

SHIELDS L, Jessup M, Smyth W, Abernethy G, Douglas T. Implications for telehealth for accessing education in rural areas: children with a severe chronic disease. Keynote address, 33rd National SPERA Conference, Canberra, 27- 29 September 2017.

Abstract:

Children and their families who live in rural and remote areas are often disadvantaged by distance. In healthcare, this can be especially problematic. Children can suffer from a range of chronic conditions, e.g. diabetes, asthma, cardiac conditions, cystic fibrosis and others. In Australia, health services for children and families with such conditions are centred in specialist children's hospitals in the capital cities in each state, but the burden of health care often falls to the parents and the children themselves.

While rural health services do a wonderful job providing health care for these children, it is very rare to find specialist services in any rural situation. For example, children with cystic fibrosis who live in remote parts of Queensland attend specialist clinics in their local hospital twice or three times a year for routine check-ups, when the cystic fibrosis team of nurses, doctors and allied health staff from the children's hospital in Brisbane travels to rural areas. If children become acutely ill, they might be able to be treated in the local hospital if they are not too sick, or they could be taken to the children's hospital in Brisbane by their parents. If they are having a serious exacerbation of the illness, they will be transported there by aircraft and ambulance.

Any child being sick is stressful for the family, regardless of where they live. However, if families live thousands of kilometres from the main treatment centres, scenarios described above can be common, with subsequent family disruption and emotional, social and economic costs.

Telehealth is being installed in many rural and remote health services, thereby allowing country families the benefit of specialist consultation and care. However, governments and health departments are only slowly engaging with such technology.

This paper presents findings of a study in Far North Queensland which examined how care was delivered to rural and remote families with children with cystic fibrosis, and how they cope. It will discuss how telehealth could improve care to such families and pose questions about why this is so slow in being implemented in Australia.