

Country SA PHN Needs Assessment Report 2025–2028

Executive Summary and
Identified Need Statements

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COUNTRY SA
An Australian Government Initiative



Executive Summary

The Country SA PHN Comprehensive Needs Assessment report identifies the health and service needs, gaps and opportunities for improved outcomes in our region, through the synthesis of data, stakeholder and community consultations. This report will inform Country SA PHN's work over the next three years to address identified access barriers and inequities. Several factors outside our scope of work are also discussed to ensure findings are representative of our community and form a holistic foundation for evidence-based commissioning.

It is evident that the country SA region continues to experience an increasing demand for health services and workforce due to ageing populations, the prevalence of chronic disease and mental health conditions as well as increasing complexity of health needs. Findings reiterated that there are unique additional barriers to accessing and providing appropriate, timely and accessible healthcare in regional and remote South Australia. These barriers include the limited availability of healthcare professionals, long wait times, reduced access to specialist services, and culturally appropriate care. There is also limited access to public health and/or bulk billing services, as well as options available 'after hours'.

Access barriers in country SA go beyond structural disparities and instead represent the complex interaction between systems, organisations, providers, consumers, and the environment. Many people in our region live in a health landscape that continues to be impacted by environmental factors that affect health service access and utilisation, including access to transportation, living situation, and geographical location. Stoicism, confidentiality concerns, and healthcare avoidance also impacts healthcare utilisation in our region. While many of these factors are broadly experienced by our population of approximately 530,000 people, variance in aspects such as rurality, population density, health beliefs and behaviours across our region, results in differing experiences and challenges to consider.

Recognising the effects of these factors on unmet healthcare needs can help identify broader issues, opportunities for change and avoiding blame. These considerations are important when we address challenges in our region, including higher rates of chronic conditions including cancer, cardiovascular disease and chronic kidney disease in rural and remote areas. The need for a preventative approach to address the higher prevalence of behavioural risk factors and improve timely access to identification and intervention support including screening programs was identified.

Many people in country SA have a strong sense of resilience and find strength from close community bonds, which can help reduce social exclusion, isolation and loneliness. The unique challenges of rural life including economic and environmental changes, as well as stress from unfavourable conditions and natural disasters can directly impact mental health and impede healthcare utilisation. Regional and remote regions of South Australia have higher rates of mental health concerns, while workforce distribution and services decrease with rurality. As a result, mental health-related emergency department presentations are increasing in country SA, as in some regions, it is the only option for people experiencing an acute mental health crisis. There is a need for increased outreach health supports, population-specific approaches, particularly for men and young people, as well as early identification and intervention services in our region.

The following paragraph includes discussions of suicide and self-harm.

Suicide has a significant and enduring impact throughout communities in country SA. The interconnected nature of our regional communities can be protective against suicide and self-harm, providing support and a sense of belonging; however, it can also extend the impact when someone dies by suicide. In country SA, there is a need for improved access to timely, appropriate and compassionate supports as well as efforts to strengthen existing protective factors within communities. This requires planning at the local level to ensure initiatives address community needs and challenges. Country SA PHN respectfully acknowledges those impacted by suicide and self-harm, including the bereaved, people who care for loved ones through suicidal crisis and people with lived or living experience.

Alcohol and other drug use causes harm to individuals, families, and communities, with these harms disproportionately affecting specific population groups. Negative societal framing overlooks key influencing factors in usage behaviours and creates barriers to help seeking, which can exacerbate existing inequalities. In 2023, alcohol, tobacco and cannabis were the most prevalent drugs used in country SA. Alcohol was the leading principal drug of concern for clients receiving AOD treatment in our region, followed by amphetamines and cannabis. The co-occurrence of mental illness and substance misuse can amplify health impacts and complicate treatment for both conditions. The emergence of alternate nicotine delivery products including e-cigarettes presents new health risks and challenges.

Healthcare access and utilisation factors impact the health of our population in different ways over their lifespan, often resulting in cumulative challenges and barriers. The foundations of good health start during the first 2000 days of a child's life, from conception to age five years. Limited healthcare availability and choice can exacerbate existing challenges in country SA, including low rates of antenatal care attendances and higher than average rates of smoking in pregnancy in some regions, as well as immunisation rates below national targets. These factors persist into childhood, as prevalence of developmental vulnerability and potentially preventable hospitalisations increase with remoteness.

An increasing number of older people in country SA are choosing to remain in their communities as they age, enabled by the increasing availability of home support and care service packages. Older people experience a range of health conditions including dementia, heart disease and cancer as well as health concerns like falls and medication management. Increasing co-morbidity and corresponding complexity of health needs continues to be a challenge for our aged care workforce. Many older people live alone at home and enjoy the independence it offers; however, it can pose significant risks and can limit the accessibility of timely medical care. Therefore, there is a need for appropriate supports that allow older people to have an active role in their own health as well as understand and access the aged and primary health care systems.

Diagnosis of a life-limiting illness or the transition to the end-of-life phase has far reaching consequences. Community strengths, including the close-knit nature of country towns, can be a vital support for individuals and their loved ones, but may also amplify the emotional, physical, financial, and communal impacts of difficult times. In country SA, there is a need for increased multidisciplinary care delivery and the incorporation of pharmacists into palliative care teams. Community education on death literacy can support meaningful conversations about people's end-of-life wishes, facilitate proactive planning and reduce societal stigma.

Informal carers play a key role in sustaining our aged care, disability, health, mental health, and palliative care systems. In country SA, challenges including accessing respite care can exacerbate the existing personal impacts of this unpaid work on health, wellbeing, and career prospects.

Aboriginal people intimately understand that health is a complex integration and balance of physical, environmental, emotional, social, spiritual, and cultural wellbeing. This understanding, as well as the social and cultural determinants of health, must be central when addressing Aboriginal people's health needs. It has been well established that working with Aboriginal communities, on

priority issues identified by Aboriginal organisations and communities achieves the best outcomes. Aboriginal people in our region and across South Australia have identified several priority needs including improved prevention and management of chronic conditions as well as enhanced access to culturally safe and responsive services. It is also important to recognise the negative impacts of deficit framing particularly on health outcomes, embed strengths-based approaches and highlight protective factors. These approaches can work to counter the intergenerational trauma and deep-seated distrust of mainstream healthcare systems among Aboriginal peoples which has resulted from colonisation, the forced removal of children, and discriminatory healthcare policies.

Specific population groups within our community experience health inequity, including Aboriginal people, the LGBTQIA+ community, people from culturally and linguistically diverse (CALD) backgrounds and people with disability. To contextualise the lived experiences of these priority populations, key facilitators, protective factors, barriers, preferred language and cultural considerations were identified. These factors vary between health areas and several additional priority populations, including young people and people at risk of or experiencing homelessness, are highlighted in this report. Country SA PHN is committed to addressing health inequity through increased workforce capability, person centred approaches and the provision of locally relevant and culturally safe services.

Long-standing challenges in attracting and retaining a suitably trained multidisciplinary primary care workforce in rural and remote South Australian communities continues to impact service availability, acceptability, and continuity. Local stakeholders identified several challenges including limited availability of transport, housing, support for families and reduced opportunities for professional development for health professionals. As demand for allied health services increases, challenges in providing culturally safe care that includes the appropriate mix of required skills to meet community needs remain. Opportunities include increased integration and coordination across the health, aged and social sectors as well as expanding the peer, lived experience and Aboriginal workforces.

Digital health and connectivity can enhance access to healthcare, improve outcomes, and facilitate the delivery of efficient and coordinated care, especially in regional and remote communities. In country SA, opportunities to increase uptake and utilisation include improving digital health literacy, building digital capability of providers, and facilitating connections and collaboration across primary care sectors.

Country SA PHN will address the identified needs of our community by working with local services and stakeholders to develop place-based solutions including education, capacity building and increased service provision.

Identified Need Statements

Country SA PHN Priority Area	Identified Need Statements – 2025–2028 (Nov 2024)
Aboriginal Health	Culturally appropriate health services
	Appropriate support to ACCHOs to improve individual and community health outcomes
	Integrated and coordinated multidisciplinary care for Aboriginal people with chronic disease
	Screening and early detection services which are appropriate and accessible for Aboriginal people
Aged Care and Older People	Appropriate support to older people to understand and access the aged and primary healthcare system
	Aged care workforce are supported with skill and knowledge opportunities to improve workforce capacity to deliver person-centred care
	Early intervention services which are appropriate and accessible for older people to reduce risk of frailty and deterioration
	Appropriate support to older people to have an active role in their own health to stay independent and well in their place of residence
	Support integrated and coordinated systems that connect providers and consumers across health, social, community and aged care services
Alcohol & Other Drugs	Priority populations have access to high quality, culturally appropriate alcohol and other drug treatment services
	Integrated alcohol and other drug treatment services and systems for coordinated care across the health and social sector
	Professionals have the appropriate skills, knowledge and capability to support people with AOD needs
Mental Health	Early intervention and prevention mental health services that are accessible for rural and remote populations
	Access to psychosocial support services for people with severe and complex mental health needs
	Mental health services that are accessible to people living in rural and remote regions
	Mental health services are accessible to support the wellbeing of children and youth
	Integrated mental health services and systems for coordinated care across the health and social sector
	Access to responsive and appropriate mental health services
	Access to suicide prevention services and support for people experiencing suicidal distress and or crisis

Country SA PHN Priority Area	Identified Need Statements – 2025–2028 (Nov 2024)
Population Health	Appropriate health services for culturally and linguistically diverse communities
	Health services which prioritise equity and access for vulnerable population groups
	Appropriate and timely sexual and reproductive health services
	Access to afterhours primary health care services
	Access to services that support developmental health and wellbeing of children and youth
	Screening and early detection services which are appropriate and accessible for vulnerable population groups
	Integrated and coordinated multidisciplinary care for people with chronic disease
	Improvement in immunisation and vaccination rates
	Health service integration, coordination and information sharing across the health system
	Improved integration of Pharmacy in delivering primary health care
	Improve awareness and access to patient centred palliative care and reduce avoidable hospital admissions
Health Workforce	Appropriate support to allied health to improve individual and community health outcomes
	Appropriate support to general practices to improve individual and community health outcomes
	Locally relevant professional development and education for primary care clinicians
Digital Health	Primary health care providers and RACH are supported to implement digital health initiatives
	Increased utilisation of digital health solutions to facilitate integrated and coordinated care across the health system