

Health Delivery System In Australia

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Introduction

The aim of this paper is to discuss the health delivery system in Australia. This will give an overview of the definition of health. It will give an insight into the delivery of health care in Australia. It will briefly regarding the determinants of health in Australia. It will provide knowledge regarding the funding of oral health as well as the factors on which oral health is dependent in Australia. This paper will also discuss the current structure and delivery of oral health in Australia. It will briefly regarding the determinants of oral health and factors pressuring [oral health care](#) in Australia.

Main Body

Health is defined as a state of complete well-being. This well-being includes physical, mental, social, and psychological aspects. It is necessary for people to work with optimum health to achieve their goals. If the people of a nation are healthy, then the nation is also healthy. If the people are ill, the nation is also ill. Healthy people are the ones who help in the prosperity of their country. They are the ones who help raise a nation and these are the countries that are successful countries. The health of the people of a country reflects the lifestyle, genetics, environment, socioeconomic status, cultural aspects, and presence of quality healthcare services in the country (AIHW, 2016).

It is the duty of the government to make plans that will cover every individual of the country under one umbrella and provide health care facilities to each and every individual. The government needs to make such a legislative body and policies that cover the health needs of each and every person without any difference (AIHW, 2016).

Health Care System Of Australia

The health care system of Australia is under the covers of multiple facets. It is a network that consists of settings and services with the involvement of private and public care providers, funding systems, regulators, and legislative bodies. The \$155 billion figure describes 2013–14. AIHW estimates that Australia spent \$270.5 billion on health in 2023–24, equal to \$10,037 per person and about 10.1% of GDP. The burden of disease is also improving in Australia. Australia has one of the healthiest populations in the world (AIHW, 2015b). The funding responsibility is divided into governmental and nongovernmental agencies to deliver health care facilities to the people. Governmental agencies from all levels are included in this funding responsibility. These include local, territory, state, and federal. Insurance companies also pay their part from their own pocket. Health services are provided by many

people. These include organizations and health professionals, including medical practitioners, nurses, allied and other health professionals, hospitals, clinics, pharmacies, and government and non-government agencies (PM&C, 2014). Public hospitals are controlled by the government, while private hospitals are controlled by the private sector but under the supervision of the government (AIHW, 2016).

The government of Australia sets the policies for health care, regulates obedience to those policies, educates and trains health care professionals, regulates pharmaceuticals, constantly helps researchers to help improve health care in Australia, provides funding for health and health care projects, provides ambulances, regulate health care screening programs and support health promotional practices (AIHW, 2016).

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The health services are divided into primary health services, secondary health services, and hospitals. Both public and private hospitals are operational in Australia. The hospital count and 9.7 million admissions refer to 2013–14. AIHW reported 12.8 million hospitalisations in 2024–25, including 7.7 million in public hospitals and 5.1 million in private hospitals. The health care system of Australia is under the covers of multiple facets. It is a network that consists of settings and services with the involvement of private and public care providers, funding systems, regulators, and legislative bodies. The \$155 billion figure describes 2013–14. AIHW estimates that Australia spent \$270.5 billion on health in 2023–24, equal to \$10,037 per person and about 10.1% of GDP. The burden of disease is also improving in Australia. Australia has one of the healthiest populations in the world (AIHW, 2015b). The funding responsibility is divided into governmental and nongovernmental agencies to deliver health care facilities to the people. Governmental agencies from all levels are included in this funding responsibility. These include local, territory, state, and federal. Insurance companies also pay their part from their own pocket. Health services are provided by many people. These include organizations and health professionals, including medical practitioners, nurses, allied and other health professionals, hospitals, clinics, pharmacies, and government and non-government agencies (PM&C, 2014). Public hospitals are controlled by the government, while private hospitals are controlled by the private sector but under the supervision of the government (AIHW, 2016).

In 2013-14, 68% of the funding was governed by the government (41 % from the Australian government and 27 % from the state and territory government). The remaining 32 % was funded by people by themselves (18% from expenses by the patients, 8.3% from health insurance, and 6.1 % from accident compensation schemes) (AIHW 2015b). In the Australian government, health ministers are responsible for health care. These health ministers formulate health councils (COAG Health Council 2014b).

Determinants Of Health

Determinants of health are the factor that defines the extent to which we will remain healthy and the chances at which we will become ill. There are three important determinants of health. These include biomedical, social, and behavioral factors. The social determinants of health include socioeconomic status, which includes education, occupation, income, etc. Social factors also include early life, agriculture and food production, social exclusion, health care facilities, social capital, water and sanitation facilities, work and employment, housing, and residential conditions. Biomedical factors include gender, age, and genetics. Behavioral factors include the adoption of healthy behavior by an individual (AIHW, 2016).

Oral Health Definition

Oral health is an important part of the overall health of an individual. Oral health is the maximum health of the oral cavity and the associated tissues, which allow an individual to eat, speak, and socialize without any disease, embarrassment, or discomfort. It also contributes to the overall well-being of an individual (COAG Health Council, 2015).

The major diseases of oral cavities are dental caries, periodontal disease, and oral cancers. Dental caries is one of the leading conditions occurring in people of Australia belonging to oral disease. The most affected group is from 5 to 14 years of age. These are among the most costly treatments for Australians (NACOA, 2003).

The oral health care delivery program also comes under the general health care program. It is under the health ministers who run the health council (COAG Health Council, 2015).

Recently Australia has given its first national strategic plan for oral health (2003 to 2014). The aim of this plan is to decrease the incidence and prevalence of oral disease as well as to decrease the health care inequalities in oral health care in the Australian population. The guiding principle of this plan includes the health of the population, universalism in health, accessible and appropriate services, and integrated health provision (COAG Health Council, 2015). Determinants of health are the factor that defines the extent to which we will remain healthy and the chances at which we will become ill. There are three important determinants of health. These include biomedical, social, and behavioral factors. The social determinants of health include socioeconomic status, which includes education, occupation, income, etc. Social factors also include early life, agriculture and food production, social exclusion, health care facilities, social capital, water and sanitation facilities, work and employment, housing, and residential conditions. Biomedical factors include gender, age, and genetics. Behavioral factors include the adoption of healthy behavior by an individual (AIHW, 2016).

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There are certain foundation areas made by the government of Australia for oral health in the national strategic plan. These foundation areas include the promotion of oral health, access to oral health care facilities, alignment and integration of the system, safety and quality, development of workforce, and research and evaluation (COAG Health Council, 2015).

The Australian government has set a priority population for targeting people for oral health. The priority population includes those people who have low incomes and are socially disadvantaged, aboriginals and Torres Strait islanders, people living in remote areas with fewer healthcare facilities, and people who are under special needs (COAG Health Council, 2015). There are certain foundation areas made by the government of Australia for oral health in the national strategic plan. These foundation areas include the promotion of oral health, access to oral health care facilities, alignment and integration of the system, safety and quality, development of workforce, and research and evaluation (COAG Health Council, 2015).

Pressures Affecting The System

There are certain factors that are causing pressure on the access of people to healthcare facilities in the dental region.

People with oral disease can present with a different presentation, which can be difficult to diagnose. One of the pressures comes from a lack of coordination among the departments. The patient may wait for a long time and then leave the treatment process. One of the factors that put pressure is the lack of knowledge of the patient regarding oral health, who can easily ignore many of the signs and symptoms of many diseases. Many people consider their general physician as the doctor of the whole system and consider them to treat their tooth problems. One of the pressures is the high cost of the

dental care procedure because many people ignore or withdraw from their treatment plan. Many of the people are living in aboriginal areas, and the government has to cope with the huge number of people in those areas. The cost of all the dental procedures is to be borne by the government itself. Lack of integrated care also puts pressure on the government for a proper oral health care plan (Samaei et al., 2015). People of Australia in some regions also have unhealthy lifestyles; they use tobacco, sugary items, alcohol, and tobacco, which also puts pressure on the system to control oral disease (COAG Health Council, 2015).

Determinants Of Oral Health In Australia

Oral health is under the influence of many factors. These include economic, social, behavioral, political, environmental, cultural, and biological factors (Vanobbergen et al., 2010). In addition to these, the ability the access dental health care citizen, the ability to utilize oral health care services, literacy and knowledge of people regarding dental health care, and the attitude of the people regarding health are also some of the factors for dental health care (Watt & Sheiham, 2012).

Socioeconomic factors have shown the highest link with oral health. The lower the socioeconomic status, the lower will be the oral health. Socioeconomic status affects the ability of the people to access the healthcare facility and pay the fees for treatment 18. The socioeconomic status of an individual is also linked to the ability of an individual to acquire sugary foods, tobacco, and alcohol. All of these have negative effects on oral health. Consumption of these items is also linked to the development of many chronic diseases like heart disease, stroke, and cancer (AIHW, 2016). Since the mid-1990s, there has been an increase in tooth decay because of the consumption of sugary items and nonfluorinated water bottles by Australian children (Spencer & Harford, 2008). Children with low socioeconomic status experience 50 to 70 times more tooth decay than children with high socioeconomic status (COAG Health Council, 2015).

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Environmental factors include broader aspects that can affect the oral health of people. These include policies for access and provision of dental health, consumption of tobacco or alcohol, and addition of fluoride in water. Fluoride plays an important part in the prevention of tooth decay. Fluoride is added to the community water and toothpaste (Parnell, Whelton & Mullane, 2009), (Melbye & Armfield, 2013). In Australia, there has been an improvement in tooth decay because of improved fluoride addition in the water and toothpaste, improved access to healthcare facilities, and the practice of good oral hygiene norms (Harding & O'Mullane, 2013). Aboriginals and Torres Strait islanders experience almost 50% the tooth decay than people living in other parts of Australia in children older than 15 years 29 (COAG Health Council, 2015). Environmental factors include broader aspects that can affect the oral health of people.

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Conclusion

Health is defined as a state of complete well-being. This well-being includes physical, mental, social, and psychological aspects. It is necessary for people to work with optimum health to achieve their goals. The health care system of Australia is under the covers of multiple facets. It is a network that consists of settings and services with the involvement of private and public care providers, funding systems, regulators, and legislative bodies. From 2013 to 2014, Australia spent an amount of \$155 billion on health care services. The health services are divided into primary health services, secondary health services, and hospitals. Determinants of health are the factor that defines the extent to which we will remain healthy and the chances at which we will become ill. There are three important

determinants of health. These include biomedical, social, and behavioral factors. Oral health is an important part of the overall health of an individual. Oral health is the maximum health of the oral cavity and the associated tissues, which allow an individual to eat, speak, and socialize without any disease, embarrassment, or discomfort. Recently Australia has given its first national strategic plan for oral health (2003 to 2014). The aim of this plan is to decrease the incidence and prevalence of oral disease as well as to decrease the health care inequalities in oral health care in the Australian population. Oral health is under the influence of many factors. These include economic, social, behavioral, political, environmental, cultural, and biological factors.