

# The RACGP

## Supporting GPs to work better in Aboriginal and Torres Strait Islander health

**BACKGROUND** The Royal Australian College of General Practitioners (RACGP) has worked with funding from the Australian government to improve support and training for general practitioners working in Aboriginal and Torres Strait Islander communities.

**OBJECTIVE** This article outlines the role being played by the RACGP and addresses the question: 'What can I do?' for interested GPs.

**DISCUSSION** The RACGP plays an important role in supporting GPs working in Aboriginal and Torres Strait Islander communities. This includes current RACGP Aboriginal and Torres Strait Islander health projects such as providing support for the NACCHO GP Network, provision of accessible relevant cultural safety training for GPs, a national meeting of those working in Aboriginal and Torres Strait Islander health, access to the RACGP library's Aboriginal and Torres Strait Islander health resource collection, and the ongoing distribution of other resources, as well as RACGP organisational support for a range of other initiatives. On an individual level, all GPs are challenged to work at being well informed, and to take a personal leadership role so they can play a part in improving Aboriginal and Torres Strait Islander health.

In my experience general practitioners are people who want to do something. We may be pushed to the limits of our time, energy and resources, but confronted with a patient with chest pain or a child with fever and vomiting we will stay the extra time and do what is required. In other words, when we are confronted with a clear health need, if we have the resources we will do what we can to meet it.

The need in Aboriginal and Torres Strait Islander health has been clear for many years now. Life expectancy rates remain 17 years less than the total Australian population,<sup>1</sup> age adjusted death rates are four times higher than those of non-Indigenous Australians,<sup>2</sup> and the range of common morbidities in these communities is more similar to that of a third world country than what we would expect in Australia. All this is in contrast to the improvement in indigenous health status in other countries.<sup>3</sup> It leaves us asking: 'Why not here?'

The answer is complex and beyond the scope of this article or the individual GP. However, it is important to note the shortfall in funding for Aboriginal and Torres Strait Islander primary health care of \$400 million per year.<sup>4</sup> A range of actions are required to address this issue, from political to educational, legal, social and environmental.

As GPs we are a part of the answer. Yet too often we feel we don't have the resources to play the role we might. We fear we don't have the information or the skills, or perhaps the support required to 'do' Aboriginal and Torres Strait Islander health care differently.

We may not know who among our patients is Aboriginal, or how best to ask this question. We



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may also not be aware of the additional health care opportunities shown to improve health care for Aboriginal and Torres Strait Islander patients, or of the payments available to GPs for these services. Some of us are frustrated because management plans negotiated with Aboriginal and Torres Strait Islander patients, that we consider would improve their health status, are not necessarily attended to in the way we envisaged.

### Getting help to be part of the solution

Since 2000, The Royal Australian College of General Practitioners (RACGP) has worked closely and effectively with the National Aboriginal Community Controlled Health Organisation (NACCHO) on a range of activities aimed at supporting GPs and general practice registrars working in Aboriginal and Torres Strait Islander communities. These activities have been funded by the Australian Government Department of Health and Ageing (DoHA).

One of the key activities undertaken early in the course of these projects was a survey based assessment of the support and training needs of GPs and registrars working in this area.<sup>5</sup> A wide range of activities have been run by the RACGP in partnership with other organisations between 2001 and 2003.<sup>6,7</sup> These have included cross cultural training, mentoring of registrars, and networking through national meetings, local forums, teleconferences and web based methodologies. Work place initiatives in Aboriginal community controlled health services (ACCHSs) included the provision of reference books and manuals, and the development of orientation manuals. Lasting resources produced through these projects, such as the set of four training videos,<sup>8</sup> and the book *Aboriginal primary health care*<sup>9</sup> are still in great demand (see *Resources*). Since 2003, the RACGP has been working with funding from the DoHA on extending the benefits of the previous projects.

### NACCHO GP Network

The NACCHO GP Network, a web based communication and support network (initiated under the earlier projects) has been expanded and refined. So far 381 GPs have joined the network and 95 participate in thematic forum discussions. The network also highlights issues and activities of current interest to GPs working in this field, and offers a locum network that functions as a 'matchmaking service' linking GPs interested in locum work in Aboriginal and Torres Strait Islander communities with medical services (including general practices) in

these communities (see *Resources* and the article *NACCHO GP Network – enhancing communication in Aboriginal health* by Robert Starling this issue).

### Cultural safety training

Following a comprehensive review of the international literature concerning best practice in the area of cross cultural training in indigenous health and an extensive survey based review of current practice in Australia,<sup>10</sup> the RACGP has subcontracted the development and piloting of cross cultural training modules to the Aboriginal Health Council of Western Australia. A set of four training modules has been developed, which are designed to be relevant to the needs of GPs working in Aboriginal and Torres Strait Islander health, flexible in delivery, and able to be locally adapted.<sup>11</sup> These modules are being piloted in all states and the Northern Territory, and a comprehensive evaluation will inform their future use.

### National meeting

A second national meeting of GPs and others working in Aboriginal and Torres Strait Islander health was held in Melbourne in October 2004. As with the first meeting, it provided an opportunity for sharing ideas and insights. In the words of participants:

*'The workshop was a great time to share information about positive programs that are working and have input into areas that need addressing and... making new links with other services'; and*

*'It revitalised me to do better at my job'.*

A number of recommendations were put in the final plenary session. The RACGP is working with NACCHO to follow these through and they will be reported at the next national meeting.

### Resources

The RACGP has provided funding for its library to continue to expand its resource collection in Aboriginal and Torres Strait Islander health. Free access to library services is available to GPs working in Aboriginal and Torres Strait Islander communities as well as to staff at ACCHSs. A regular newsletter provides updates on journal articles and recent resource acquisitions (see *Resources*).

### The ongoing role of the RACGP

The RACGP has endorsed a position statement on Aboriginal health. It has worked with NACCHO, the Australian Indigenous Doctors' Association (AIDA), and the Australian College of Rural and Remote Medicine

to develop a joint proposal to government for funding of a revision of the *Aboriginal health curriculum for general practice registrar training*. In March this year, the RACGP and Northern Territory General Practice Education convened a workshop to develop Aboriginal and Torres Strait Islander health questions for the Fellowship examination.

The RACGP is negotiating with the DoHA for further funding to continue GP support and training activities. The RACGP has a strong, well respected voice at policy level, and will continue to speak out about the needs in Aboriginal and Torres Strait Islander health.

The RACGP submission to the Senate Select Committee on Mental Health (May 2005) began with the statement: 'The RACGP recognises that Aboriginal and Torres Strait Islander people experience worse general health and mental health outcomes than non-Aboriginal and Torres Strait Islander people, and recommends that increased and dedicated funding be made available for programs that are culturally appropriate and empower communities'.<sup>12</sup>

The RACGP continues to coordinate an email list of GPs and others with an interest in Aboriginal and Torres Strait Islander health. This provides an easy means of updating people and advertising relevant events and information.

In order to enhance our work in this area, the RACGP Council has endorsed a motion to establish an Aboriginal and Torres Strait Islander Health Unit. This unit will have ongoing staffing to coordinate RACGP activities in this area, including liaison with partner organisations, NACCHO and the Australian Indigenous Doctors' Association, and government and other funding bodies. An early task for the Aboriginal and Torres Strait Islander Health Unit will be to consult within and outside the RACGP to develop a strategic plan in Aboriginal and Torres Strait Islander health. It will be seeking to attract Aboriginal and Torres Strait Islander people to senior management positions in the unit.

### What can I do?

As GPs we can offer an important health service to Aboriginal and Torres Strait Islander peoples. BEACH reports that GPs logged 1.6% of their patient encounters with Aboriginal or Torres Strait Islander patients.<sup>13</sup> We can do better at identifying this group of people in our practices. Readers are referred to information provided regarding the new Medicare item for an Aboriginal and

Torres Strait Islander adult health check that includes a guide to identification (see *Resources*). We can learn appropriate ways of communicating so that we work better with our Aboriginal and Torres Strait Islander patients in improving individual health outcomes. We can ensure we are up-to-date with the latest in evidence based health care for the conditions, including cardiovascular disease, diabetes, and renal disease which take such a toll on health in these communities. We can be more aware of specific Medicare item numbers and immunisation schedules for our Aboriginal and Torres Strait Islander patients. We can find out about local Aboriginal and Torres Strait Islander health resources and local organisations whom we can work with to improve health care in this sector; we could consider working as a locum in an Aboriginal and Torres Strait Islander community.

Perhaps even more importantly, as GPs we are people of some influence in the community. If we are well informed, our opinions can make a difference to the way other people think and act in this area. When someone at a dinner party next deplores the dollars wasted by government on indigenous health, will you be able to explain the gross and long term underfunding in this sector? Will you point to indigenous health improvement in other countries where treaties have been signed, apologies given, land rights secured and appropriate spending directed to indigenous health?

We may not have imagined a leadership role when we entered this profession, but when this role is required of us, we have a responsibility to ensure that we have the information and the resources required to fulfil it. The RACGP is committed to supporting GPs who want to be a part of improving the health of Aboriginal and Torres Strait Islander peoples.

### Resources

- NACCHO GP Network: administrator@gpnetwork.naccho.org.au Website [www.naccho.org.au/gphome.html](http://www.naccho.org.au/gphome.html)
- RACGP position statement on Aboriginal health: [www.racgp.org.au/folder.asp?id=1088](http://www.racgp.org.au/folder.asp?id=1088)
- RACGP ATSI Health Library Collection. To access this service contact 03 8699 0519, email [library@racgp.org.au](mailto:library@racgp.org.au), or visit the website at [www.racgp.org.au/folder.asp?id=646](http://www.racgp.org.au/folder.asp?id=646)
- Other Aboriginal health resources including copies of *Aboriginal primary health care* contact Pauline Curtis on 08 82678351, or email [pauline.curtis@racgp.org.au](mailto:pauline.curtis@racgp.org.au)
- Medicare EPC item numbers: [www.health.gov.au/epc/atssiinfo.htm](http://www.health.gov.au/epc/atssiinfo.htm)

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