



The Royal
Australian &
New Zealand
College of
Psychiatrists



Productivity Commission

National Mental Health and Suicide Prevention Strategy Review

February 2025

Equity in access to mental health services

About the Royal Australian and New Zealand College of Psychiatrists

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) is responsible for training, educating and representing psychiatrists in Australia and New Zealand. The RANZCP has more than 8700 members, including around 6100 qualified psychiatrists (Fellow and Affiliate members).

The RANZCP welcomes the opportunity to contribute to the Productivity Commission review of the National Mental Health and Suicide Prevention Agreement (National Agreement). The recommendations contained within this submission are based on consultation with RANZCP members and committees, including the Community Collaboration Committee, the Faculty of Child and Adolescent Psychiatry Committee, the Faculty of Adult Psychiatry Committee and the Faculty of Psychiatry of Old Age which comprise community members and psychiatrists with unique expertise of the mental health system and the National Agreement. As such, the RANZCP is well positioned to provide assistance and advice about this issue due to the breadth of academic, clinical and service delivery expertise it represents.

Recommendations

To ensure a comprehensive and effective review of the National Agreement, the RANZCP recommends:

- The review considers the current challenges of the Australian mental health system, including workforce shortages, burnout, access issues and long wait-times, when evaluating the principles, objectives, outcomes and outputs of the National Agreement.
- The inclusion of Aboriginal and Torres Strait Islander peoples is considered as a priority, and assessed using the Closing the Gap annual report as a measure of success.
- Incorporating or referencing the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy and its priorities in the succeeding iteration of the National Agreement.
- The roles, responsibilities and accountabilities of Commonwealth and state governments are clearly defined and made more actionable in the design and implementation of mental health services.
- The sustainability and investment into Australia's mental health workforce is used as a measure of the success when evaluating the accountability of Commonwealth and state governments.
- The review evaluates the progress of the implementation and funding of the National Mental Health Workforce Strategy by Commonwealth and state governments as a key success indicator of the National Agreement.

Introduction

The RANZCP acknowledges the significant challenges facing the mental health sector, including the growing demand for services, workforce shortages, and disparities in access. We believe that the National Agreement provides a vital framework for improving mental health outcomes across the country, but there is an urgent need for a more focused and actionable approach to ensure that the system is adequately resourced and responsive to emerging challenges. Through this submission, we aim to strengthen the foundation for long-term, sustainable improvements in mental health care and suicide prevention.

Principles, Objectives, Outcomes, and Outputs

The RANZCP supports the broad principles outlined in Part 2 of the National Agreement. However, we believe that more specific actions are needed to fully realise these principles. While the current principles offer a high-level framework for Australia's mental health policy, clearer and more actionable steps are needed to make meaningful progress. The current principles need to be underpinned by specific, measurable actions from both federal and state governments to ensure tangible improvements in mental health service delivery across the country.

Australia's Mental Health System

As highlighted in our [2025-26 Federal Prebudget Submission](#), access to mental health care in Australia is increasingly difficult. Despite the existence of the National Agreement, many gaps in service provision remain, particularly in rural, regional, and remote Australia, and for culturally and linguistically diverse communities.

The RANZCP has previously highlighted in its Position Statement: [Principles for a mental health system](#), which include equitable access, culturally safe, and person-centred. These align with the principles set out in the National Agreement, but more concrete action is required from both federal and state governments to turn these principles into reality. For instance, a survey by the [Australian Patients Association](#) found that nearly 3 in 4 Australians skip or delay healthcare due to financial reasons, with 76% of respondents reporting greater difficulty in accessing no-fee bulk billing services. Given the rising cost of living, it is clear that more needs to be done to ensure that all Australians can access affordable mental health services. Both federal and state governments must play a more active role in delivering equitable mental health care across the country.

Closing the Gap

The National Agreement designates Aboriginal and Torres Strait Islander peoples as a national priority. As highlighted in the [2024 Annual Data Compilation Report \(ADCR\)](#), socioeconomic factors, are a determinant of mental health, are not improving at the expected rate, in line with the [Closing the Gap Agreement](#). According to the [Australian Institute of Health and Welfare](#) identified mental health as the most prevalent health issue for First Nations communities.

Despite the National Agreement's recognition of First Nations peoples as a priority group, there are still significant gaps in mental health care for Aboriginal and Torres Strait Islander peoples. The role of governments in the delivery and design of mental health services for First Nations communities must be more comprehensively addressed in the National Agreement.

The RANZCP supports the priorities set out in the [National Aboriginal and Torres Strait Islander Suicide Prevention Strategy](#), which include leadership, self-determination, thriving communities, culturally safe and accessible care, and a responsive workforce. These priorities must be integrated into the next iteration of the National Agreement to ensure that the mental health needs of First Nations peoples are adequately addressed.

The Role of Federal and State Governments

Part 3 of the National Agreement outlines the roles of both Commonwealth and state governments in mental health service provision and design. The RANZCP believes that the review of the Agreement offers an opportunity to revise and refine these roles, ensuring clearer delineation of responsibilities and greater accountability.

Royal Australian and New Zealand College of Psychiatrists submission

Productivity Commission's review of the National Mental Health and Suicide Prevention Agreement

Service Design and Delivery

Governments must take a more active role in service design and delivery to address the growing burden of mental health issues in Australia. The National Agreement must clearly define the roles and responsibilities of all parties to ensure more coherent and effective mental health services.

Mental Health Workforce

The mental health system is struggling to meet Australia's mental health needs [1-3], in part due to systemic workforce and capacity issues. [3-5] As recommended by the [Kruk Review](#), the RANZCP urges both Commonwealth and state governments to collaborate on developing and funding sustainable training models that will expand the domestic workforce pipeline.

The RANZCP recommends that the review of the National Agreement include a detailed evaluation of the role of both Commonwealth and state governments in addressing workforce challenges. Given the growing demand for mental health services, especially in underserved areas, both levels of government must collaborate more effectively and share funding responsibilities to ensure a sustainable workforce. This collaboration should focus on improving recruitment, training, retention, and career progression within the mental health sector, with specific attention to regional, rural, and remote areas.

Immediate and sustained funding commitments are essential to support the [National Mental Health Workforce Strategy](#) (the Strategy), including the expansion of training programs and incentives for professionals in underserved regions. Clear definitions of governmental responsibility for funding and workforce development are necessary to ensure accountability and the successful implementation of the Strategy.

Without clear and coordinated efforts from both levels of government, workforce shortages and capacity limitations will continue to undermine the mental health system's ability to meet increasing demand. The National Agreement must make workforce sustainability a priority to ensure the long-term effectiveness of mental health services across Australia.

Governance and Accountability

The governance and implementation of the National Agreement have been directed towards existing mechanisms. However, these mechanisms have often proven inadequate in ensuring accountability and effective action. Health and Mental Health Ministers (MHMs) must take a more proactive role in ensuring that mental health policy and services are delivered as intended.

The RANZCP acknowledges the efforts of the MHMs in discussing key mental health issues in their [August 2024](#) meeting and agreeing to meet twice yearly. However, the lack of a confirmed follow-up meeting date as of February 2025 indicates that the current governance model may be insufficient. The National Agreement must mandate regular, structured meetings between the MHMs to ensure that progress is made on critical mental health issues.

Summary

The RANZCP acknowledges the importance of the National Mental Health and Suicide Prevention Agreement in fostering collaboration between Commonwealth and state governments. However, for the National Agreement to be truly effective, greater accountability and clearer responsibilities must be established across all levels of government. Only then can we ensure that Australia's mental health system is equipped to meet the growing needs of the population.

The RANZCP is grateful for the opportunity to contribute to this important review and remains committed to working with governments and stakeholders to improve mental health outcomes for all Australians. For

Royal Australian and New Zealand College of Psychiatrists submission

Productivity Commission's review of the National Mental Health and Suicide Prevention Agreement

further discussions or to address any matters raised in this submission, please contact us at policy@ranzcp.org.

References

1. Australian Institute of Health and Welfare. Australian Burden of Disease Study 2022 Canberra: Australian Institute of Health and Welfare; December 2022 [Available from: Australian Burden of Disease Study 2022, Summary - Australian Institute of Health and Welfare (aihw.gov.au)].
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4. Nguyen TP, Solanki P. Addressing the shortage of psychiatrists in Australia: Strategies to improve recruitment among medical students and prevocational doctors. Australian & New Zealand Journal of Psychiatry. 2023;57(2):161-
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