

Mental health services underused in aged care

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Fewer than 3% of people with mental health conditions living in Australian residential aged care facilities accessed government-subsidized mental health services, a new analysis from Flinders University and the South Australian Health and Medical Research Institute (SAHMRI) has found, with calls for organizational and policy changes to improve access.

"Residents in aged care are four times more likely to have depression and nine times more likely to have [anxiety disorders](#) compared to the general population of older Australians," says study lead author Dr. Monica Cations, a psychology registrar and epidemiologist from Flinders University's College of Education, Psychology and Social Work and affiliated Senior Postdoctoral Researcher with the Registry of Senior Australians at SAHMRI.

"Despite this, less than 3% of residents with a mental health condition in our cohort accessed funding subsidies for mental health services provided by GPs, psychiatrists, or allied [health professionals](#), in contrast to almost 10% of the general population."

The study analyzed data from the Registry of Senior Australians on all non-Indigenous people living in 2,851 Australian [aged care facilities](#) between 2012 and 2017, finding minimal increases in access across various categories in those five years.

The proportion of residents who accessed [primary care](#) mental health services was only 2.4% in 2016/17, and only 2.3% accessed psychiatry services.

"Difficulties for accessing mental health services was particular pronounced for people with dementia, who were less likely than people without dementia to access any of the services, aside from psychiatry services," says Dr. Cations.

"The under-identification and lack of non-pharmacological treatment of mental illness among people with dementia is a long-documented problem, partly explained by a widespread misbelief that people with dementia cannot benefit from non-pharmacological therapies."

While the authors acknowledge that residents may have received mental health services in ways not captured by the dataset (such as those employed by the facility), people living in residential aged care deserve equitable access to public services.

"Mental health care is a pillar of the publicly-funded health care system in Australia and the low use of publicly-funded services among those living in [residential aged care](#) is indicative of major barriers to service access and uptake," says Dr. Cations.

"These barriers, many of which were raised in submissions to the Royal Commission into Aged Care Quality and Safety, include a lack of expertise among the workforce, complex mental health service arrangements and eligibility requirements, costs of transport and low priority given to mental health needs unless it was likely to disrupt care or was distressing for residents and staff."

While the Royal Commission made several recommendations related to mental health services in their final report, work is needed to implement them. The authors recommend permanently widening eligibility criteria for Medicare access, initiatives to train and embed the mental health workforce into aged care services, upskilling existing staff, clearer referral pathways and the ongoing monitoring of programs to ensure quality and continued investment.

"Appropriate treatment and management of psychological needs can have wide-ranging benefits including improved quality of life for residents, reduced staff turnover and reduced behavioral disturbances and related costs," says Dr. Cations.

"Our study indicates a need for significant and sustained organizational, policy and funding changes to improve access to [mental health care](#) for aged care residents."

"Government-subsidized [mental health services](#) are underused in Australian residential [aged care](#) facilities" has been accepted for publication in the journal *Australian Health Review*.

More information: Government-subsidised mental health services are underused in Australian residential aged care facilities. *Australian Health Review*.

www.publish.csiro.au/AH/justaccepted/AH22049

Provided by Flinders University

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