Indigenous patients left feeling ‘isolated’

Justin Raymond

AN INDIGENOUS dialysis patient being away from home and families is no good.

That’s one of the messages from indigenous kidney patients calling for equitable care in a new report from Menzies School of Health Research.

In the *indigenous Patient Voices: Gathering Perspectives, Finding Solutions for Chronic and End-Stage Kidney Disease* 2017 report, renal patients and carers from across Northern and Central Australia highlighted the need for more holistic care and services to be made available closer to home.

Lead author Dr Jaquelyne Hughes said health care systems missed the mark in helping indigenous people feel connected to their country, communities and culture while they received treatment.

“Some patients reported homelessness and desperation because of this disconnect,” Dr Hughes said.

“They are not rejecting the desire to live well; they are rejecting the only model of care available to them.

“The care available to kidney patients was designed by and for people who live close to cities. This automatically excludes people who live further away and in the bush.”

Dr Hughes is among many health practitioners urging the Australian state, territory and federal government health ministers to respond to this call to action.

“We’ve highlighted the patient-reported barriers to accessing quality services for chronic and end-stage kidney disease, how and where services are delivered, how information is communicated and developing pathways and career opportunities for indigenous Australians within the renal health care workforce,” Dr Hughes said.

The NT has the highest rate of renal failure in the world and is faced with a projected rise in dialysis treatments in clinics of 70 per cent by 2022.