

FAQ

FREQUENTLY ASKED QUESTIONS



PODCAST WEBINAR

Teaching yourself and your registrar about Aboriginal and Torres Strait Islander health

What are the key challenges associated with Aboriginal and Torres Strait Islander people's health and my general practice?

PRACTICE CULTURE

A crucial component of practice culture is its connection with and accessibility to the wider community. To make your general practice truly inclusive, you need to cater your service delivery to all of the groups that make up the local population, of which the Aboriginal and Torres Strait Islander community on whose land your practice is located, is particularly important. You and your registrar can engage with members of this community by reaching out, meeting and talking to them, and participating in community celebrations and commemorative events in order to learn about the local history and stories.

Good healthcare for Aboriginal and Torres Strait Islander patients can be enhanced by allowing a double appointment where possible to help establish trusting relationships between the GP and the patient.

EXPECTATIONS ABOUT ACCESSING MAINSTREAM GENERAL PRACTICE VS COMMUNITY-CONTROLLED HEALTH SERVICES

Contrary to popular opinion, as many as half of all Aboriginal and Torres Strait Islander Australians only access healthcare through mainstream general practice, highlighting how crucial it is to offer an inclusive, culturally-sensitive, patient-centric service model at all times.

Aboriginal and Torres Strait Islander health means not just the physical wellbeing of an individual but refers to the social, emotional and cultural wellbeing of the whole community. Each individual is able to achieve their full potential and contribute to the total wellbeing of their community. It is a whole of life view and includes the cyclical concept of life-death-life.

IDENTIFICATION OF ABORIGINAL AND TORRES STRAIT ISLANDER PATIENTS

A recent study demonstrated that Aboriginal and Torres Strait Islander status was only recorded in about half of the clinical records in training practices. It is important to know all your patients as people not medical records, and even if the information provided to the receptionist does not specify that they identify as Aboriginal and Torres Strait Islander, it can be useful to check by asking. It is also a necessary precondition for participation in the Closing the Gap initiative and it could make a positive difference to your patient's health to gain an understanding about their background (without stereotyping).

WHOLISTIC APPROACH

Taking a holistic approach to Aboriginal and Torres Strait Islander patient care is as much about the community as the individual patient, noting that socioeconomic determinants of Aboriginal and Torres Strait Islander health include poverty, education, housing, discrimination, institutional racism and employment. A GP who is sensitive to these determinants and able to view the individual in this context is more likely to navigate the patient into a good health outcome.

Unlike non-Indigenous Australians who might be labelled under an "I" culture, Aboriginal and Torres Strait Islander Australians are part of a "We" culture, which makes the community as important to the individual as the individual to the community. As an example of this, if the family or community is struggling financially, the individual is less likely to follow through with a GP's directive to take a costly medication or take time off work for health reasons.

WOMEN'S HEALTH

GP supervisors and registrars need to be aware of, and respect, the cultural and gender sensitivities of Men's and Women's Business for Aboriginal and Torres Strait Islander patients within the context of a consult and be mindful of how this impacts the history collected, diagnosis and treatment plans.

TELEHEALTH

Telehealth can be particularly problematic for those Aboriginal and Torres Strait Islander patients with minimal access to the internet; privacy concerns when conducting telephone consultations from overcrowded housing; and language or hearing difficulties.

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LEGACY OF STOLEN GENERATION

To provide effective healthcare to Aboriginal and Torres Strait Islander patients, we need to understand what is behind the suspicion and mistrust of healthcare professionals and institutions that might otherwise be misinterpreted as disinterest or apathy with respect to certain patients' personal health.

This requires us to appreciate the interconnectivity between the traumatic events of the Aboriginal and Torres Strait Islanders' shared history from colonisation – including but not limited to violence, loss of culture and land, as well as government policies such as the forced removal of children – with poor physical health, mental health, addiction, incarceration, domestic violence, self-harm and suicide in their communities.

Intergenerational trauma is widely considered to be the main contributor to the collection of diseases suffered in disproportionate numbers by Aboriginal and Torres Strait Islander people:

- chronic disease, including diabetes, cardiovascular disease, rheumatic heart disease, renal disease;
- infectious diseases, like scabies, otitis media, STIs; and
- mental health problems, including depression, psychotic conditions, and drug and alcohol problems.

What are the opportunities associated with Aboriginal and Torres Strait Islander people's health and my general practice?

Good general practice relies on the core principles of high quality, safe and effective healthcare, regardless of the patient's background or identity. You can enhance your practice by evaluating your ability to translate these principles into Aboriginal and Torres Strait Islander healthcare. This includes providing comprehensive, patient-centred and relationship-based primary care.

A focus on Aboriginal and Torres Strait Islander health will provide an opportunity for your registrar to learn about:

- management of chronic diseases and multi-morbidity
- the social determinants of health
- how to navigate the health system
- patient-centred medicine, and
- how to use Medicare and practice systems appropriately.

The fact that as few as 1% of all the encounters a registrar experiences in general practice may be with patients identifying as Aboriginal and Torres Strait Islander should not be a deterrent from making this a specific training focus.

Would your treatment be the same if this patient identified as Aboriginal or Torres Strait Islander?

- Consider culture and history
- Introduce concepts of trauma informed practice
- Explore local support services
- Teach your registrar about the MBS and PBS items available to them and their patients
- Consider how inclusive the practice is in relation to its policies and the practice environment
- Build awareness and intrigue in learning more about the local culture
- Work to identify unconscious bias within your staff and with your registrar
- Connect familiar concepts such as patient centred to what that means for Aboriginal and Torres Strait Islander people

It is also important to note that your registrar is likely to have arrived at your practice with a more solid grounding in Aboriginal and Torres Strait Islander health than you yourself have. A large proportion of medical students have undertaken workshops and university classes on this popular and important topic as part of a more contemporary curriculum than the one you would have followed in your own training. Aboriginal and Torres Strait Islander Health then becomes an area of health that you can collaboratively learn about, including with your registrar as the teacher and you the student.

What can we learn together? How do we put this into practice within our own practice?

If we role model that it is important to be patient centred, inclusive and culturally competent then not only do we end up with competent doctors and better patient outcomes, but our registrars learn to teach and mentor this way once they become supervisors themselves.



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How can we use the new GPSA resource - Aboriginal and Torres Strait Islander Health in General practice – a Guide to teaching and learning?

This new guide <https://gpsupervisorsaustralia.org.au/aboriginal-and-torres-strait-islander-health-in-general-practice-guide/> has been designed both as a teaching resource for you to use with your registrar and as a learning resource for you yourself to gain a greater understanding of Aboriginal and Torres Strait Islander health and its importance as a practice focus, noting that:

- as many as half of all Aboriginal and Torres Strait Islander Australians only access healthcare through mainstream general practice rather than attending community-controlled health services or facilities;
- it is every GP's responsibility to help in closing the health and life expectancy gap between Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander Australians;
- all GPs need to contribute to the government's 'Closing the Gap' strategy by developing a "culturally competent health workforce" through clinical service delivery and education;
- Aboriginal and Torres Strait Islander health is a core component of both colleges curricula and barrier assessments. It needs to be included in your in-practice training in order to help your registrar pass their exams!

Aboriginal and Torres Strait Islander people have the poorest health outcomes of any identifiable group in Australia. Let's turn this around.

The new guide covers the following:

- Why teach Aboriginal and Torres Strait Islander health?
- The role of the GP supervisor
- The role of the Regional Training Organisation
- The role of the GP registrar
- What should I teach in Aboriginal and Torres Strait Islander health?
- What GP registrars should learn
 - Culture
 - Clinical
 - Consultation
 - Context
- A welcoming practice Culture inclusion checklist
- Resources

