people. And with the pandemic driving unprecedented demand for our services, Australia’s already drowning mental health system is at breaking point.

With uncertainty about the future, the continuing development of COVID-19 strains, and the increasing incidence of natural disasters, we are experiencing a perfect storm of circumstances, the true, long-term health impact of which is impossible to predict.

With that being said, if the Government doesn’t enact major policy change within the next five or 10 years, we can expect to see a widening of the socio-economic divide, coupled with a significant rise in suicide, youth violence, drug and alcohol issues and family breakdowns.

At the ACA, we refuse to accept a future in which the only people able to afford timely mental health services are the affluent. The time for reform is now.
Australia’s hidden health crisis

Australia is in the midst of a mental health crisis. Over the past decade, Medicare-funded mental health services have nearly doubled. Even prior to the pandemic, 65% of GP visits were connected to psychological issues. Now, as evidence of the longer-term mental health effects of COVID-19 starts to emerge, this figure is expected to grow.1

The challenge for mental health providers is how to cope with this surge in demand and ensure that support is provided when and where it is most urgently needed. While this is very much a nationwide issue, in rural and regional areas - where mental health services are most lacking - the system is almost at breaking point.

So what does this mean in real terms for everyday Australians? And what options are available to help alleviate the pressure? This report seeks to understand the context and environmental factors contributing to Australia’s mental health crisis, examine the broader implications and put forward potential solutions.
1. Key issues fuelling our mental health emergency

1.1 Excessive wait times for those most at risk

Since the advent of COVID-19, demand for mental health services has spiked - most noticeably in states that experienced long periods of lockdowns. Consequently, waiting lists to see mental health providers are now in excess of six weeks in many parts of Australia, with demand so high that many psychologists are unable to take on any new patients.

For the one in three Australians who live in rural and remote areas, however, the situation is even more pronounced. Despite the fact that suicide and self-harm rates increase the further from cities you go, the overwhelming majority of psychiatrists and psychologists are employed in urban areas.2 As a result, access to these mental health professionals outside of cities is significantly reduced - therefore exacerbating the demand for their services.
This lack of Medicare-funded mental health providers in rural and regional areas is having a direct impact on patients’ ability to get the support they need, when they need it. According to the National Regional Check In, a report commissioned by the Australian Counselling Association, 68% of those living in rural and regional Australia experienced depression and anxiety over the past two years. The same study also found that 26% of patients living in non-metro areas had to wait four to six weeks to see a psychologist or psychiatrist, while 14% waited seven weeks or more to access mental health support.

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Not surprisingly then, many regional Australians said they felt unsupported during their mental health challenges, identifying ‘feeling completely alone and isolated’ as a key trigger for their mental health challenges.
Of course, it’s not just adults who are experiencing mental health issues as a result of the pandemic. One in six Australians living in regional, rural or remote areas said their children have also suffered, citing the isolation enforced by lockdowns and the pressures of home schooling as some the biggest contributors to their children’s deteriorating mental health.

Even children suffering from perennial concerns like body image issues, online bullying and understanding their sexuality have been indirectly affected by the pandemic; a third of parents found it difficult to access adequate or appropriate mental health support for their children due to the increased demand on already limited regional services.

For many parents, supporting their children through these challenges with little to no professional assistance has taken its toll on their own mental wellbeing. More than half of parents went through a period of depression or anxiety themselves; for one in five this was a new experience. Of those surveyed, close to half admitted to feeling lost and hopeless as a result, while 13% attributed the subsequent breakdown of their family unit or relationship to the pressures of trying to cope.

**What’s contributing to children’s mental health challenges?**

- **Isolation from lockdown**: 49%
- **Body image issues and/or eating disorders**: 19%
- **Understanding their sexuality & identity**: 37%
- **Pressures of home schooling**: 27%
- **Access to the right support**: 33%
- **Social media / online bullying**: 15%
- **Lack of adequate support**: 9%
1.3 COVID-fuelled pressures in the workplace

For working Australians - and those with young families in particular - learning how to juggle work and home responsibilities has been one of the greatest challenges of the pandemic. Home-schooling, remote working and a lack of job security created a perfect storm in which mental health issues could take hold.

According to the National Regional Check In, workplace-related anxiety and stress affected over a third of Australians nationwide. The same percentage of those working in regional Australia had similar experiences, with one in five seeking professional support to help them manage their rising stress levels.

Despite Australia’s economy having grown considerably over the last few decades, few rural and regional Australians have benefited from this increased prosperity. Even pre-pandemic, Australia’s two-speed economy has seen regional Australians already experience much higher levels of job insecurity in comparison to metropolitan workers.3 Now, being able to find and keep a job is even more difficult for regional Australians, 24% of whom cited declining job security as one of the key concerns impacting their mental health. And for more than one in ten regional Australians, the fear of losing their job during the pandemic became a reality.

Meanwhile, many Australians struggled to adjust to new ways of working enforced by the pandemic. From working remotely to conducting their working lives behind masks and screens, close to a third of regional Australians said these necessary changes to how they did their job or delivered services triggered a decline in their mental health. Those working on the frontlines of the pandemic were particularly at risk of mental health issues, with 20% of essential workers from regional or rural areas acknowledging the negative psychological impacts of being exposed daily to the risks of contracting COVID-19.
1.4 The mental toll of natural disasters

From record-breaking floods in Queensland and New South Wales to devastating bushfires in Victoria and Western Australia, the pressure natural disasters place on our mental health services should not be underestimated.

In the wake of environmental catastrophes like these, it’s common to see increases in people suffering from depression, anxiety and PTSD. And it’s not just those directly affected by disasters who are dealing with their fallout. Many emergency and recovery workers, as well as the families of those affected and the communities around them, seek the support of mental health professionals to help them process what can be a highly traumatising experience.

In 2022, many communities only just beginning to recover from the financial and emotional impacts of COVID-19 were hit by yet another emotionally harrowing event, placing an already stretched system under even greater pressure. And with extreme weather events expected to become increasingly common, it is crucial that Australia’s mental health services are equipped to deal with inevitable spikes in demand.

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2. A GP’s Perspective

Dr Michela Sorensen

Growing up in rural and regional Australia, I experienced firsthand the lack of access to healthcare services - and the adverse health outcomes that occur as a direct result. It’s one of the reasons I’m such a passionate advocate for equitable access to quality healthcare for every Australian, irrespective of their postcode.

I see the GP as having a fundamental role in helping address the current mental health crisis. GPs are the first point of call when it comes to all areas of health, particularly mental health. They usually have an existing relationship with patients and they will often recognise the signs of mental illness before the patient does. It is up to the GP to ask the right questions, facilitate the discussion around mental health and, above all, provide a safe space where a patient feels comfortable enough to be vulnerable and discuss their mental health.

Importantly, the GP is also the facilitator in linking patients with mental health services. As such, they are well aware of the lack of access to appropriate support. One of the key findings from the National Regional Check In that stood out to me was the percentage of GP presentations focusing on mental health - these findings are certainly inline with, or perhaps even less than what I see on a day to day basis.

Since COVID hit, I have seen an exponential increase in the number of people presenting with mental health concerns. This trend spans all age groups, from children right through to the elderly. The triggers vary, but most frequently they have been health anxiety, social isolation, financial stress and also relationship stress.

The current mental health crisis is a very complex issue and there is no one, simple solution. This is however, one cog in the wheel that has the potential to be hugely beneficial. As the research shows, there are over 4,000 registered counsellors currently available to provide mental health care. Making their services available under MBS is one way to increase access to mental health care, particularly in rural and regional Australia.
“The GP is the facilitator in linking patients with mental health services”
3. A simple solution to a complex problem

The recent 2022 budget pledged more than $600 million in new funding for mental health over the next five years - but while a step in the right direction, it does not go nearly far enough. None of the measures put forward address the most urgent issues facing the mental health sector today: the shortage in the number of workers available to provide immediate support; and excessive wait times for those seeking help.

One potential and swift solution to the staffing issue involves making better use of the thousands of Registered Counsellors and Psychotherapists employed right across Australia - including regional and rural areas. Registered Counsellors and Psychotherapists are a qualified, highly trained sector of the mental health workforce, but are currently under-utilised as their services are not funded under the Medicare Benefits Schedule (MBS). This makes them financially unviable for many of those seeking mental health support.

The outcomes of redressing this oversight are likely to be considerable. Reports show that allied health professionals such as psychologists providing MBS items for Focussed Psychological Strategies spend approximately 60% of their time delivering counselling services, compared to just 30% delivering mental health interventions.

As counselling specialists, Registered Counsellors and Psychotherapists could significantly reduce this burden, freeing up psychologists to focus on more advanced cases and lowering wait times across the board. What’s more, this is a workforce that can be accessed immediately: right now, there are at least 4,000 Registered Counsellors who meet the current criteria for the Medicare Benefits Schedule (MBS), while a further 1,000 could be eligible to register within six months.
3.2 Economic benefits of Medicare-funded counsellors

From a financial perspective, including Registered Counsellors and Psychotherapists within the MBS has the potential to benefit both patients and the wider economy.

Despite the fact that the MBS was created to facilitate bulk billing, figures show that less than 30% of service providers bulk bill. By contrast, an overwhelming majority of ACA members have said they would welcome the ability to bulk bill their services. As such, funding Registered Counsellors in this way would not only significantly improve access for those in lower socioeconomic areas but also make it financially within reach.

There’s also a broader economic argument for these services to be Medicare listed. Mental health and suicide has been estimated to cost the Australian economy $220 billion annually - an amount that could be substantially reduced with improved access to support and earlier intervention from mental health professionals. Compare that to the $224 million it would cost to annually fund 3,000 Registered Counsellors operating at full capacity and the financial benefit is clear.5

Added to this is the positive impact such a move would have on the per capita service cost for Government and on out-of-pocket costs for consumers accessing services under the Better Access Initiative (BAI).

3.3 Safeguarding Australian’s Mental Health

While there are multiple external factors contributing to Australia’s current mental health crisis, many of which are outside of our control, right now there is an opportunity to alleviate and potentially even reverse the declining mental health of our nation.

It is the strong recommendation of the ACA that Registered Counsellors and Psychotherapists are added to the list of allied health professions in the Health Insurance (Allied Health Services) Determination 2014, which provide Focussed Psychological Strategies under the Medicare Benefits Schedule (MBS) Better Access Initiative (BAI).

Including Registered Counsellors into the BAI will significantly increase access to bulk billing services, especially for our nation’s most vulnerable. In the absence of a viable solution from the Government, it presents an appropriate, cost-effective and immediate solution that would ultimately help save lives.
References

Research for the National Regional Check In was conducted by Pure Profile on behalf of the Australian Counselling Association between February 22, and March 2, 2022. The research surveyed 2,009 Australians aged 18+ with an equal representation of those living in metro and non-metro (rural, regional and remote) areas.

1. Department of Health


