

Specialist paediatric pain treatment is **less accessible** to patients living in **more disadvantaged areas**

How far is the pain service? A study of the location of and distance travelled to paediatric pain services in Australia

 Samuel F. Allingham (samallin@uow.edu.au)  Hilarie P. Tardif (hilarie@uow.edu.au)

INTRODUCTION

Barriers to accessing health care include geographical factors and socioeconomic status.

Does proximity to pain services and socioeconomic disadvantage influence access to paediatric specialist pain management services in Australia?

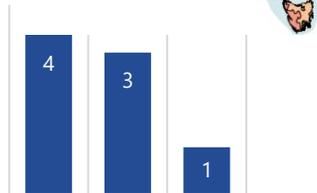
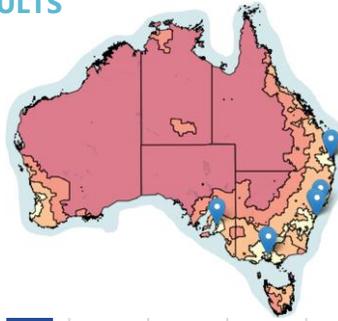
METHODS

The location of the eight paediatric pain services that participate in the electronic Persistent Pain Outcomes Collaboration were geocoded to Remoteness Area (RA) and Quintile of Disadvantage using the Index of Relative Socio-economic Disadvantage (IRSD).

The residential postcodes of patients who were referred between 1 January 2014 to 30 June 2021 were similarly geocoded (n = 2939).

Proximity to the treating pain service was calculated as the straight-line distance between the centre of the patient's postcode and the location of the service.

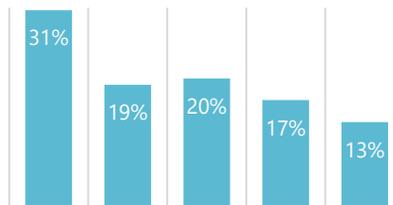
RESULTS



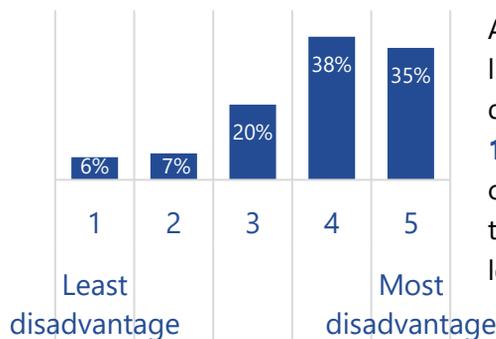
All paediatric pain services (n = 8) were **situated in major Australian cities**.

None were in regional or remote areas.

Half of the services (4) were in areas of least disadvantage, with **no services in areas corresponding to the most disadvantaged** 40% of the population (quintiles 4 and 5).



Individuals living in areas of higher disadvantage were **less frequently referred for specialist pain management**.



Almost 40% of patients who lived in the areas of higher disadvantage **lived more than 100km** from their pain service, compared to less than 10% in those who lived in areas of lower disadvantage.

Quintile of disadvantage

CONCLUSIONS

The location of paediatric pain services in Australia appears to be a barrier for those who live outside major cities, and in areas of higher disadvantage. Recent improvements in the use of telehealth may be useful in improving access.

