13 Mental health workforce

13.1 Introduction

Information is presented in this chapter on the size and characteristics of the workforces of professionals specialised in mental health care, which include psychiatrists and mental health nurses. For information on psychologists, please refer to the previous publication *Mental health services in Australia* 2004–05, as there have been no new data available.

Other health care professionals and workers who can provide mental health-related services, such as GPs, counsellors, social workers, general nurses, and unpaid carers are not covered, as equivalent workforce data are not available.

Key concepts

In this report, an **employed** health professional is defined as one who:

- worked for a total of 1 hour or more, principally in the relevant profession, for pay, commission, payment in kind, or profit; mainly or only in a particular state or territory during a specified period (for psychiatrists, at the time of the survey; and for nurses, in the week before the survey); or
- usually worked but was away on leave (with some pay) for less than 3 months, on strike or locked out, or rostered off.

This includes those involved in both clinical and non-clinical roles (such as education, research, and administration). Employed people are also referred to as the workforce in this chapter.

Full-time equivalent (FTE) is the number of 38-hour-week workloads worked by professionals. FTE is calculated by multiplying the number of employed professionals in a particular category by the average total hours worked by employed people in the category, and dividing by 38 (with 38 hours being considered, for this report, a standard working week). The FTE per 100,000 population figures provide a standardised measure of supply of the number of FTE professionals per relevant 100,000 population.

The standard of 38 hours was used in this report to provide comparable figures between the professions covered. This differs from the approach used in *Mental health services in Australia* reports published before 2004–05, and with data on the medical and nursing labour force published by the AIHW (AIHW 2008a, 2008b). FTE numbers presented in this chapter will, therefore, not be comparable with those reports.

Total hours are the total hours worked per week in the profession, including paid and unpaid work. Average total weekly hours are calculated only for those people who reported their hours (that is, those who did not report them are excluded).

It should be noted that the numbers presented in this chapter are estimates, based on responses to the AIHW labour force surveys, as outlined in Appendix 1. While the data are weighted to population benchmarks (which are based on professional registration numbers for the AIHW survey data), not all possible non-response bias can be accounted for or measured. In addition, the survey questionnaires, while generally consistent in content and design, have been modified over time and can vary by jurisdiction. As a result, care needs to be taken in interpreting changes in numbers and rates, and variations across states and territories.

13.2 Psychiatrists and psychiatrists-in-training

Estimates on the number of psychiatrists and psychiatrists-in-training practising in Australia are available from the AIHW Medical Labour Force Survey. As described more fully in the description of the AIHW surveys in Appendix 1, the state and territory health departments, in consultation with the AIHW and in cooperation with the medical registration boards in each jurisdiction, conduct this survey of all registered medical practitioners annually.

Psychiatrists and psychiatrists-in-training self-identify in the AIHW survey. Subsequent weighting of responses, using registration data as benchmarks, provides estimates of the total number of psychiatrists and psychiatrists-in-training at the state and territory and national levels.

For the purposes of this report, estimates of the psychiatrist workforce are based on psychiatrists and psychiatrists-in-training who stated that they were *employed* as a medical practitioner at the time of the survey. This includes those working predominantly in non-clinical areas, such as research, education and administration, as well as clinicians. However, medical practitioners practising psychiatry as a second or third speciality are excluded, as are those who were on extended leave for more than 3 months or who were not employed (including those looking for work).

To enable meaningful comparisons in the supply of psychiatrists across Australia, over time and with the nursing workforce data in this chapter, *full-time-equivalent* (*FTE*) figures are provided in addition to the number of psychiatrists. The FTE measures the number of 38-hour-week workloads worked by psychiatrists, regardless of how many worked full-time or part-time. Population standardised FTE figures (FTE per 100,000 population) are also reported, as these take into account differences in the size of the relevant populations between regions and over time.

Characteristics of the psychiatrist workforce

Psychiatrists (including psychiatrists-in-training) made up 5.3% of all employed medical practitioners in Australia, with an estimated 3,180 working in Australia in 2005 (Table 13.1). Psychiatrists-in-training made up 22.8% (or 726) of these psychiatrists. The average age of psychiatrists in 2005 was 47.6 years, with female psychiatrists being younger, on average, than their male counterparts. In 2005, 62.6% of employed psychiatrists were male, and, of all male practitioners, 15.2% were trainee psychiatrists.

Including clinical and non-clinical hours, psychiatrists worked an average of 40.6 *total hours* per week in 2005 (Table 13.2). The hours worked per week were, on average, lower for females than males (36.9 hours compared with 42.8 hours) and higher for psychiatrists-in-training than for those not in training (43.4 hours compared with 39.8 hours).

Table 13.1: Employed psychiatrists and psychiatrists-in-training, demographic characteristics, 2001–2005

						Distribution 2005	Average annual change
	2001	2002	2003	2004	2005	(per cent)	(per cent)
Psychiatrists	2,097	2,367	2,395	2,409	2,454	77.2	4.0
Psychiatrists-in-training	632	587	631	742	726	22.8	3.5
Sex							
Males	1,797	1,946	1,972	2,020	1,991	62.6	2.6
Females	931	1,008	1,054	1,131	1,189	37.4	6.3
Sex and age (years)							
Males							
Less than 35	233	227	196	274	266	8.4	3.4
35–44	469	450	505	469	489	15.4	1.0
45–54	488	537	546	543	505	15.9	0.9
55–64	400	471	453	463	464	14.6	3.8
65+	207	262	272	272	267	8.4	6.6
Females							
Less than 35	250	197	227	268	285	9.0	3.3
35–44	293	291	323	353	380	11.9	6.7
45–54	203	308	289	304	323	10.2	12.3
55–64	136	171	161	159	152	4.8	2.8
65+	49	40	53	48	49	1.5	0.0
Average age (years)							
Males	49.8	50.7	50.5	49.9	49.9		0.1
Females	44.1	45.5	45.0	44.0	43.7		-0.2
Total	47.9	48.9	48.6	47.8	47.6		-0.2
Total number ^(a)	2,729	2,954	3,026	3,152	3,180	100.0	3.9
All employed medical practitioners	53,384	53,991	56,207	58,211	60,252		3.1

⁽a) The number for each variable may not sum to the total due to the estimation process and rounding.

Source: AIHW Medical Labour Force Survey, 2001–2005.

Table 13.2: Employed psychiatrists and psychiatrists-in-training, average total hours worked per week, by type and sex, 2001-2005

	2001	2002	2003	2004	2005	Average annual change (per cent)
Psychiatrists	42.0	41.4	40.8	40.0	39.8	-1.3
Psychiatrists-in-training	45.0	44.0	45.4	43.8	43.4	-0.9
Sex						
Males	44.5	44.2	44.3	43.3	42.8	-1.0
Females	39.2	37.5	36.9	36.6	36.9	-1.5
Total	42.7	41.9	41.8	40.9	40.6	-1.3

Source: AIHW Medical Labour Force Survey, 2001–2005.

^{..} Not applicable.

Size and distribution of the psychiatrist workforce

Psychiatrists are not evenly spread across Australia either by state and territory or by geographic region. This is best illustrated by examining the ratio of FTE psychiatrists working in the state or territory (or region) to the population of that state or territory (or region). In 2005, there were 17 FTE psychiatrists per 100,000 population in Australia (Table 13.3). The rate ranged from 11 FTE per 100,000 in Western Australia to 20 per 100,000 in Victoria and South Australia.

Table 13.3: Employed psychiatrists and psychiatrists-in-training, average total hours worked per week, and FTE and FTE per 100,000 population, states and territories, 2005

	Number of psychiatrists	Number of psychiatrists- in-training	Total number	Average total hours worked per week	FTE	FTE per 100,000 population ^(a)
NSW	774	282	1,056	41.2	1,144	17
Vic	743	222	965	40.5	1,028	20
Qld	404	93	497	41.4	541	14
WA	185	36	221	38.3	223	11
SA	219	71	289	41.1	313	20
Tas	61	6	68	35.6	63	13
ACT	55	9	64	37.6	63	19
NT	14	7	21	44.4	25	12
Total ^(b)	2,454	726	3,180	40.6	3,398	17

⁽a) Crude rate based on the Australian estimated resident population as at 30 June 2005.

Note: FTE is based on 38-hour standard working week.

Source: AIHW Medical Labour Force Survey, 2005.

In 2005, 88.9% of FTE psychiatrists (for whom region was reported) worked mainly in the major cities, while less than 0.5% worked mainly in remote and very remote regions (Table 13.4). By comparison, 66.2% of Australia's population resided in major cities and 2.5% in remote and very remote regions. As a result, the number of FTE psychiatrists per 100,000 population was higher in major cities (22 FTE psychiatrists per 100,000 population) than in the other regions. In 2005, the inner regional areas had 6 FTE psychiatrists per 100,000 population and the remote and very remote regions had 3 FTE psychiatrists per 100,000 population.

⁽b) The number for each variable may not sum to the total due to the estimation process and rounding.

Table 13.4: Employed psychiatrists and psychiatrists-in-training, average total hours worked per week, and FTE and FTE per 100,000 population, by region^(a),2005

Region ^(a)	Number	Average total hours worked per week	FTE	FTE per 100,000 population ^(b)
Major cities	2,733	40.8	2,934	22
Inner regional	255	39.7	267	6
Outer regional	85	38.5	86	4
Remote and Very remote	12	43.9	14	3
Not reported	95	40.1	101	
Total ^(c)	3,180	40.6	3,398	17

⁽a) Region is derived from the postcode of the respondent's main job and is classified according to the remoteness area structure within the Australian Standard Geographical Classification (ABS 2002). This data should be treated with caution due to the large number of 'Not reported' values for region, relative to the number in outer regional and remote and very remote regions.

Note: FTE is based on 38-hour standard working week

Source: AIHW Medical Labour Force Survey, 2005.

Changes in the psychiatrist workforce

The size and characteristics of the psychiatrist workforce, including the hours worked, changed in the period from 2001 to 2005. Over that period, the number of employed psychiatrists (and psychiatrists-in-training) increased by 16.5% (which equates to an average annual increase of 3.9%) (Table 13.1). This is slightly higher than the 12.9% increase in the total number of all employed medical practitioners (AIHW 2008a).

The supply of psychiatrists, measured as FTE and FTE per 100,000 population, also increased between 2001 and 2005 but to a lesser extent than the number of employed psychiatrists (tables 13.5 and 13.6). The smaller increase in supply was due to a fall in the average hours worked by psychiatrists, from 42.7 hours in 2001 to 40.6 hours in 2005 (Table 13.2) combined with a 5.1% growth in the Australian population between 2001 and 2005. The supply of psychiatrists increased in some, but not all, jurisdictions in the period from 2001 to 2005 (Table 13.6).

The proportion of female psychiatrists in the workforce increased over the period from 34.1% in 2001 to 37.4% in 2005 (Table 13.1). Given that female psychiatrists are generally younger than their male counterparts (as noted earlier) and that females made up 58.2% of psychiatrists-in-training in 2005, this trend may continue.

Female psychiatrists, while increasing their share of the psychiatry workforce, worked fewer hours per week on average than their male counterparts over the 5-year period (Table 13.2). In addition, both male and female psychiatrists were working somewhat fewer average hours in 2005 than they were in 2001, with an average annual drop in average total working hours of 1.3% for the sexes combined.

⁽b) Crude rate based on the Australian estimated resident population as at 31 December 2005.

⁽c) The number for each variable may not sum to the total due to the estimation process and rounding.

^{..} Not applicable.

Table 13.5: Employed psychiatrists and psychiatrists-in-training, FTE and FTE per 100,000 population, 2001–2005

	2001	2002	2003	2004	2005	Average annual change (per cent)
Psychiatrists	2,317	2,579	2,571	2,536	2,570	2.6
Psychiatrists-in-training	748	680	754	856	830	2.6
Total FTE ^(a)	3,066	3,257	3,328	3,392	3,398	2.6
FTE per 100,000 population ^(b)	16	17	17	17	17	1.5

⁽a) The number for each variable may not sum to the total due to the estimation process and rounding.

Note: FTE is based on 38-hour standard working week.

Source: AIHW Medical Labour Force Survey, 2001–2005.

Table 13.6: Employed psychiatrists and psychiatrists-in-training, FTE and FTE per 100,000 population^(a), states and territories, 2001–2005

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT ^(b)	Total ^(c)
					FTE				
2001	922	991	437	274	318	57	45	20	3,066
2002	1,094	1,047	434	233	302	63	56	29	3,257
2003	1,063	1,049	463	271	319	71	50	36	3,328
2004	1,129	1,076	474	247	335	68	44	20	3,392
2005	1,144	1,028	541	223	313	63	63	25	3,398
Average annual change (per cent)	5.5	0.9	5.5	-5.0	-0.4	2.5	8.8	5.7	2.6
				FTE per 10	0,000 popul	ation ^(a)			
2001	14	21	12	14	21	12	14	10	16
2002	17	22	12	12	20	13	17	14	17
2003	16	21	12	14	21	15	15	18	17
2004	17	22	12	12	22	14	13	10	17
2005	17	20	14	11	20	13	19	12	17
Average annual change (per cent)	5.0	-1.2	3.9	-5.9	-1.2	2.0	7.9	4.7	1.5

⁽a) Crude rate based on the Australian estimated resident population as at 30 June of the reference year.

Note: FTE is based on 38-hour standard working week.

Source: AIHW Medical Labour Force Survey, 2001–2005.

⁽b) Crude rate based on the Australian estimated resident population as at 30 June of the reference year.

⁽b) Northern Territory estimates for 2005 are based on responses to the 2004 Medical Labour Force Survey weighted to 2005 benchmark figures, giving an estimated response rate of 31.8%. Care should be taken when interpreting these figures.

⁽c) The number for each variable may not sum to the total due to the estimation process and rounding.

13.3 Mental health nurses

Mental health nurses are another group of professionals who can provide specialist health-related care to people with mental health problems. In this report, the definition of mental health nursing is based on the principal area of nursing activity, rather than the qualification of the nurse. An employed registered or enrolled nurse whose principal area of activity in their main nursing job is self-identified as mental health nursing is considered to be a mental health nurse. Nurses working principally with alcohol and other substance use are not included.

Information on the mental health nursing workforce is derived from responses to the AIHW Nursing and Midwifery Labour Force Survey, with these responses weighted to available nursing registration data from each state and territory. As described in Appendix 1, this is a survey of all enrolled and registered nurses in Australia conducted by the state and territory departments of health, in conjunction with nursing registration boards and the AIHW. The survey collects information on the demographic characteristics of nurses, the hours they worked, their qualifications, their place of work and their main area of nursing activity in the week before the survey.

In this section of the chapter, some comparisons are made between employed mental health nurses and all employed nurses. Detailed data on the total nursing labour force are available from *Nursing and midwifery labour force* 2005 (AIHW 2008b).

Characteristics of the mental health nursing workforce

Out of 244,360 nurses employed in Australia in 2005, an estimated 13,472 (5.5%) worked principally in the area of mental health nursing (Table 13.7). Of these, 22.8% reported that they had completed a post-registration or post-enrolment course in mental health lasting more than 6 months.

Nurses working in mental health are more likely to work full time, are slightly older on average, and much more likely to be male than nurses in the general workforce (AIHW 2008b).

The minimum educational requirement for a newly registered nurse is a 3-year degree or equivalent. Enrolled nurses, whose minimum educational requirement is a 1-year diploma or equivalent, usually work under the direction of registered nurses to provide basic care (AIHW 2008b). In 2005, 82.1% of nurses working principally in mental health and 81.2% of all employed nurses in Australia were registered nurses, with the remainder being enrolled nurses.

There has been a 1.4% average annual increase in the average age of mental health nurses since 2001. The average age of employed mental health nurses in 2005 was 46.4 years, which is slightly older than the 45.1 years for all employed nurses (Table 13.7). Female nurses working in mental health nursing were younger, on average, than their male counterparts (45.8 years compared with 47.7 years).

In general, nursing is a very female-dominated profession, with only 7.9% of all nurses employed in Australia in 2005 being male (AIHW 2008b). By contrast, male nurses made up over a third (31.3%) of employed mental health nurses in 2005 (Table 13.7).

Mental health nurses worked an average of 37.2 total hours per week in 2005 (Table 13.8). The hours worked per week were, on average, lower for females than males (36.1 hours

compared with 39.5 hours) and higher for registered nurses than for enrolled nurses (37.5 hours compared with 35.8 hours).

Table 13.7: Employed mental health nurses, demographic characteristics, 2001–2005

	2001	2003 ^(a)	2004 ^(b)	2005	Distribution 2005 (per cent)	Average annual change 2003–2005 (per cent)	Average annual change 2001–2005 (per cent)
Registered nurses	11,353	10,315	10,134	11,066	82.1	3.6	-0.6
Enrolled nurses	2,002	3,463	3,702	2,406	17.9	-16.6	4.7
Sex							
Males	4,353	4,469	4,676	4,211	31.3	-2.9	-0.8
Females	9,002	9,308	9,160	9,261	68.7	-0.3	0.7
Sex and age (years)							
Males							
Less than 25	52	72	52	38	0.3	-27.4	-7.5
25–34	611	533	557	407	3.0	-12.6	-9.7
35–44	1,396	1,255	1,172	901	6.7	-15.3	-10.4
45–54	1,738	1,875	2,035	1,917	14.2	1.1	2.5
55–64	508	668	779	862	6.4	13.6	14.1
65+	48	67	81	86	0.6	13.3	15.7
Females							
Less than 25	222	285	349	204	1.5	-15.4	-2.1
25–34	1,539	1,483	1,445	1,215	9.0	-9.5	-5.7
35–44	2,998	2,767	2,425	2,289	17.0	-9.0	-6.5
45–54	3,139	3,402	3,465	3,852	28.6	6.4	5.3
55–64	1,005	1,214	1,309	1,523	11.3	12.0	11.0
65+	100	157	166	177	1.3	6.2	15.3
Average age (years)							
Males	44.9	45.6	46.2	47.7		2.3	1.5
Females	43.5	44.1	44.3	45.8		1.9	1.3
Total	43.9	44.6	44.9	46.4		2.0	1.4
Total number ^(c)	13,355	13,777	13,836	13,472	100.0	-1.1	0.2
All employed nurses	228,230	236,645	243,916	244,360		1.6	1.7

⁽a) The Nursing and Midwifery Labour Force Survey was conducted every two years from 1995 to 2003, which explains the missing data for 2002. The survey has been conducted annually since 2003.

Source: AIHW Nursing and Midwifery Labour Force Survey, 2003–2005.

⁽b) 2004 data have been revised since the publication of *Mental health services in Australia 2004*–05.

⁽c) The number for each variable may not sum to the total due to the estimation process and rounding.

^{..} Not applicable.

Table 13.8: Employed mental health nurses, average total hours worked per week, by sex, 2001–2005

	2001	2003	2004	2005	Average annual change 2003–2005 (per cent)	Average annual change 2001–2005 (per cent)
Registered nurses	34.9	37.0	37.3	37.5	0.7	1.8
Enrolled nurses	34.0	36.0	35.9	35.8	-0.3	1.3
Sex						
Males	37.2	39.1	39.2	39.5	0.5	1.5
Females	33.6	35.6	35.8	36.1	0.7	1.8
Total	34.7	36.7	36.9	37.2	0.7	1.8

Source: AIHW Nursing and Midwifery Labour Force Survey, 2001-2005.

Size and distribution of the mental health nursing workforce

As with psychiatrists, nurses working in mental health areas are not evenly distributed across the states and territories or the regions of Australia. Their distribution also does not mirror the distribution of all employed nurses in Australia (AIHW 2008b). In 2005, there were 65 FTE mental health nurses per 100,000 population in Australia, with Victoria reporting the highest rate of 73 FTE per 100,000 population (Table 13.9).

Table 13.9: Employed mental health nurses, average total hours worked per week, and FTE and FTE per 100,000 population, states and territories, 2005

		Mental health nu	rses		All nurses
	Number	Average total hours worked per week	FTE	FTE per 100,000 population ^(a)	FTE per 100,000 population ^(a)
NSW	4,315	37.8	4,293	64	975
Vic ^(b)	3,869	36.4	3,706	73	1,144
Qld	2,317	37.0	2,256	56	911
WA ^(c)	1,037	36.5	996	49	950
SA	1,153	36.8	1,116	72	1,279
Tas	343	37.6	339	70	1,190
ACT	221	37.1	215	65	1,126
$NT^{(d)}$	n.p.	n.p.	n.p.	n.p.	n.p.
Total ^(d)	13,472	37.2	13,188	65	1,040

⁽a) Crude rate based on the Australian estimated resident population as at 30 June 2005.

Note: FTE based on 38-hour standard working week. Note FTE rates differ from those published in Nursing and midwifery labour force 2005 (AIHW 2008b) due to revised population estimates.

Source: AIHW Nursing and Midwifery Labour Force Census 2005.

⁽b) Estimates for Victoria for 2005 are derived from survey results of 2006 AIHW Nursing and Midwifery Labour Force Survey, weighted to 2005 benchmarks.

⁽c) Estimates for Western Australia for 2005 should be treated with caution due to the low response rate (26.9%) in the 2005 survey.

⁽d) Estimates for the Northern Territory are not separately published due to the very low response rate to the survey in that jurisdiction (13.7%). However, the total includes Northern Territory estimates. The number for each variable may not sum to the total due to the estimation process and rounding.

n.p. Not published.

Information on the supply of mental health nurses by geographic region (derived from the location of the respondent's main nursing job as reported in the survey) is provided in Table 13.10. The figures are underestimates for each individual region as nurses who did not provide information on the location of their main job could not be allocated to a region. The figure for total FTE per 100,000 population is calculated based on all employed nurses.

For nurses who reported information on the location of their main job, the number of FTE mental health nurses per 100,000 population was highest in inner regional areas (69 FTE per 100,000 population in 2005) and in major cities (64 FTE per 100,000). Remote and very remote regions had a lower rate of 32 FTE per 100,000 population in 2005.

Table 13.10: Employed mental health nurses, average total hours worked per week, and FTE and FTE per 100,000 population, by region^(a), 2005

		All nurses			
Region ^(a)	Number	Average total hours worked per week	FTE per 100,000 population ^(b)	FTE per 100,000 population ^(b)	
Major cities	8,818	37.1	8,609	64	989
Inner regional	3,058	37.0	2,977	69	1,019
Outer regional	865	38.2	870	42	1,049
Remote and Very remote	143	43.3	163	32	1,026
Not reported	588	34.8	538		
Total ^(c)	13,472	37.2	13,188	65	1,040

⁽a) Region is derived from the postcode of the respondent's main job and is classified according to the remoteness area structure within the Australian Standard Geographical Classification (ABS 2002a). This data should be treated with caution due to the relatively large number of 'Not reported' values for region, relative to the number in outer regional and remote and very remote regions.

Note: FTE based on 38-hour standard working week. Note FTE rates differ from those published in Nursing and midwifery labour force 2005 (AIHW 2008b) due to revised population estimates.

Source: AIHW Nursing and Midwifery Labour Force Census 2005.

Changes in the mental health nursing workforce

An overall 7.1% increase in the total number of employed nurses in Australia between 2001 and 2005 was not reflected in the number working in mental health nursing, which increased by 0.9% over the same period (Table 13.7). While the total number of employed nurses increased by 0.2% between 2004 and 2005, the number of mental health nurses actually decreased by 2.6% which was largely due to the 35.0% drop in the number of enrolled mental health nurses.

There was an increase of 7.2% in the average total weekly hours worked, from 34.7 to 37.2 hours per week, which is likely to have contributed to the 8.1% increase in the number of FTE mental health nurses over the 5-year period (tables 13.8 and 13.11). The number of FTE mental health nurses per 100,000 population was similar in 2005 to that in 2001 (65 and 63, respectively).

⁽b) Crude rate based on the Australian estimated resident population as at 30 June 2005.

⁽c) The number for each variable may not sum to the total due to the estimation process and rounding.

^{..} Not applicable.

Table 13.11: Employed mental health nurses, FTE and FTE per 100,000 population, 2001–2005

	2001	2003	2004 ^(a)	2005	Average annual change 2003–2005 (per cent)	Average annual change 2001–2005 (per cent)
Registered nurses	10,427	10,043	9,947	10,920	4.3	1.2
Enrolled nurses	1,791	3,281	3,497	2,267	-16.9	6.1
Total FTE ^(b)	12,195	13,306	13,435	13,188	-0.4	2.0
FTE per 100,000 population ^(c)	63	67	67	65	-1.5	0.8

- (a) 2004 data have been revised since the publication of Mental health services in Australia 2004–05.
- (b) The number for each variable may not sum to the total due to the estimation process and rounding
- (c) Crude rate based on the Australian estimated resident population as at 30 June.

Note: FTE based on 38-hour standard working week. Note FTE rates differ from those published in Nursing and midwifery labour force 2005 (AIHW 2008b) due to revised population estimates.

Source: AIHW Nursing Labour Force survey, 2001; AIHW Nursing and Midwifery Labour Force Census, 2003–2005.

There is considerable variability in the state and territory estimates of FTE mental health nurses and FTE per 100,000 population in the period from 2001 to 2005 (Table 13.12). As outlined in Appendix 1, at least part of this variation may be due to changes in the survey methodology and variations in response rates, and thus jurisdictional differences should be interpreted with caution.

The demographic characteristics of the mental health nursing workforce are also changing over time. The proportion of males in this workforce decreased from 32.6% in 2001 to 31.3% in 2005 (Table 13.7). The proportion of mental health nurses who were registered nurses (rather than enrolled nurses) declined slightly over the period, from 85.0% in 2001 to 82.1% in 2005.

As with the general nursing population, the mental health nursing workforce is ageing, with the average age increasing from 43.9 in 2001 to 46.4 years in 2005 (Table 13.7 and Figure 13.1). The proportion of mental health nurses aged 55 years and over also increased, from 12.4% in 2001 to 19.7% in 2005.

As noted above, the average hours worked by nurses in mental health nursing increased in the period from 2001 to 2005 (Table 13.8). While this is the case for both males and females, the increase has been higher for females (7.4%) than for males (6.2%).

Table 13.12: Employed mental health nurses, FTE and FTE per 100,000 population, states and territories, 2001–2005

	NSW	Vic ^(b)	Qld	WA ^(c)	SA	Tas	ACT	NT ^(d)	Total ^(d)
					FTE				
2001	4,257	3,475	1,831	950	1,115	282	212	93	12,195
2003	4,846	3,660	2,254	916	1,098	320	167	54	13,306
2004 ^(e)	4,336	3,955	2,369	1,175	1,072	295	166	77	13,435
2005	4,293	3,706	2,256	996	1,116	339	215	n.p.	13,188
Average annual change 2003–2005 (per cent)	-5.9	0.6	0.0	4.3	0.8	2.9	13.5		-0.4
Average annual change 2001–2005 (per cent)	0.2	1.6	5.4	1.2	0.0	4.7	0.4		2.0
			FT	E per 100	0,000 pop	oulatio	n ^(a)		
2001	65	72	50	50	74	60	66	47	63
2003	73	74	59	47	72	67	51	27	67
2004 ^(e)	65	79	61	59	70	61	51	38	67
2005	64	73	56	49	72	70	65	n.p.	65
Average annual change 2003–2005 (per cent)	-6.4	-0.7	-2.6	2.1	0.0	2.2	12.9		-1.5
Average annual change 2001–2005 (per cent)	-0.4	0.3	2.9	-0.5	-0.7	3.9	-0.4		0.8

⁽a) Crude rate based on the Australian estimated resident population as at 30 June.

Note: FTE based on 38-hour standard working week. Note FTE rates differ from those published in Nursing and midwifery labour force 2005 (AIHW 2008b) due to revised population estimates.

Source: AIHW Nursing Labour Force Survey, 2001; AIHW Nursing and Midwifery Labour Force Census, 2003-2005.

⁽b) Estimates for Victoria for 2005 are derived from survey results of 2006 AIHW Nursing and Midwifery Labour Force Survey, weighted to 2005 benchmarks.

⁽c) Estimates for Western Australia for 2005 should be treated with caution due to the low response rate (26.9%) in the 2005 survey. Estimates for Western Australia for 2003 and 2004 should also be treated with caution as they are based on a response rate of 19.0% and 37.7%, respectively.

⁽d) Estimates for the Northern Territory are not separately published for 2005 due to the very low response rate to the survey in that jurisdiction (13.7%). Estimates for the Northern Territory for 2003 and 2004 should be treated cautiously due to the low response rate (31.1% and 35.1%, respectively. Total includes Northern Territory estimates. The number for each variable may not sum to the total due to the estimation process and rounding.

⁽e) 2004 data have been revised since the publication of Mental health services in Australia 2004–05.

^{. .} Not applicable.

n.p. Not published.

