
12 Mental health management

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Attachment tables

Attachment tables are identified in references throughout this Indigenous Compendium by an 'A' prefix (for example, in this chapter, table 12A.1). As the data are directly sourced from the 2015 Report, the Compendium also notes where the original table, figure or text in the 2015 Report can be found. For example, where the Compendium refers to '2015 Report, p. 12.1' this is page 1 of chapter 12 of the 2015 Report, and '2015 Report, table 12A.1' is attachment table 1 of attachment 12A of the 2015 Report. A list of attachment tables referred to in the Compendium is provided at the end of this chapter, and the full attachment tables are available from the Review website at www.pc.gov.au/research/recurring/report-on-government-services.

The Mental health management chapter (chapter 12) in the *Report on Government Services 2015* (2015 Report) reports on the management of mental health in Australia. Data are reported for Aboriginal and Torres Strait Islander Australians for a subset of the performance indicators reported in that chapter — those data are compiled and presented here.

Health management is concerned with the management of diseases, illnesses and injuries using a range of services (promotion, prevention/early detection and intervention) in a

variety of settings (for example, public hospitals, community health centres and general practice). This chapter reports on the Australian, State and Territory governments' management of mental health and mental illnesses through a variety of service types and delivery settings.

Mental health relates to an individual's ability to negotiate the daily challenges and social interactions of life without experiencing undue emotional or behavioural incapacity (DHAC and AIHW 1999). The World Health Organization (WHO) describes positive mental health as:

... a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community (WHO 2001).

Mental illness is a term that describes a diverse range of behavioural and psychological conditions. These conditions can affect an individual's mental health, functioning and quality of life. Each mental illness is unique in its incidence across the lifespan, causal factors and treatments. The most common mental illnesses are anxiety, affective (mood) and substance use disorders. Mental illness also includes low prevalence conditions such as schizophrenia, bipolar disorder and other psychoses, and severe personality disorder (DoHA 2010). While of lower prevalence, these conditions can severely affect people's ability to function in their daily lives (Morgan et al. 2011).

Specialised mental health management services offered by a range of government and non-government service providers include promotion, prevention, treatment, management, and rehabilitation services. Community mental health facilities, psychiatrists, clinical psychologists, psychotherapists, mental health clinicians in private practice, counsellors, Aboriginal health workers, Aboriginal mental health workers, public hospitals with specialised psychiatric units and psychiatric hospitals all provide specialised mental health care. In addition, a number of health services provide care to mental health patients in a non-specialised health setting — for example, GPs, Aboriginal community controlled health services, public hospital emergency departments and outpatient departments, and public hospital general wards (as distinct from specialist psychiatric wards). Some people with a mental illness are cared for in residential aged care services.

Mental health is also the subject of programs designed to improve public health. Public health programs require the participation of public hospitals, primary and community health and other, services. The performance of primary and community health services is reported in chapter 10 and the performance of public hospitals is reported in chapter 11.

Aboriginal and Torres Strait Islander data in the Mental health management chapter

The Mental health management chapter or attachment in the 2015 Report contains the following data for Aboriginal and Torres Strait Islander Australians:

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- age standardised rate of adults with high/very high levels of psychological distress
 - GP mental health-related encounters (general and mental health specific)
 - use of State and Territory specialised public mental health care reported, by service type
 - new clients as a proportion of total clients under the care of State or Territory specialised public mental health services
 - proportion of the population using State and Territory specialised public mental health services
 - proportion of the population using MBSsubsidised mental health services
 - proportion of young people (aged < 25 years) who had contact with MBS subsidised primary mental health care services
 - rate of community follow up within first seven days of discharge from a psychiatric admission
 - readmissions to hospital within 28 days of discharge
 - recent drinkers lifetime and single occasion risk, people aged 14 years or older
 - illicit drug use, people aged 14 years or older
 - mortality due to suicide.

Size and scope of sector

Prevalence of mental illness and high/very high levels of psychological distress

According to the National Survey of Mental Health and Wellbeing (SMHWB), in 2007, 20.0 ± 1.1 per cent of adults aged 16–85 years (or approximately 3.2 million adults) met the criteria for diagnosis of a lifetime mental disorder and had symptoms in the 12 months before the survey (2015 Report, table 12A.76). A further 25.5 ± 1.4 per cent of adults aged 16–85 years had experienced a mental disorder at some point in their life, but did not have symptoms in the previous 12 months (2015 Report, table 12A.76).

A proxy measure of the overall mental health and wellbeing of the population is the Kessler 10 (K10) psychological distress scale. Data from the 2007 SMHWB show that people with a lifetime mental disorder who had symptoms in the previous 12 months (20.0 ± 1.1 per cent of the total population), were significantly overrepresented in the populations who had high or very high levels of psychological distress — 57.1 ± 5.1 per cent and 79.6 ± 7.2 per cent of these populations respectively (2015 Report, table 12A.7). Analysis of the 1997 SMHWB showed a strong association between a high/very high K10 score and a current diagnosis of anxiety and affective disorders (ABS 2012). According to the Australian Bureau of Statistics (ABS), which uses the K10 instrument in the SMHWB and National Health Surveys (NHS), the K10:

... is a scale designed to measure non-specific psychological distress, based on questions about negative emotional states experienced in the past 30 days. ... it is not a diagnostic tool, but an indicator of current psychological distress, where very high levels of distress may signify a need for professional help. It is also useful for estimating population need for mental health services (ABS 2012).

Females had higher proportions of very high levels of psychological distress than males in 2011-12 (2105 Report, figure 12.5). People with disability or restrictive long term health condition and people in low socioeconomic areas also reported higher proportions of very high levels of psychological distress than other community groups (2015 Report, table 12A.9). In 2012-13, 29.4 ± 2.1 per cent of Aboriginal and Torres Strait Islander Australians aged 18 years or over reported high/very high levels of psychological distress (table 12A.15). After adjusting for age, this was 2.7 times the rate for non-Indigenous adults.

Specialised admitted patient and community-based mental health services — service use, patient days, beds and staffing

Estimating activity across the publicly funded specialised mental health services sector, which comprises admitted patient care and community-based mental health services, is problematic as the way activity is measured differs across the service types. Service activity is reported by separations for admitted patient care, episodes for community-based residential care, contacts for community-based ambulatory care and number of participants accessing the targeted community care (mental health) services funded by the Department of Social Services (DSS). Other service use data for the NGOs are not available.

Data on service use by Indigenous status are available, but comparisons are not necessarily accurate because Aboriginal and Torres Strait Islander patients are not always correctly identified (table 12A.25). Differences in rates of service use could also reflect other factors, including the range of social and physical infrastructure services available to Aboriginal and Torres Strait Islander Australians, and differences in the complexity, incidence and prevalence of illnesses between Aboriginal and Torres Strait Islander and non-Indigenous Australians.

Framework of performance indicators for mental health management

Preventing the onset of mental illness is challenging, primarily because individual illnesses have many origins. Most efforts have been directed at treating mental illness when it occurs, determining the most appropriate setting for providing treatment and emphasising early intervention.

Data for Aboriginal and Torres Strait Islander Australians are reported for a subset of the performance indicators and are presented here or in the attachment tables. It is important to interpret these data in the context of the broader performance indicator framework. The

framework shows which data are comparable. For data that are not considered directly comparable, the text includes relevant caveats and supporting commentary.

The framework of performance indicators for mental health services draws on governments' broad objectives for national mental health policy, as encompassed in the *National Mental Health Policy 2008* (box 12.1). The performance indicator framework reports on the equity, effectiveness and efficiency of mental health services. It covers a number of service delivery types (MBS subsidised, admitted patient and community-based services) and includes outcome indicators of system-wide performance.

Box 12.1 **Broad objectives and policy directions of National Mental Health Policy**

The *National Mental Health Policy 2008* has an emphasis on whole of government mental health reform and commits the Australian, State and Territory governments to the continual improvement of Australia's mental health system. The key broad objectives are to:

- promote the mental health and well-being of the Australian community and, where possible, prevent the development of mental health problems and mental illness
- reduce the impact of mental health problems and mental illness, including the effects of stigma on individuals, families and the community
- promote recovery from mental health problems and mental illness
- assure the rights of people with mental health problems and mental illness, and enable them to participate meaningfully in society.

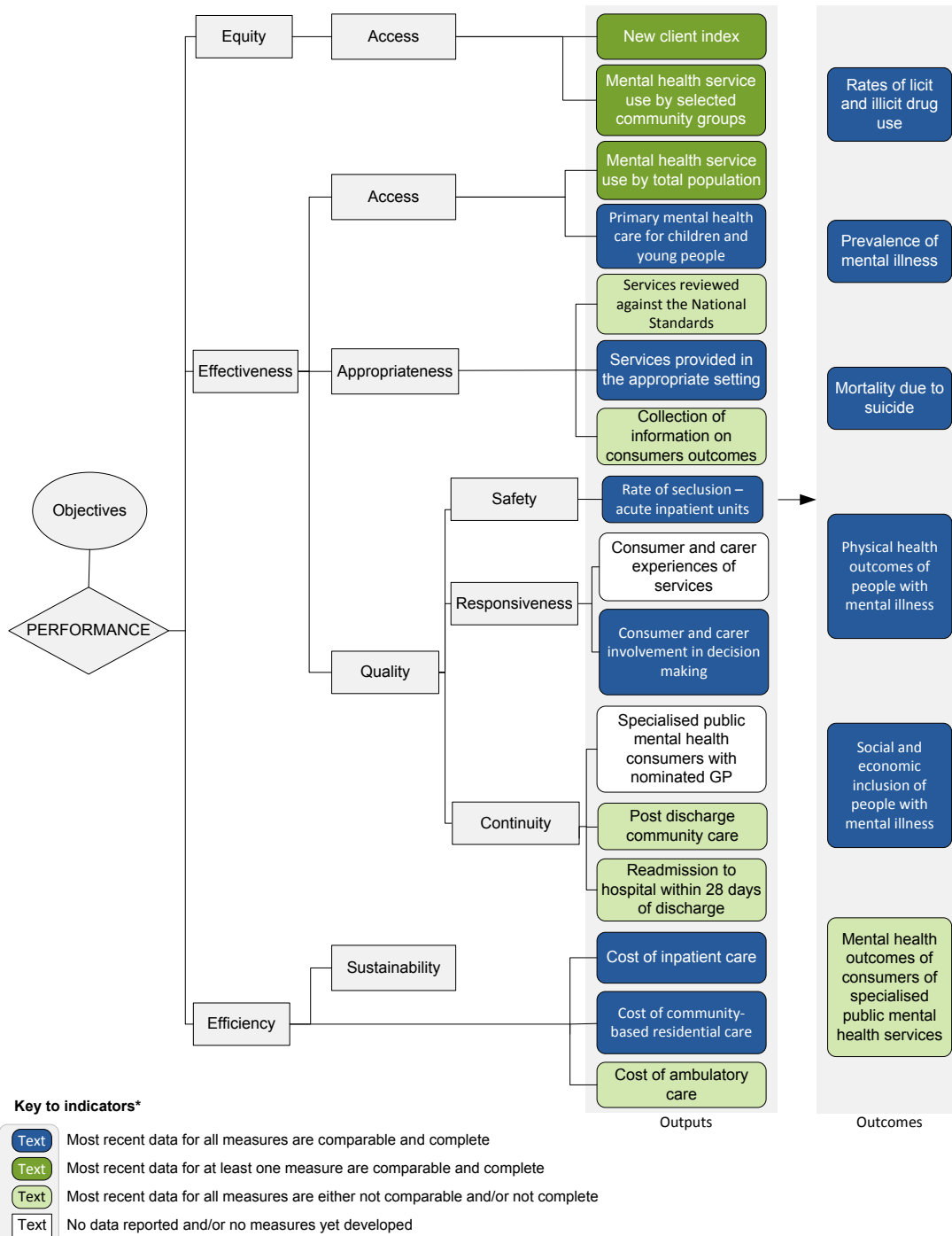
The key policy directions are summarised as follows:

- Rights and responsibilities of people with mental health problems and mental illness will be acknowledged and respected.
- Mental health promotion will support destigmatisation and assist people to be emotionally resilient, cope with negative experiences and participate in the community.
- The proportion of people with mental health problems, mental illness and people at risk of suicide will be reduced.
- Emerging mental health problems or mental illnesses will receive early intervention to minimise the severity and duration of the condition and to reduce its broader impacts.
- People will receive timely access to high quality, coordinated care appropriate to their conditions and circumstances.
- People with mental health problems and mental illness will enjoy full social, political and economic participation in their communities.
- The crucial role of carers will be acknowledged and respected and they will be provided with appropriate support to enable them to fulfil their role.
- The mental health workforce will be appropriately trained and adequate in size and distribution to meet the need for care.
- Across all sectors, mental health services should be monitored and evaluated to ensure they are of high quality and achieving positive outcomes.
- Research and evaluation efforts will generate new knowledge about mental health problems and mental illness that can reduce the impact of these conditions.

The performance indicator framework provides information on equity, efficiency and effectiveness, and distinguishes the outputs and outcomes of mental health management services (figure 12.1). The performance indicator framework shows which data are complete and comparable in the 2015 Report. For data that are not considered directly comparable, the text includes relevant caveats and supporting commentary. Chapter 1 discusses data comparability from a Report-wide perspective (see 2015 Report, chapter 1, section 1.6).

The Report's statistical context chapter contains data that may assist in interpreting the performance indicators presented in this chapter. These data cover a range of demographic and geographic characteristics, including age profile, geographic distribution of the population, income levels, education levels, tenure of dwellings and cultural heritage (including Aboriginal and Torres Strait Islander and ethnic status) (chapter 2).

Figure 12.1 Mental health management performance indicator framework



Source: 2015 Report, figure 12.9, p. 12.22.

Equity — access — mental health service use by selected community groups

‘Mental health service use by selected community groups’ is an indicator of governments’ objective to provide mental health services in an equitable manner, including access to services by selected community groups such as Aboriginal and Torres Strait Islander Australians (box 12.2).

Box 12.2 Mental health service use by selected community groups

‘Mental health service use by selected community groups’ is defined by two measures:

- proportion of the population in a selected community group using State and Territory specialised public mental health services, compared with the proportion of the population outside the selected community group using State and Territory specialised public mental health services
- proportion of the population in a selected community group using MBS subsidised mental health services provided by private psychiatrists, GPs and allied health providers (psychologists, social workers, occupational therapists, mental health nurses and Aboriginal health workers), compared with the proportion of the population outside the selected community group using MBS subsidised mental health services.

The selected community groups reported are Aboriginal and Torres Strait Islander Australians, people from outer regional, remote and very remote locations and people residing in low socioeconomic areas. For MBS subsidised mental health services, data by socioeconomic status are reported by decile and quintile, at the national level only.

This indicator is difficult to interpret. It does not measure access according to need, that is, according to the prevalence of mental illness across the selected community groups. Variations in use could be due to variations in access, but could also be a result of differences in the prevalence of mental illness. It also does not provide information on whether the services are appropriate for the needs of the people receiving them, or correctly targeted to those most in need.

Data reported for the ‘proportion of the population in a selected community group using State and Territory specialised public mental health services’ measure are:

- comparable (subject to caveats) across jurisdictions, but a break in series means that data from 2012-13 are not comparable to previous years’ data — previously data were restricted to counts of people receiving one or more service contact provided by community-based ambulatory services, now they also includes people using inpatient and residential care services
- incomplete for the current reporting period (subject to caveats). All required 2012-13 data are not available for Victoria.

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Box 12.2 (continued)

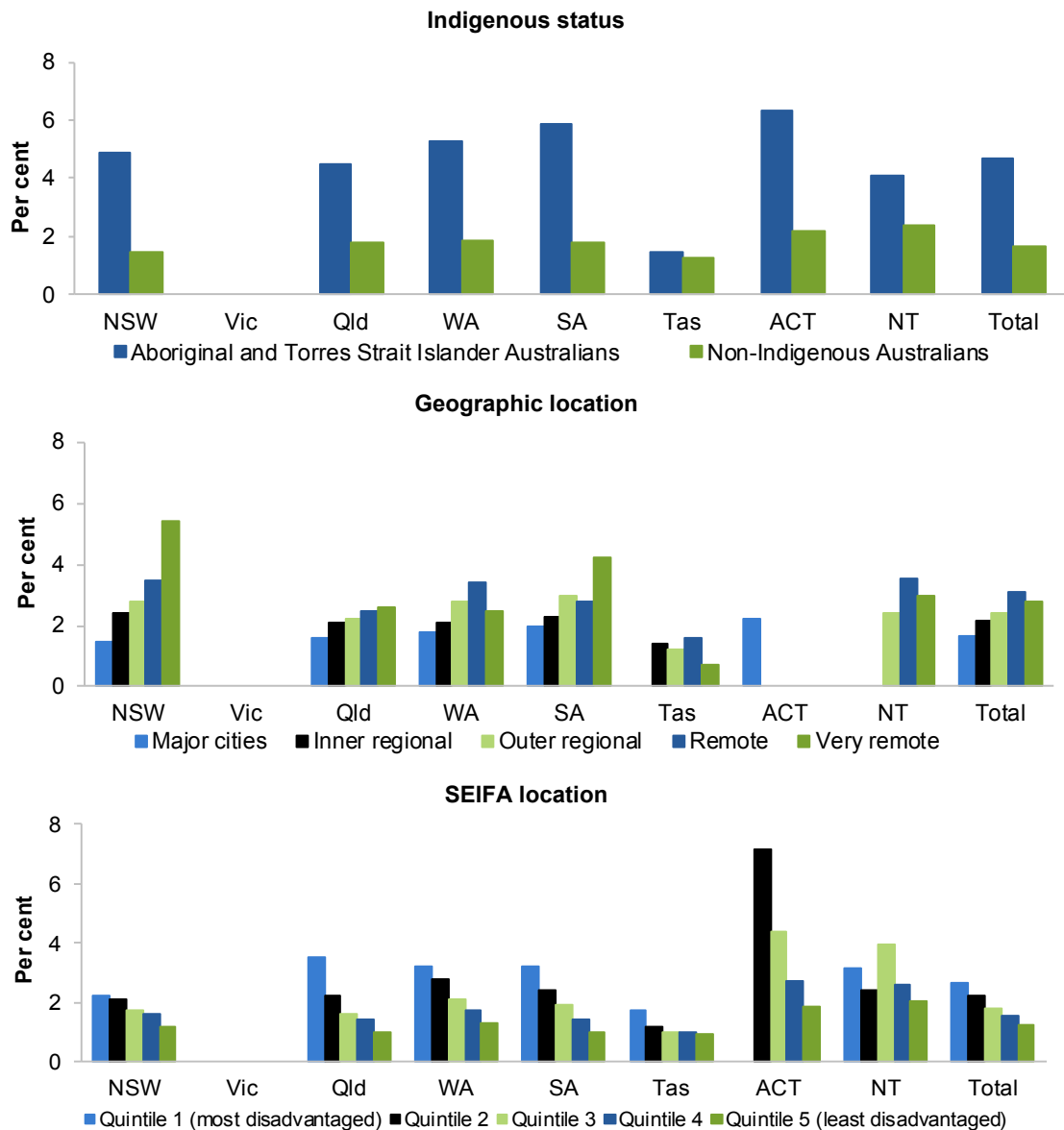
Data reported for the 'proportion of the population in a selected community group using MBS subsidised ambulatory mental health services' measure are:

- comparable (subject to caveats) across jurisdictions, but a break in series means that data from 2011-12 by geographic location and Socio-Economic Indexes for Areas (SEIFA) are not comparable to previous years' data
- complete for the current reporting period (subject to caveats). All required 2012-13 data are available for all jurisdictions.

Data quality information for this indicator is at www.pc.gov.au/research/recurring/report-on-government-services.

The proportions of the population using State and Territory specialised public mental health services in 2012-13, by selected community groups are reported in figure 12.2. The results are not available for Victoria.

Figure 12.2 Population using State and Territory specialised public mental health services, by selected community group, 2012-13^{a, b, c, d, e, f, g}

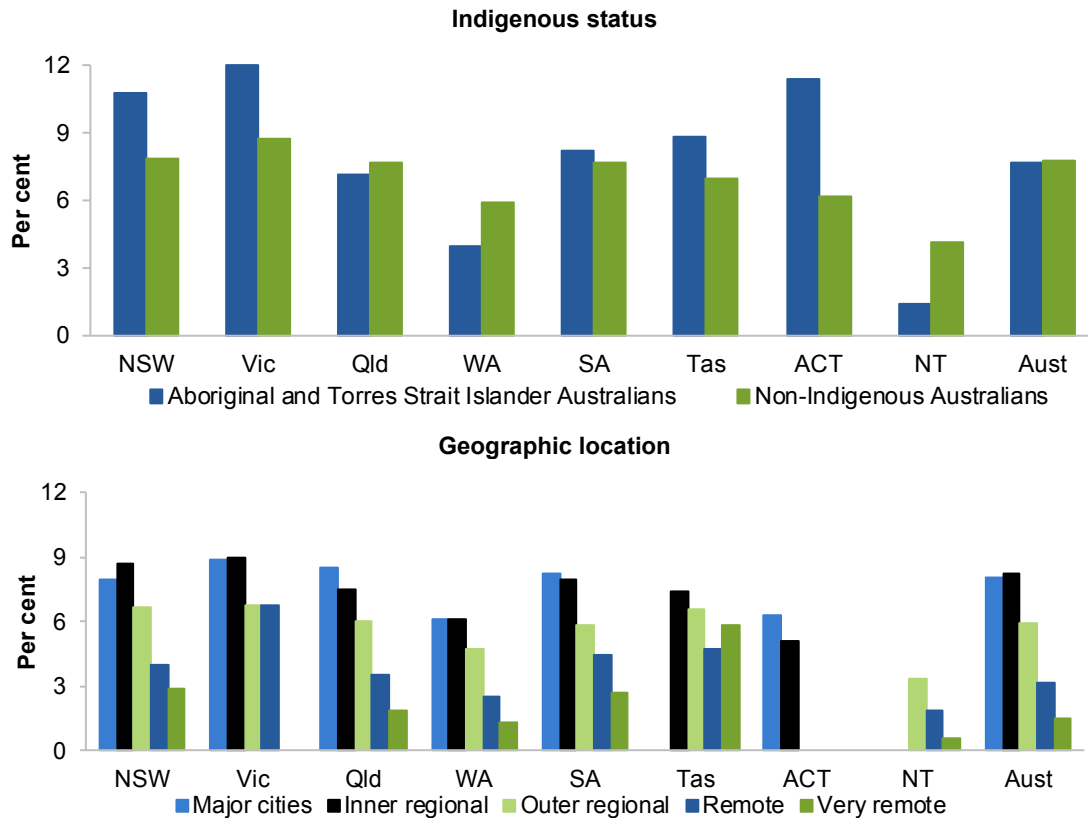


SEIFA = Socio Economic Indexes for Areas. ^a Proportions are age standardised to the Australian population as at 30 June 2001. ^b State and Territory specialised public mental health services are counts of people receiving one or more services provided by inpatient or community-based ambulatory or residential services. ^c Data are not available for Victoria. ^d Industrial action during 2012-13 in Tasmania has limited the available data quality and quantity of the community-based ambulatory mental health care data; which represents a large proportion of the overall figures. ^e Disaggregation by remoteness area is based on a person's usual residence, not the location of the service provider, except the NT for which the majority of the data were based on the location of the service. ^f The ACT does not have outer regional, remote or very remote locations. ACT data are not published for inner regional areas. Data for Quintile 1 are not published for the ACT. ^g The NT does not have major cities or inner regional locations.

Source: AIHW (unpublished), derived from data provided by State and Territory governments; State and Territory governments (unpublished) specialised mental health services data; tables 12A.36, 2015 Report, tables 12A.37-38; 2015 Report, figure 12.12, p. 12.27.

The proportions of the population using MBS subsidised mental health services, by selected community groups, are reported in figure 12.3 (data by socioeconomic status are available by decile and quintile at the national level only in 2105 Report, tables 12A.38 and 12A.40).

Figure 12.3 Population using MBS subsidised mental health services, by selected community group, 2012-13^{a, b, c, d}



^a Proportions are age standardised to the Australian population as at 30 June 2001. ^b MBS subsidised services are those mental health specific services provided under the general MBS and by the Department of Veterans' Affairs (DVA). The specific Medicare items included are detailed in 2105 Report, table 12A.41. ^c Disaggregation by remoteness area is based on a person's usual residence, not the location of the service provider. However, where a state or territory does not have a particular remoteness category a rate cannot be calculated. ^d Victoria does not have very remote areas. Tasmania does not have major cities. The ACT does not have outer regional, remote or very remote locations. The NT does not have major cities or inner regional locations.

Source: AIHW (unpublished), derived from data provided by the Australian Government; Department of Health (unpublished) and Department of Veterans' Affairs (DVA) (unpublished), Medicare Benefits Schedule (MBS) Statistics data; table 12A.36 and 2015 Report, table 12A.37; 2015 Report, figure 12.13, p. 12.28.

Mortality due to suicide

‘Mortality due to suicide’ is an indicator of governments’ objective under the NMHS to prevent mental health problems, mental illness and suicide, and identify and intervene early with people at risk (box 12.3).

Box 12.3 Mortality due to suicide

‘Mortality due to suicide’ is defined as the suicide rate per 100 000 people. The suicide rate is reported for all people, for males and females, for people of different ages (including those aged 15–24 years), people living in capital cities, people living in other urban areas, people living in rural areas, Aboriginal and Torres Strait Islander and non-Indigenous Australians.

A low or decreasing suicide rate per 100 000 people is desirable.

While mental health services contribute to reducing suicides, other government services also have a significant role. Public mental health programs are primarily concerned with providing treatment and support services for individual clients affected by severe mental illness, some of whom have either attempted, or indicated an intention, to commit suicide. Suicide prevention targeted at the wider population is also addressed through the initiatives of other government agencies, NGOs and other special interest groups. Any effect on suicide rates, therefore, will be a result of a coordinated response across a range of collaborating agencies, including education, housing, justice and community services.

Many factors outside the control of mental health services can influence a person’s decision to commit suicide. These include environmental, sociocultural and economic risk factors — for example, adverse childhood experiences (such as sexual abuse) can increase the risk of suicide, particularly in adolescents and young adults. Alcohol and other drugs are also often associated with an increased risk of suicidal behaviour. Other factors that can influence suicide rates include economic growth rates, which affect unemployment rates and social disadvantage. Often a combination of these factors can increase the risk of suicidal behaviour.

Data reported for this indicator are:

- comparable (subject to caveats) across jurisdictions but a break in series means that data are not comparable across time periods for some disaggregations (see the attachment tables 12A.81–83 in 2015 Report for details)
- complete for the current reporting period (subject to caveats). All required 2012 or 2008–2012 data are available for all jurisdictions.

Data quality information for this indicator is at www.pc.gov.au/research/recurring/report-on-government-services.

People with a mental illness are at a higher risk of suicide than are the general population. They are also at a higher risk of death from other causes, such as cardiovascular disease (Coghlan et al. 2001; Joukamaa et al. 2001; Sartorius 2007; Lawrence, Hancock and Kisely 2013).

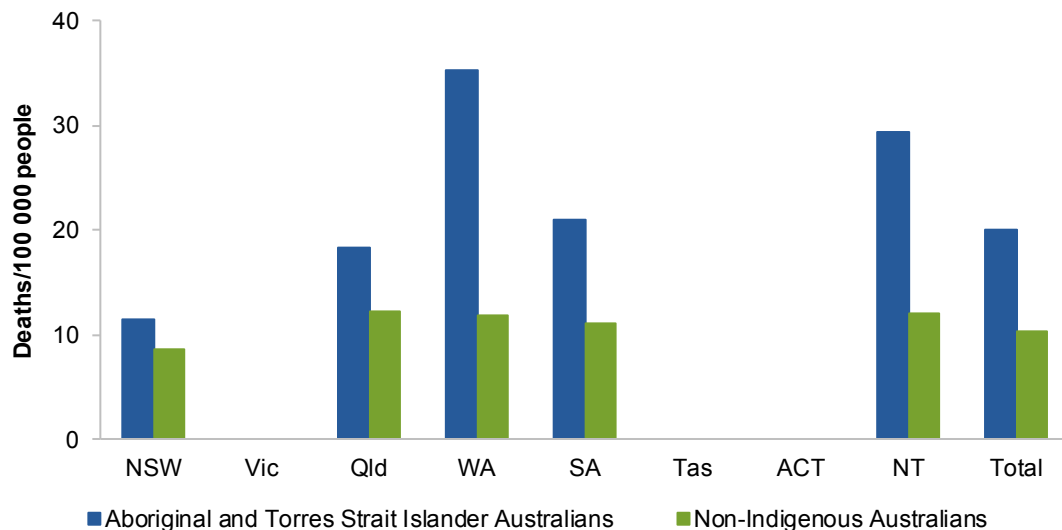
All Coroner certified deaths registered after 1 January 2006 are subject to a revisions process. The revisions process enables the use of additional information relating to Coroner certified deaths either 12 or 24 months after initial processing. This increases the

specificity of the assigned International Classification of Diseases (ICD) 10 codes over time (ABS 2010). Each year of data is now released as preliminary, revised and final. For further information on this revisions process see the DQI for this indicator.

Aboriginal and Torres Strait Islander suicide rates are presented for NSW, Queensland, WA, SA and the NT (figure 12.4). After adjusting for differences in the age structure of the two populations, the suicide rate for Aboriginal and Torres Strait Islander Australians during the period 2008–2012, for the reported jurisdictions, was higher than the corresponding rate for non-Indigenous Australians.

Care needs to be taken when interpreting these data because data for Aboriginal and Torres Strait Islander Australians are incomplete and data for some jurisdictions are not published. Aboriginal and Torres Strait Islander Australians are not always accurately identified in administrative collections (such as hospital records, and birth and death registrations) due to definition variations, different data collection methods and failure to record Indigenous status. The rate calculations have not been adjusted for differences in the completeness of identification of Aboriginal and Torres Strait Islander deaths across jurisdictions.

Figure 12.4 Suicide rates, by Indigenous status, 2008–2012^{a, b, c, d, e, f}



^a Deaths from suicides are deaths with ICD 10 codes X60–X84 and Y87.0. ^b Suicide rates are age standardised. ^c Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths of Aboriginal and Torres Strait Islander people across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between Aboriginal and Torres Strait Islander and non-Indigenous data. ^d Deaths with a 'not stated' Indigenous status are excluded. ^e Causes of death data for 2008–2010 have undergone revisions and are now considered final. Causes of death data for 2011 have been revised and are subject to further revisions. Causes of death data for 2012 are preliminary and subject to a revisions process. ^f Total data are for NSW, Queensland, WA, SA, and the NT combined, based on the state or territory of usual residence. Data has been included for these five states and territories only as there is evidence of sufficient levels of identification and sufficient numbers of deaths to support mortality analysis.

Source: ABS (unpublished) *Causes of Deaths, Australia*, Cat. no. 3303.0; table 12A.84; 2015 Report, figure 12.33, p. 12.64.

Definitions of key terms

General terms

General practice

The organisational structure in which one or more GPs provide and supervise health care for a 'population' of patients. This definition includes medical practitioners who work solely with one specific population, such as women's health or Aboriginal and Torres Strait Islander health.

Health management

The ongoing process beginning with initial client contact and including all actions relating to the client. Includes assessment/evaluation, education of the person, family or carer(s), and diagnosis and treatment. Involves problems with adherence to treatment and liaison with, or referral to, other agencies.

Separation

An episode of care for an admitted patient, which can be a total hospital stay, or a portion of a hospital stay beginning or ending in a change of type of care (for example, from acute to rehabilitation). Separation also means the process by which an admitted patient completes an episode of care.

Mental health

Affective disorders	A mood disturbance, including mania, hypomania, bipolar affective disorder, depression and dysthymia.
Comparability	Data are considered comparable if (subject to caveats) they can be used to inform an assessment of comparative performance. Typically, data are considered comparable when they are collected in the same way and in accordance with the same definitions. For comparable indicators or measures, significant differences in reported results allow an assessment of differences in performance, rather than being the result of anomalies in the data.
Completeness	Data are considered complete if all required data are available for all jurisdictions that provide the service.
Depression	A state of gloom, despondency or sadness lasting at least two weeks. The person usually suffers from low mood, loss of interest and enjoyment, and reduced energy. Sleep, appetite and concentration can be affected.
Mental illness	A diagnosable illness that significantly interferes with an individual's cognitive, emotional and/or social abilities.
Mental health	The capacity of individuals within groups and the environment to interact with one another in ways that promote subjective wellbeing, the optimal development and use of mental abilities (cognitive, affective and relational) and the achievement of individual and collective goals consistent with justice.
Mental health problems	Diminished cognitive, emotional or social abilities, but not to the extent of meeting the criteria for a mental illness.
Mental health promotion	Actions taken to maximise mental health and wellbeing among populations and individuals. It is aimed at changing environments (social, physical, economic, educational, cultural) and enhancing the 'coping' capacity of communities, families and individuals by giving power, knowledge, skills and necessary resources.
Mortality rate from suicide	The proportion of the population who die as a result of suicide.
Prevalence	The number of cases of a disease present in a population at a given time (point prevalence) or during a given period (period prevalence).
Psychiatrist	A medical practitioner with specialist training in psychiatry.
Public health	The organised, social response to protect and promote health, and to prevent illness, injury and disability. The starting point for identifying public health issues, problems and priorities, and for designing and implementing interventions, is the population as a whole or population subgroups. Public health is characterised by a focus on the health of the population (and particular at-risk groups) and complements clinical provision of health care services.
Schizophrenia	A combination of signs and symptoms that can include delusions, hallucinations, disorganised speech or behaviour, a flattening in emotions, and restrictions in thought, speech and goal directed behaviour.
Specialised mental health services	Services whose primary function is specifically to provide treatment, rehabilitation or community support targeted towards people affected by a mental illness or psychiatric disability. Further, such activities are delivered from a service or facility that is readily identifiable as both specialised and serving a mental health function. This criterion applies regardless of the source of funds.
Substance use disorders	Disorders in which drugs or alcohol are used to such an extent that behaviour becomes maladaptive, social and occupational functioning is impaired, and control or abstinence becomes impossible. Reliance on the drug can be psychological (as in substance misuse) or physiological (as in substance dependence).

List of attachment tables

Attachment tables for data within this chapter are contained in the attachment to the Compendium. These tables are identified in references throughout this chapter by a '12A' prefix (for example, table 12A.1 is table 1 in the Mental health management attachment).

Attachment tables are on the Review website (www.pc.gov.au/research/recurring/report-on-government-services).

- Table 12A.15** Age standardised rate of adults with high/ very high levels of psychological distress, by State and Territory, by Indigenous status, 2011-13
- Table 12A.19** GP mental health-related encounters (general and mental health specific), 2012-13
- Table 12A.25** Specialised mental health care reported, by Indigenous status
- Table 12A.34** New clients as a proportion of total clients under the care of State or Territory specialised public mental health services, by selected characteristics, 2012-13
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- Table 12A.74** Illicit drug use, people aged 14 years or older, by social characteristics (per cent)
- Table 12A.84** Suicide deaths, by Indigenous status, 2008–2012

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12A Mental health management — attachment

Tables in this attachment are sourced from the Mental health management attachment of the 2015 Report. Table numbers refer to the 2015 Report, for example, a reference to ‘2015 Report, table 12A.15’ refers to attachment table 15 of attachment 12A of the 2015 Report.

Definitions for indicators and descriptors in this attachment are in the Mental health management chapter of the Compendium.

Data in this Compendium are examined by the Health Working Group, but have not been formally audited by the Secretariat. Unsourced information was obtained from the Australian, State and Territory governments.

This file is available in Adobe PDF format on the Review web page (www.pc.gov.au/research/recurring/report-on-government-services).

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Table 12A.84	Suicide deaths, by Indigenous status, 2008–2012

TABLE 12A.15

Table 12A.15 **Age standardised rate of adults with high/ very high levels of psychological distress, by State and Territory, by Indigenous status, 2011-13 (a), (b), (c), (d), (e)**

	<i>unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT (e)</i>	<i>Aust</i>
<i>Age standardised proportion (%)</i>										
Aboriginal and Torres Strait Islander	rate	30.5	31.5	30.3	28.5	32.8	26.3	30.9	21.6	29.4
Non-Indigenous	rate	9.9	11.3	11.5	10.9	12.2	9.9	8.9	8.2	10.8
<i>Relative standard errors</i>										
Aboriginal and Torres Strait Islander	%	8.2	7.8	7.0	5.9	7.4	10.4	16.8	8.8	3.6
Non-Indigenous	%	6.8	6.1	6.5	7.8	7.4	9.0	9.1	13.2	3.0
<i>95 per cent confidence intervals</i>										
Aboriginal and Torres Strait Islander	±	4.9	4.8	4.1	3.3	4.8	5.4	10.2	3.7	2.1
Non-Indigenous	±	1.3	1.3	1.5	1.7	1.8	1.8	1.6	2.1	0.6

(a) Levels of psychological distress are derived from the Kessler Psychological Distress Scale (K5). Denominator includes a small number of persons for whom levels of psychological distress were unable to be determined.

(b) Rates are age standardised by State and Territory, to the 2001 Estimated Resident Population (10 year ranges from 18 years).

(c) Adults are defined as persons aged 18 years and over.

(d) Totals for Aboriginal and Torres Strait Islander persons exclude a small number of persons for whom responses were provided by proxy but who were not present at interview.

(e) Data for the NT should be used with care as exclusion of very remote areas from the *National Health Survey* translates to the exclusion of around 23 per cent of the NT population.

Source: ABS (unpublished) *Australian Aboriginal and Torres Strait Islander Health Survey, 2012-13* (National Aboriginal and Torres Strait Islander Health Survey component) and ABS (unpublished) *Australian Health Survey 2011-13* (2011-12 NHS component).

TABLE 12A.19

Table 12A.19 **GP mental health-related encounters (general and mental health specific), 2012-13**

	<i>Per cent of total mental health-related encounters (a)</i>	<i>Rate (per 100 encounters)</i>	<i>95% LCL</i>	<i>95% UCL</i>	<i>Encounters per 1000 population (b)</i>
<i>Age group</i>					
Less than 15 years	3.8	4.0	3.4	4.6	136.4
15–24 years	7.8	11.8	10.8	12.7	396.3
25–34 years	12.9	15.0	13.9	16.2	607.7
35–44 years	17.7	18.6	17.3	19.9	866.1
45–54 years	18.1	17.0	15.8	18.2	926.5
55–64 years	14.5	12.3	11.5	13.0	870.0
65 years or over	25.4	10.2	9.6	10.9	1 214.1
<i>Sex</i>					
Male	41.3	11.7	11.1	12.4	565.5
Female	58.7	12.7	12.2	13.3	759.0
<i>Indigenous status (c)</i>					
Aboriginal and Torres Strait Islander	1.9	15.2	12.6	17.8	554.1
Non-Indigenous	98.1	12.4	11.8	13.0	613.4
<i>Remoteness area of usual residence</i>					
Major cities	71.3	12.1	11.4	12.7	672.7
Inner regional	19.1	13.5	12.3	14.6	686.6
Outer regional	8.7	12.1	10.9	13.4	639.6
Remote and very remote	1.0	10.5	7.3	13.8	295.7
Total	100.0	12.3	11.8	12.8	670.6

LCL—lower confidence limit; UCL—upper confidence limit.

Table 12A.19 **GP mental health-related encounters (general and mental health specific), 2012-13**

<i>Per cent of total mental health-related encounters (a)</i>	<i>Rate (per 100 encounters)</i>	<i>95% LCL</i>	<i>95% UCL</i>	<i>Encounters per 1000 population (b)</i>
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(a) The percentages shown do not include those encounters for which the demographic information was missing or not reported.

(b) Estimated encounter rates were directly age-standardised, with the exception of age, which is a crude rate.

(c) Information on this variable was missing or not reported for more than 9 per cent of encounters.

Source: AIHW (2014) *Mental Health Services in Australia* (available at <http://mhsa.aihw.gov.au/home/>).

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
<i>2005-06</i>										
<i>Episodes of community-based residential mental health care (a), (b), (c)</i>										
Number										
Aboriginal and Torres Strait Islander (d)	no.	23	11	..	np	8	16	np	..	64
Non-Indigenous	no.	403	778	..	172	130	565	48	..	2 096
Not reported	no.	10	2	..	–	2	160	11	..	185
Total	no.	436	791	..	177	140	741	60	..	2 345
Rate per 10 000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 10 000 people	2.0	3.7	..	np	3.6	18.5	np	..	1.9
Non-Indigenous	per 10 000 people	0.6	1.6	..	0.9	0.9	15.4	1.8	..	1.1
Rate ratio (f)		3.3	2.3	..	0.8	4.0	1.2	1.2	..	1.7
Total	per 10 000 people	0.6	1.6	..	0.9	1.0	14.1	1.8	..	1.1
<i>Community-based ambulatory mental health service contacts (g)</i>										
Number										
Aboriginal	no.	97 430	21 682	49 225	23 006	11 255	950	5 275	10 654	219 477
Torres Strait Islander	no.	1 697	2 146	5 314	171	158	22	39	27	9 574
Both Aboriginal and Torres Strait Islander	no.	9 518	2 474	2 704	1 953	762	7	412	382	18 212
Aboriginal and Torres Strait Islander (d)	no.	108 645	26 302	57 243	25 130	12 175	979	5 726	11 063	247 263
Neither Aboriginal nor Torres Strait Islander	no.	1 040 517	1 800 406	832 841	440 820	271 101	47 412	135 872	24 807	4 593 776
Not reported	no.	683 015	6 497	2 309	26 518	19 124	17 185	69 235	486	824 369
Total	no.	1 832 177	1 833 205	892 393	492 468	302 400	65 576	210 833	36 356	5 665 408

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Rate per 10 000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 1 000 people	822.1	936.6	435.5	375.9	446.3	153.5	1138.6	187.2	531.7
Non-Indigenous (h)	per 1 000 people	254.2	356.4	216.6	239.5	191.4	133.0	612.6	168.4	270.3
Rate ratio (f)		3.2	2.6	2.0	1.6	2.3	1.2	1.9	1.1	2.0
Total	per 1 000 people	265.1	357.3	221.5	242.2	195.6	130.5	616.3	170.8	274.9
<i>Admitted patient mental health-related separations with specialised psychiatric care (i), (j), (k), (l)</i>										
Aboriginal and Torres Strait Islander (d)										
Separations	no.	1 709	316	1 007	623	328	np	np	np	4 478
Separation rate (e)	per 1 000 people	13.6	10.9	8.2	9.3	12.2	np	np	np	10.4
Patient days	no.	30 049	4506	22 285	14 339	4 641	np	np	np	80 616
Psychiatric care days	no.	29 549	4502	22 167	14 288	4 641	np	np	np	79 907
Average length of stay (overnight)	no.	18.0	14.5	22.5	23.3	15.0	np	np	np	18.5
Non-Indigenous (h)										
Separations	no.	36 704	25 380	25 438	10 976	9 990	np	np	np	109 139
Separation rate (e)	per 1 000 people	5.5	5.0	6.6	5.6	6.4	np	np	np	5.7
Patient days	no.	790 150	466 353	458 231	205 605	236 494	np	np	np	2 162 881
Psychiatric care days	no.	766 667	465 514	454 165	202 744	236 494	np	np	np	2 131 599
Average length of stay (overnight)	no.	23.0	19.4	21.3	19.9	27.2	np	np	np	21.7
Rate ratio (f)		2.5	2.2	1.2	1.7	1.9	np	np	np	1.8

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
<i>2006-07</i>										
<i>Episodes of community-based residential mental health care (a), (b), (c)</i>										
Number										
Aboriginal and Torres Strait Islander (d)	no.	15	26	..	np	2	10	np	np	60
Non-Indigenous	no.	377	968	..	178	115	627	73	6	2 344
Not reported	no.	1	9	..	np	4	106	7	np	127
Total	no.	393	1 003	..	181	121	743	81	9	2 531
Rate per 10 000 people										
Aboriginal and Torres Strait Islander (d)	per 10 000 people	1.8	10.3	..	np	0.8	15.4	1.6	np	1.8
Non-Indigenous	per 10 000 people	0.6	1.9	..	0.9	0.8	12.8	2.1	0.5	1.2
Rate ratio (f)		3.0	5.4	..	np	1.0	1.2	0.8	np	1.5
Total	per 10 000 people	0.6	2.0	..	0.9	0.8	14.7	2.3	0.5	1.2
<i>Community-based ambulatory mental health service contacts (g)</i>										
Number										
Aboriginal	no.	114 468	25 636	65 117	23 967	14 042	2 598	3 710	10 897	260 435
Torres Strait Islander	no.	2 402	1 681	7 514	123	166	31	8	62	11 987
Both Aboriginal and Torres Strait Islander	no.	12 137	1 760	4 299	1 335	763	23	199	297	20 813
Aboriginal and Torres Strait Islander (d)	no.	129 007	29 077	76 930	25 425	14 971	2 652	3 917	11 256	293 235
Neither Aboriginal nor Torres Strait Islander	no.	1 288 558	1 789 065	970 751	489 271	333 057	77 479	177 633	24 799	5 150 613
Not reported	no.	410 903	12 136	3 279	21 113	34 276	13 055	25 937	1 730	522 429
Total	no.	1 828 468	1 830 278	1 050 960	535 809	382 304	93 186	207 487	37 785	5 966 277

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Rate per 1000 people (e)										
Aboriginal and Torres Strait Islander	per 1 000 people	996.3	1 022.1	595.3	359.7	528.9	181.3	902.5	180.8	629.3
Non-Indigenous (h)	per 1 000 people	255.4	349.3	245.8	253.3	243.1	189.4	596.8	167.2	279.8
Rate ratio (f)		3.9	2.9	2.4	1.4	2.2	1.0	1.5	1.1	2.2
Total	per 1 000 people	269.7	353.3	256.7	257.9	249.3	189.2	602.9	172.3	288.0
<i>Admitted patient mental health-related separations with specialised psychiatric care (i), (j), (k), (l)</i>										
Aboriginal and Torres Strait Islander (d)										
Separations	no.	1 915	361	1 219	607	362	np	np	440	4 904
Separation rate (e)	per 1 000 people	15.1	12.6	10.1	8.4	13.5	np	np	7.0	11.3
Patient days	no.	37 458	6 008	40 405	14 216	6 833	np	np	5 369	110 289
Psychiatric care days	no.	36 981	5 997	40 265	14 134	6 833	np	np	5 339	109 549
Average length of stay (overnight)	no.	19.7	16.7	34.9	23.6	19.5	np	np	12.8	23.0
Non-Indigenous (h)										
Separations	no.	37 344	27 095	24 791	11 389	10 775	np	np	544	111 938
Separation rate (e)	per 1 000 people	5.6	5.2	6.2	5.6	6.8	np	np	3.3	5.7
Patient days	no.	808 262	536 843	481 912	226 377	207 442	np	np	5 957	2 266 793
Psychiatric care days	no.	782 915	536 176	477 831	223 946	207 442	np	np	5 886	2 234 196
Average length of stay (overnight)	no.	22.6	20.6	23.4	21.3	22.3	np	np	11.2	22.0
Rate ratio (f)		2.7	2.4	1.6	1.5	2.0	np	np	2.1	1.8

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
<i>2007-08</i>										
<i>Episodes of community-based residential mental health care (a), (b), (c)</i>										
Number										
Aboriginal and Torres Strait Islander (d)	no.	np	np	..	np	np	np	np	np	87
Non-Indigenous	no.	np	np	..	np	np	np	np	np	2 962
Not reported	no.	np	np	..	np	np	np	np	np	np
Total	no.	305	1 498	..	240	192	907	75	5	3 222
Rate per 10 000 people										
Aboriginal and Torres Strait Islander (d)	per 10 000 people	np	np	..	np	np	np	np	np	1.9
Non-Indigenous (h)	per 10 000 people	np	np	..	np	np	np	np	np	1.4
Rate ratio (f)		np	np	..	np	np	np	np	np	1.4
Total	per 10 000 people	0.4	2.8	..	1.1	1.3	17.3	2.1	0.3	1.5
<i>Community-based ambulatory mental health service contacts (g)</i>										
Number										
Aboriginal	no.	154 648	25 248	81 047	27 339	19 616	3 371	4 399	10 788	326 456
Torres Strait Islander	no.	3 088	1 516	7 942	98	248	41	24	37	12 994
Both Aboriginal and Torres Strait Islander	no.	12 511	2 646	5 164	1 394	817	113	–	334	22 979
Aboriginal and Torres Strait Islander (d)	no.	170 247	29 410	94 153	28 831	20 681	3 525	4 423	11 159	362 429
Neither Aboriginal nor Torres Strait Islander	no.	1 602 002	1 691 539	1 066 035	508 389	388 682	120 633	179 059	21 081	5 577 420
Not reported	no.	300 191	15 507	2 369	17 338	47 579	23 543	23 985	3 906	434 418

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Total		2 072 440	1 736 456	1 162 557	554 558	456 942	147 701	207 467	36 146	6 374 267
Rate per 1000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 1 000 people	1228.5	940.5	678.2	412.4	729.0	193.7	1077.2	172.0	735.7
Non-Indigenous (h)	per 1 000 people	262.9	302.5	253.5	231.6	261.1	254.1	552.0	151.1	271.6
Rate ratio (f)		4.7	3.1	2.7	1.8	2.8	0.8	2.0	1.1	2.7
Total	per 1 000 people	289.8	327.1	276.7	256.6	279.4	280.9	591.8	158.6	295.7
<i>Admitted patient mental health-related separations with specialised psychiatric care (i), (j), (k), (l)</i>										
Aboriginal and Torres Strait Islander (d)										
Separations	no.	1 940	362	1 227	590	302	np	np	404	4 825
Separation rate (e)	per 1 000 people	14.1	11.9	9.3	8.3	11.3	np	np	5.9	10.5
Patient days	no.	38 573	6 463	45 785	14 307	4 984	np	np	5 074	115 186
Psychiatric care days	no.	37 795	6 351	45 011	14 171	4 984	np	np	5 050	113 362
Average length of stay (overnight)	no.	20.0	18.2	39.1	24.4	16.7	np	np	12.9	24.3
Non-Indigenous										
Separations	no.	38 256	28 910	24 429	12 494	9 549	np	np	553	114 191
Separation rate (e)	per 1 000 people	5.6	5.5	5.9	6.0	6.0	np	np	3.4	5.7
Patient days	no.	874 557	537 322	469 727	238 391	188 967	np	np	5 376	2 314 340
Psychiatric care days	no.	856 734	536 505	465 016	235 522	188 967	np	np	5 343	2 288 087
Average length of stay (overnight)	no.	24.0	19.5	22.7	21.9	22.7	np	np	10.2	22.2
Rate ratio (f)		2.5	2.2	1.6	1.4	1.9	np	np	1.7	1.8

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
<i>2008-09</i>										
<i>Episodes of community-based residential mental health care (a), (b), (c)</i>										
Number										
Aboriginal and Torres Strait Islander (d)	no.	13	34	..	5	11	9	–	9	81
Non-Indigenous	no.	200	1 685	..	249	219	822	45	40	3 260
Total	no.	213	1 730	..	254	237	968	46	49	3 497
Rate per 10 000 people (e)										
Aboriginal and Torres Strait Islander	per 10 000 people	np	np	..	np	np	np	np	np	1.7
Non-Indigenous	per 10 000 people	np	np	..	np	np	np	np	np	1.5
Rate ratio (f)		np	np	..	np	np	np	np	np	1.1
Total	per 10 000 people	0.3	3.2	..	1.1	1.6	18.4	1.3	2.2	1.6
<i>Community-based ambulatory mental health service contacts (g)</i>										
Number										
Aboriginal	no.	155 180	26 648	67 758	32 355	26 639	3 645	5 332	12 100	329 657
Torres Strait Islander	no.	3 647	1 755	7 181	81	417	48	33	70	13 232
Both Aboriginal and Torres Strait Islander	no.	12 899	2 570	4 419	1 469	890	641	–	348	23 236
Aboriginal and Torres Strait Islander (d)	no.	171 726	30 973	79 358	33 905	27 946	4 334	5 365	12 518	366 125
Neither Aboriginal nor Torres Strait Islander	no.	1 441 593	1 643 674	872 221	557 448	434 958	142 697	191 895	21 500	5 305 986
Not reported	no.	438 260	14 681	7 342	17 923	62 313	26 757	26 068	5 310	598 654
Total		2 051 579	1 689 328	958 921	609 276	525 217	173 788	223 328	39 328	6 270 765

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Rate per 1000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 1 000 people	1 224	975.0	556.7	482.7	943.6	269.5	1108.3	188.1	731.2
Non-Indigenous	per 1 000 people	211.5	308.8	212.1	264.5	283.8	300.5	549.2	131.3	254.0
Rate ratio (f)		5.8	3.2	2.6	1.8	3.3	0.9	2.0	1.4	2.9
Total	per 1 000 people	294.8	313.6	223.5	277.1	335.5	351.5	632.5	167.4	291.9
<i>Admitted patient mental health-related separations with specialised psychiatric care (i), (j), (k), (l)</i>										
Aboriginal and Torres Strait Islander (d)										
Separations	no.	np	np	np	np	np	np	np	np	4 951
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	10.6
Non-Indigenous (h)										
Separations	no.	np	np	np	np	np	np	np	np	122 255
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	6.0
Rate ratio (f)		np	np	np	np	np	np	np	np	1.8
<i>2009-10</i>										
<i>Episodes of community-based residential mental health care (a), (b), (c)</i>										
Number										
Aboriginal and Torres Strait Islander (d)	no.	18	27	..	8	19	16	–	33	121
Non-Indigenous	no.	196	2 200	..	215	190	780	55	49	3 685
Total	no.	214	2 240	..	223	219	929	57	82	3 964
Rate per 10 000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 10 000 people	np	np	np	np	np	np	np	np	2.5
Non-Indigenous	per 10 000 people	np	np	np	np	np	np	np	np	1.7
Rate ratio (f)		np	np	np	np	np	np	np	np	1.5

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Total	per 10 000 people	np	np	np	np	np	np	np	np	1.8
<i>Community-based ambulatory mental health service contacts (g)</i>										
Number										
Aboriginal	no.	190 299	25 973	67 059	38 366	27 363	18 496	7 632	14 483	389 671
Torres Strait Islander	no.	3 227	2 091	6 382	202	310	587	172	107	13 078
Both Aboriginal and Torres Strait Islander	no.	16 017	4 138	4 633	1 552	860	527	–	418	28 145
Aboriginal and Torres Strait Islander (d)	no.	209 543	32 202	78 074	40 120	28 533	19 610	7 804	15 008	430 894
Neither Aboriginal nor Torres Strait Islander	no.	1 604 984	1 681 351	803 254	617 936	446 762	178 757	226 842	23 514	5 583 400
Not reported	no.	427 507	22 457	2 130	22 078	68 053	14 232	22 851	462	579 770
Total		2 242 034	1 736 010	883 458	680 134	543 348	212 599	257 497	38 984	6 594 064
Rate per 1000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 1 000 people	1 459.1	971.2	530.2	554.4	941.3	1211.1	1767.0	217.4	841.8
Non-Indigenous (h)	per 1 000 people	231.7	309.4	190.6	284.5	288.8	380.4	649.0	141.6	262.0
Rate ratio (f)		6.3	3.1	2.8	1.9	3.3	3.2	2.7	1.5	3.2
Total	per 1 000 people	315.5	314.4	200.5	300.5	343.1	434.2	724.8	161.9	299.9
<i>Admitted patient mental health-related separations with specialised psychiatric care (i), (j), (k), (l)</i>										
Aboriginal and Torres Strait Islander (d)										
Separations	no.	np	np	np	np	np	np	np	np	5 075
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	10.6
Non-Indigenous (h)										
Separations	no.	np	np	np	np	np	np	np	np	122 489

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	5.9
Rate ratio (f)		np	np	np	np	np	np	np	np	1.8
<i>2010-11</i>										
<i>Episodes of community-based residential mental health care (a), (b), (c)</i>										
Number										
Aboriginal and Torres Strait Islander (d)	no.	17	27	..	6	15	14	np	np	121
Non-Indigenous	no.	215	2 425	..	231	323	656	np	np	3 969
Total (h)	no.	232	2 475	..	237	369	760	75	86	4 234
Rate per 10 000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 10 000 people	np	np	np	np	np	np	np	np	2.6
Non-Indigenous	per 10 000 people	np	np	np	np	np	np	np	np	1.8
Rate ratio (f)		np	np	np	np	np	np	np	np	1.4
Total	per 10 000 people	np	np	np	np	np	np	np	np	1.9
<i>Community-based ambulatory mental health service contacts (g)</i>										
Number										
Aboriginal	no.	200 879	26 355	82 921	49 083	28 886	3 580	9 173	16 098	416 975
Torres Strait Islander	no.	3 186	1 741	7 777	135	451	392	157	71	13 910
Both Aboriginal and Torres Strait Islander	no.	16 143	2 128	6 327	1 592	54	978	–	461	27 683
Aboriginal and Torres Strait Islander (d)	no.	220 208	30 224	97 025	50 810	29 391	4 950	9 330	16 630	458 568
Neither Aboriginal nor Torres Strait Islander	no.	1 755 783	1 731 303	924 592	679 170	461 470	121 216	211 748	24 296	5 909 578
Not reported	no.	432 497	233 225	1 885	22 206	69 637	24 523	21 779	295	806 047

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Total		2 408 488	1 994 752	1 023 502	752 186	560 498	150 689	242 857	41 221	7 174 193
Rate per 1000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 1 000 people	1 511.5	892.2	634.1	676.6	968.8	289.2	1807.5	242.4	870.9
Non-Indigenous (h)	per 1 000 people	254.4	317.5	220.2	306.1	297.7	251.3	587.8	142.9	276.7
Rate ratio (f)		5.9	2.8	2.9	2.2	3.3	1.2	3.1	1.7	3.1
Total	per 1 000 people	341.4	362.1	234.3	325.4	354.8	301.9	659.9	168.1	326.8
<i>Admitted patient mental health-related separations with specialised psychiatric care (i), (j), (k), (l)</i>										
Aboriginal and Torres Strait Islander (d)										
Separations	no.	np	np	np	np	np	np	np	np	6 109
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	12.9
Non-Indigenous (h)										
Separations	no.	np	np	np	np	np	np	np	np	122 610
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	5.8
Rate ratio (f)		np	np	np	np	np	np	np	np	2.2
2011-12 (m), (n)										
<i>Episodes of community-based residential mental health care (a), (b), (c)</i>										
Number										
Aboriginal and Torres Strait Islander (d)	no.	28	49	..	np	45	41	np	55	230
Non-Indigenous	no.	268	2 711	..	np	1 083	816	np	67	5 275
Total (h)	no.	296	2 794	..	277	1 223	949	66	122	5 727
Rate per 10 000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 10 000 people	np	np	np	np	np	np	np	np	5.0
Non-Indigenous	per 10 000 people	np	np	np	np	np	np	np	np	2.4

TABLE 12A.25

Table 12A.25 Specialised mental health care reported, by Indigenous status

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Rate ratio (f)		np	np	np	np	np	np	np	np	2.1
Total	per 10 000 people	0.4	5.0	..	1.2	7.7	18.4	1.7	4.9	2.6
<i>Community-based ambulatory mental health service contacts (g)</i>										
Number										
Aboriginal	no.	237 868	na	108 533	53 297	33 578	2 427	9 608	18 303	463 614
Torres Strait Islander	no.	3 353	na	11 029	190	700	179	45	131	15 627
Both Aboriginal and Torres Strait Islander	no.	18 724	na	6 884	1 755	31	1 209	–	465	29 068
Aboriginal and Torres Strait Islander (d)	no.	259 945	na	126 446	55 242	34 309	3 815	9 653	18 899	508 309
Neither Aboriginal nor Torres Strait Islander	no.	1 851 698	na	1 085 140	678 862	485 828	76 872	228 150	29 832	4 436 382
Not reported	no.	461 599	na	2 622	18 315	73 041	18 091	21 543	205	595 416
Total		2 573 242	na	1 214 208	752 419	593 178	98 778	259 346	48 936	5 540 107
Rate per 1000 people (e), (m), (n)										
Aboriginal and Torres Strait Islander (d)	per 1 000 people	1 756.7	na	797.9	713.7	1 126.2	193.5	2 045.1	265.7	1 007.7
Non-Indigenous (h)	per 1 000 people	261.8	na	249.8	300.0	307.6	164.1	625.2	178.2	272.8
Rate ratio (f)		6.7	na	3.2	2.4	3.7	1.2	3.3	1.5	3.7
Total	per 1 000 people	362.0	na	274.1	316.8	371.8	200.9	690.4	198.0	333.2
<i>Admitted patient mental health-related separations with specialised psychiatric care (i), (j), (k), (l)</i>										
Aboriginal and Torres Strait Islander (d)										
Separations	no.	np	np	np	np	np	np	np	np	6 749
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	13.9
Non-Indigenous (h)										

TABLE 12A.25

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
Separations	no.	np	np	np	np	np	np	np	np	135 149
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	6.1
Rate ratio (f)		np	np	np	np	np	np	np	np	2.3
<i>2012-13 (m), (n)</i>										
<i>Episodes of community-based residential mental health care (a), (b), (c)</i>										
Number										
Aboriginal and Torres Strait Islander (d)	no.	27	44	..	13	73	34	np	np	228
Non-Indigenous	no.	271	2 912	..	255	1 518	1 024	np	np	6 114
Total (h)	no.	298	2 992	..	268	1 707	1 097	69	104	6 535
Rate per 10 000 people (e)										
Aboriginal and Torres Strait Islander (d)	per 10 000 people	np	np	np	np	np	np	np	np	4.1
Non-Indigenous	per 10 000 people	np	np	np	np	np	np	np	np	2.8
Rate ratio (f)		np	np	np	np	np	np	np	np	1.5
Total	per 10 000 people	0.4	5.3	..	1.1	10.7	20.9	1.8	4.2	2.9
<i>Community-based ambulatory mental health service contacts (g)</i>										
Number										
Aboriginal	no.	268 575	na	142 575	62 417	34 992	2 586	10 158	26 399	547 702
Torres Strait Islander	no.	3 401	na	14 983	309	345	70	226	158	19 492
Both Aboriginal and Torres Strait Islander	no.	17 345	na	9 426	1 887	260	339	239	585	30 081
Aboriginal and Torres Strait Islander (d)	no.	289 321	na	166 984	64 613	35 597	2 995	10 623	27 142	597 275
Neither Aboriginal nor Torres Strait Islander	no.	2 138 992	na	1 337 663	722 417	526 506	62 430	244 074	36 595	5 068 677

TABLE 12A.25

Table 12A.25 Specialised mental health care reported, by Indigenous status

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Not reported	no.	496 371	na	1 951	8 172	77 612	2 255	13 190	374	599 925
Total		2 924 684	na	1 506 598	795 202	639 715	67 680	267 887	64 111	6 265 877
Rate per 1000 people (e), (m), (n)										
Aboriginal and Torres Strait Islander (d)	per 1 000 people	1 558.9	..	890.5	725.9	930.8	..	1 711.4	374.5	998.8
Non-Indigenous (h)	per 1 000 people	306.6	..	312.1	309.6	335.3	..	652.2	214.9	313.1
Rate ratio (f)		5.1	..	2.9	2.3	2.8	..	2.6	1.7	3.2
Total	per 1 000 people	406.8	..	334.2	324.6	398.2	..	698.5	255.1	371.1
<i>Admitted patient mental health-related separations with specialised psychiatric care (i), (j), (k), (l)</i>										
Aboriginal and Torres Strait Islander (d)										
Separations	no.	np	np	np	np	np	np	np	np	7 209
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	12.7
Non-Indigenous (h)										
Separations	no.	np	np	np	np	np	np	np	np	139 726
Separation rate (e)	per 1 000 people	np	np	np	np	np	np	np	np	6.3
Rate ratio (f)		np	np	np	np	np	np	np	np	2.0

- (a) Data for episodes of community residential care should be interpreted with caution due to the varying quality and completeness of Indigenous identification across jurisdictions.
- (b) Queensland does not have any government-operated residential mental health services. Tasmanian information contains data for government-funded residential units operated by the non-government sector in that state, being the only jurisdiction providing this level of reporting. The NT did not have any community residential units in 2005-06.
- (c) For NSW, Confused and Disturbed Elderly (CADE) residential mental health services were reclassified as admitted patient hospital services from 1 July 2007. All data relating to these services have been reclassified from 2007–08 onwards. Comparison of NSW data over time therefore should be approached with caution.
- (d) Includes patients identified as being either of Aboriginal but not Torres Strait Islander origin, Torres Strait Islander but not Aboriginal origin, Aboriginal and Torres Strait Islander origin and patients identified as of Aboriginal or Torres Strait Islander origin.

Table 12A.25 **Specialised mental health care reported, by Indigenous status**

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total</i>
(e)	The rates were directly aged standardised against the Australian Estimated Resident Population as at 30 June 2001.									
(f)	The rate ratio is equal to the service use (episodes, contacts or separations) rate for Indigenous Australians divided by the service use rate for non-Indigenous Australians.									
(g)	Data for community mental health service contacts should be interpreted with caution. Across jurisdictions, the data quality and completeness of Indigenous identification varies or is unknown. See <i>Mental Health Services in Australia</i> (http://mhsa.aihw.gov.au/home) for further information.									
(h)	Includes data for people where Indigenous status was missing or not reported.									
(i)	Admitted patient separations refers to those non-ambulatory separations when a patient undergoes a hospital's formal admission process, completes an episode of care and 'separates' from the hospital, excluding ambulatory-equivalent separations. Separations for which care type was reported as Newborn with no qualified days and records for Hospital boarders and Posthumous organ procurement have been excluded. Comprises separations with and without mental health-related principal diagnoses but with specialised psychiatric care.									
(j)	Interpretation of differences between jurisdictions needs to be undertaken with care as they may reflect different service delivery and admission practices and/or differences in the types of establishments categorised as hospitals.									
(k)	Includes only public hospital separations for the NT.									
(l)	Indigenous status data for NSW, Victoria, Queensland, WA, SA and the NT public hospitals are considered to be of acceptable quality for analytical purposes. Indigenous identification is likely to be incomplete and to vary among jurisdictions. Total includes data for these jurisdictions only.									
(m)	Data were not available for Victoria in 2011–12 and 2012-13 due to service level collection gaps resulting from protected industrial action during this period. Victoria required that data for 2011–12 and 2012-13 be excluded from all totals, with no proxy data to be included for Victoria when calculating national totals. Industrial action in Tasmania in 2011–12 and 2012-13 has affected the quality and quantity of Tasmania's data (see the Mental Health Services in Australia online data source of the Community mental health care section).									
(n)	Totals include only those jurisdictions that provided data. Rates were calculated using a methodology which accounts for missing data, as detailed in the online technical information. Comparisons between jurisdictions and over time should be made with caution.									

na Not available. – Nil or rounded to zero. **np** Not published. .. Not applicable.

Source: AIHW (various issues) *Mental Health Services in Australia* (various years), (available at <http://mhsa.aihw.gov.au/home/>).

TABLE 12A.34

Table 12A.34 **New clients as a proportion of total clients under the care of State or Territory specialised public mental health services, by selected characteristics, 2012-13 (a), (b), (c)**

	<i>Unit</i>	<i>NSW</i>	<i>Vic (d)</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT (e)</i>	<i>Aust (d), (e)</i>
<i>Age group</i>										
Less than 15 years	%	52.8	na	54.7	54.4	47.4	73.3	65.4	50.1	53.3
15–24 years	%	44.8	na	47.8	47.7	52.4	63.0	43.7	54.5	47.4
25–34 years	%	37.5	na	42.4	42.0	42.9	50.9	40.2	45.7	40.7
35–44 years	%	32.9	na	39.1	35.9	36.2	50.0	34.8	41.0	35.9
45–54 years	%	32.3	na	39.8	33.0	36.0	50.8	34.6	44.9	35.4
55–64 years	%	34.2	na	42.4	34.9	38.2	52.2	36.7	47.8	37.5
65–74 years	%	39.4	na	47.3	42.8	44.1	53.6	39.9	49.4	42.9
75 years or over	%	52.0	na	57.5	53.3	51.8	71.7	51.8	74.4	53.9
<i>Gender</i>										
Male	%	37.8	na	42.9	41.5	41.4	58.0	39.0	45.6	40.7
Female	%	42.2	na	47.8	43.3	45.4	57.8	43.6	50.7	44.8
<i>SEIFA quintiles</i>										
Quintile 1 (most disadvantaged)	%	39.4	na	41.3	40.2	43.3	56.7	51.9	45.0	41.5
Quintile 2	%	39.0	na	45.6	39.4	41.7	57.2	42.1	44.4	41.3
Quintile 3	%	40.0	na	46.0	41.2	43.8	59.0	45.1	46.7	42.9
Quintile 4	%	39.4	na	46.8	41.1	42.9	60.8	39.0	49.8	42.9
Quintile 5 (least disadvantaged)	%	41.9	na	49.7	44.0	45.8	59.1	42.8	55.3	44.2
<i>Indigenous status</i>										
Aboriginal and Torres Strait Islander	%	32.0	na	37.8	39.9	35.8	56.7	33.4	41.7	36.6
Non-Indigenous	%	39.5	na	46.0	41.4	41.4	56.6	40.2	51.6	42.4
<i>Remoteness</i>										
Major cities	%	39.8	na	44.3	40.0	40.3	70.6	40.5	83.0	41.0

Table 12A.34 **New clients as a proportion of total clients under the care of State or Territory specialised public mental health services, by selected characteristics, 2012-13 (a), (b), (c)**

	<i>Unit</i>	<i>NSW</i>	<i>Vic (d)</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT (e)</i>	<i>Aust (d), (e)</i>
Inner regional	%	40.3	na	44.8	42.0	48.1	56.7	61.3	76.5	43.5
Outer regional	%	38.8	na	46.0	40.8	49.1	60.1	76.4	48.2	44.7
Remote	%	39.5	na	46.0	48.1	49.3	59.1	50.3	45.1	46.5
Very remote	%	27.6	na	45.2	48.8	40.7	66.7	–	45.3	44.5

- (a) Clients in receipt of services include all people who received one or more community service contacts or had one or more days of inpatient or residential care in the data period.
- (b) A new client is defined as a consumer who has not been seen in the five years preceding the first contact with a State or Territory specialised public mental health service in the data period.
- (c) See table 12A.33 and the DQI for specific footnotes regarding each State or Territory.
- (d) Victorian 2011-12 and 2012-13 data are unavailable due to service level collection gaps resulting from protected industrial action during this period. The total only includes those jurisdictions that have provided data.
- (e) Remoteness and socioeconomic status have been allocated using the client's usual residence, not the location of the service provider. State/territory is reported for the state/territory of the service provider.

na Not available. – Nil or rounded to zero.

Source: AIHW (unpublished) derived from data provided by State and Territory governments.

TABLE 12A.36

Table 12A.36 Proportion of people receiving clinical mental health services by service type and Indigenous status

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>	
Age standardised proportion (%) (a)										no.
<i>2007-08</i>										
Public (b), (c)										
Aboriginal and Torres Strait Islander	3.6	2.6	3.5	3.1	4.3	1.3	4.8	2.9	3.3	19 187
Non-Indigenous	1.2	1.1	1.8	1.6	1.5	2.0	1.6	1.9	1.4	276 005
Private (d)										
Aboriginal and Torres Strait Islander	na	na	na	na	na	na	na	..	na	na
Non-Indigenous	na	na	na	na	na	na	na	..	na	na
MBS and DVA (e)										
Aboriginal and Torres Strait Islander	np	np	np	np	np	np	np	np	np	np
Non-Indigenous	np	np	np	np	np	np	np	np	np	np
<i>2008-09</i>										
Public (b), (c)										
Aboriginal and Torres Strait Islander	3.9	2.6	3.4	3.4	4.8	1.1	4.8	3.0	3.4	20 616
Non-Indigenous	1.2	1.1	1.6	1.7	1.6	1.3	1.7	1.9	1.4	277 321
Private (d)										
Aboriginal and Torres Strait Islander	na	na	na	na	na	na	na	..	na	na
Non-Indigenous	na	na	na	na	na	na	na	..	na	na
MBS and DVA (e)										
Aboriginal and Torres Strait Islander	5.9	7.6	3.9	2.4	4.7	5.6	6.7	1.0	4.4	24 603

TABLE 12A.36

Table 12A.36 Proportion of people receiving clinical mental health services by service type and Indigenous status

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>	
Non-Indigenous	6.0	6.5	5.5	4.9	5.7	5.0	4.6	2.7	5.8	1 200 337
<i>2009-10</i>										
Public (b), (c)										
Aboriginal and Torres Strait Islander	4.0	2.6	3.5	3.8	4.8	3.0	4.8	3.7	3.7	22 930
Non-Indigenous	1.2	1.1	1.6	1.7	1.6	1.4	1.7	2.0	1.4	282 620
Private (d)										
Aboriginal and Torres Strait Islander	na	na	na	na	na	na	na	..	na	na
Non-Indigenous	na	na	na	na	na	na	na	..	na	na
MBS and DVA (e)										
Aboriginal and Torres Strait Islander	6.6	8.3	4.2	2.7	5.1	6.2	7.2	1.3	4.8	28 303
Non-Indigenous	6.5	7.1	6.1	5.3	6.4	5.6	5.0	3.2	6.4	1 337 882
<i>2010-11</i>										
Public (b), (c)										
Aboriginal and Torres Strait Islander	3.9	2.5	3.9	4.3	4.9	1.6	5.3	3.7	3.8	24 250
Non-Indigenous	1.2	1.1	1.7	1.8	1.6	1.6	1.8	2.0	1.4	291 381
Private (d)										
Aboriginal and Torres Strait Islander	na	na	na	na	na	na	na	..	na	na
Non-Indigenous	na	na	na	na	na	na	na	..	na	na
MBS and DVA (e)										
Aboriginal and Torres Strait Islander	8.2	9.2	5.2	3.6	6.5	7.6	9.7	1.5	6.0	36 044

TABLE 12A.36

Table 12A.36 Proportion of people receiving clinical mental health services by service type and Indigenous status

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>	
Non-Indigenous	7.1	7.8	6.8	5.7	7.0	6.3	5.5	3.4	7.0	1 486 676
2011-12										
Public (b), (c)										
Aboriginal and Torres Strait Islander	4.5	na	4.2	4.9	5.7	1.0	6.4	3.9	4.3	26 133
Non-Indigenous	1.2	na	1.7	1.8	1.7	0.8	1.9	2.3	1.5	240 556
Private (d)										
Aboriginal and Torres Strait Islander	na	na	na	na	na	na	na	..	na	na
Non-Indigenous	na	na	na	na	na	na	na	..	na	na
MBS and DVA (e)										
Aboriginal and Torres Strait Islander	9.7	11.4	6.4	3.7	7.5	7.6	10.7	1.4	7.0	43 634
Non-Indigenous	7.3	8.1	7.1	5.7	7.3	6.4	5.6	3.7	7.2	1 559 298
2012-13 (f)										
Public (b), (c)										
Aboriginal and Torres Strait Islander	4.9	na	4.5	5.3	5.9	1.4	6.3	4.1	4.7	29 378
Non-Indigenous	1.5	na	1.8	1.9	1.8	1.2	2.2	2.4	1.7	269 525
Private (d)										
Aboriginal and Torres Strait Islander	na	na	na	na	na	na	na	..	na	na
Non-Indigenous	na	na	na	na	na	na	na	..	na	na
MBS and DVA (e)										
Aboriginal and Torres Strait Islander	10.7	12.0	7.1	4.0	8.2	8.8	11.4	1.4	7.7	49 787

TABLE 12A.36

Table 12A.36 **Proportion of people receiving clinical mental health services by service type and Indigenous status**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>	
Non-Indigenous	7.9	8.7	7.7	5.9	7.6	7.0	6.2	4.1	7.7	1 690 537

- (a) Rates are age-standardised to the Australian population as at 30 June 2001.
- (b) Excludes people for whom Indigenous status was missing or not reported. The Indigenous status rates should be interpreted with caution due to the varying and, in some instances, unknown quality of Indigenous identification across jurisdictions. All historical data has been recalculated using the revised Indigenous population data.
- (c) Caution should be taken when making inter-jurisdictional comparisons for public data. South Australia submitted data that were not based on unique patient identifier or data matching approaches. This was also the case for data submitted by Tasmania prior to 2012-13. Victorian 2011-12 and 2012-13 data are unavailable due to service level collection gaps resulting from protected industrial action during this period. Industrial action during 2011-12 and 2012-13 in Tasmania has limited the available data quality and quantity of the community mental health care data; which represents a large proportion of the overall figures. Australian totals for 2011-12 and 2012-13 only include available data and should therefore be interpreted with caution. Australian totals for 2011-12 and 2012-13 should not be compared to previous years.
- (d) Indigenous information is not collected for private psychiatric hospitals.
- (e) DVA data not available by Indigenous status. MBS data are not published for 2007-08. Medicare data presented by Indigenous status have been adjusted for under-identification in the Department of Human Services (DHS) Voluntary Indigenous Identifier (VII) database. Indigenous rates are therefore modelled and should be interpreted with caution. These statistics are not derived from the total Australian Indigenous population, but from those Aboriginal and Torres Strait Islander people who have voluntarily identified as Indigenous to DHS. The statistics have been adjusted to reflect demographic characteristics of the overall Indigenous population, but this adjustment may not address all the differences in the service use patterns of the enrolled population relative to the total Indigenous population. The level of VII enrolment (61 per cent nationally as at August 2012) varies across age-sex-remoteness-State/Territory sub-groups and over time which means that the extent of adjustment required varies across jurisdictions and over time. Indigenous rates should also be interpreted with caution due to small population numbers in some jurisdictions. MBS data for 2011-12 has been updated since the 2014 Report.
- (f) A change in scope for 'public data' implemented for the 2012-13 collection period means that comparison of rates for years up to and including 2011-12 with years 2012-13 and beyond should not be made. See data quality information for additional information.

na Not available. **..** Not applicable. **np** Not published.

Source: State and territory (unpublished) specialised mental health services data; Private Mental Health Alliance (unpublished); Centralised Data Management Service data; Department of Health (unpublished) and DVA (unpublished), MBS Statistics; ABS (unpublished) Estimated Residential Population, 30 June (prior to relevant period).

TABLE 12A.45

Table 12A.45 **Proportion of young people (aged < 25 years) who had contact with MBS-subsidised primary mental health care services, by selected characteristics (per cent) (a), (b), (c), (d), (e), (f), (g), (h)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (i)</i>
<i>2011-12</i>									
Gender									
Male	4.2	4.8	3.9	3.0	4.4	3.8	3.2	1.4	4.1
Female	5.6	6.5	5.4	4.5	6.0	5.7	5.3	2.3	5.6
Remoteness areas (h)									
Major cities	4.7	5.5	5.0	3.8	5.5	..	4.2	..	4.9
Inner regional	5.6	6.2	4.8	4.1	5.5	4.9	–	..	5.4
Outer regional	4.1	5.0	3.6	3.0	3.7	4.2	..	2.0	3.7
Remote	2.4	3.6	1.9	1.4	2.6	2.6	..	1.2	1.8
Very Remote	1.6	..	0.9	0.8	0.8	3.6	..	0.3	0.7
Unallocated	–	–	–	0.1	–	–	–	0.5	–
SEIFA quintiles (h)									
Quintile 1 (most disadvantaged)	4.5	5.0	4.5	3.0	5.0	4.3	5.4	0.5	4.4
Quintile 2	4.9	5.5	4.7	3.4	5.1	4.7	4.0	1.9	4.8
Quintile 3	5.1	5.9	4.8	3.7	5.0	4.8	4.2	1.8	5.0
Quintile 4	5.0	5.7	4.5	3.6	5.4	5.3	4.4	1.9	4.9
Quintile 5 (least disadvantaged)	5.0	5.7	4.4	3.9	5.2	5.7	4.1	1.7	4.8
Unallocated	–	–	–	0.1	–	–	0.1	0.5	–
Indigenous status									
Indigenous	6.1	7.9	3.8	2.2	4.5	6.2	6.5	0.8	4.5
Non-Indigenous	4.8	5.6	4.7	3.8	5.2	4.6	4.1	2.6	4.9

TABLE 12A.45

Table 12A.45 **Proportion of young people (aged < 25 years) who had contact with MBS-subsidised primary mental health care services, by selected characteristics (per cent) (a), (b), (c), (d), (e), (f), (g), (h)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (i)</i>
<i>2012-13</i>									
Gender									
Male	4.8	5.5	4.5	3.3	4.8	4.3	3.8	1.6	4.7
Female	6.4	7.4	6.3	5.1	6.7	6.6	6.2	2.5	6.5
Remoteness areas (h)									
Major cities	5.4	6.2	5.8	4.3	6.0	..	4.9	..	5.6
Inner regional	6.5	7.2	5.4	4.8	6.3	5.6	–	..	6.2
Outer regional	4.7	5.4	4.2	3.3	4.1	5.0	..	2.2	4.3
Remote	2.7	4.0	1.9	1.7	3.1	3.3	..	1.3	2.0
Very Remote	1.5	..	0.9	0.9	1.3	3.6	..	0.3	0.8
Unallocated	–	–	–	0.1	–	–	0.1	0.5	–
SEIFA quintiles (h)									
Quintile 1 (most disadvantaged)	5.1	5.8	5.3	3.4	5.6	5.1	5.8	0.5	5.1
Quintile 2	5.6	6.4	5.5	3.9	5.7	5.4	5.1	2.1	5.5
Quintile 3	5.9	6.7	5.5	4.1	5.6	5.4	5.0	2.0	5.7
Quintile 4	5.6	6.4	5.2	4.1	5.9	5.9	5.2	2.1	5.6
Quintile 5 (least disadvantaged)	5.6	6.3	5.1	4.3	5.7	6.2	4.8	2.0	5.4
Unallocated	–	–	–	0.1	–	–	0.1	0.5	–
Indigenous status									
Indigenous	7.1	9.1	4.6	2.4	5.3	6.6	8.1	0.8	5.2
Non-Indigenous	5.5	6.4	5.4	4.3	5.7	5.3	4.9	2.8	5.6

TABLE 12A.45

Table 12A.45 **Proportion of young people (aged < 25 years) who had contact with MBS-subsidised primary mental health care services, by selected characteristics (per cent) (a), (b), (c), (d), (e), (f), (g), (h)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (i)</i>
<i>2013-14</i>									
Gender									
Male	5.2	5.9	5.2	3.8	5.4	4.9	4.3	1.7	5.2
Female	7.0	7.9	7.0	5.6	7.3	7.5	6.9	2.7	7.0
Remoteness areas (h)									
Major cities	5.8	6.6	6.4	4.7	6.6	..	5.5	..	6.0
Inner regional	7.3	7.9	6.3	5.5	7.1	6.4	–	..	7.1
Outer regional	5.5	6.0	5.0	4.0	4.6	5.6	..	2.5	4.9
Remote	3.7	5.3	2.5	2.0	3.6	3.7	..	1.1	2.4
Very Remote	2.3	..	1.1	1.3	1.6	4.4	..	0.3	1.0
Unallocated	–	–	–	0.1	–	–	0.1	0.5	–
SEIFA quintiles (h)									
Quintile 1 (most disadvantaged)	5.7	6.2	6.0	3.7	6.2	5.6	6.3	0.5	5.7
Quintile 2	6.1	7.0	6.4	4.4	6.4	6.3	5.8	2.3	6.2
Quintile 3	6.4	7.2	6.2	4.7	6.2	6.2	5.9	1.9	6.3
Quintile 4	6.0	6.9	6.0	4.5	6.6	6.8	5.9	2.4	6.1
Quintile 5 (least disadvantaged)	6.1	6.7	5.7	4.7	6.3	7.2	5.3	2.2	5.9
Unallocated	0.9	3.1	0.1	2.1	0.4	0.5	3.8	1.4	1.0
Indigenous status									
Aboriginal and Torres Strait Islander	7.7	10.4	5.7	2.9	5.7	6.7	8.6	0.9	5.9
Non-Indigenous	6.0	6.8	6.1	4.8	6.4	6.1	5.5	3.0	6.1

Table 12A.45 Proportion of young people (aged < 25 years) who had contact with MBS-subsidised primary mental health care services, by selected characteristics (per cent) (a), (b), (c), (d), (e), (f), (g), (h)

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (i)</i>
(a) Totals do not equal the sum of all mental health providers as data excludes psychiatrists. MBS items included for this indicator are as follows: – Clinical psychologist services: MBS items 80000, 80005, 80010, 80015, 80020 – GP services: MBS items 170, 171, 172, 2574, 2575, 2577, 2578, 2700, 2701, 2702, 2704, 2705, 2707, 2708, 2710, 2712, 2713, 2715, 2717, 2719, 2721, 2723, 2725, 2727 – Other allied health services: MBS items 10956, 10968, 80100, 80105, 80110, 80115, 80120, 80125, 80130, 80135, 80140, 80145, 80150, 80155, 80160, 80165, 80170, 81325, 81355, 82000, 82015.									
(b) Data are based on the date the claim was processed.									
(c) Age of the patient is based on age at last service during the reporting period. Note that in previous years, data supplied for this indicator calculated each patient's age at 30 June of each reference year.									
(d) A person is counted if any of the specified mental health item has been used in the reference period.									
(e) A patient is allocated to a state/territory based on their location as at the last service in the reference period.									
(f) The allocation to the state or territory uses a concordance (ABS ASGS 2011 Postcode to Remoteness Area/State) and splits a person where the postcode covers more than one state/territory, therefore the totals may not equal the sum of the individual cells due to rounding.									
(g) The population data used in this table are the June estimate before the the relevant financial year. For 2012-13 data, the estimate is June 2012.									
(h) Remoteness Areas and State are based on ABS ASGS 2011. State for SEIFA data are derived from the SEIFA concordance: poa11_seifa_erp2012.									
(i) The Australian total rates include young people who could not be allocated to a State or Territory. – Nil or rounded to zero. .. Not applicable.									

Source: Department of Health (unpublished); ABS (unpublished) *Australian Demographic Statistics*, Cat. no. 3101.0; ABS (2014) *Australian Demographic Statistics*, Cat. no. 3101.0.

TABLE 12A.54

Table 12A.54 **Rate of community follow up within first seven days of discharge from a psychiatric admission, by State and Territory, by Indigenous status and remoteness (a), (b)**

	<i>Unit</i>	<i>NSW</i>	<i>Vic (c)</i>	<i>Qld</i>	<i>WA</i>	<i>SA (d)</i>	<i>Tas (e)</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (f)</i>
<i>2011-12</i>										
Indigenous status										
Aboriginal and Torres Strait Islander	%	45.2	na	61.0	40.5	45.4	na	87.9	32.5	48.0
Non-Indigenous	%	53.0	na	65.0	52.5	52.6	na	78.2	47.9	56.0
Remoteness										
Major cities	%	52.5	na	62.8	53.2	53.5	na	79.5	50.0	55.9
Inner regional	%	54.6	na	69.7	50.7	41.3	na	51.9	25.0	58.4
Outer regional	%	52.8	na	67.1	44.3	41.4	na	100.0	48.9	56.6
Remote	%	39.5	na	65.7	48.2	31.0	na	..	43.1	46.2
Very remote	%	36.4	na	62.2	30.4	34.5	na	..	25.8	33.8
<i>2012-13</i>										
Indigenous status										
Aboriginal and Torres Strait Islander	%	53.9	na	72.1	46.9	39.4	15.1	68.3	40.2	55.2
Non-Indigenous	%	60.0	na	73.1	54.0	55.9	21.3	74.5	53.1	61.4
Remoteness										
Major cities	%	59.4	na	71.2	54.8	56.8	–	75.6	16.7	61.6
Inner regional	%	62.7	na	77.8	52.0	40.2	10.1	32.6	33.3	60.9
Outer regional	%	59.8	na	76.4	47.1	38.6	3.7	19.3	53.8	60.6
Remote	%	38.7	na	65.2	56.9	47.4	3.7	–	54.8	52.8
Very remote	%	60.9	na	72.2	39.2	39.2	22.2	–	33.1	41.4

(a) The Indigenous status rates should be interpreted with caution due to the varying and, in some instances, unknown quality of Indigenous identification across jurisdictions. Excludes people for whom demographic information was missing or not reported.

Table 12A.54 **Rate of community follow up within first seven days of discharge from a psychiatric admission, by State and Territory, by Indigenous status and remoteness (a), (b)**

<i>Unit</i>	<i>NSW</i>	<i>Vic (c)</i>	<i>Qld</i>	<i>WA</i>	<i>SA (d)</i>	<i>Tas (e)</i>	<i>ACT</i>	<i>NT</i>	<i>Aust (f)</i>
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(b) Disaggregation by remoteness area is based on a person's usual residence, not the location of the service provider. State/territory is the state/territory of the service provider. Excludes people for whom demographic information was missing or not reported.

(c) For public sector community mental health services, Victorian data are unavailable due to service level collection gaps resulting from protected industrial action during this period.

(d) SA submitted data that was not based on unique patient identifier or data matching approaches.

(e) Industrial action in Tasmania limited the available data quality and quantity of 2011-12 and 2012-13 community data.

(f) Due to data supply issues, Australian totals should be interpreted with caution.

na Not available. – Nil or rounded to zero. .. Not applicable.

Source: AIHW (unpublished) from data provided by State and Territory health authorities from admitted patient and community mental health care data.

TABLE 12A.57

Table 12A.57 Readmissions to hospital within 28 days of discharge, by selected characteristics, 2012-13 (a), (b), (c), (d)

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld (e)</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>
<i>Age group</i>										
Less than 15 years	%	15.7	19.9	8.8	8.1	14.7	na	na	–	13.8
15–24 years	%	14.0	19.8	16.5	14.6	11.7	14.9	18.6	12.2	15.9
25–34 years	%	16.6	15.9	15.2	14.0	7.0	14.5	15.5	10.2	15.1
35–44 years	%	15.6	13.9	13.9	14.7	7.3	12.3	14.1	11.9	14.2
45–54 years	%	14.0	11.9	13.6	14.2	6.4	14.4	11.1	9.5	12.9
55–64 years	%	11.8	11.2	14.0	10.8	6.3	5.7	13.2	–	11.3
65–74 years	%	13.1	9.6	9.5	9.8	5.6	10.2	8.8	8.3	10.2
75 years or over	%	9.1	5.0	8.7	5.9	6.1	–	12.5	na	6.9
<i>Gender</i>										
Male	%	13.9	13.2	14.1	12.6	7.0	12.3	13.8	11.2	13.1
Female	%	–	–	–	–	–	–	–	–	–
<i>SEIFA quintiles (d)</i>										
Quintile 1 (most disadvantaged)	%	13.6	16.0	14.3	14.0	7.0	13.1	–	11.2	13.7
Quintile 2	%	15.1	13.1	12.8	14.5	6.1	21.4	15.1	12.5	13.4
Quintile 3	%	14.9	14.7	13.6	13.0	10.0	6.6	20.3	9.8	13.9
Quintile 4	%	15.3	14.4	15.0	14.2	10.8	10.4	15.2	10.5	14.4
Quintile 5 (least disadvantaged)	%	15.7	15.1	15.6	10.9	6.3	–	13.9	8.6	14.4
<i>Indigenous status</i>										
Aboriginal and Torres Strait Islander	%	18.1	17.7	15.6	14.4	6.6	10.8	12.7	14.3	16.0
Non-Indigenous	%	14.4	14.7	14.3	13.3	8.2	12.9	14.8	7.0	13.9
<i>Remoteness (d)</i>										
Major cities	%	14.9	15.4	14.9	13.5	8.3	10.0	14.9	8.3	14.3
Inner regional	%	14.6	13.1	13.2	12.6	6.1	11.8	–	–	13.4

Table 12A.57 Readmissions to hospital within 28 days of discharge, by selected characteristics, 2012-13 (a), (b), (c), (d)

	<i>Unit</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld (e)</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Aust</i>
Outer regional	%	12.6	11.1	12.6	13.8	4.1	15.5	10.0	9.9	12.1
Remote	%	19.4	11.5	6.7	11.9	5.5	11.1	na	10.6	11.4
Very remote	%	17.4	–	8.9	7.5	15.4	11.1	na	12.3	11.0

- (a) Data are based on all 'in scope' separations from State and Territory psychiatric inpatient units, defined as those for which it is meaningful to examine readmission rates. The following separations were excluded: same day separations; overnight separations that occur through discharge/transfer to another hospital; statistical discharge — type change; left against medical advice/discharge at own risk and death.
- (b) For the purposes of this indicator, a readmission for any of the separations identified as 'in-scope' is defined as an admission to any other public psychiatric acute unit within the jurisdiction that occurs within 28 days of the date of the original separation. For this to occur a system of unique client identifiers needs to be in place that allows individuals to be 'tracked' across units. Such systems have been available in all states/territories for the full period (2005-06 to 2012-13), with the exception of Tasmania (which introduced such a system in 2012-13) and SA (which has not yet introduced such a system). Undercounting of readmissions may have occurred in SA and Tasmania in the years that the system of unique identifiers is not in place.
- (c) No distinction is made between planned and unplanned readmissions because data collection systems in most Australian mental health services do not include a reliable and consistent method to distinguish a planned from an unplanned admission to hospital.
- (d) Remoteness and socioeconomic status have been allocated using the client's usual residence, not the location of the service provider. State/territory is reported for the state/territory of the service provider.
- (e) For Qld, inpatient identifiers are unique at a hospital level. A routine linkage program is utilised to create a unique identifier for reporting purposes.
- na** Not available. – Nil or rounded to zero.

Source: AIHW (unpublished) from data provided by State and Territory health authorities.

TABLE 12A.65

Table 12A.65 **Recent drinkers lifetime and single occasion risk, people aged 14 years or older, by social characteristics, 2013 (per cent)**

	Abstainers (a)	Lifetime risk		Single occasion risk		
		Low risk (b)	Risky (c)	Low risk (d)	At least yearly (e)	At least weekly (f)
<i>Socioeconomic status</i>						
Quintile 1 (lowest)	31.1	53.0	15.9	36.3	19.5	13.0
Quintile 2	24.4	57.6	18.0	39.6	21.5	14.6
Quintile 3	20.9	59.9	19.2	39.9	24.3	15.0
Quintile 4	18.6	62.4	19.0	42.3	24.4	14.7
Quintile 5 (highest)	16.7	65.0	18.4	42.1	27.6	13.6
<i>Geography</i>						
Major cities	23.1	60.2	16.7	40.4	23.5	13.0
Inner regional	18.9	62.0	19.1	41.8	24.4	14.9
Outer regional	20.5	56.9	22.6	38.1	23.6	17.8
Remote/Very remote	17.5	47.6	34.9	30.8	22.8	28.9
<i>Indigenous status</i>						
Aboriginal and/or Torres Strait Islander	27.9	49.4	22.7	22.4	29.8	19.9
Non-Indigenous	21.7	60.2	18.1	40.6	23.5	14.1

(a) Not consumed alcohol in the previous 12 months.

(b) On average, had no more than 2 standard drinks per day.

(c) On average, had more than 2 standard drinks per day.

(d) Never had more than 4 standard drinks on any occasion.

(e) Had more than 4 standard drinks at least once a year but not as often as weekly.

(f) Had more than 4 standard drinks at least once a week.

Source: AIHW (2014) *National Drug Strategy Household Survey detailed report 2013*, Drug statistics series no. 28, Cat. no. PHE 183, Canberra.

TABLE 12A.74

Table 12A.74 **Illicit drug use, people aged 14 years or older, by social characteristics (per cent) (a)**

	<i>Never used</i>			<i>Ex-users (b)</i>			<i>Recent users (c)</i>		
	2007	2010	2013	2007	2010	2013	2007	2010	2013
<i>All illicit drugs</i>									
<i>Socioeconomic status</i>									
Quintile 1 (lowest)	65.1	64.0	61.6	21.1	20.9	22.5	13.8	15.1	15.9
Quintile 2	65.3	61.8	59.7	23.4	22.7	25.4	11.4	15.5	15.0
Quintile 3	64.2	60.4	57.4	22.2	26.0	27.7	13.6	13.6	14.9
Quintile 4	60.5	59.5	57.5	26.2	26.5	27.9	13.3	14.0	14.6
Quintile 5 (highest)	59.5	57.1	56.3	26.0	27.7	28.7	14.5	15.2	15.0
<i>Geography</i>									
Major cities	62.5	60.6	59.1	23.7	24.6	26.0	13.8	14.8	14.9
Inner regional	64.4	61.2	58.0	23.8	24.9	27.9	11.8	13.9	14.1
Outer regional	61.0	59.9	55.9	26.2	25.0	27.4	12.8	15.0	16.7
Remote/Very remote	51.8	50.8	49.9	27.6	31.9	31.4	20.6	17.2	18.7
<i>Indigenous status</i>									
Aboriginal and/or Torres Strait Islander	47.1	46.5	47.4	28.5	28.5	28.5	24.4	25.0	24.1
Non-Indigenous	62.7	60.8	58.6	24.2	25.1	26.6	13.1	14.2	14.8
<i>Cannabis</i>									
<i>Socioeconomic status</i>									
Quintile 1 (lowest)	70.9	68.7	69.7	20.0	21.0	20.0	9.0	10.3	10.3
Quintile 2	70.6	66.5	67.0	22.3	22.8	22.9	7.2	10.7	10.1
Quintile 3	69.1	64.5	63.1	21.9	25.4	26.2	8.9	10.1	10.7
Quintile 4	65.0	63.8	64.2	26.0	26.8	25.9	9.0	9.4	9.9
Quintile 5 (highest)	64.0	60.6	63.1	26.4	28.4	26.9	9.5	11.1	10.0
<i>Geography</i>									
Major cities	67.5	64.8	66.0	23.6	24.8	24.2	8.9	10.4	9.8
Inner regional	69.1	65.5	65.0	23.0	24.7	24.9	7.9	9.8	10.1
Outer regional	66.1	64.2	63.1	24.9	25.4	24.9	9.0	10.4	12.0
Remote/Very remote	58.3	55.2	56.1	27.6	33.4	30.3	14.1	11.4	13.6
<i>Indigenous status</i>									
Aboriginal and/or Torres Strait Islander	57.6	52.0	54.4	26.9	29.5	26.6	15.5	18.5	19.0
Non-Indigenous	67.4	64.8	65.4	23.8	25.2	24.6	8.7	10.0	10.0
<i>Ecstasy</i>									
<i>Socioeconomic status</i>									
Quintile 1 (lowest)	93.4	92.0	91.8	4.1	6.2	6.6	2.5	1.9	1.6
Quintile 2	93.8	90.8	91.5	4.0	6.6	6.6	2.3	2.5	2.0
Quintile 3	91.9	90.1	89.1	4.5	7.3	8.0	3.7	2.7	3.0
Quintile 4	90.6	88.7	88.9	5.8	8.1	8.3	3.6	3.1	2.8

TABLE 12A.74

Table 12A.74 **Illicit drug use, people aged 14 years or older, by social characteristics (per cent) (a)**

	<i>Never used</i>			<i>Ex-users (b)</i>			<i>Recent users (c)</i>		
	2007	2010	2013	2007	2010	2013	2007	2010	2013
Quintile 5 (highest)	88.7	87.6	88.6	6.7	8.0	8.5	4.6	4.4	2.9
<i>Geography</i>									
Major cities	90.4	88.9	89.3	5.7	7.8	7.9	3.9	3.3	2.9
Inner regional	93.8	91.9	91.9	3.8	6.1	6.6	2.5	2.0	1.5
Outer regional	93.7	91.9	91.7	4.5	5.9	6.7	1.8	2.2	1.6
Remote/Very remote	88.8	86.4	87.1	6.6	9.5	11.1	4.6	*4.1	*1.8
<i>Indigenous status</i>									
Aboriginal and/or Torres Strait Islander	90.2	89.9	89.3	6.1	*7.0	9.7	3.7	*3.0	**1.1
Non-Indigenous	91.4	89.7	89.9	5.2	7.3	7.6	3.4	3.0	2.5
<i>Meth/amphetamines</i>									
<i>Socioeconomic status</i>									
Quintile 1 (lowest)	93.8	92.9	93.4	3.9	4.7	4.4	2.3	2.4	2.2
Quintile 2	95.0	92.9	93.7	3.1	5.0	4.1	1.8	2.1	2.1
Quintile 3	94.3	93.4	92.3	3.2	4.5	5.3	2.5	2.1	2.4
Quintile 4	93.5	92.8	94.1	4.2	5.4	4.1	2.2	1.8	1.8
Quintile 5 (highest)	93.5	93.2	94.3	4.3	4.8	3.9	2.2	2.0	1.8
<i>Geography</i>									
Major cities	93.6	92.8	93.6	3.9	5.1	4.3	2.5	2.0	2.1
Inner regional	95.1	93.8	94.3	3.2	4.1	4.1	1.7	2.0	1.6
Outer regional	94.3	94.1	94.0	4.1	4.4	4.0	1.6	1.5	2.0
Remote/Very remote	91.3	88.8	87.0	5.7	7.2	8.6	3.0	*4.0	*4.4
<i>Indigenous status</i>									
Aboriginal and/or Torres Strait Islander	92.2	92.4	89.8	5.5	*4.0	7.0	2.3	*3.6	*3.1
Non-Indigenous	94.0	93.1	93.7	3.8	5.0	4.3	2.2	2.0	2.0
<i>Cocaine</i>									
<i>Socioeconomic status</i>									
Quintile 1 (lowest)	96.4	95.0	94.2	3.2	4.0	4.6	0.5	1.0	1.2
Quintile 2	96.1	94.7	94.2	3.2	3.9	4.4	0.7	1.4	1.4
Quintile 3	95.1	93.0	92.7	3.7	5.5	5.4	1.2	1.5	1.9
Quintile 4	93.8	92.2	91.2	4.4	5.6	6.3	1.8	2.2	2.5
Quintile 5 (highest)	90.7	89.5	90.0	6.0	6.2	6.5	3.3	4.3	3.5
<i>Geography</i>									
Major cities	93.1	91.8	91.6	4.8	5.6	5.8	2.1	2.6	2.6
Inner regional	96.8	94.7	94.7	2.6	4.3	4.5	0.6	1.0	0.8
Outer regional	95.3	95.7	94.1	4.3	3.4	4.8	0.4	*0.9	*1.1
Remote/Very remote	95.0	92.6	92.0	2.7	5.3	5.6	2.3	**2.0	*2.5

Table 12A.74 **Illicit drug use, people aged 14 years or older, by social characteristics (per cent) (a)**

	<i>Never used</i>			<i>Ex-users (b)</i>			<i>Recent users (c)</i>		
	2007	2010	2013	2007	2010	2013	2007	2010	2013
<i>Indigenous status</i>									
Aboriginal and/or Torres Strait Islander	92.4	95.9	93.4	6.3	*3.2	4.8	1.3	**0.9	*1.9
Non-Indigenous	94.2	92.7	92.3	4.2	5.2	5.5	1.6	2.1	2.2

(a) Results subject to RSEs of between 25 per cent and 50 per cent should be considered with caution and those with relative standard errors greater than 50 per cent should be considered as unreliable for most practical purposes. Estimates that have RSEs greater than 50 per cent are marked with " ** " and those with RSEs of between 25 per cent and 50 per cent are marked with " * ".

(b) Used, but not in the previous 12 months.

(c) Used in the previous 12 months.

Source: AIHW (2014) *National Drug Strategy Household Survey detailed report 2013*, Drug statistics series no. 28, Cat. no. PHE 183, Canberra.

Table 12A.84 Suicide deaths, by Indigenous status, 2008–2012 (a), (b), (c), (d), (e), (f), (g)

	<i>NSW</i>	<i>Vic</i>	<i>Qld (h)</i>	<i>WA (i)</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total (j)</i>
<i>Number</i>									
Aboriginal and Torres Strait Islander	93	np	166	150	37	np	np	115	561
Non-Indigenous	3 087	np	2 606	1 331	908	np	np	96	8 028
Total	3 180	np	2 772	1 481	945	np	np	211	8 589
<i>Suicide rate per 100 000 (i), (j), (k)</i>									
Aboriginal and Torres Strait Islander	11.4	np	18.3	35.2	21.0	np	np	29.3	20.1
Non-Indigenous (l)	8.7	np	12.3	11.9	11.2	np	np	12.1	10.4

- (a) All causes of death data from 2006 onward are subject to a revisions process — once data for a reference year are 'final', they are no longer revised. Affected data in this table are: 2008-2010 (final), 2011 (revised), 2012 (preliminary). See Explanatory Notes 29-33 and Technical Notes, Causes of Death Revisions, 2006 in Causes of Death, Australia, 2010 (Cat. no. 3303.0) and Causes of Death Revisions, 2010 and 2011 in Causes of Death, Australia, 2012 (Cat. no. 3303.0).
- (b) Data are based on State or Territory of usual residence.
- (c) Intentional self-harm includes ICD-10 codes X60-X84 and Y87.0.
- (d) Data are presented in five-year groupings due to the volatility of small numbers each year.
- (e) Data based on reference year.
- (f) Data on deaths of Aboriginal and Torres Strait Islander Australians are affected by differing levels of coverage of deaths identified as Aboriginal and Torres Strait Islander Australians across states and territories. Care should be exercised in analysing these data, particularly in making comparisons across states and territories and between the Aboriginal and Torres Strait Islander and non-Indigenous data.
- (g) Deaths where the Indigenous status of the deceased was not stated are excluded from analysis.
- (h) Care should be taken when interpreting deaths data for Queensland as they are affected by recent changes in the timeliness of birth and death registrations. Queensland deaths data for 2010 have been adjusted to minimise the impact of late registration of deaths on mortality indicators. See data quality statements for a more detailed explanation.
- (i) Aboriginal and Torres Strait Islander data for WA were not published in Causes of Death, Australia, 2010 (cat. no. 3303.0) due to investigations being undertaken regarding the volatility of this data. Subsequently, Aboriginal and Torres Strait Islander deaths data in WA for the years 2008 and 2009 were adjusted to correct for potential over-reporting in this period. This data was released on 22 June, 2012 in Causes of Death, Australia, 2010 (Cat. no. 3303.0). This adjusted data has been included in this table.
- (j) Total includes data for NSW, Queensland, WA, SA and the NT only. These five states and territories have been included due to there being evidence of sufficient levels of identification and sufficient numbers of deaths to support mortality analysis.
- (k) Denominators used in the calculation of rates for the Indigenous population are Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians (ABS Cat. no. 3238.0, series B, 2011 base). There are no comparable population data for the non-Indigenous population. Denominators used in the calculation of rates for comparison with the Indigenous population have been derived by subtracting Aboriginal and Torres Strait Islander population estimates/projections from total estimated resident population and should be used with care, as these data include population units for which Indigenous status were not stated.

Table 12A.84 **Suicide deaths, by Indigenous status, 2008–2012 (a), (b), (c), (d), (e), (f), (g)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld (h)</i>	<i>WA (i)</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total (j)</i>
(l) Age-standardised death rates enable the comparison of death rates between populations with different age structures by relating them to a standard population. The current ABS standard population is all persons in the Australian population at 30 June 2001. Standardised death rates (SDRs) are expressed per 100 000 persons. SDRs in this table have been calculated using the indirect method, age standardised by five year age group to 75 years and over. Rates calculated using the indirect method are not comparable to rates calculated using the direct method.									

np Not published.

Source: ABS (unpublished) *Causes of Death, Australia*, Cat. no. 3303.0; ABS (2014) *Estimates and Projections, Aboriginal and Torres Strait Islander Australians*, 2001 to 2026, cat. no. 3238.0.