

Burn units need to cater to Indigenous kids

November 11 2019



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Aboriginal health workers in burn units, and greater cultural competence in clinicians and health services, are urgently needed for Aboriginal and Torres Strait Islander burns patients who have the highest burn injury rates of all Australians.

Researchers are calling for the urgent need for culturally safe and for holistic care to be factored into hospital treatment and post-injury care for the large number of people from remote communities presenting with serious burns, particularly infants and children and their carers and

parents.

In a major study funded by the Australian Government NHMRC, researchers at Flinders University are working with the George Institute for Global Health and UNSW Sydney to address the issue.

With [burn](#) injuries among Aboriginal and Torres Strait Islander children at least double the rate of other children in Australia, the researchers interviewed 76 clinicians in multidisciplinary burn teams around Australia about their [burn care](#) for their families.

The resulting findings, published in the journal *Burns* (Elsevier), conclude there are "clear opportunities to improve healthcare" for Aboriginal and Torres Strait Islander children.

"Burns care for Aboriginal and Torres Strait Islander children and families in Australia is still predominantly informed by non-Indigenous concepts of health, healing and care delivery," says lead author, Flinders University Ph.D. candidate Sarah Fraser.

"The disjuncture between Western biomedical and Indigenous healthcare paradigms negatively impacts the delivery of care."

Burns care is an important but not isolated example, Ms Fraser says.

"The current power imbalance in favor of the scientific approaches to burns care extenuates the issue and constructive action is required to address this inequity."

Starting with care provisions in remote community clinics, the Coolamon project led by UNSW Professor Rebecca Ivers from the George Institute seeks to understand the gaps in care and bring better understandings of cultural and social requirements into major metropolitan burns units.

"Emergency and trauma settings, including burns units, are critical for provision of appropriate care for life-threatening injuries and rehabilitation afterwards," says Professor Ivers.

"However, care delivered needs to be holistic, and better address the needs of Aboriginal and Torres Strait Islander children and their families."

Flinders University ARC Fellow Dr. Tamara Mackean, who focuses on Australian healthcare delivery from an Indigenous perspective, says the research project is very important.

"Addressing these issues is a critical means by which acute care services can address broader issues of quality and safety for Aboriginal and Torres Strait Islander peoples and meet the national standards of care set by the Australian Commission on Safety and Quality in Health Care," says Professor Mackean.

"Achievement of these standards will contribute to redressing health inequities in relation to childhood burn injuries."

The latest paper, "What informs care? Descriptions by multidisciplinary teams about burns care for Aboriginal and Torres Strait Islander children," has been published in the journal *Burns*.

Background: While not comprehensively reported, Indigenous Australian children are disproportionately affected: they are more than twice as likely to be hospitalized for a burn injury as non-Indigenous [children](#), and mortality is five times as high.

According to 2013-14 statistics, Aboriginal and Torres Strait Islander people accounted for 9 percent of hospitalized burn cases overall, with the 480 cases representing 58 cases per 100,000 population, compared to

22 cases per 100,000 for other Australians.

The highest rate of burn injury was in the youngest age range (0-4 years) for both Indigenous (174 cases per 100,000 population) and other Australians (56 cases per 100,000 people).

More information: Sarah Fraser et al. What informs care? Descriptions by multidisciplinary teams about burns care for Aboriginal and Torres Strait Islander children, *Burns* (2019). [DOI: 10.1016/j.burns.2019.07.039](https://doi.org/10.1016/j.burns.2019.07.039)

Provided by Flinders University

Citation: Burn units need to cater to Indigenous kids (2019, November 11) retrieved 11 May 2024 from <https://medicalxpress.com/news/2019-11-cater-indigenous-kids.html>

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