

Homebound and Bedridden People Locked Out of Medical System

MELBOURNE, 14 May 2018 – The Australian medical system has comprehensively failed those people who find it difficult or impossible to leave their homes, according to a report released today.

The report, "Just Invisible: Medical Access Issues for Homebound/Bedridden People" examined homebound and bedridden people who are excluded from all facets of the medical system, including GPs, specialists, hospitals, and allied health. This exclusion also results in an inability to receive the paperwork necessary to access other supports such as Centrelink and NDIS

Ricky Buchanan, the author of the report explains, "*There are no patient groups, peak bodies, or advocacy organisations that specifically represent homebound/bedridden people. As a person who has been homebound for 20 years (and in all that time there has been no advocacy around this), I felt compelled to do this.*"

People become homebound/bedridden from a variety of diseases, including Multiple Sclerosis, ME/CFS, ALS, complex spinal cord injury, ABI, and severe mental illness. Many elderly people are also homebound/bedridden near the end of their lives. Despite this, there has been no epidemiological research conducted on this population. Therefore, we don't know basic facts about them. Even data around reasons for being homebound/bedridden are sparse at best.

Ms. Buchanan added "*There's no understanding. If you don't turn up to a medical appointment they assume you don't want the service. If you try to explain you can't get there, people just don't understand. They think you could come back next week or month. Trying to make people understand that it is physically impossible for you to go there, that you need them to come to you ... people just don't get it.*"

Thirteen homebound/bedridden patients living around Australia contributed to the report. Ms. Buchanan explains, "*Many homebound/bedridden folk have disabilities that affect their ability to communicate, think, or remember things. This report only includes quotes from people who are well enough to be on the internet themselves, because they're the only people I can contact. We really need outreach to include the others too, but I can't do that because I can't travel.*"

"*The good news*", Ms. Buchanan says, "*is that there are a lot of low-hanging fruit here because nobody's worked in this area before.*"

Her report clearly outlines what needs to be done by governments, by the Royal Australian College of GPs, and by medical and allied health professionals to improve the situation for homebound/bedridden people. Educating people that homebound/bedridden patients exist, for a start, and expanding existing Telehealth systems for rural/remote areas so that homebound/bedridden patients can use them too. Other recommendations, such as working with RACGP to implement commonsense guidelines to make sure

homebound/bedridden patients have access to GPs where needed, will be more complex but are vital.

"We have to do this", concludes Ms. Buchanan, "We can't have a whole section of society who are unable to access medical care. We have to fix it."

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Read the full report here: <http://notdoneliving.net/justinvisible/medical-access-issues-for-homebound-bedridden-persons.pdf>