

ABSTRACT SUBMISSION

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Abstract Title: Improvements to health outcomes for rural and remote Australians rely on increased acceptability of digital health services

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Background: Accessing healthcare in rural and remote Australia can be problematic; advances in digital technologies that provide timely health advice and information have the potential to positively impact health outcomes. Despite these advances, studies have shown a divide between users and non-users of technologies. Average computer literacy rates across lower income and disadvantaged groups are also lower.

Established in 2006, Healthdirect Australia is a national, not-for-profit organisation funded by governments to deliver innovative multi-channel services to ensure all Australians have access to free and trusted health advice when and where they need it. To inform further service enhancements aimed at improving health outcomes, it was important to understand how Healthdirect Australia's services can benefit population groups with greater health needs. This research explores the acceptability and appropriateness of telephone and digital health services among Aboriginal and Torres Strait Islander peoples, and socially and economically disadvantaged community members.

Approach: We conducted 18 focus groups comprising Aboriginal and Torres Strait Islander peoples, and low socio-economic status (SES) people from rural, remote and metropolitan areas (n=145) and 20 in-depth interviews with health professionals. Focus groups and interviews allowed for a grounded exploration of issues by giving participants a voice to describe their lives, experiences of health care, and what is important to them. Systematic comparative analysis was used to develop a framework of dominant themes.

Results: Our findings go beyond identifying users and non-users of technology, as many participants had access to a phone line/internet. All participants expressed confidence performing online searches and were willing to seek-out advice for routine health issues. Cultural appropriateness, fundamental literacy and the ability to understand if they had sufficient information to manage their own health, acted as a barrier to the advice being useful in improving self-management skills, and maximising its ability to supplement face to face services. Participants' information seeking behaviours and timing of active engagement was different across the three groups, highlighting several improvement opportunities to actively engage and support consumers.

Take Home Message: Increasing access to trusted, free, health advice is crucial to people in rural, remote areas to achieve better health outcomes.

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