

2025

DFA CONFERENCE

**ABSTRACT SUBMISSION FORM**

Submissions should focus on high-quality original research in diabetes-related foot disease with relevance for clinical practice, now or in the future.

**06JUL25 ABSTRACTS CLOSE****23JUL25 OUTCOMES ADVISED****submit your form to****[nationaloffice@diabetesfeetaustralia.org](mailto:nationaloffice@diabetesfeetaustralia.org)****TITLE** Co-designed amputation resources for Aboriginal South Australians**AUTHORS** Courtney Hammond<sup>1\*</sup>, Michael Turner<sup>1</sup>, Matthew Kemsley, Saraid Martin<sup>1</sup>, Kim Morey<sup>1</sup>**EMAIL** saraid.martin@sahmri.com**INSTITUTION** Wardliparingga, SAHMRI**ABSTRACT (maximum 450 words. Please use the following or similar headings: Background/Methods/Results/Conclusions)****Background**

The rate of lower limb amputation in South Australia during 2011-2018 for Aboriginal people was 3.4 times greater than the non-Aboriginal population rate and accounted for 4.9% of all amputations. Health care teams acknowledge that a loss of limb can be a life changing event with inequities in access to services creating barriers that lead to difficulties engaging Aboriginal patients experiencing an amputation.

Previous work from SAHMRI found that the amputation journey for Aboriginal patients in South Australia is complex and variable, yet stories of strength and determination was evident. Further, this report detailed 40 recommendations for targeted health system improvements across each phase of the amputation journey for Aboriginal South Australians.

The aim of this project is to implement the report recommendation regarding development of culturally appropriate amputation resources, as to date there are no suitable resources available in South Australia.

**Methods**

A co-design, Aboriginal lived-experience led resource development project has commenced to create culturally informed decision-making resources to support informed choices along a person's amputation journey. The resources will be used across South Australia, central Australia and western NSW and will be freely available to clinicians, service providers, and community.

Aboriginal knowledge and experience will be privileged throughout, with expertise sought from clinicians caring for those experiencing amputation, and communication, design and production experts.

Throughout the project, staff utilise reflective practice to capture progress.

**Results**

To date a lived-experience, culturally safe workshop was convened with 10 community members attending. Community member shared their stories, and articulated priorities for where additional resources would have aided their amputation journey.

Subsequently, a clinician workshop was held, with 25 multi-disciplinary clinicians attending to confirm the evidence base aligning with the most pressing priorities identified by the lived-experience group.

A communication company has analysed the data and produced a communication and dissemination strategy.

An Aboriginal owned production company is producing the first person resources

By the Conference date, film and other resources production will have been completed and able to be shared.

**Conclusions**

The amputation journey is difficult, complex, and distressing for Aboriginal people in South Australia. This project addresses one aspect of amputation care that has been shown to be deficient by delivering co-designed, culturally informed decision-making resources.