

Evidence Brief

Facilitating engagement through strong relationships between primary healthcare and Aboriginal and Torres Strait Islander peoples

Carol Davy, Alan Cass, John Brady, Joanne DeVries, Barry Fewquandie, Suzzane Ingram, Ricky Mentha, Pamela Simon, Bernadette Rickards, Samantha Togni, Hueming Liu, David Peiris, Deborah Askew, Elaine Kite, Leda Sivak, Maree Hackett, Josee Lavoie, Alex Brown

Australian and New Zealand Journal of Public Health (2016) Early online addition

Given the high prevalence of chronic disease in many Aboriginal and Torres Strait Islander communities, it is of concern that access to and sustained engagement with primary healthcare services is often far lower than would be expected. Our study sought to explore ways in which sustained engagement between primary healthcare services and Aboriginal and Torres Strait Islander communities could be improved. Semi-structured interviews were conducted with 126 Aboriginal and Torres Strait Islander participants with and without chronic disease and 97 Aboriginal and Torres Strait Islander and non-Indigenous healthcare providers, managers and administrative staff.

We found that sustained engagement was most likely when community members felt that the healthcare service was part of their community and where patients were able to develop strong relationships with providers. We also found that while Aboriginal and Torres Strait Islander staff were more likely to form strong connections with patients, participants acknowledged the importance of developing relationships with non-Indigenous providers. However, these relationships often took longer to develop and required mutual trust and respect.

Our study also found that a tailored approach to care whereby the needs of the individual in the context of their family and their community were considered. Examples of a tailored care approach included the use of local language when communicating with patients and provision of healthcare services that accommodated for the cultural sensitivities and expectations of the community. Tailored care also focused on prospective planning whereby the needs of the broader community were identified in addition to those of their existing client base. Services can support this type of tailored approach by:

- ensuring that providers have the time to connect with patients, their families and the community;
- providing cultural safety training for all staff so they not only understand but take responsibility for their own cultural impositions, and
- employing Aboriginal and Torres Strait Islander staff who are best able to assist with ensuring that patients feel welcomed and accepted while engaging with care.

There are also a number of ways in which health systems can support sustained engagement between primary healthcare services and Aboriginal and Torres Strait Islander peoples including:

- funding services to ensure that they are able to appropriately engage with Aboriginal and Torres Strait Islander communities, and
- providing educational and career opportunities Aboriginal and Torres Strait Islander staff to build careers within the primary healthcare sector.