



Considering difference: clinician reports of providing equal and equitable burns care for Aboriginal and Torres Strait Islander children and families

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...methods and main findings

Interviews Semi-structured interviews.

Multidisciplinary team members who provide burns care.

Asked about the provision of different care.

Six paediatric, tertiary burns units across five Australian jurisdictions

Results 65 interviews

Approaches to care for Aboriginal and Torres Strait Islander children fell into three main categories.

Team members who understand, who believe but do not act and who see no need.

...main findings – 1

understand the requirement
to meet the specific needs of
Aboriginal and Torres Strait
Islander children and
families and deliver
different care

- "...including the family as a unit rather than directly working with maybe one parent".
- "...allowing time for patients to go back and discuss matters with family which might not in other situations be needed".
- "...the dislocation [from family] in Indigenous is something that we have to be much more aware of.

...main findings – 2

believe in equal care, but deliver different care based on needs 'I think we treat everyone fairly equal, the only thing that I think that we would maybe do differently is getting the ALO involved a bit more with the families from a social work point of view, but other than that I can't really think of anything'.

...main findings – 3

see little need for the provision of different care for Aboriginal and Torres
Strait Islander children and value equal care above all

'To be honest I couldn't care a less about their status because we're treating them all the same and if they've got special requirements then you know we do that for every patient as we don't have a different pathway for Indigenous children'.

...what does this mean?

Equitable care is needed to address disparities in health.

Clinicians, healthcare services and relevant system structures to work coherently and intentionally to enable the delivery of equitable care.

The full potential of quality burns care will not be realised without the specific consideration of the needs of Aboriginal and Torres Strait Islander children and families.