



Media Release

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A better deal needed for palliative care services in rural Australia

Discussion around palliative care must acknowledge the need for better services for Australians living in rural and remote parts of the country according to the peak body for the sector, Palliative Care Australia (PCA).

PCA is marking National Palliative Care Week (NPCW) 2015, which runs from 24-30 May, with the theme 'Dying to talk; talking about dying won't kill you'.

While the week will centre on the discussions necessary to ensure greater awareness of the issues surrounding death and dying, PCA CEO Liz Callaghan said that inherent in the debate was the inequity of access to existing palliative care services.

"This week, we want to get Australians talking about death and dying – regardless of whether they are someone approaching the end of their lives, a relative or friend.

"It is important for Australians to have these difficult conversations so they can advocate for their friends and loved ones when they need them to. If you know what your father, brother, friend wants when they are dying, you are better able to seek out that care for them.

"It also means family members are not having to make challenging decisions about care without the guidance of the person concerned and when they are at their most distressed.

Ms Callaghan said palliative care has a role to play in this with its focus on maintaining to the end the best possible quality of life for a terminally ill person.

But access to palliative care remains an issue for rural and regional Australians.

"We know Australians living in cities have better palliative services than those in the bush, with studies finding that access to palliative care is influenced by distance from health services. Nowhere is the tyranny of distance better expressed than through the decline in the quality of health services the further one gets from capital cities.

"The more remote a patient's life is, the lower the proportion of available palliative care. 72 per cent of cancer patients in a major city received palliative care before they died, compared to 52 per cent in rural and remote Australia."

Ms Callaghan said this year's Intergenerational Report made much of the possibility of the Australian population including 40,000 centenarians by 2055.

"This will mean even greater need for palliative care which, if we are to plan sensibly, needs to be part of the wider debate about ageing.

"While there are many services, they lack coordination. Australians who are dying face enough challenges without having to navigate a complex health system in the search for appropriate care," she said.

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