

Improving Aboriginal heart health in Western Australia: bringing everyone on the journey

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Background: Bettering Aboriginal Heart Health WA [BAHHWA] research provides epidemiological and qualitative information about cardiac care and outcomes for Aboriginal people in WA. Aboriginal people experience both illness and death from heart disease at higher rates and a much earlier age, and many are further disadvantaged by living in rural and remote areas. This underscores the urgency to direct efforts towards primary/secondary prevention and earlier, community-based detection and intervention. To ensure continuity of care, access to high quality primary health care, improved integration (e.g., multidisciplinary teams) and continuity (linkages between primary and specialist/hospital care) through augmented discharge processes, strengthened Aboriginal Health Liaison Officer programs and up-to-date information technology solutions are vital.

This paper describes the knowledge translation [KT] processes involved in using BAHHWA research to initiate and support state-wide health system change. Initially focused on the development of the Information for Action (IFA) Report to disseminate the BAHHWA research results, this work has broadened to include many other KT strategies.

Methods: Through iterative consultative processes the BAHHWA team has collaborated with relevant WA and national stakeholders, through a variety of mechanisms including: joint workshops, sharing of resources and partnership development.

Results/discussions: KT initiatives and resulting actions have included:

- a series of workshops and reference group meetings with relevant Aboriginal and non-Aboriginal stakeholders informed the development of the IFA report, including themes covered and framework used. The ongoing engagement of Reference group members supports broad dissemination of the report
- a conference presentation that included a questionnaire to gauge GPs' knowledge needs resulted in planning for a 2-day heart health multidisciplinary primary care forum in the Pilbara for GPs, AHWs, allied health and administrators

- engagement of stakeholders in writing case studies about their work has led to further collaborations, for example with the Aboriginal Health Improvement Unit
- an Indigenous business conference panel has involved a broader range of stakeholders in the KT process
- a meeting with the WA Health Clinical planners.

Conclusions/implications: It is insufficient to demonstrate health inequity through research; it is vital that researchers also identify, initiate and support actions to implement what can be done to address the challenges raised by the research. Stakeholder engagement is an essential component of this process and must reflect the intersectoral collaboration needed, such as facilitating better service integration. Bringing all stakeholders on the journey means key messages and actions must be adapted to reflect different partnership needs.