

28 Feb 2023

**NATIONAL RURAL HEALTH ALLIANCE**  
**SENATE STANDING COMMITTEES ON COMMUNITY AFFAIRS**  
**COMMUNITY AFFAIRS REFERENCES COMMITTEE**  
**INQUIRY INTO THE UNIVERSAL ACCESS TO REPRODUCTIVE HEALTHCARE**  
**OPENING STATEMENT FOR HEARING**

Good afternoon, Committee Chair and Senators.

The National Rural Health Alliance welcomes the opportunity to present at this public hearing.

As an organisation, we represent 45 member bodies, and our vision is for healthy and sustainable rural, regional and remote (hereafter rural) communities & individuals – the 30% of people residing outside our major cities. Our expertise spans the patient journey across the lifespan, the practitioner pipeline from commencement of education and training to the end of ones' career and research from ideas and needs assessment, to translation and implementation into practice.

Women and girls in rural, regional and remote Australia have poorer health outcomes than their metropolitan counterparts and experience a multitude of barriers to accessing reproductive healthcare services. They have on average, lower rates of employment, lower incomes and lower educational attainment than their metropolitan counterparts, impacting ability to pay for healthcare services and health literacy.

- They have higher exposure to health risk factors.
- Higher rates of unintended pregnancy.
- Access to surgical termination of pregnancy is very limited and many rural areas do not have access to early medical abortion.
- Perinatal mortality rates are higher for babies born to women living in very remote areas, as is the rate of maternal death in remote and very remote areas.
- Babies born to women living in very remote areas are more likely to be born preterm, be small for gestational age at birth and have an extended neonatal hospital stay.

Rural women are prioritised within the National Women's Health Strategy, to which this inquiry refers and hence improving their health and wellbeing outcomes, as they relate to reproductive healthcare, is imperative. This is a human rights issue! But it also relates to the role women play in societal wellbeing, via caring for children, parents and in-laws, higher rates of volunteering and the substantial contribution rural women make to the national economy, enhancing Australia's overall economic wellbeing.

Rural industries contribute over 80 per cent of Australia's export earnings, 50% of tourism income and produce more than 98% of food that all Australians enjoy. Rural Australia earns hundreds of billions of dollars in export and taxation contributions sustaining metropolitan Australia and yet, access to essential health care for people in these rural communities is not prioritised and is inequitable.

Key to improving access to care and ultimately health outcomes along the spectrum of reproductive healthcare for rural women are:

- Workforce interventions that aim to **increase the prevalence of primary health care professionals, specifically general practitioners (including rural generalists) and midwives**. This includes the model of comprehensive, multidisciplinary primary healthcare for rural Australia proposed by the Alliance, termed PRIM-HS. Ideally this would also sit under a National Rural Health Strategy which is needed in this country.
- In addition, workforce interventions that aim to **increase the education, training and support of the aforementioned health professionals (and others)**, across the range of reproductive healthcare services, are also essential to increase the number of these professionals willing and able to provide care to rural women.
- System level interventions that **aim to explore alternative models of care provision** to increase the efficiency and effectiveness of the existing health workforce by allowing health professionals to work to their full scope of practice, must also be considered. This will require joint working between the Australian and State and Territory governments and models of care provision to be population health need and gap identified planning to be completed at local levels with health stakeholders.
- The Alliance seeks commitment from government to **re-open and maintain rural maternity** units in accordance with local and regional planning mechanisms, clinical safety and access standards and calls for action to ensure all rural hospitals have the **capacity to manage emergency reproductive health events**.
- It is important that **cost barriers** to accessing contraceptives and termination services be addressed.
- **Addressing the specific needs of Aboriginal and Torres Strait Islander women, women from culturally and linguistically diverse backgrounds and women with disabilities**, is essential to ensuring universal access, considering the multiplier effect of living in rural Australia. These different groups may require different strategies to ensure these groups have equitable access to appropriate and culturally sensitive reproductive health care.
- Finally, we would like to highlight the importance of working to **improve the literacy of rural women**, including digital literacy and reproductive health literacy, to ensure their ability to navigate the system and access the services they need. This should be started at schools and be publicly available.

We would be delighted to discuss these issues and recommendations in more detail.

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