

Rural and remote psychological service delivery:
Perceptions of rural psychologists, general practitioners,
and community members

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Abstract

This thesis explores psychological service delivery from the perspectives of three key stakeholders: fly-in, fly-out (FIFO) and drive-in, drive-out (DIDO) rural and remote psychologists; rural and remote General Practitioners (GPs); and rural and urban community members. The thesis builds on previous research with resident rural psychologists in exploring what is required of rural psychologists and psychological services in the context of unique challenges, including a lack of access to psychologists, ethical challenges, and poorer health and mental health outcomes for rural communities.

This thesis is comprised of three studies. Study 1 is a qualitative exploration of the experiences of FIFO/DIDO rural and remote psychologists. Study 2 is a qualitative exploration of the experiences of rural and remote GPs. These studies employed purposive sampling and a semi-structured interview format, and were subject to thematic analysis. Study 3 is a quantitative survey comparing rural and urban community members' understandings and perceptions of psychologists and psychology services.

The findings are presented in the form of four papers. FIFO/DIDO psychologists, as described in Paper 1, face similar challenges to resident rural psychologists, but also face additional unique personal and professional challenges due to working away from home, including caring for dependents, managing fatigue, greater intensity of work, and logistical challenges. While FIFO/DIDO work arrangements are contentious, there may be personal and professional advantages for psychologists, including financial and time compensation, greater support and fewer ethical dilemmas compared to resident rural psychologists. Support required to provided FIFO/DIDO services may include an appropriate induction into the community, the availability of local support, and appropriate compensation for lifestyle impacts.

GPs were the focus of Papers 2 and 3. Participants highlighted how rural psychologists may be a source of support for rural GPs and vice versa. While rural GPs tend to hold positive views about psychologists, they report challenges in communicating with psychologists, and gaps in their knowledge of psychologists' training and expertise. Given the knowledge gaps identified, Paper 3 is written for a GP professional audience and outlines '6 top tips' about working with psychologists.

Paper 4 reports on the results of Study 3, the quantitative survey. Rural participants were significantly less likely than urban participants to have seen a psychologist, more likely to perceive seeing a psychologist as helpful, more likely to endorse travel as a barrier to seeing a psychologist, scored significantly lower on a multiple-choice test of knowledge about psychologists, and were less aware of Medicare rebates for psychological services, highlighting a gap between rural and urban Australians regarding knowledge and understanding of psychologists.

This thesis demonstrates a need for greater awareness and initiatives to improve understanding of psychologists amongst rural GPs and rural communities, and highlights opportunities of alternative service delivery models (such as FIFO/DIDO) in addressing recruitment and retention problems in the rural psychology workforce. The findings of this thesis have implications in terms of models of rural psychological service delivery, professional development and education for rural psychologists and GPs, mental health and Medicare policy in rural areas, recruitment and retention, and primary care psychology.

Statement of originality of the work

I certify that this work contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text.

In addition, I certify that no part of this work will, in the future, be used in a submission for any other degree or diploma in any university or other tertiary institution without the prior approval of the University of Adelaide and where applicable, any partner institution responsible for the joint-award of this degree.

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List of publications arising from this thesis

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