

# ABSTRACT SUBMISSION

## 2017 NSW RURAL HEALTH AND RESEARCH CONGRESS

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**Concurrent Stream:** Rural Workforce – Sustain, Maintain, Gain

**Keyword:** Workforce

**Abstract Title:** Defining “Rural Health”: Exploring GPs Perceptions of What Constitutes Rural Health

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### **Background:**

Definitions of rural and remote health have typically taken a geographical or a practice-based approach. There is also an implied rural culture within the rural health literature that potentially has implications for health and health behavior. This study aimed to gain an understanding of GPs’ perspectives of what constitutes rural health and rural medicine.

### **Approach:**

The approach used was semi-structured interviews with thematic analysis of qualitative data and a systematic review of the literature around the definitions of rural health.

A purposeful sampling strategy was used to recruit a range of rural GP and GP registrars to include overseas trained doctors, international medical graduates and Australian-based doctors. 19 GP registrars and recent fellows (FRACGP/FACRRM), were interviewed as part of a broader study that explored models of future practice and these doctors were asked, ‘How they would define rural health?’

### **Outcomes / Results:**

Recurring contextual themes included the following:

- **Person:**
  - The rural GP- themes under this included the need for all-round professional competence, with cradle to grave ‘holistic patient-centered care across a range of disciplines’, lack of anonymity, urban drift and the need to build capacity.
  - The rural patient- the ‘rural character’, ‘who doesn’t come in for a heart attack until he finishes the harvest,’ and ‘whose ‘life isn’t easy.’
- **Presentation for care** – barriers of access, communication and resources, ‘access to healthcare is different,’ ‘there will always be a disparity,’ our job is to make the disparities less.’

### **Take Home Message:**

While the heterogeneity of rural health is well recognized the literature implies that ‘rural’ is different from ‘urban.’ This paper contributes to a better understanding of that difference and includes the opinions of rural GPs.

A more detailed analysis of the culture of rural general practice may enable the development of strategies that can assist rural and remote GPs in overcoming some of the cultural difficulties they expressly experience such as professional isolation and loss of privacy.