



Lives of rural NZ at risk – something needs to be done

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The lives of rural New Zealanders are at risk every day because of poor connectivity and inequitable health services, a rural health leader says.

Dr Martin London, chair of the Rural Health Alliance of Aotearoa New Zealand (RHAANZ), says government needs to help remove barriers so rural people's health be considered just as important as those who live in cities.

RHAANZ has 47 national member organisations encompassing rural health providers, agribusiness groups, universities, rural community groups and local government. This week it held a series of national rural conferences and meetings in Wellington.

Later, London met Health Minister Jonathan Coleman outlining RHAANZ's priorities for improving health services in rural areas: rural wellbeing, rural connectivity, rural research and policy, rural health services and the rural health workforce.

"We reminded him that with at least 600,000 people living in rural regions, effectively New Zealand's second largest city, we are an important constituency from an economic and political perspective.

"Overseas evidence links health and wellbeing to economic productivity. Intuitively this will apply in NZ so it is an imperative rural people receive their fair share of publicly funded health services and have equitable access to health services.

"We asked him to reinstate rural proofing across all government departments and we want to fast track a new definition of rurality as it pertains to health services in New Zealand. These are two of the most important ways we can hold policy makers to account for equitable health outcomes for rural people.

"Mobile blackspots remain a serious issue across rural New Zealand, especially in case of emergencies. Poor broadband connectivity is a barrier to education and the slow pace of UFB and RBI2 roll-outs are dampening progress, production and innovation," London says.

The responses to major disasters such as last year's Hurunui-Kaikoura-Marlborough earthquake show what can be done in an innovative way to bring services to rural areas. Much can be learned from these adverse events and needs to be carried over into business as usual. It's just a pity it takes a major earthquake to do it.

“We also know there are simply unrealistic expectations placed on the rural health workforce especially in regard to emergency and after-hours services. Our rural health workforce is ageing, tired and burnt-out and we need better retention and recruitment. We need greater workforce flexibility, nurse practitioners and pharmacists for example, as a key way to improve access to health services for rural people.

“We also need to make our small towns liveable so that people want to come and to stay. If we can make our rural communities vibrant again many of our issues will be solved,” London says.

“We want a national virtual health care service for rural New Zealanders, bringing services closer to rural people and helping rural people to age in their own homes. The technology and expertise is there. We need, in an election year, evidence of the political will to see it happen.

“Agriculture and tourism are the powerhouses of our economy. Each year, more than two and a half million tourists visit rural New Zealand. In 2011-2012, \$40 billion, or 19 percent of GDP, was generated directly or indirectly by the agri-food sector.

“The Government needs to work with our ideas on rural health and social services if it wants the sector to thrive,” London says.

“We will meet Minister Coleman again at the inaugural Health Hub at the annual Mystery Creek Fieldays in the Waikato next month.”

For more information contact RHAANZ chair Martin London on 027 464 1191 or Make Lemonade editor-in-chief Kip Brook on 0275 030188.

Photo: Martin London