

KEY MESSAGES

Overcoming access and equity problems relating to primary health care services in rural and remote Australia

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Policy context

Nowhere is the problem of access to health services greater than in rural and remote areas. Problems of access to services are at the heart of health outcome inequalities and inequities, have persisted over time, and remain the single biggest remediable impediment to improving the health outcomes of geographically disadvantaged groups. The Centre of Research Excellence in Rural and Remote Primary Health Care (CRERRPHC) was established in 2011 to undertake research which aimed to better understand key access and equity issues relating to the provision of appropriate, effective and high quality primary health care services in rural and remote communities of Australia.

Key messages

- > Geographical classification systems underpinning rural and remote health workforce planning and resource allocation need to be evidence-based and fit-for-purpose
- > Measures of access need to take greater account of health needs, patients' abilities to access care, and the availability of appropriate Primary Health Care (PHC) services
- > Researchers require improved access to existing unit record and small-area health data as the basis for modelling access to PHC services
- > Indicators and benchmarks are essential for monitoring PHC services and evaluating national policies designed to provide effective and equitable health care
- > An agreed basket of core PHC services helps to define these benchmarks
- > More research is required to develop an efficient methodology for defining PHC 'benchmarks'
- > Previous research highlighting important environmental enablers and service requirements necessary to ensure accessible, equitable and sustainable PHC services was validated
- > PHC service models need to be fit-for-purpose, something that is best achieved by policymakers and funders working in very close association with local health providers and consumers
- > Improved access to comprehensive PHC leads to improved equity in health outcomes
- > Monitoring of rural and remote PHC services is vital if governments are to ensure accessible, equitable, effective and sustainable PHC for consumers regardless of where they live
- > Research capacity building programs should be tailored to meet the interests of the rural health stakeholders, the needs and contexts of their services, and the types of research and evaluation skills perceived to be most valuable by the service
- > Engagement of policymakers in research capacity building programs should be encouraged
- > Research impact can and should be comprehensively measured