Care planning and social determinants

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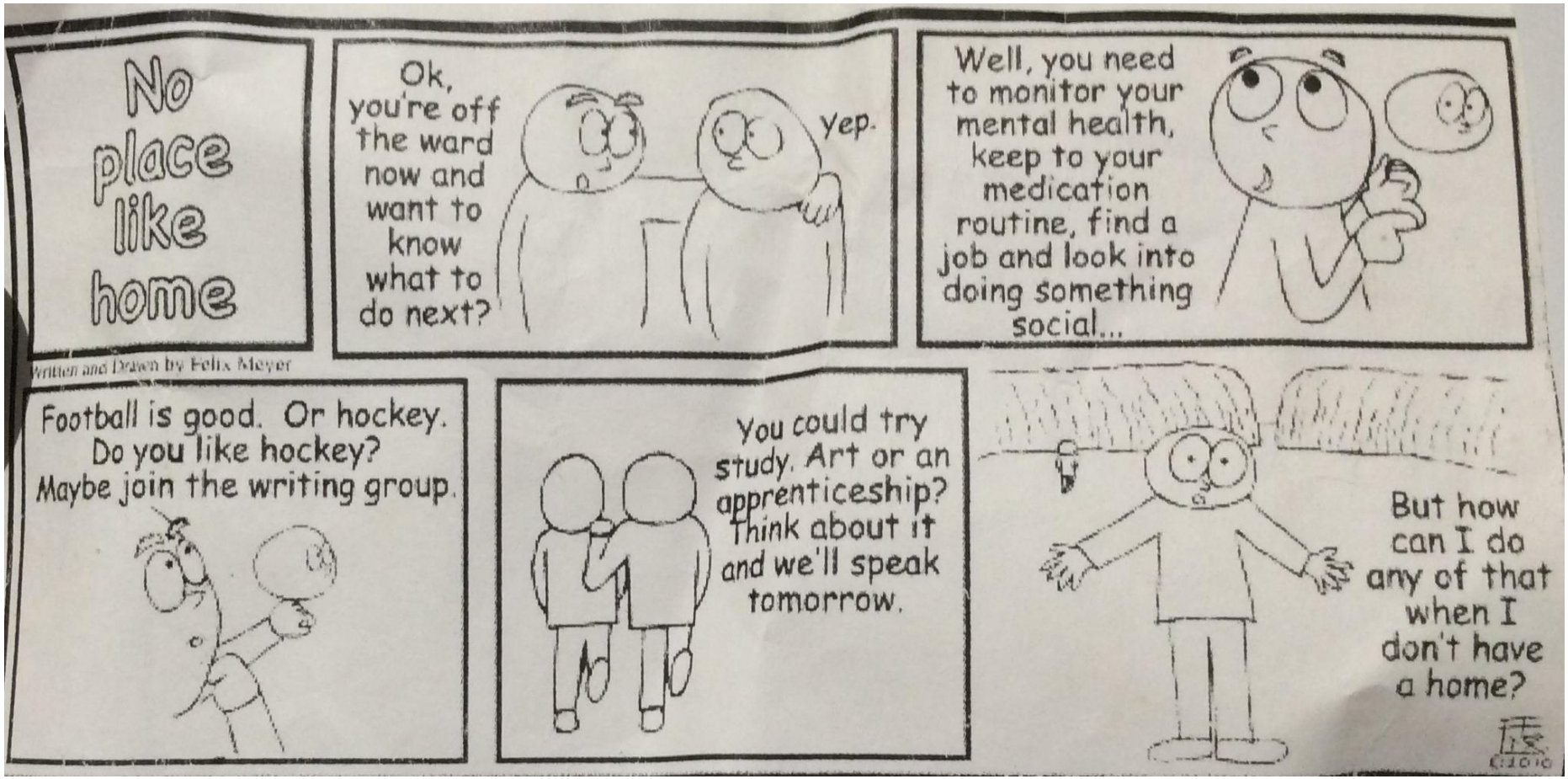
Integrated team care (ITC)



What's the point of treating people and then sending them back to the conditions that made them sick in the first place?

Marmot 2016 Boyer lectures

ITC - service users

- 27 clients
- 19 women / 8 men
- 22-78 years old
- Grandmothers, aunties, daughters, sons, mothers, husbands, wives

- Rheumatic heart disease
- Coronary artery disease
- Type II diabetes
- Kidney disease
- Chronic lung disease
- Hearing loss
- Autoimmune diseases

Transport

Challenges

- Access to a vehicle in an emergency
- Two clients have cars which family drive
- Most have only opportunistic access to a working vehicle
- Poor public transport
- 3 live 40km from town

What works

- Flexible outreach
- Accessible vehicles
- Transport attached to services which is flexible

Housing

Challenges

- No home ownership
- 7 named on public housing lease
- 8 named on town camp lease
- 4 have no address
- 3 outstations 40km
- 3 Aboriginal hostels

Housing

What works

- Service recognition of no address
- Good personal relationships in other services
- Flexible service delivery
- Recognition of housing issues on the care plan

Central Australian Affordable Housing Company

Income and employment

Challenges

- All access Centrelink benefits
- Difficulty in accessing disability pensions
- Fines attributed to people

Income and employment

What works

- Engagement in meaningful activities
- Arts centers
- Processes to support access to income

tangentyere artists

Other challenges

*Governments failing to address the power inequalities, expecting Indigenous people to function in western bureaucratic forms and style, and favouring western over Indigenous knowledge.

- Lack of recognition of the importance of having Aboriginal co-workers
- Access to a phone

*Hunt J 2013. Engagement with Indigenous communities in key sectors. Resource sheet no. 23. Produced for the Closing the Gap Clearinghouse. Canberra: Australian Institute of Health and Welfare & Melbourne: Australian Institute of Family Studies

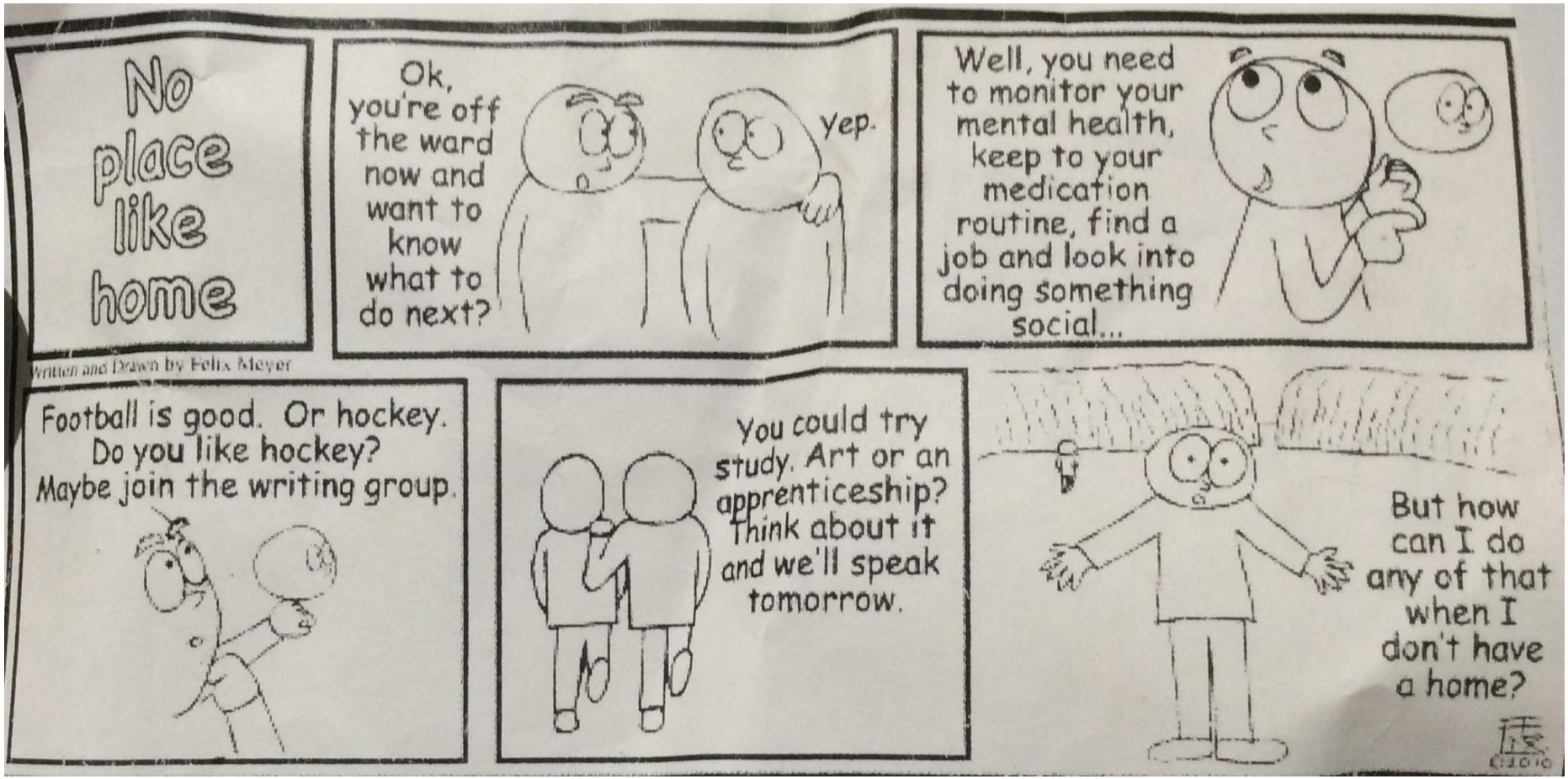
Other challenges cont'd

- Most systems
- Language
- Access to interpreters
- Education
- Ignorance
- Blame
- Racism

What works

- Relationships
- SDoH in the care plan
- Flexible outreach community based service
- Person centered care
- Relationships
- Working with other services
- Working in a “culturally responsive framework”
- Curiosity not judgement
- Looking after ourselves
- Relationships

Self management in this context?



How do we incorporate the Social Determinants of Health into care planning and how can we affect change