

Regional, Rural and Remote Health

(Extract from Australian Labor Party National Platform) Pages 41-142

67. Australians living in remote, rural and regional locations typically have poorer access to health services, higher out-of-pocket medical expenses, poorer health outcomes and a lower life expectancy than those living in metropolitan and urban centres.

68. Labor will:

- Develop a new National Rural Health Strategy;
- Improve access to health care, including using telemedicine and other infrastructure platforms where appropriate;
- Address barriers to people in remote, rural and regional communities getting maternity, mental health, dementia and palliative care services, including by providing services where people live or nearby wherever possible;
- Act to reduce the rate of suicide in rural communities, especially among young people and particularly young men, young Aboriginal and Torres Strait Islander people and young lesbian, gay bisexual, transgender and intersex people;
- Take account of the needs in remote, rural and regional Australians in dealing with alcohol and other drugs;
- Build on Labor's record in cancer care and improve survival rates for remote, rural and regional Australians;
- Increase the number of health professionals working in remote, rural and regional areas, including through:
 - Promoting opportunities for medical, nursing, midwifery and allied health students to be educated and trained in regional, rural and remote communities and encourage them to return to those areas once their education and training is completed;
 - Promoting opportunities for medical graduates to remain in regional, rural and remote communities by supporting regional specialist training programs with a focus on generalist specialities;
 - Ensuring medical, nursing, midwifery and allied health workforce planning for remote, rural and regional communities recognises geographically specific health workforce shortages;
 - Improving workforce data quality in regional, rural and remote communities to inform workforce strategies;
 - Working with local governments, Primary Health Networks and GP groups to develop community-specific models for GPs and other specialists to practice in areas of shortage;

- Supporting a national rural generalist pathway and program to ensure people living in regional, rural and remote communities have access to health services which align with community needs; and
- Ensuring adequate governance of health services for remote, rural and regional communities, particularly in primary care settings.