Delivery of health care to Aboriginal Australians
The Experiences of Aboriginal Health Workers (AHW’s) and Health Professionals Working Collaboratively – A Systematic Review

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Background
Aboriginal Australians experience significant health inequity in relation to Non Aboriginal Australians1. Engagement and partnering with Indigenous Australian’s has been promoted as an effective way to close this health inequity1. Australian health policy contains strategies to increase the number of Aboriginal and Torres Strait Islander (ATSI) people participating in health service delivery1. This promotes increased opportunities for ATSI people to self determine policies and practices that effect culturally safe care provision to their own people. AHW’s are recognized as an important part of any health care delivery team trying to engage with and provide culturally responsive care, and an appropriate way of health organisations increasing the numbers of Aboriginal workers participating in health care delivery2. AHW’s are train primary health care professionals. By partnering with clinicians, the cultural distance between ATSI people and mainstream health services is narrowed, enabling increased access to health care2. Despite the acknowledgement of the benefits of partnership between Aboriginal and mainstream organisations, barriers remain that prevent effective interprofessional partnerships between clinicians and AHW’s3. If unilateral partnerships develop, this may impact negatively on the ability of health services to meet the needs of ATSI people.

Review Objective
To identify, appraise and synthesize qualitative evidence on the shared experience of interprofessional collaboration between AHW’s and health professionals delivering care to Aboriginal Australians.

The review aims to explore the following questions:
• What is the experiences of AHW’s and health Professionals working in collaborative clinical arrangements delivering care to Aboriginal people?
• What are the perceived factors within a health care organisation or service model which facilitate or prevent successful working partnerships between AHW’s and health professionals?

Methods
Type of participants
• Studies that include Clinicians, Aboriginal Health Workers, Aboriginal Liaison Officers and Community Health Workers working collaboratively to deliver care to Aboriginal Australians in a variety of health care settings.

Phenomena of Interest
• The shared experiences of AHW’s and clinicians in collaborative work arrangements from the perspectives of clinicians, AHW’s and clients receiving care if available.

Types of studies
• Qualitative data including, but not limited to, designs such as phenomenology, grounded theory, ethnography, action research and feminist research. In the absence of research studies, opinion papers, discussion papers and reports will be considered.

Types of outcomes
• A synthesis of theme/categories that relate to the perspectives of AHW, Clinicians and Clients regarding what elements support or obstruct collaboration to promote the provision of culturally safe care provision.

References