Why our work in health and digital is important?
We can make a difference to Aboriginal peoples’ lives.

By Christine Ross
Managing Director
Christine Ross Consultancy
I would like to acknowledge the Gadigal People of the Eora Nation that are the Traditional Custodians of this beautiful land on which we are meeting on today. I would also like to pay my respects to the Elders both past and present and extend that respect to other Aboriginal and Torres Strait Islanders who are here today.
Proudly the oldest living culture in the world - 60,000 years

Population of Indigenous Australians - approx 650,000 in 2016 Census

2.8 percent of the total population

The majority of Indigenous Australians live in NSW, QLD, WA, NT, VIC, SA, TAS and ACT.
I am an Arrernte/Eastern Arrernte/Kaytetye Desert women from Alice Springs NT.
Dixie Crawford
Managing Director of Source Nation
What enables change & equitable health outcomes for Aboriginal people?

- Improving health literacy
- Increasing organisation literacy
- Cultural support planning
- Shared decision-making
- Care coordination and navigation
- Peer support
Guiding principles

Partnership – Consumers are engaged as true partners in their healthcare.

Compassion and Empathy – Healthcare is always delivered with compassion and empathy.

Trust – Two-way trust is established and maintained.

Carers and Family – The support and expertise of carers, families and communities is recognised, encouraged and valued.

Diversity – Diversity is valued and the different needs of people are understood and provided for.

Continuous learning – Consumers and clinicians strive to continuously improve their knowledge, skills, health literacy and self-management strategies, and foster environments that support ongoing learning.
Facilitate - the Broadband for the Bush Indigenous Focus Day - Feedback to the Main Forum
The Northern Territory (NT) population is only 245,000 residents approximately 32% Indigenous, of which approximately 79% live in Remote Indigenous Communities.

- 2 Health Services - 6 Hospitals
- 25 Urban Services
- 100 Remote Clinics - poor access to the Internet
- 74 remote NT communities with populations greater that 100 representing 45000 people.
  - 30 have ADSL.
  - 44 have mobile phone services.
The Core Clinical Systems Renewal Program

- This Program will provide a fully integrated health system across the NT.
- Current systems are approaching end-of-life
- Transforms NT Health business
- Provides real time, clinical information at the point of care
- Improve efficiency and staff productivity
- Improve population health
- Roll out - October 2019 in Katherine
- Top End - May 2020
It is not a given to be able to access Digital Services.

- Remote Indigenous people remain the most digitally excluded population in Australia
- Digital inclusion should be considered a human right in 2018
- The biggest barrier is access to a phone and internet.
- Unreliable telecommunications.
- Major obstacles are affordability and access to infrastructure, equipment and online services; also cyber-safety, security and skills
- More mobile coverage and Wi-Fi solutions needed due to mobility and limited home internet
Whose got credit on their mobile....

- Remote community stats: 26% under 16, 8% disabled, 12% under 4, 2% in jail, 3% aged, 19% carers, 24% looking after small kids, 6% may have jobs; 43% in unpaid jobs

- Mobiles highly valued, shared by multiple users - If we are going to go digital in a big way do it through apps on smartphones as nearly everyone in communities have one. But they don’t all have computers or internets at home.

- Pre-paid data is very expensive - each person pays $30-$80 a week from $370 a fortnight. So it could be a choice between food or phone credit.

- Mobile phone snakes and ladders - lots of snakes, hardly any ladders

- AirG creates lots of trouble - bullying, jealousing, false identity, wrong way talk, violence; costs $1/day
How can we improve Digital Inclusion for Indigenous Australians.

- Include digital inclusion as a ‘closing the gap’ indicator
- Data Collection needed to measure digital inclusion in remote and rural Australia
- IT Training and Technical Support Program (ongoing)
- Digital Mentors Employment Program
- Remote Cyber Safety Strategy
- Industry partnerships via RAPs / ILUAs etc.
- Develop pathways towards inclusion in digital economy
- MyGov - needs to be overhauled and more user friendly to be more effective.
- A lot of Indigenous Australians would have no idea about My Health Records so there needs to be a big focus on community awareness programs.
Telehealth - the provision of healthcare remotely by means of telecommunications technology.

• Greater access to specialty services
• Reduced travel costs
• Decreased non-attendance appointment rates
• Increased primary care clinician involvement
• There are sometimes difficulties in accessing tele-health records and services with unreliable internet services
• Family more able to be involved with appointments
• People prefer to stay in community, not leave to access medical services - scared about going to cities and towns as they may not come back.
• Telehealth often occurs at the cultural interface between non-Indigenous healthcare professional and Indigenous patient.

• The cultural interface is where different knowledge systems interact: 'it is a place of tension that requires constant negotiation. Its about building rapport, trust, and engagement with Indigenous people’.

• According to Dr Helen Milroy we need to look at a contemporary Aboriginal model of holistic health which includes cultural, spiritual, social, emotional, and physical dimensions. Telehealth needs to incorporate all of this when providing health care to Indigenous Australians.
Benefits of Telehealth continued...

• **Staff Connectivity**
  - Connecting to other remote workers, visiting outreach specialists, hospital clinicians

• **Meetings**
  - Meetings with clinicians and other Aboriginal Medical Service sites could be conducted more effectively with video conferencing
  - Staff interviews:
    - Interviews can be more effectively conducted via video conferencing rather than telephone
It is mind-boggling what services are available on Telehealth. 26 Specialties:

- Paediatrics
- Infectious diseases
- Gastroenterology
- Renal
- General Surgical
- Gynaecology
- Oncology
- Dermatology
- Cardiac rehabilitation
- Thoracic medicine
- Memory clinics
- Pain management
- Haematology
- General Medical
- Endocrinology
- Occupational Therapy
- Burns
- Pre-admissions
- Orthopaedics
- Psychiatric
- Cardiology
- Rheumatology
- Sleep disorders
- Hepatobiliary
- Spinal
- Addiction Medicine

(Michelle McGuirk, pers comm)
Change management in new Telehealth enabled clinics

Introducing change into the clinic environment.

- ...people are the key to making Telehealth work.

- Workforce development, career planning, training package components
  - Developing community based Telehealth coordinators.
How can we address Barriers to Access Essential Services.

Free access to essential online services (white list)
More affordable pre-paid mobile data products
Need alternate to credit card payments for online services/sales

Partnerships with large orgs (e.g. mining co’s) for data sharing
Local content servers enable affordable access to high-use content via Wi-Fi

Delivery of e-services saves government money
PATS tele-health savings should go back into community facilities
Expand telehealth Medicare numbers
Do Cost-benefit analysis of tele-health delivery
Laynhapuy Homelands - Empower the community through health and community services.
Expected Outcomes: Identification of barriers and enablers of Telehealth

- † Productivity
- † Telehealth consults
- † Health and social benefits
- ↓ Patient Travel $$
- ↓ Did Not Attend rates
- † Access to training
- † VC used in day-to-day practice
- † Medicare income
- † Availability internet based clinical systems
- † Business efficiency, better recruitment
- † Availability of services
- † Access to specialist services
- ↓ Waiting times
- † Support for remote staff
Last 18 months - Cross-sector Collaboration

- Aboriginal Medical Services NT Aboriginal Corporation AMSANT
- Broadband for the Bush Alliance Ltd (B4BA)
- Telstra Health
- Northern Institute, Charles Darwin University
- NT Department of Health (DoH)
- eMerge IT Solutions
Thanks to the Digital Age - A positive story to end on.
National NAIDOC Aboriginal and Torres Strait Islanders Women’s Conference 11 - 12 July 2018 at UNSW Sydney
AMRRIC - Healthy Animals = Healthy Communities
Thank You for listening, Dixie and I are consultants so call us as we want to work with you safe travels home.