# A George Institute Fact v Sheet

How can Local Health Districts and Networks cultivate anti-racist hospitals? – February 2023

The George Institute for Global Health Australia

# Facts:

- An audit recently applied to Queensland Hospital and Health Services and South Australia Local Health Networks found that most services demonstrated evidence of very high levels of institutional racism.
- In 2018-19, 32% of Aboriginal and Torres Strait Islander people who did not access health services when they needed to said this was due to discrimination.
- In 2020, 22% of Aboriginal and Torres Strait Islander adults reported being racially discriminated against by doctors, nurses and/or medical staff in the last 12 months.

#### **Project Cycle:**

2023-2027

#### **Partners**:

- The George Institute
- Flinders University
- Deakin University
- The Lowitja Institute
- University of Technology Sydney
- The University of Adelaide
- Central Australia Health Service Southern Adelaide Local Health
- Network

Sydney Children's Hospital Network Central Coast Local Health District

#### Supporters:

National Health and Medical Research Council

#### **Contact:**

To find out more about this project and its principal investigator Associate Professor Tamara Mackean or The George Institute, please contact Tina Wall +61 410 411 983 or <u>twall@georgeinstitute.org.au</u>

## **Background:**

- Racism has been clearly identified as a determinant of health and wellbeing for Aboriginal and Torres Strait Islander people.
- Aboriginal and Torres Strait Islander people continue to experience racism and discrimination within the Australian healthcare system.
- Racism is causing dire health consequences and inhibiting access to quality and safe healthcare services.

# Aims:

• To comprehensively understand and address the complex dynamics of racism, bias and colonisation in reforming hospital care for Aboriginal and Torres Strait Islander people and families.

# Methods:

- Decolonise existing tools such as the Readiness to Change Assessment (RCTA) and Promoting Action on Research Implementation in Health Services (i-PARIHS) framework.
- Evaluate health organisations' readiness to change beliefs, attitudes and processes that maintain inequity.
- Undertake Aboriginal patient journey mapping and review governance structures, workforce development, current quality indicators and processes for implicit bias.
- Develop, implement and evaluate interventions using multiple methods such as co-designing, yarning and deep listening.
- Disseminate findings to translate and scale-up successful interventions to achieve health systems and services change.

### Impact:

- Uptake and use of decolonised tools and frameworks to address racism.
- Health organisations will have a better understanding of successful interventions needed to eliminate racism from Australian healthcare services.
- In the long term, Aboriginal and Torres Strait Islander people will have increased access to safe and anti-racist health services.

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