“Well we have a clinic on Tuesday and they don’t come... .”

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Jan Dewing
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Introduction

• Collaborations between University of Wollongong and Alzheimer’s Australia
• Multi-disciplinary perspective (historical, Indigenous health and nursing)
• Two world views explained
• Questioning applicability of person centred care models of dementia for Aboriginal and Torres Strait Islander communities
• What does cultural competence mean for you and your organisation?
“Person Centred Care as Caring for Country”

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• Faye McMillan is a Wiradjuri woman from Trangie, Central West, NSW. Faye is the first Aboriginal person in Australia to gain a pharmacy degree and to go onto registration as a pharmacist.
• David Kampers Lecturer / Undergraduate Indigenous Health Coordinator.
• Victoria Traynor, Associate Professor, University of Wollongong
• Professor Jan Dewing, University of Wollongong and University of Canterbury.
“Dementia Education Online: Dementia in Aboriginal and Torres Strait Islander Communities”

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• David Kampers Lecturer / Undergraduate Indigenous Health Coordinator.
• Venessa Curnow is the Aboriginal and Torres Strait Islander Officer for Alzheimer’s Australia and works out of Cairns. Venessa is a Torres Strait Islander and her ancestry is originally from the Saibal Island.
Case Study:
Urban dementia experience: Early diagnosis

- Aunty Daph a respected Elder in the local urban Aboriginal and Torres Strait community. Aunty Daph is due for routine health appointment/health check at the local Aboriginal Medical Service (AMS). As is common the AMS transport is provided for all the Elders to enable them to attend their appointments.

- A bus comes to pick up auntie Daph and, unlike her, she forgot the bus was coming and she had already gone to her daughter’s place to look after the grandchildren. On another occasion, the bus arrived and Aunty Daph was ready to go but she was still wearing her nightie and was not aware that this was inappropriate. The children have been telling their mum about the “funny” things nanny does, for example, “She arrived to look after us in the middle of the day and we all got to have a bath. She then put on our pyjamas but we didn’t want to go to sleep and nanny got upset.”

- The daughter has talked to Aunty Daph’s sister and her siblings about mum’s strange behaviours. During one of the children’s routine visits to the AMS (e.g., dentist or immunisations) she mentions her mum’s strange behaviour to one of the female Aboriginal Health Workers. So far, everyone says not to worry. The bus driver repeatedly tells the Aboriginal Health Worker that Aunty Daph is not herself. Eventually, the day when Aunty Daph was waiting for the driver in her nightie the Aboriginal Health Worker (AHW) knew that action was required.
Case Study: Remote dementia care study: Impact on health of community

- Uncle Jim is a respected Elder, Lore man in his community. His diagnosis of dementia is very significant because of his role and responsibility for passing on knowledge e.g. hunting skills and knowledge. The young men listen carefully and attentively to Uncle Jim about what his role is to be in the community.

- During a usual hunting expedition with the young men of the community the young men know that they always go along the river bank to harvest kangaroo but today, for a second time, they have gone down the canon path.

- The young men know that there are no kangaroo down the canon path so they suspect that Uncle Jim has forgotten something. The young men will say to one another that Uncle Jim has “lost the plot” again. There already is a younger man who is being trained up to follow on his role in the community. This younger man will have the responsibility to inform the village Elders about Uncle Jim’s memory problems.

Conclusions

- Launch of the Dementia Initiative has led to increased knowledge and understanding about dementia in Aboriginal and Torres Strait Islander Communities.

- Social determinants of health for Indigenous Australians still need to be acknowledged as a consequence of colonisation.

- Mainstream service providers need to start their dialogue by acknowledging that Indigenous Australians live in two worlds.

- Heterogeneity of Indigenous communities needs to be acknowledged when developing dementia services.

- We need to ask ourselves and the organisations we work in what we mean by cultural competence.