



DELIVERING HEALTH IN THE BUSH

Meeting rural health needs

Universal healthcare wherever you live

For too long we have seen poorer health outcomes in rural and regional Australia. Patients in the bush need access to health professionals that can meet their needs, and security to know their geography won't determine their health outcomes.

People living in rural and regional communities experience poorer access to health services, significantly higher rates of disease and injury, worse health outcomes and a significantly shorter life expectancy compared to people living in major cities.

The Greens have listened to stakeholder concerns and will fight for better health outcomes in rural Australia through a targeted plan and key health measures to better align our health system with the needs of people in the bush.

> RURAL HEALTH LAGS BEHIND

The Greens share the concerns of rural health advocates that for too long our health system has failed to respond effectively to the health needs in the bush.

Despite the fact that about one third of Australia's population live in rural, regional and remote areas, key health indicators like death rates and life expectancy are higher in these areas than in our major cities.¹ It is not acceptable in 2016, that where you live should determine your health outcomes.

Despite these statistics, rural health has been too often ignored by the major parties.

> A VISION FOR RURAL HEALTH

The health needs in rural and regional Australia are often unique and directly related to the remoteness of communities. As long as we continue attempting to meet the needs in the bush with a system designed for the cities, we will continue to fail.

The Greens have heard the concerns of rural patients and doctors and will advocate for the development of a **National Rural Health Plan**, to establish key areas of need in the bush and strategies to improve health outcomes, underpinned by appropriate funding.

¹ AIHW. Impact of rurality on health status.
<http://www.aihw.gov.au/rural-health-impact-of-rurality/>

Central to the National Rural Health Plan would be ways to ensure better access to local, high quality health care in the bush.

> RURAL HEALTH WORKFORCE

The National Rural Health Plan would focus on meeting the workforce needs in rural and regional Australia.

GPs in particular are required to deliver a range of expanded services to patients in rural areas. As called for by the Rural Doctors Association of Australia, the Greens would advocate for the development and funding of a **National Rural Generalist Framework** to encompass:

- mechanisms to promote and sustain rural general practices
- strategies for rural recruitment and retention, and other workforce development measures
- a National Rural Generalist Training Program to ensure that the next generations of rural doctors are equipped with the necessary education, training and skills to prepare them for rural medical practice.²

> UNFREEZING MEDICARE INDEXATION

The Greens are the only party to consistently oppose the freeze on indexation on Medicare Benefits Schedule (MBS) payments.

The Greens recognise the huge pressure this cynical cash-grab has put on rural and regional areas. In country towns across Australia, GP clinics have been put in the difficult position of having to consider imposing a co-payment to their patients as the cost of delivering care outstrips the Medicare payment, or close altogether.³ In small towns, where access to a GP is already limited, this indexation freeze threatens serious hardship to patients and diminishes access to our universal system.

² Rural Doctors Association of Australia, RDA 2016 Election Platform
<http://www.rdaa.com.au/sites/default/files/public/18May16%20Final%20ELECTION%20PLATFORM.pdf>

³ ACRRM, 'ACRRM urges all parties to commit to lift the MBS Indexation freeze' 20 May 2016

We have opposed this measure since it was first introduced by Labor, and have continued to oppose as this government has extended it. We would unfreeze indexation from 1 January 2017, **investing \$2.4 billion back into Medicare** and protecting rural health.

> INVESTING IN RURAL MENTAL HEALTH

We will invest **\$280 million for rural mental health**, including the development and implementation of a workforce plan and funding for step-up, step-down support services and accommodation.

Mental health professionals are chronically underrepresented in regional, rural and remote communities. On a per capita basis you are four times more likely to find a psychiatrist, three times more likely to find a psychologist and more than twice as likely to find an allied mental health professional in our major urban centres, compared with rural and regional Australia.⁴ The Greens would contribute \$140 million in funding to generate then implement a plan to attract and encourage more mental health workers in regional Australia and improve the skills of the workforce already there.

On top of these workforce constraints, there is a need for short term residential care and other types of 'stepped treatment' to provide appropriate services for those being treated for a mental illness in regional Australia. The Greens would grant an additional \$140 million to secure these services for regional Australians.

> ACCESS TO DENTAL CARE

The Greens believe that as your mouth is just another part of your body, Australians should have access to public dental care just like Medicare.

The Green have opposed the government's announced cut to the Child Dental Benefits Scheme (CDBS), which has been providing government funded dental care to children from eligible families at their local dentist since 2014. The CDBS is crucial in rural and regional areas, where access to state-run public dental hospitals is slim to non-existent and removing the ability to see a local dentist may mean hours of costly travel and lost waiting lists as well.

The Greens will maintain the CDBS and is committed to working towards universal access to dental care.

> PROTECTING OUR HOSPITALS

The Greens will reform hospital spending to commit the Commonwealth to sharing the cost. We'll restore the funding model where the Commonwealth and the states share the rising costs in delivering hospital services evenly. The Commonwealth

⁴ NMHC (National Mental Health Commission) 2014. The national review of mental health programmes and services, Sydney: NMHC.

will increase its funding to match 50% of the efficient growth in hospital costs from the next budget cycle, and we'll legislate that to protect it from cuts like we've seen from this government.

This commitment will ensure patients in rural and regional Australia can have confidence in their local hospitals to provide the services they need, when they need them. We'll couple this will further focus on a primary care system which meets modern needs, leading to a reduction in avoidable hospital admissions.

> ENSURING RURAL WOMEN'S ACCESS TO ABORTION

The Greens see affordable, universal health care as an investment, not a cost. Equal access to sexual and reproductive health services, including access to abortion, is part of every woman's right to make decisions about her own body. The Greens will invest \$15 million over 4 years to improve access – no matter where you live.

Right now, access to sexual and reproductive health services including abortion can be expensive, are not always provided via public hospitals, and for rural women it can be very difficult.⁵

Women from regional areas must often spend vast amounts of time and money travelling to the urban centres to access termination, far from their homes. More provision through the public hospital system will ease this problem.

Eliminating out-of-pocket costs and expanding equal access through the public hospital system is the best way to make sure all women are able to exercise their fundamental right to control their own bodies and their own health.

> CLOSING THE GAP

We know that Aboriginal and Torres Strait Islander (ATSI) health outcomes remain shamefully lower than for the rest of Australians across the country, and that in rural and remote areas, they are even worse by comparison.

The Greens are committed to closing the gap in health outcomes for ATSI people, and are calling on the government to ensure the National Aboriginal and Torres Strait Islander Health Plan (NATSIHP) is implemented in full, with appropriate resources and transparent monitoring.

⁵ See for example: Doran F M, Hornibrook J, Barriers around access to abortion experienced by rural women in New South Wales, Australia. Rural Remote Health. 2016 Jan-Mar;16(1):3538; Doran F, Hornibrook J, Too Much Hush Hush! Rural women tell their stories about access to abortion Services' 2013 http://www.ruralhealth.org.au/13nrhc/images/paper_Doran,%20Frances_Hornibrook,%20Julie.pdf