

# Opportunities to strengthen primary health care for Aboriginal and Torres Strait Islander young people

## Authors:

Harfield S<sup>1,2,3,4</sup>, Azzopardi P<sup>4,5</sup>, Mishra G<sup>2</sup>, Ward J<sup>1</sup>

<sup>1</sup> Poche Centre for Indigenous Health, University of Queensland, <sup>2</sup> School of Public Health, University of Queensland, <sup>3</sup> Aboriginal Health Equity, South Australian Health and Medical Research Institute, <sup>4</sup> Adolescent Health and Wellbeing team, The Kids Research Institute, <sup>5</sup> Global Adolescent Health Group, Murdoch Children's Research Institute

## Background:

Achieving optimal health and wellbeing is critical for Aboriginal and Torres Strait Islander young people; however, there are significant gaps in access and utilisation of primary health care (PHC) among this group.

## Methods:

A multiphase mixed methods research study utilising Indigenous methodologies was used to understand how young people access, interact with, and experience PHC services from the perspectives of young people, healthcare providers, and Aboriginal community-controlled health organisations (ACCHOs). Indigenous and non-Indigenous knowledges were integrated to identify opportunities to strengthen PHC services to better respond to the health and wellbeing needs of Aboriginal and Torres Strait Islander young people aged 15-24 years living in urban southeast Queensland. This study was guided by Indigenous leadership, governance, and engagement with Aboriginal and Torres Strait Islander young people and ACCHOs.

## Results:

10 recommendations were identified across three themes that aim to strengthen PHC services for Aboriginal and Torres Strait Islander young people: 1) Strengthen the provision of PHC and the healthcare system to respond to the health and wellbeing needs of Aboriginal and Torres Strait Islander young people; 2) Improve the accountability of the healthcare system and governments to respond to the health and wellbeing needs of Aboriginal and Torres Strait Islander young people; and 3) Strengthen the capacity of Aboriginal and Torres Strait Islander young people to access PHC services. Each recommendation is accompanied by a set of actions to support its implementation.

## Conclusion:

Improving PHC access for Aboriginal and Torres Strait Islander young people should focus on implementing, funding, and evaluating these recommendations. The realisation of these recommendations is critical for improving Aboriginal and Torres Strait Islander young people's access and utilisation of PHC services, and ultimately, contributing to improving their health and wellbeing.

## Disclosure of Interest Statement:

Harfield was supported by the *Australian Government Research Training Program Scholarship*, a *UQ Poche Centre for Indigenous Health Research Top-Up Scholarship*, a *Lowitja Institute Higher Degree Research Top-Up Scholarship*, and a

*Top-Up Scholarship from the Australian Longitudinal Study on Women's Health,  
funded by the Australian Government Department of Health and Aged Care.*