

Diabetes in Aboriginal and Torres Strait Islander

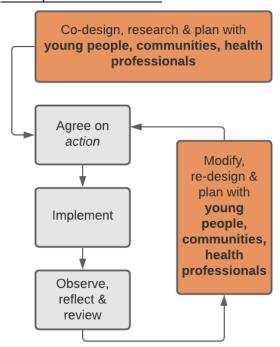
Children and Young People

Project overview: Rates of type 2 diabetes among Aboriginal and Torres Strait Islander children and young people are increasing and have been documented as twenty-fold higher than for non-Indigenous young people. Youth onset diabetes can have serious complications, significantly impair quality of life and reduce life expectancy. Managing youth type 2 diabetes can be challenging in a complex environment and research has indicated that there are opportunities to enhance support models to enhance the management of this condition. This project has three years of funding and spans across four regions: the Kimberley, Far North Queensland and the Northern Territory's Top End and Central Australia. It sits within the DIABETES across the LIFECOURSE: Northern Australia Partnership.

Project aim: This project aims to co-design and evaluate culturally appropriate, youth-friendly models of care for Aboriginal and Torres Strait Islander young people with type 2 diabetes across Northern Australia.

Methods: This is a mixed methods project that uses a developmental evaluation framework. This evaluation approach compliments innovative program design in complex settings by providing a continuous development and reflection feedback loop.

Developmental Evaluation:



Participating sites:

This project is part of a multi-site, multijurisdictional study with two sites participating in each of the following regions:

- Top End (NT)
- Central Australia (NT)
- Far North Queensland
- Kimberley (WA)

A mix of community controlled/health department, urban/remote sites have been included.

Inclusion criteria:

There are three tiers of participants included in this project, namely:

Tier 1 - Individual: Aboriginal and Torres Strait Islander people with type 2 diabetes aged 10-25 years

Tier 2 – Community: Members of the community interested in contributing to the co-design of diabetes models of care (including family and carers)

Tier 3 - Health systems: Health professionals involved in clinical management of youth type 2 diabetes

Data collection:

It is anticipated that each tier and participant group will focus on enhancing different components of care for young people with type 2 diabetes. For example: the individual tier will likely focus on developing support networks for enhanced diabetes care; the community tier is more likely to be focused on increasing advocacy



and support systems from a community-based perspective; and the health system tier is more likely to focus on systems directly related to youth type 2 diabetes clinical care within the scope of the health service.

Tier 1: Young people

Young people will be invited to contribute to this project by a health professional when attending their appointment at clinic. For those who consent, they can subsequently be involved in the following ways:

- 1. By participating in several questionnaires (including; Child and Youth Resilience Measure, PedsQL & aPHQ9, physical behaviour and social-demographic survey), a short interview and a medical record assessment at two time points throughout the project (Year 1 & Year 3)
- 2. By becoming a member of the Indigenous Youth Reference Group, which will meet bi-monthly and will be involved in co-designing activities and outputs for young people (such as youth camps and educational days)
- 3. By attending and participating in community events, workshops, educational days and youth camps codesigned as part of this project

Tier 2 and 3: Community and Health Services

The community will be invited to participate in this project through the clinic and by association with the young people involved in the project, along with recruitment from the project team at community events. Health professionals will be invited to participate via their health service's clinic manager and also through existing networks and partnerships. They will subsequently be able to contribute to the project in the following ways:

- 1. By participating in multiple workshops and focus groups
- 2. By participating in semi-structured interviews

Key outputs:

- Peer-support initiatives (such as youth camps and support networks)
- The development and production of educational resources for young people and health professionals (including the promotion of clinical guidelines)
- Strengthening aspects of the health system (including self-management support, information systems and decision support, and delivery system design)

Anticipated outcomes:

- 1. Positively influence self-rated quality of life (including Social and Emotional Wellbeing outcomes) through the development of new ways of providing health services and supports for young Aboriginal and Torres Strait Islander people with type 2 diabetes. This will include:
 - Supporting health professionals to deliver relevant and meaningful health messages and education.
 - Building community awareness, support networks and advocacy efforts to enhance type 2 diabetes management for young Aboriginal and Torres Strait Islander people.
- 2. Build awareness of youth type 2 diabetes to enhance and develop relevant support systems. Specifically:
 - Increasing diabetes knowledge for young people and their communities
 - Increasing health professional knowledge through education, development and promotion of guidelines and clinical pathways.

If you have any questions about the project, please contact:

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