



transforming your experience



Improved self-management in clients enrolled in the Aboriginal Chronic Care Program (ACCP) at Budyari Community Health Centre, Miller NSW



Making Chronic Diseases "Visible"

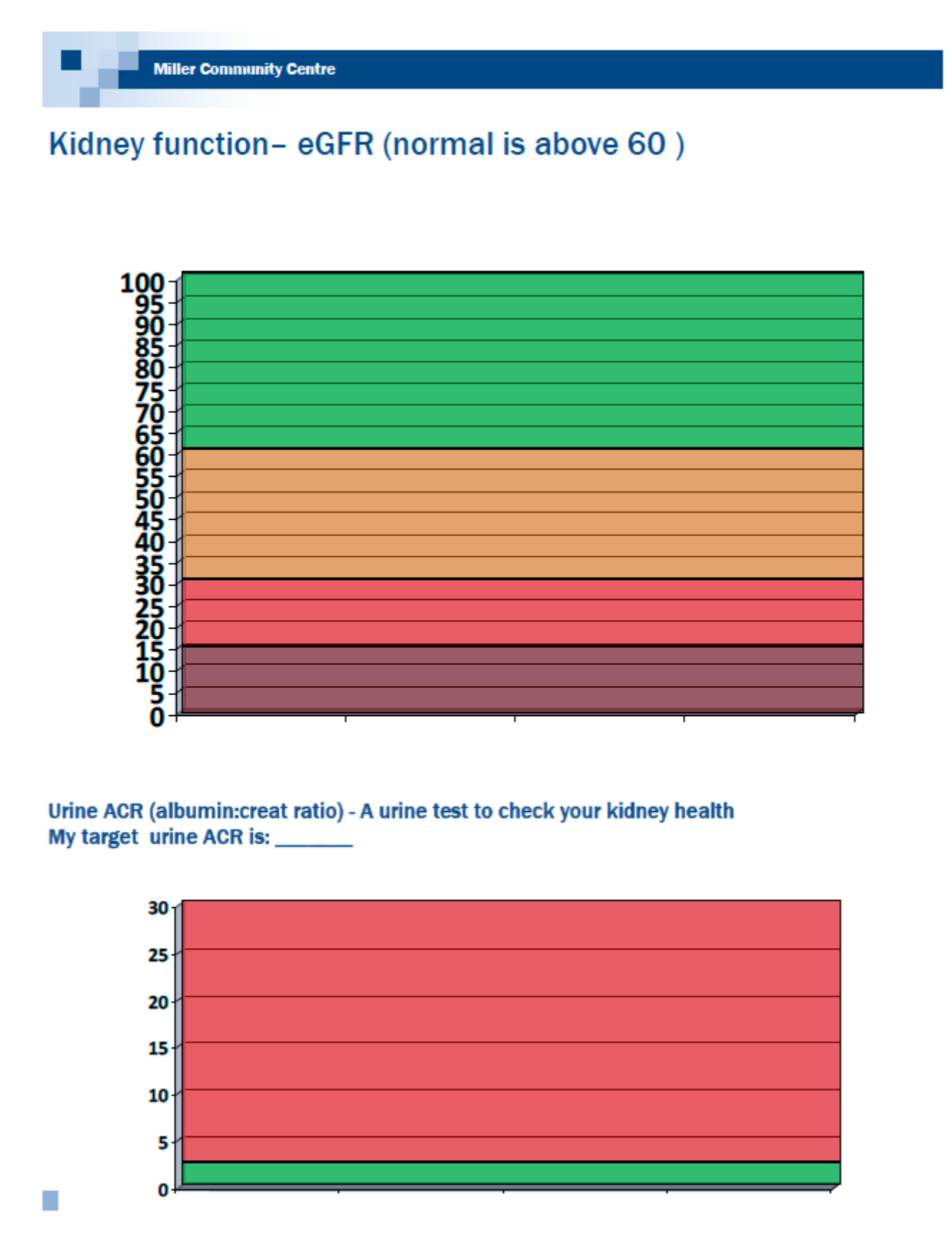
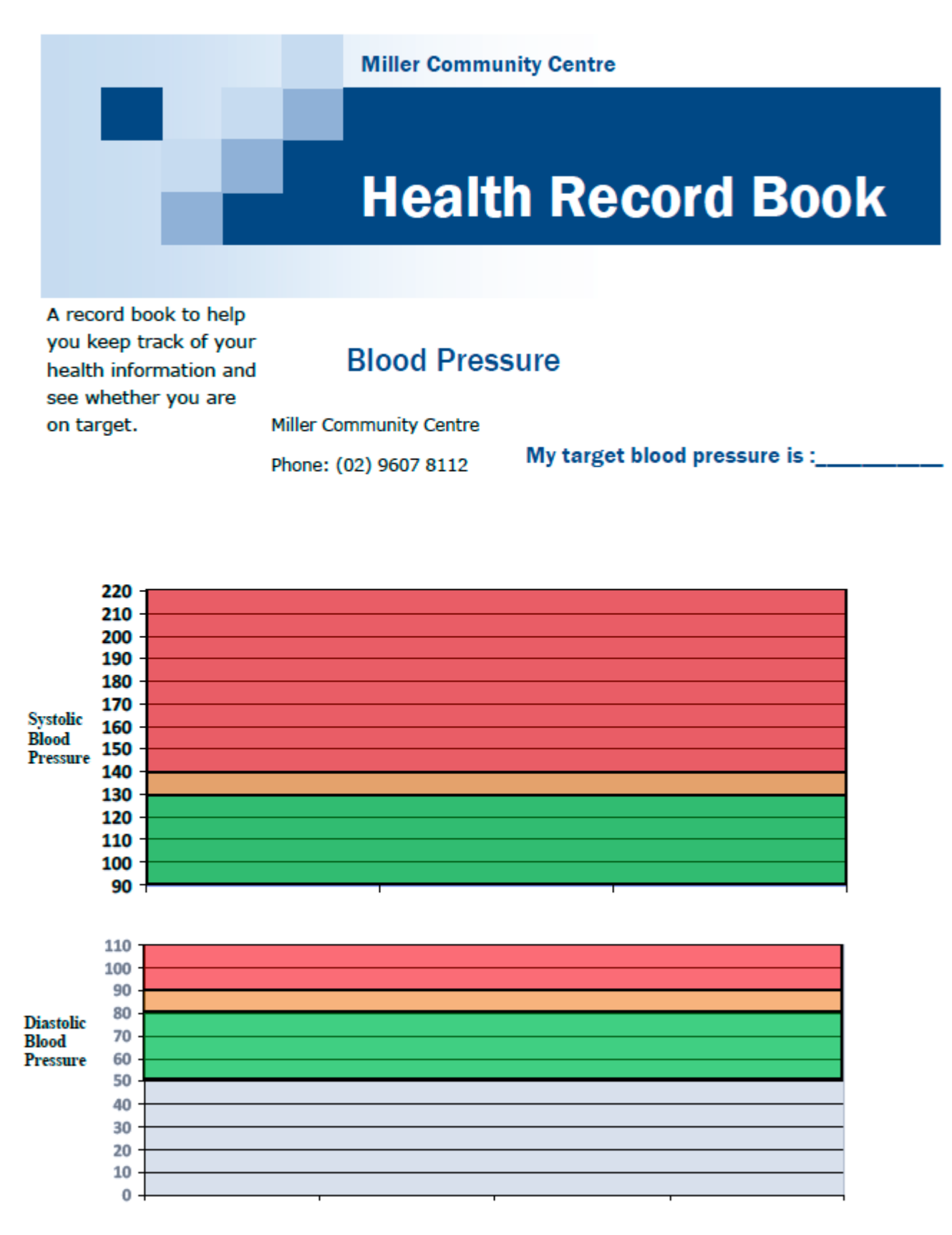


Introduction

Management of Chronic medical conditions in an indigenous community can be intricate, due to the fact that causative/contributing factors of the disease(s), and subsequent complications are way beyond the obvious diseases pathogenesis documented in medical literature. Believes, teaching/learning methods and makeup of the community fabric need to be incorporated in the prevention and management of diseases. Low income and low health literacy are both associated with poorer health outcomes.

The approach

This research looked at how we can assist clients understand and/or relate to their chronic disease(s), using simplified colour coded charts, similar to those used in between the flag charts across NSW hospitals – which were designed to meet the needs of the deteriorating patients . This study introduced peers education as a key education strategy. A peer education relationship is one of equals, not one where the teacher has all the knowledge or authority and the learner has none. The essential idea is that peer educators and learner share some degree of common experience and desire to help and learn from one another. Education sessions were informal, and organised to include other activities art & craft, painting and cooking classes.



Evaluation

Positive response on use of the health record book. " My kidneys are 'on orange', how do I get them to be on the green?" Quote from two participants. One of them quit smoking as advised, and her kidney function improved. Peer led interventions enhanced positive impacts on knowledge, confidence and attitudes. Peer mentoring has been acknowledged as important in improving the health of indigenous people.

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 Acknowledge the Traditional Custodians of the land on which I work and live, and pay respect to Elders past, present and emerging

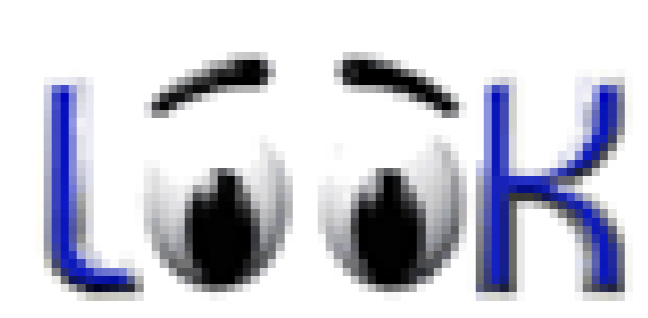
-Kidney Disease- Challenges in Early Community Diagnosis

Kidney disease can be 'invisible' in the population.

Cannot touch kidney



Cannot see kidney



Experience the symptoms when 90% of the kidney function is lost



Opportunities for Improvement

Potential for the health Record Book to be formalised and used within the wider population. Peer education could be used with the Aboriginal community, and communities Culturally and linguistically diverse (CALD) population.

Conclusions

In an urban based Aboriginal population where chronic disease is prevalent, the provision of peer education and health record books contributes to the optimisation of health literacy and quality of life through improved self management

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