Suicide in Rural and Remote Australia: Mental Health Strategies cannot effectively Operate in Isolation

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Key Points

- Suicide disproportionately affects remote and rural Australia.
- The chief recommendation in the 2018 Senate inquiry’s report was for the Federal Government to develop a national rural and remote mental health strategy.
- A national rural and remote mental health strategy could significantly improve the accessibility and effective provision of mental health services in rural and remote Australia.
- For optimum effect, strategies must be implemented in tandem with other government policies that seek to address the underlying causes of mental health issues among specific demographics within Australia’s rural population.

Summary

Remote and rural areas in Australia suffer from suicide rates significantly higher than those in metropolitan areas and the trend in suicide rates is increasing. In 2015, suicide was identified as one of the three leading causes of death outside metropolitan areas.

This disturbing trend disproportionately affects men; death rates from suicide are 25 to 40 per cent higher in rural-based men than those living in urban centres. Correspondingly, young men in regional areas between the ages of 15-24, were between 1.5 and 1.8 times more likely to commit suicide than men of the same demographic living in urban areas. Similar inter-regional comparison statistics have been reported for rural men aged between 25-44. Furthermore, two out of every three suicides in farmers over the age of 55, were male.
Indigenous suicide rates outside urban areas are high; this suggests Indigenous and Torres Strait Islander rural and remote communities are disproportionately affected by suicide. In some remote areas, Indigenous suicide rates are up to seven times the national average. Reports indicate that, in 2017, suicide was the leading cause of death nationwide among Indigenous children between the ages of five and 17.

Analysis

The 2018 Senate Inquiry Report on the Accessibility and quality of mental health services in rural and remote Australia, made 18 recommendations aimed at addressing the high rates of suicide in regional Australian communities. Chief among these was for the Federal Government to develop a national strategy concerning rural and remote mental health. It recommended a policy that identifies and differentiates between the factors underlying the high levels of suicide across a range of different rural demographics. More broadly, the government must seek to work in tandem with other existing government policies concerned with mental health.

There is evidence to show that Australian farmers operate in a work environment that can be hazardous to their mental health. Rates of stress and depression among farmers are higher than for urbanised Australians and non-farmers living in rural areas; Australian farmers are more at risk of being victims of suicide than both these groups. Farmers in rural Australia are subject to a unique set of external pressures. These pressures themselves do not necessarily cause negative mental health outcomes in farmers. Indeed, many Australian farmers thrive by working through these circumstances. Many of the pressures are subject to extreme variability such as changing commodity prices, lack of rainfall, increased frequency of high-intensity bush fires, and the length and extent of droughts. These are all external, uncontrollable variables which can amplify the pressures over time.

Where farmers feel unable to manage and deal with the impacts of external economic and environmental factors on their businesses and livelihoods, it can cause feelings of powerlessness. That mindset can, in turn, translate into mental health issues, which may eventually lead to suicide.

A national rural and remote mental health strategy, aimed at providing increased access to improved mental health services, could help to facilitate intervention. This, in turn, has the potential to significantly reduce suicide rates among Australian farmers. The strategy, however, should not be aimed at the root causes of these mental health issues in isolation; addressing the underlying issues will require leadership from the Federal Government across a number of key areas.

One area is drought. Drought represents a major external pressure on Australian farmers and is likely to become a persistent issue, as Australia continues to experience a long-term warming trend. A survey of farmers by the Australian Institute of Family Studies found that ‘drought-declared area farmers’ were twice as likely to experience mental health problems as farmers in areas not suffering a drought. Understanding drought, and the impact it has on farmers’ mental health and rural suicide rates, is one of many broader social effects of climate change on Australia. Accordingly, what is needed is a national rural and remote
mental health strategy that operates in conjunction with continued drought relief.

Indigenous Australians living in rural and remote communities face their own set of unique circumstances which are driving factors of the disproportionally high rates of suicide. According to the 2018 senate inquiry mentioned above, in many cases the cause of suicide ‘is not mental illness, but despair caused by the history of dispossession combined with the social and economic conditions in which they (Indigenous Australians) live’.

Poverty, racism, divorce from culture, intergenerational trauma and social exclusion are several of a number of factors that explain the abnormally high rate of suicide in Indigenous people living in remote and rural Australia. All five factors are also “downstream” effects of colonisation – the long-term impacts from the treatment of Indigenous Australians that followed white settlement. Compounding those factors in remote Indigenous communities are others, including isolation, high-unemployment and the ineffective provision of social services. Collectively, these circumstances have facilitated a crisis in Indigenous suicide in rural and remote Australia.

![Figure 1: Supporting RUOK initiatives in Indigenous communities](image)

*Source: Blue Tree Project*

Adopting a national rural and remote mental health strategy will greatly improve the provision of mental health services in remote communities. The Senate inquiry that reported those needs, further found that developing and implementing such a strategy could drastically improve the effective provision and quality of mental health services in remote Indigenous communities. Other findings included ensuring local input and consultation on
how best to provide mental health services in each community and ensuring mental health professionals working in those communities are culturally competent and aware of their clients’ specific cultural needs. Furthermore, the report recommends longer contracts for mental health professionals working in remote communities, to facilitate building effective and trusting relationships between these professionals and the community.

The inquiry also determined that returning to a model of block government funding for mental health services would serve to empower local solutions in addressing mental health issues. Implemented within the context of a national rural and remote mental health strategy, these recommendations could facilitate an approach aimed at empowering remote Indigenous communities to solve their own problems. These would emphasise positive and well-developed inter-personal relationships as essential to solving these problems, especially by recognising the role culture plays in the access and effective provision of mental health services in Indigenous communities.

While implementation of these recommendations could drastically improve the quality of, and access to, mental health services in remote Indigenous communities, it will not address the underlying causes of suicide in these communities. As mentioned above, the long-term impacts of colonisation have been identified as significant factors in the high rates of suicide in remote Indigenous communities.

Accordingly, a national rural and remote mental health strategy cannot be pursued in isolation, as the sole means of addressing these problems. Instead, such a strategy must work in tandem with the renewed pursuit of reconciliation and provide policy decisions designed to address issues especially pertinent to Indigenous Australians. Youth unemployment and “closing the gap” in Indigenous education outcomes, is one such strategy. The issue of suicide in remote Indigenous communities can only be effectively addressed through a multi-faceted, multi-pronged, policy approach, which addresses the provision of services in conjunction with tackling the underlying causes of mental health issues in these communities.

Over the last few years, agricultural markets have become more globalised, the level of competition in industries key to rural Australia has increased and depopulation has seen a decline in rural economic output. Collectively, these factors, compounded by a rapidly aging rural population, have seen the economic decline of a number of rural centres across Australia. In NSW, for example, evidence suggests that 40 per cent of inland country towns are in (economic) decline. In rural centres, the regional economy is a key influence on mental health. Consequently, economic decline can often increase trends towards urbanisation, rural depopulation and unemployment, all of which are contributing factors to the high suicide rates in Australian rural townships.

A national rural and remote mental health strategy, therefore, must be complemented by government policy investing in the economic future of rural towns across Australia, if it is to directly address the underlying causes of suicide. Incentivising companies and employees to base themselves in rural Australia, through provisions such as tax cuts and housing subsidies, is a way of stemming depopulation and encouraging economic growth and prosperity in rural centres.
Conclusion

A national rural and remote mental health strategy is necessary to improve the capacity of mental health services to combat the disturbing trend of high rates of suicide in remote and rural Australia. Also needed are other policies and strategies that address the underlying causes of these high rates of suicide. Furthermore, it is essential that these policies recognise the unique circumstances that facilitate negative mental health outcomes in various groups and demographics in rural and remote Australia. The need is to specifically address these circumstances in conjunction with other government policies.

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