MEDIA RELEASE

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ROUNDTABLE TOWARDS ROADMAP FOR RENAL HEALTH

Reducing the misery and death caused by kidney disease will be the focus of Australia’s first roadmap to Indigenous renal health.

A renal roundtable convened by Indigenous Health Minister Ken Wyatt AM in Darwin began charting the roadmap this week.

“While strengthening current activity is important, a comprehensive plan for prevention and management is imperative,” Minister Wyatt said.

“Kidney disease often has its beginnings before birth and becomes a living nightmare, with our young people regularly showing symptoms in their teens.

“I commend the many dedicated people and organisations working to improve kidney health but at the moment it is like a jigsaw and there must be more coordination.

“There is barely an Aboriginal and Torres Strait Islander family unaffected by this tragedy, including my own.”

Currently, more than 1,700 Indigenous people receive kidney replacement therapy, with almost 60 per cent of these starting dialysis when they were under 55 years of age, compared with only 31% of non-Indigenous Australians.

“Statistics like this clearly show the challenge our people face,” Minister Wyatt said.

“Our communities are often vulnerable to conditions that can lead to poorer health.

“Once on dialysis, many people are required to travel long distances for treatment, impacting on their wellbeing and causing major disruptions to important community responsibilities and connections.

“The roundtable has focused on how we can change this picture for Indigenous Australians in many ways, from too many low birthweight babies with weaker kidneys, to the scourge of common childhood skin infections that can multiply the risk of renal disease sixfold.”
Professor Alan Cass, Director of Menzies School of Health Research, reinforced the benefits of a roadmap outlining priorities in kidney disease prevention and management.

“Kidney disease is having a devastating impact within Aboriginal and Torres Strait Islander communities,” he said.

“We cannot accept that progression to dialysis, and the need to move away from family, community and country, is inevitable.

“The roundtable brought together key community, health service, research and government stakeholders who are well-placed to support the coordinated effort called for by the Minister. We look forward to working together to make this happen.”

Minister Wyatt said the Turnbull Government had invested more than $27 million since 2014–15 for a range of specific renal support activities in the Northern Territory, South Australia and Western Australia through the Indigenous Australians’ Health Programme.

“Now is the time to look at what is and isn’t working, in frank and honest discussions on where the issues lie and where we need to re-double our efforts to find new and better ways of doing things,” the Minister said.

“I commend the roundtable contributors, who have begun unpacking the underlying issues and mapping out a whole-of-life approach.

“Individuals, community and health care organisations and all levels of government – Commonwealth, State and Territory – have a responsibility for this and we must work together.

“The future of thousands of Indigenous Australians depends on our collective success.”

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