



POLICY PROPOSAL

MENTAL HEALTH FIRST AID FOR RURAL FINANCIAL COUNSELLORS

PROPOSAL

The National Rural Health Alliance proposes that:

- funding for the Mental Health First Aid Training for Frontline Community Workers program (or an equivalent program) be continued for four years, starting from 1 July 2015;
- mental health first aid training be made compulsory for practising Rural Financial Counsellors (there are currently approximately 125 of them working in 40 regions across Australia); and
- Rural Financial Counselling Service providers work with relevant health organisations to develop consistent referral guidelines for clients presenting who may need mental health services.

This proposal is consistent with Recommendations 11 and 38 made by Mental Health Australia in its recently published Blueprint for Action on Mental Health.

POTENTIAL COST OF PROPOSAL

To ensure all Rural Financial Counsellors are equipped to provide mental health first aid, and refer people to mental health services when required, we estimate that it will cost \$6.5 million over four years. This will enable the continuation of the Mental Health First Aid Training for Frontline Community Workers program over the next four years. It will also provide funding to support the development of standardised referral processes for clients with mental health problems. In 2011-11, program funding was \$6.1 million over four years, but did not include funding for development of referral guidelines.

The Alliance is keen to be called upon for assistance in further developing this proposal. See Appendix A for a list of Alliance Member Bodies.

RATIONALE FOR PROPOSAL

- Farmers are more than twice as likely to die by suicide than the general employed public.
- Rural Financial Counsellors are often the first point of call for agricultural clients seeking assistance of various types, including psychological support.
- Counsellors are not trained or expected to provide personal counselling services, but a client's mental state has a major bearing on their ability to deal effectively with financial issues. As a result, Counsellors are encouraged to undertake training in mental health first aid, and to make referrals to appropriate services when required.
- In 2010-11, the Commonwealth Department of Health made \$6.1 million available over four years to train frontline community workers in mental health first aid; this training was made available to a range of workers including Rural Financial Counsellors. Funding for the program is due to cease in July 2015.
- Currently, Rural Financial Counsellors are not required to complete training in mental health first aid, but some of their employing services strongly encourage them to undertake it.
- A recent review of the Rural Financial Counselling Service conducted by the National Rural Advisory Council suggested that the program could be improved by:
 - placing greater emphasis on referring clients to other professional services, including health and wellbeing professionals; and
 - o implementing more consistent and formal referral processes.
- This NRHA proposal supports the National Rural Advisory Council's findings on referrals to mental health services.

ADDITIONAL MATERIAL

BACKGROUND

The Rural Financial Counselling Service program

- The Commonwealth Department of Agriculture provides funds to state and regional organisations in order to provide free rural financial counselling to primary producers, fishers and small rural businesses who are suffering financial hardship, and who have no alternative sources of impartial support.
- The independent National Rural Advisory Council recently published its review of the Rural Financial Counselling Service.
- The Council's report highlighted the important role that Rural Financial Counsellors play in responding to rural clients in difficult circumstances – both financial and personal. The report commented that while Financial Counsellors are not trained or expected to provide personal counselling services, they are encouraged to undertake training in mental health first aid, and to make referrals to relevant health services, if required.
- The report also commented that the number of referrals made by Counsellors was relatively low, and that referral processes were inconsistent across services (Finding 33 and 38).
- The Council's report recommended:
 - o that greater emphasis be placed on referring clients to other professional services, including health and wellbeing professionals; and
 - o a more consistent and formal referral processes be developed and implemented (Recommendation 24 and 29).

List of Sources

Australian Government, Department of Agriculture, National Rural Advisory Council (NRAC), [website], available at: http://www.agriculture.gov.au/agriculture-food/drought/nrac

Australian Government, Department of Agriculture, Rural Financial Counselling Service, [website], available at: http://www.agriculture.gov.au/agriculture-food/drought/assistance/assistanceruralfinancial-counselling-service

Australian Government, Department of Health, Appendix B: Mental health: Taking Action to Tackle Suicide package, [website], available at:

http://www.health.gov.au/internet/publications/publishing.nsf/Content/mental-pubs-c-tolltoc~mental-pubs-c-toll-app~mental-pubs-c-toll-app-b

Australian Government, Department of Health, Mental health first aid training for front line community workers, [website], available at:

http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-firstaid

Mental Health Australia, Blueprint for Action on mental Health, [website], available at: http://mhaustralia.org/submission/blueprint-action-mental-health

APPENDIX A

Member Bodies of the National Rural Health Alliance

ACEM (RRRC)	Australasian College of Emergency Medicine (Rural, Regional and Remote Committee)
ACHSM	Australasian College of Health Service Management
ACM (RRAC)	Australian College of Midwives (Rural and Remote Advisory Committee)
ACN (RNMCI)	Australian College of Nursing (Rural Nursing and Midwifery Community of Interest)
ACRRM	Australian College of Rural and Remote Medicine
AGPN	Australian General Practice Network
АННА	Australian Healthcare and Hospitals Association
AHPARR	Allied Health Professions Australia Rural and Remote
AIDA	Australian Indigenous Doctors' Association
ANMF	Australian Nursing and Midwifery Federation (rural members)
APA (RMN)	Australian Physiotherapy Association Rural Member Network
APS	Australian Paediatric Society
APS (RRPIG)	Australian Psychological Society (Rural and Remote Psychology Interest Group)
ARHEN	Australian Rural Health Education Network Limited
CAA (RRG)	Council of Ambulance Authorities (Rural and Remote Group)
CRANAplus	CRANAplus – the professional body for all remote health
CWAA	Country Women's Association of Australia
ESSA (NRRC)	Exercise and Sports Science Australia (National Rural and Remote Committee)
FRAME	Federation of Rural Australian Medical Educators
FS	Frontier Services of the Uniting Church in Australia
HCRRA	Health Consumers of Rural and Remote Australia
IAHA	Indigenous Allied Health Australia
ICPA	Isolated Children's Parents' Association
NACCHO	National Aboriginal Community Controlled Health Organisation
NRF of RACGP	National Rural Faculty of the Royal Australian College of General Practitioners
NRHSN	National Rural Health Students' Network
PA (RRSIG)	Paramedics Australasia (Rural and Remote Special Interest Group
PSA (RSIG)	Rural Special Interest Group of the Pharmaceutical Society of Australia
RDAA	Rural Doctors Association of Australia
RDN of ADA	Rural Dentists' Network of the Australian Dental Association
RFDS	Royal Flying Doctor Service
RHWA	Rural Health Workforce Australia
RIHG of CAA	Rural Indigenous and Health-interest Group of the Chiropractors' Association of Australia
ROG of OAA	Rural Optometry Group of the Australian Optometrists Association
RPA	Rural Pharmacists Australia
SARRAH	Services for Australian Rural and Remote Allied Health
SPA (RRMC)	Speech Pathology Australia (Rural and Remote Member Community)
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...good health and wellbeing in rural and remote Australia