

Aboriginal Health



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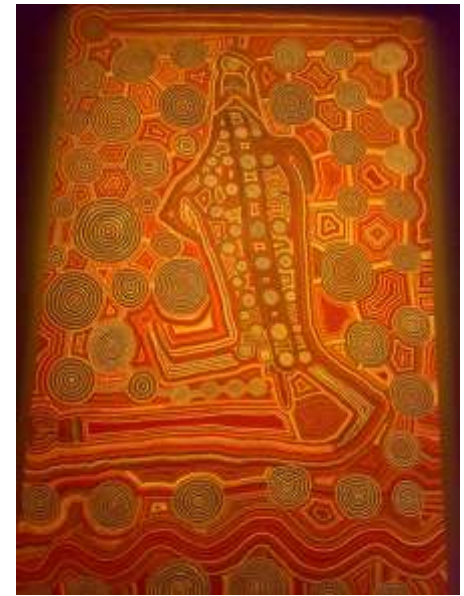
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The past

- Indigenous Australians existed before colonisation in healthy, functional societies
- The strength and resilience of a people continuing to maintain and increase their place within an 'historically hostile, denigrating and imposed culture, is easily obscured by the pervasive pictures of substance misuse, poor social and emotional wellbeing, third world health status and generational poverty and unemployment'

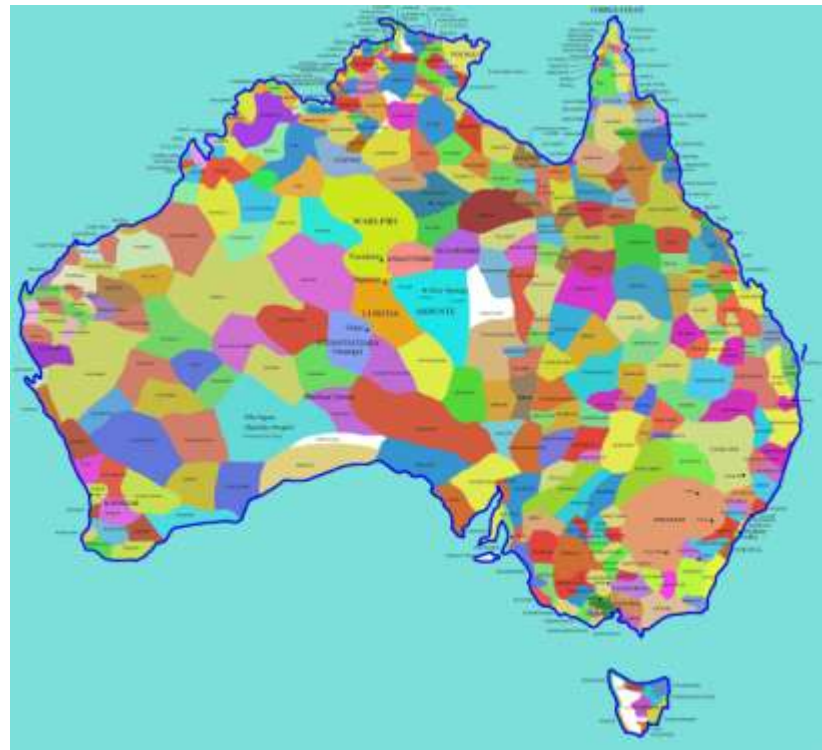


What influences our health?

- Health is influenced by:
 - what we eat
 - housing
 - exercise
 - access to work
 - social support networks
 - education
 - ability to deal with crisis in our lives
 - access to health services
 - other infrastructure



Aboriginal demographics



- 517,200 Indigenous people in Australia in 2006
- 2.5% of the total Australian population.
- Most Indigenous people live in NSW, followed by Queensland, WA, and NT
- The NT has the highest percentage of Indigenous people among its population and Victoria the lowest

Aboriginal demographics

- Much younger overall than the non-Indigenous population.
- Life expectancy 17 years less
- Male life expectancy is 59, female 65 years
- Increased neonatal deaths
- These figures are similar to the rest of Australia in 1910-15 and to developing countries such as Gambia, Ghana, Bhutan, PNG, and Yemen.
- The infant mortality is similar to 1960s or Argentina or Malaysia



Health figures

- Leading causes of death are cardiovascular disease, injuries, cancer
- Diabetes 2-4 times more common
- End-stage renal disease up to 30 times higher
- Twice as likely to be admitted for injuries
- Twice as likely to be admitted for respiratory disease
- Alcohol and other substance abuse



More health figures

- Increased communicable disease
 - TB 10 times more likely
 - Haemophilus influenzae 14 times more likely
 - Meningococcus twice as likely
 - Syphilis and gonorrhoea 50-100 times more likely
 - HIV similar
- 30% have eye or vision problems
- 20% have hearing loss
- Family violence issues



What are the risk factors for illness?

- Social factors such as dispossession, dislocation, discrimination
- Housing, education, income, employment, physical environment
- Smoking, obesity, physical inactivity
- Lack of access to good quality health care



Urban vs rural Aboriginal health

- 35% live in remote areas (cf 3% of the non-indigenous population) where staffing costs and the cost of transporting both staff and patients are very high
- The majority of Aboriginal people live in urban areas where there is adequate but not necessarily accessible or appropriate health services



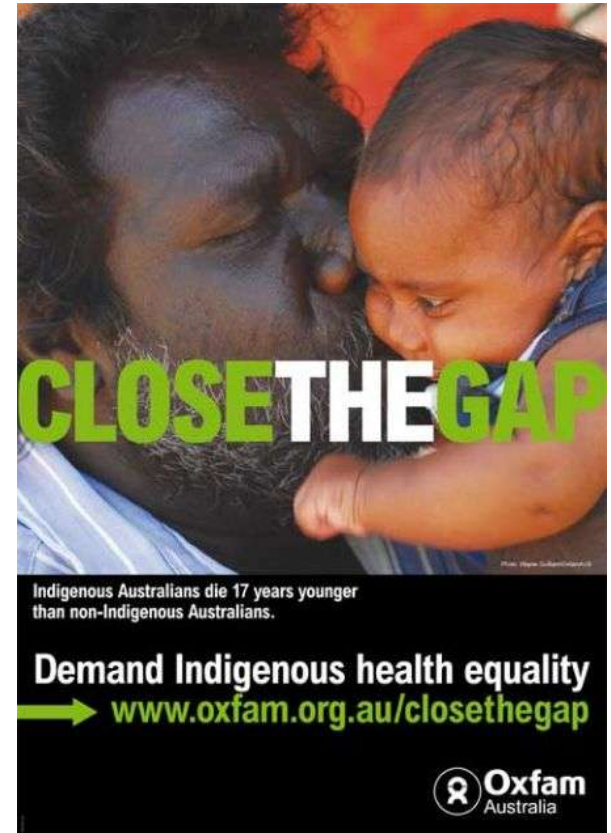
How can we achieve health equity?

- workforce issues
- finances
- access
- service provider attitudes
- culturally relevant practice
- communication issues
- cultural understanding
- racism



Other Indigenous cultures

- The health of the Indigenous people of the USA, Canada and New Zealand has improved over the last 20 years
 - progress in infrastructure
 - self-determination of health services
 - community-controlled primary healthcare services
 - an adequate level of resources
 - skilled workforce



Health workforce

- 430 doctors and 450 other health professionals are needed just to meet the same standard of workforce
- An additional 928 doctors, 2570 nurses and 2000 Aboriginal health workers to meet the same standard of health
- Currently 90 Indigenous doctors and 100 Indigenous medical students in Australia
 - 0.18% of the medical profession.



Education

- 40% of Indigenous students (70% in the NT) did not meet national year 7 reading benchmarks in 2001 (cf 12% in the non-Indigenous population)
- The participation of Indigenous people 15 years and over in post secondary education is still only 12% compared to 33.5% in the rest of the Australian population



Cultural Awareness

- Having knowledge and understanding of Aboriginal people's histories, values, belief systems, experience and lifestyles
 - Not about being an expert but about respect
 - May suffer from 'culture shock' which may cause them to withdraw from communicating and interacting with the health system
- Ethnocentrism
- Health literacy
- Cultural mentors





Use of the Cultural Awareness Tool

- A patient comes with abdominal pain. He/she says it is keeping him/her awake at night. He/she is given a script for a proton pump inhibitor but returns 2 weeks later with the same symptoms
- You decide to ask the questions on the Cultural Awareness Tool and discover the patient has had the pain for 3 months since they cut their cousin down from where he had hung himself in a tree.
- The patient is concerned that the cousin's spirit is still 'hanging around' and causing him to have eating and sleeping problems¹⁵



Cultural Awareness Tool (1)

- What do you think caused your problem?
- Why do you think it started when it did?
- What do you think illness does to you?
- What are the chief problems it has caused for you?
- How severe is your illness?
- What do you most fear about it?



Cultural Awareness Tool (2)

- What kind of treatment/help do you think you should receive?
- Within your own culture how would your illness be treated?
- How is your community helping you?
- What have you been doing so far?
- What are the most important results you hope to get from treatment?

World-view

■ **'Western' individualistic world-view**

- Individualism and consumerism
- Body and mind are separate
- Usually assumes people are responsible for their own misfortune

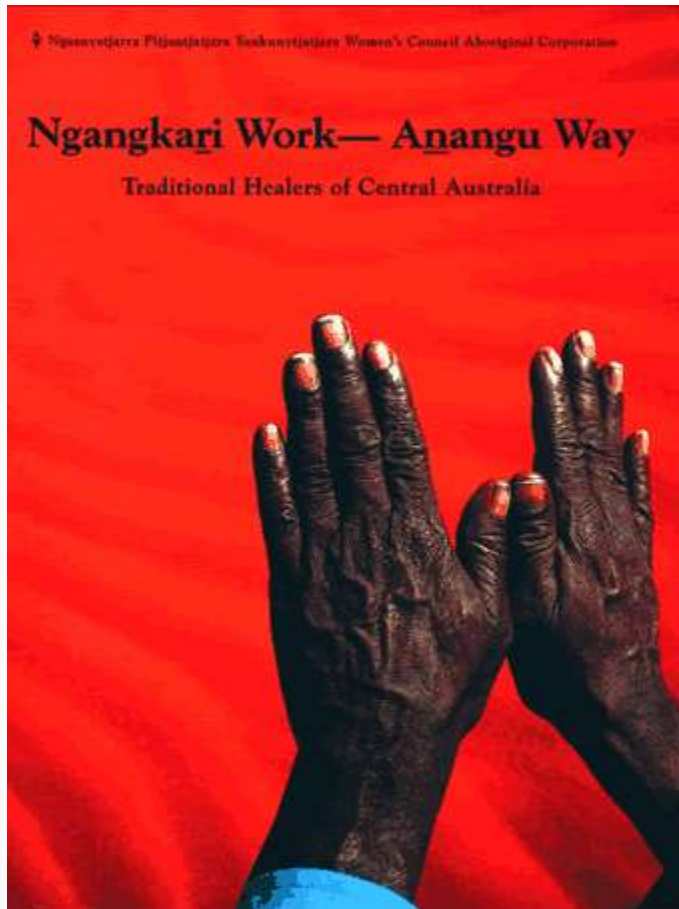


■ **Collectivist world-view**

(Indigenous cultures & the developing world)

- Spiritual and ecological
- Consensual and communal
- Spirituality pervades every aspect of the lives of people from most indigenous cultures and cannot be differentiated from either their physical or mental well-being

Ngangkari



- Traditional healers have socially recognised skills to provide culturally relevant specialist services, such as diagnosis, treatment, advice, explanation and reassurance.
- Whether or not in cooperation, the two systems coexist because it appears that neither can fulfill entirely the needs of many Aboriginal patients

Quotes from Elders



- Puggy Hunter said “You white people keep telling us Aboriginals that we have ear problems. You keep showing us the graphs and the research. You know, I think you mob are the ones with the ear problems...we keep saying the same things and you don't seem to hear”
- Lila Watson, an Aboriginal elder woman from Brisbane said “If you have come to help me, you are wasting your time. But if you see my struggles as a part of your own survival, then perhaps we can work together”



Yalata Aboriginal Community

Thank you

