

Insights into supporting the wellbeing of older Aboriginal people receiving home care packages who are experiencing grief and loss and the wellbeing of staff who care for them: a pilot project.

Why is this research important?

As the older Aboriginal and Torres Strait Islander population continues to age and live longer more people are accessing aged care services through the Home Care Package (HCP) Program (Australian Bureau of Statistics, 2022; Australian Institute of Health and Welfare, 2021). These services aim to provide choice and control to help older people live at home for as long as possible. Aboriginal and Torres Strait Islander peoples are eligible for aged care from aged 50 years. It is important to ensure that services and the workforce who provide aged care, appropriately respond to the unique social and emotional wellbeing (SEWB) needs of Aboriginal and Torres Strait Islander peoples. Placing greater urgency and significance on this, is the fact that as of 2023 all survivors of the Stolen Generations will be eligible to access aged care. SEWB, from the perspective of Aboriginal and Torres Strait Islander peoples, is a holistic approach to health and wellbeing that encompasses the social, emotional, spiritual and cultural health and wellbeing of the person and their community (Gee et al., 2014). However, the Royal Commission into Aged Care Quality and Safety (2021) found multiple inadequacies in meeting the needs of Aboriginal and Torres Strait Islander peoples receiving aged care. In this research we aimed to explore how services funded through the HCP Program support the SEWB of Aboriginal and Torres Strait Islander people and what the workforce requires to best support these needs.



Gee, G., et al (2014).

What did we do?

This study was proposed by the Chief Executive Officer Mr Graham Aitken, Aboriginal Community Services (ACS), a South Australian Aboriginal community-controlled aged care organisation in response to an identified need to better support clients receiving home-based aged care and workforce. Specifically, to understand how the HCP Program meets the needs of Aboriginal clients, acknowledging the significant experience of grief and loss and to also support the wellbeing and training needs of the HCP Program workforce coordinating their services. This research was conducted in partnership with ACS and Wardliparingga Aboriginal Health Equity, South Australian Health and Medical Research Institute (SAHMRI). Study activities were conducted under the guidance of a Study Advisory Group and a Chief Investigator Committee which included both Aboriginal and/or Torres Strait Islander and non-Indigenous community, aged care and research representatives.

The study comprised of three components. First, we interviewed community members who were receiving HCP services across South Australia in 2022-23. We asked people to share their views and experiences of how the services and items they received through the HCP Program supported their SEWB and what they required from the workforce to meet their needs. We consulted with HCP coordinators through a focus group and interview to explore how they understand and respond to clients' SEWB. Second, we reviewed aged care workforce training programs that would provide pre-entry and existing workforce the necessary knowledge and skills to support the SEWB of Aboriginal and Torres Strait Islander people in aged care.



Aged care coordinators and members of the research team

Third, we hosted an Aboriginal and Torres Strait Islander Healthy Ageing and Aged Care Research Symposium at the South Australian Health and Medical Research Institute, Adelaide on June 27, 2023. The symposium brought together national and state attendees including, community members, Commonwealth and State government representatives, aged care researchers, policy makers, Aboriginal controlled health organisations, advocacy services, health, aged care and community service providers.



Symposium attendees

What did we learn from community members about SEWB and their HCP services?

Community members identified that having a strong connection with Country, culture and community supported their SEWB. On the whole we heard that the HCP Program adequately addressed their basic home maintenance needs. Some people found it difficult to understand their HCP entitlements which required community members to work closely with their coordinator to plan services.

What did we learn from the HCP workforce?



Aunty Martha Watts, Arabana Elder and Study Advisory Group member

HCP coordinators understood that connection to culture and community was central to their clients' SEWB as they recognised the importance of cultural determinants of health. The coordinators talked about a range of services and items they sourced for clients that supported SEWB. The coordinators believed it was difficult to meet the SEWB needs of clients who were on a lower-level HCP (e.g., Level 1 and 2) due to the limited amount of funding available within these. They also described wanting to develop a deeper understanding of Aboriginal culture and cultural practices to inform the care they provided.

Aged Care Training Review

We reviewed publicly available information across the Vocational Education Training (VET) sector, higher education and health and aged care online repositories. We found that there are limited workforce training, resources and professional development opportunities in SEWB specific to Aboriginal and Torres Strait Islander peoples' needs in aged care. Furthermore, within the opportunities we found, there was a paucity of aged care training that included Aboriginal and Torres Strait Islander specific content areas.

Healthy Ageing and Aged Care Research Symposium

The symposium was divided into three sessions including invited guest presentations, community member insights, a panel discussion, research presentations and roundtable discussions. Invited guest presentations included highlighting key success factors for Aboriginal community-controlled health organisations (ACCHOs) to design and deliver aged care services and the implications of current and future reforms to the aged care sector for Aboriginal and Torres Strait Islander peoples. The panel discussion focused on building the capacity of the Aboriginal and Torres Strait Islander aged care workforce, aged care reforms, home-based support in rural and remote areas, appropriate engagement strategies, and the unique challenges faced by Aboriginal and Torres Strait Islander peoples in accessing and receiving aged care services. In the two roundtables,

we asked the attendees how they could address the themes above to support wellbeing of Aboriginal and Torres Strait Islander people receiving aged care. Their responses spanned a breadth of areas relating to and improving feedback pathways between consumers, organisations and policymakers.



Panel members: Mr Kym Thomas, Ms Elaine Kite, Mr Mark Elliot, Ms Leslie Nelson

What's next?

In this research we have found that there is a significant need for workforce training, with minimal existing programs available. In partnership with ACS, we are co-designing a training program that is tailored to those who work in Aboriginal and/or Torres Strait Islander aged care. The findings of this study will also inform future research relating to creating integrated pathways across aged care, health and social service delivery.

Research Team and Advisory Group Members

Mr Graham Aitken, A/Prof Odette Pearson, Dr Adriana Parrella, Mr Jonathon Zagler, Ms Matilda D'Antoine, Prof Alex Brown, Ms Tameeka Ileremia, Aunty Martha Watts, Ms Tina Brodie, Dr Kate Smith

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We acknowledge that SAHMRI is located on the traditional lands of the Kurna people and pay our respects to the Kurna people, Elders past and present. We acknowledge their continuing connection to this land and thriving cultural practices and knowledge. We pay respects also to the cultural authority of project participants from other First Nations lands.

References

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