Regional and Rural Young People

Australian young people living outside of capital cities and other major urban population centres encounter a number of challenges that are not normally part of the everyday experience of young people living in metropolitan areas. The challenges include obtaining access to suitable and appropriate health and welfare services, education and training, paid employment, economic stability and recreational opportunities.¹

An inability to access these services, coupled with other stresses that are part of regional and rural lifestyles, results in these young people generally being less likely than their metropolitan counterparts to commence university studies or undertake vocational training. They are more likely to smoke, use alcohol and other drugs and be physically inactive than young people in metropolitan settings.² ³

These health risk behaviours are compounded by the fact that regional and rural young people experience: restricted access to health services because of fewer rural and remote general practitioners; less choice of medical services; limited privacy when it comes to accessing health and psychological support services; lower rates of bulk billing; and less access to medical specialists and major hospitals.⁴ As a consequence, the health status of these young people is generally poorer than that of their metropolitan counterparts. They may be more likely to experience depression which goes untreated; and they are more likely to engage in dangerous behaviours that result in accidental injury and death.⁴ ⁵

There are frequent references in the literature to increased rates of suicide and other forms of deliberate self injury amongst young people living in regional and rural communities, and in particular amongst young males.¹ ⁴ ⁵ Young people living in non-metropolitan areas themselves have identified suicide as a major concern.⁵ The Australian Institute of Health and Welfare has provided some population data to support a trend toward higher rates of suicide amongst young people, particularly young males, living in regional and rural communities.⁹

Research indicates that people living in metropolitan settings are more likely than those living outside of metropolitan areas to make use of general health and mental health services.⁶ Females are more likely than males to seek out those services. Males living in rural areas are less likely than males living in metropolitan areas or females living in rural areas to use health or mental health services. Researchers attribute these geographical and gender differences to the attitudes of rural males that favour self reliance and stoicism or which stigmatise poor health or mental health as weakness. Australian research indicates that young rural males are less willing and able than young females to talk with other young people or with service providers about stress and depression. They are also less likely than young females to report feelings of anxiety.² ⁵

Family and friendship relationships have been linked as key considerations with regional and rural young people’s psychological wellbeing, although the influence on wellbeing is very complex.⁷ ⁸ On one hand, strong positive relationships with family and friends are extremely important for developing a sense of wellbeing. At the same time, family and friendship group pressures have been linked with impaired wellbeing.⁸ The importance of maintaining these close personal ties is often confounded by young people having to leave family and friends behind when they relocate to larger regional or metropolitan centres in order to continue with their education or find employment. Relocation may be accelerated by drought and by the general decline in rural industries that have seen many families struggling to come to terms with selling rural holdings and relocating to larger population centres where there is the increased likelihood of education, employment, recreational activity and economic sustainability.⁹ ¹⁰

Rural and Remote Clients of Kids Helpline

The following is a summary of counselling contacts with young people (5 to 18 year olds) from regional and rural areas with Kids Helpline over the 7-year period from 2001 to 2007.

There were a total of 571,936 attempts to reach Kids Helpline by phone, email or web contact in 2007 of which 308,699 were answered (54% response). Over 90% of the attempts and response was via the phone. Between 2001 and 2007, 64% of all counselling contacts with Kids Helpline came from metropolitan areas and 36% came from rural and remote areas*. As shown in Figure 1, from 2003 there has been a steady decline in contact from regional centres and an increase in metropolitan contacts.

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¹ Metropolitan areas are those centres with populations of over 100,000; regional and remote centres are those with populations of 99,000 or less.
Gender and cultural background

The proportion of young girls consistently formed around 75% of all Kids Helpline contact, both among rural and metropolitan children over the past seven years (Figure 2). This figure also shows that the proportion of girls from the rural and remote areas contacting Kids Helpline has increased since 2002. Among boys, however, the proportion of both rural/remote and metropolitan callers have fallen slightly since 2003, more so among the latter. These proportions have levelled out from 2006.

* Anglo Australian and Indigenous figures are shown together but on different scales to highlight change over the years.

Concerns of Regional and Rural Counselling Clients

The concerns of regional and remote counselling clients are largely similar as shown in Table 1.

In 2007, the ten main problem types varied slightly between calls from the rural and remote based children and young people and calls from those metropolitan based. The most common problem type for both groups of callers was issues relating to relationships with their family and friends. However children and young people from rural and remote areas were more likely to seek assistance on family relationship issues.
Table 1: Ten main problem types identified in young callers to Kids Helpline by location of caller 2007

<table>
<thead>
<tr>
<th></th>
<th>Metropolitan</th>
<th>Rural/ remote</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship with Family</td>
<td>15.36</td>
<td>19.42</td>
</tr>
<tr>
<td>Mental Health issues</td>
<td>12.50</td>
<td>10.69</td>
</tr>
<tr>
<td>Emotional/ Behavioural issues</td>
<td>10.33</td>
<td>7.96</td>
</tr>
<tr>
<td>Relationship with partner</td>
<td>8.33</td>
<td>7.92</td>
</tr>
<tr>
<td>Relationship with peers</td>
<td>7.25</td>
<td>8.71</td>
</tr>
<tr>
<td>Physical, emotional and sexual abuse</td>
<td>5.91</td>
<td>7.96</td>
</tr>
<tr>
<td>Homeless</td>
<td>5.77</td>
<td>5.33</td>
</tr>
<tr>
<td>Suicide</td>
<td>3.80</td>
<td>4.28</td>
</tr>
<tr>
<td>Bullying</td>
<td>3.05</td>
<td>2.73</td>
</tr>
<tr>
<td>Grief</td>
<td>2.70</td>
<td>2.39</td>
</tr>
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</table>

The trends in problem types over the past seven (7) years also differ between children and young people from metropolitan and regional and remote areas (Figures 5 and 6).

Relationship issues with family were the primary concern for all these children and young people throughout the seven year period. Among rural/remote children and young people, the proportion of calls for this reason was steady at around 20% of all calls. Among metropolitan children and young people, this proportion has fallen gradually to around 15% in 2007. Data on Emotional and Behavioural issues was collected by Kids HelpLine for the past five years and they are prominent for both groups of children (10% of all contact in 2007).

Counselling Support for Regional and Rural Young People

Kids Helpline provides crucial support for regional and rural young people in circumstances where they have limited access to health and welfare services and are coping with the stresses of regional and rural lifestyles. It offers a service for young people who are looking for a private and confidential method of managing a health or mental health concern.

Breaking down the perceptions of seeking help for health and mental health issues as shameful or as a sign of character weakness is a major barrier to young people, particularly young males, in rural and remote Australia engaging with local health services. Strategies to encourage help seeking behaviour by children and young people in rural and remote areas and in particular those that target young men need to be implemented by both Government and the community sector.
Kids Helpline also receives ‘non-problem’ contacts from young people who are bored, lonely or feeling neglected. Over 2% of calls from rural and remote areas and just over 1% of metropolitan contacts are of this category.

Kids Helpline fulfils an important role, along with help line services for adults, as a counselling service that is available anonymously 24 hours a day, seven days a week to all young people anywhere in Australia.

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References

6 Jackson, H. et. al. (2007). Mental health problems in rural contexts: Where are the barriers to seeking help from professional providers? Australian Psychologist, 42, 147-160.