INTRODUCTION
• Queensland farmers suicide rate twice that of metropolitan population (Arnautovska et al., 2014).
• Mental health help-seeking rates reported to be low in farmers (Fuller, Edwards, Procter, & Moss, 2000).
• Mental health help-seeking is seeking help from health professionals for issues relating to mental health or distress (Rickwood & Thomas, 2012).
• Many factors are suggested to have a role in farmers’ mental health help-seeking, including those related to service provision.
• Perception of the service as well as the provider important (Humphreys, Mathews-Cowey, & Weinand, 1997).
• This research explores service related factors that may influence mental health help-seeking in farmers.

METHOD
• QLD farmers
• Qualitative
• Semi-structured interviews (N=10)
• Thematic analysis (Braun & Clarke, 2006)

RESULTS & CONCLUSION

| Service marketing/delivery | • How mental health services are provided was important to farmers, with a preference for face-to-face contact compared to internet based services. |
| Availability and accessibility | • Perceive a greater number of services, but there are still difficulties in accessing them related to timing, confidentiality, and relationship with provider. |
| Continuity of care | • Many towns serviced by locum GPs who are unfamiliar to farmers. |
| Knowledgeable ‘bush’ practitioners | • Farmers want providers that have sound mental health knowledge, as well as ‘bush’ knowledge so that providers understand their way of life and adapt their practice, where possible, to suit. |
| Good outcomes | • Farmers often unaware of the benefits of mental health help-seeking. |
| Conclusion | • Service provision factors can influence mental health help-seeking in farmers. |

• How mental health services are provided was important to farmers, with a preference for face-to-face contact compared to internet based services. "If you make it sound like you’re fixing up a bulldozer, you’ll cure it in one week. [Greg, M]"

• Perceive a greater number of services, but there are still difficulties in accessing them related to timing, confidentiality, and relationship with provider. "We’re out in the paddock daylight hours, pretty much for me to do something, like this with you, it just needs to be after dark pretty much. [Rob]"

• Many towns serviced by locum GPs who are unfamiliar to farmers. "Our biggest problem around here is that it’s very hard - even though you go to a GP, they change so quickly that you don’t have a regular person to talk to. [Michael]"

• Farmers want providers that have sound mental health knowledge, as well as ‘bush’ knowledge so that providers understand their way of life and adapt their practice, where possible, to suit. "They have to be able to relate to the people and sort of understand their way of life and what puts the pressure on them and I don’t think you can learn that out of a book, you either have to have age and the life experience and that to know it or you sort of grown up with it perhaps.” [Rudy, M]"

• Farmers often unaware of the benefits of mental health help-seeking. "I’ve got to have confidence and be comfortable in who I verbalise it to, and also I think being an introvert even though the fact you’re not inclined to verbalise your situation you even think it’s got less relevance verbalising it if you don’t think someone can be of any assistance to you.” [Steve, M]"