

## What to do if the patient declines to respond?

If the Aboriginal and / or Torres Strait Islander Australian status section is empty on a patient form or on the Patient Information and Recall Systems (PIRS), staff collecting the data must ask the question. The staff member is not obliged to convince a patient to answer. Patients may choose to disclose their identity or decline the question. Patients also have the choice to update or change their Aboriginal and / or Torres Strait Islander Australian status regardless of their response to the question in the past. It is essential that a patient is asked if they identify as an Aboriginal & Torres Strait Islander Australian at each appointment.

If the patient is further concerned with the use of data and requests information on how the data will be used, the staff member can refer the patient to the Australian Institute of Health and Welfare (AIHW) or the Australian Bureau of Statistics (ABS) websites for further details.

## What to do if a patient identifies as Aboriginal and / or Torres Strait Islander

A medical practitioner can undertake the Medicare Health Assessment for Aboriginal and Torres Strait Islander Australians (MBS item 715) upon receiving consent. The Assessment includes information collection for patient history, an examination, overall assessment, development of recommendations and information on appropriate interventions. A written record of the report may also be provided for the patient.

Aboriginal and / or Torres Strait Islander Australian patients must be registered for the Practice Incentive Program (PIP). The PIP consists of 8 individual incentives. The PIP Indigenous Health Incentive enables general practices and Aboriginal and / or Torres Strait Islander Australian health services to provide better health care specifically for Aboriginal and Torres Strait Islander Australian patients, including best practice management of chronic disease. For more information read the Indigenous-health-pip-guidelines here

<https://www.humanservices.gov.au/sites/default/files/2019/05/Indigenous-health-pip-guidelines.docx>

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# Asking the Question

**Are you of Aboriginal and / or Torres Strait Islander origin?**



## Why asking 'Are you of Aboriginal and / or Torres Strait Islander Origin?' is important

The under-identification of Aboriginal and Torres Strait Islander Australians in mainstream health services and National health data sets is a fundamental barrier to achieving health equality for all Australians. Aboriginal and / or Torres Strait Islander Australians experience and continue to have significantly worse life expectancy contrasted with non-Indigenous Australians.

Closing the Gap is the Australian Government's strategy dedicated towards enabling and empowering Aboriginal and / or Torres Strait Islander Australians to experience greater life expectancy, and better identification of Aboriginal and / or Torres Strait Islander Australians can help to close the gap.

## Health status of Aboriginal and Torres Strait Islander Australians

- Mental ill health is the most significant health issue for Aboriginal and Torres Strait Islander Australians. In 2018 37.5% of the Aboriginal and / or Torres Strait Islander Australian population in Victoria reported high to very high level of psychological distress.

- Aboriginal Community Controlled Health Organisations constantly report the adverse effects of trauma on the social and emotional wellbeing of the Aboriginal and / or Torres Strait Islander Australian population in the Western Victorian region. National mortality rates from suicide are 2.1 times greater among the Aboriginal and / or Torres Strait Islander Australian population compared to the non-Indigenous population.
- 68.2% of Aboriginal and / or Torres Strait Islander Australians aged 15yrs and older suffer from long-term health conditions, such as diabetes, cardiovascular disease, and respiratory disease, with 27.1% reporting fair or poor health.
- During 2014-2016, 10% of infants were born with a low birthweight compared to Aboriginal and / or Torres Strait Islander Australian families in Western Victoria with Ballarat (11.3%) and Wimmera-Grampians (11.8%) exhibiting even higher rates than the national Indigenous rate (10.4%).
- 15.2% of Aboriginal and / or Torres Strait Islander people have reported suffering from asthma.
- In 2016, accidental drug related deaths in Australia was 3.2 times more prevalent among Aboriginal and / or Torres Strait Islander Australians than Non-Indigenous Australians.

## Staff members 'Asking the question' about Aboriginal and / or Torres Strait Islander status may use the following statements to assist in explaining the reasons for asking:

- Aboriginal and / or Torres Strait Islander Australian status is one of the standard questions we ask all patients visiting our practice.
- Understanding the Aboriginal and / or Torres Strait Islander Australian status of our patients helps in the planning of services, and to monitor and improve health outcomes for the Australian community.
- Additional services may be identified and accessed by patients who identify as Aboriginal and Torres Strait Islander Australians such as specific immunisations and Pharmaceutical Benefits Scheme (PBS) listings, as well as assistance from Aboriginal Hospital Liaison Officers and Health Workers.
- All personal information is protected under the privacy act and will not be used for any purpose other than the reason for which it was originally collected.

If the patient has further concerns with the use of data and requests information on how the data will be used, the staff member can refer the patient to AIHW or Australian Bureau of Statistics website for further details.