
Regional cancer inequity a test for Rudd rural health reform program

Improved cancer treatment outcomes in regional Australia will be a test for the Rudd Government's new rural health reform agenda, the nation's leading non-government cancer control organisations said today.

Cancer Council Australia and its clinical partner the Clinical Oncological Society of Australia (COSA) today welcomed the Rudd Government's announcement of a new Office of Rural Health and a national reform process in response to the Audit of Health Workforce in Rural and Regional Australia, which confirmed severe health workforce shortages outside major centres.

"As cancer survival in Australia improves nationwide, the evidence increasingly shows a widening gap in outcomes between patients in the city and those in the bush," Cancer Council Chief Executive Officer, Professor Ian Olver, said.

"Cancer causes the most premature deaths, is feared more than any other disease, is rapidly increasing as our population ages and requires complex treatments – and all these problems are compounded in non-metropolitan areas, due to the difficulties in accessing services.

"We welcome the government's rural health reform agenda, because a clear test of its effectiveness will be its capacity to reduce geographic inequities in cancer survival and life quality.

"The best ways to improve access to cancer care in rural and remote Australia are to bring multidisciplinary care closer to the people through treatment centres in appropriate regional settings, facilitate access through a meaningful travel and accommodation subsidy or improve medical communications technology – or targeted combinations of all three."

COSA President, Professor David Goldstein, said a 2006 COSA study showed access to oncology services decreased dramatically with remoteness – findings borne out by the government's rural health audit and reflected in cancer survival data.

"Our members in rural areas have been advocating for rural cancer reform for years, as they deal day-to-day with the distress of people receiving inferior care, often by choice, because of their location or their responsibilities as primary producers.

"We will work closely with our rural members and Cancer Council Australia in response to the government's reform process, to promote regional cancer centres, improved travel and accommodation subsidies and better use of technology as the pillars of reduced geographic cancer inequity."

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