

Productivity Commission
National Mental Health and Suicide Prevention Strategy Review
August 2025

Equity in access to mental health services

Royal Australian and New Zealand College of Psychiatrists Submission

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

About the Royal Australian and New Zealand College of Psychiatrists

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) is responsible for training, educating and representing psychiatrists in Australia and New Zealand. The RANZCP has more than 8900 members, including around 6100 qualified psychiatrists.

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

Recommendations

Following the interim report, the RANZCP reiterates the importance of the recommendations made in its initial submission and makes the following additional recommendations:

- Cultural safety and intersectionality of mental health service delivery be included in the successor agreement.
- Emerging socio-economic and environmental challenges should be explicitly addressed.
- Early intervention programs for infant, children, and adolescents be revisited and incorporated.

Introduction

The RANZCP acknowledges the significant work already undertaken by the Commission in reviewing the National Mental Health and Suicide Prevention Agreement. As highlighted in the interim report, the current Agreement has not delivered meaningful change to the provision and regulation of mental health services and suicide prevention.

In our initial submission, the RANZCP recommended that the current state of the mental health system in Australia be considered a factor in the review. The current workforce shortages, wait times, burnout and access are markers of an agreement that has failed to produce cohesion and unity of services across states and territories.

The Interim Report

The RANZCP welcomes the Commission's identification of key structural and systemic issues, including:

- Persistent fragmentation in the mental health and suicide prevention system
- Lack of process on reform despite commitments made in the Agreement
- The absence of meaningful accountability mechanisms
- The need for renewed policy architecture and a longer-term strategic framework.

The RANZCP supports the proposal for a successor agreement that includes:

Royal Australian and New Zealand College of Psychiatrists Submission

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

- A clear set of long-term objectives, set out by the National Suicide Prevention Strategy and a renewed National Mental Health Agreement.
- Specific and measurable outcomes with an evaluation framework to ensure accountability.
- Tangible outcomes mapped to each of the Agreements objectives.

Additional Recommendations

Cultural Safety and Intersectionality

The RANZCP highlights the importance of cultural considerations and their intersection in mental health. It is important to recognise that culturally safe services for first nations, multicultural and linguistically diverse communities [help improve service access and health outcomes](#).

Societal and Environmental Drivers of Mental Health

The Agreement must take into account emergent and ongoing social and environmental determinants of mental health, including:

- Climate change
- socio-economic disparity
- Gender-specific mental health issues and gender-based violence,

These complex challenges are experienced at a [societal/population level](#) and require a whole-of-system approach. There is [evidence of increasing mental health disorders](#) and rates of suicide contributed to by these issues. Early intervention and preparedness are essential in preventing escalation and reducing long-term burden on the health system.

Early Intervention for Young People

The RANZCP recommends the inclusion of specific prevention and early intervention programs targeted at infants, children, and adolescents. These should focus on:

- Early identification of persistent and severe mental health issues (PSMHI).
- Mitigating the impacts of adverse childhood experiences
- Strengthening services that reduce long-term mental health burden across the lifespan

Information Requests

Information Request 4.1

The succeeding Agreement should include an additional schedule which brings together existing policy and strategy documents which cover the intersection of mental health issues and problematic AOD usage.

[Recognising AOD related harm as a mental health condition](#) will support AOD service design and delivery.

Information Request 4.2

Royal Australian and New Zealand College of Psychiatrists Submission

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

Best practice for consulting and recruiting LLE subject matter experts must be done in accessible forums for consumers.

Government and mental health service consultation must be available in multiple languages. When consultation is only available in English, meaningful contribution by non-English and non-native English speakers is inhibited.

Codesign with LLE must be flexible, offering adaptation of consultation and co-design processes to ensure that LLE is a core part of the process.

Information Request 4.3

A publicly accessible dashboard to track and report progress of the Agreement will support consumers and policy makers. Accountability for federal, state and territory governments is essential to ensure the goals of the Agreement are delivered.

The dashboard should show funding and implementation progress for each of the Agreements deliverables, broken down at federal and state/territory level.

Information Request 4.4

Peer support workers are crucial to providing culturally safe care and supporting consumers.

It is vital that peer support work retains its unique lived experience foundation. A standardised, "one fits all" model is not effective across all communities and cultural contexts. The strength of peer support lies in its ability to offer experience-informed perspectives to support consumers and their specific needs.

It is important to educate and acclimatise a community to the role of peer support works prior to their implementation. This ensures the community is ready to adopt the services and mitigates low uptake.

Peer support can and should be implemented across the whole spectrum of mental health and social services.

Summary

The Agreement and its successor must prioritise access, accountability, and effective implementation to address the mental health needs of Australia.

The additional recommendations and information provided in this submission should be considered alongside [our initial submission](#).

The RANZCP is grateful for the opportunity to contribute to this important review and remains committed to working with governments and stakeholders to improve mental health outcomes for all Australians. For further discussions or to address any matters raised in this submission, please contact us at policy@ranzcp.org.