

# Aboriginal and Torres Strait Islander Peoples

## Contact Tracing Context

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### Aboriginal and Torres Strait Islander Peoples Contact Tracing Context

#### Key principles:

- respect the diversity of Aboriginal and Torres Strait Islander peoples
- engage an Aboriginal and/or Torres Strait Islander Health Worker to ensure cultural safety
- establish a strong relationship with the client in the first consultation
- ensure effective engagement to enable successful recalls for treatment and contact tracing purposes
- use a holistic model of care<sup>[1]</sup> in order to ensure effective engagement and improve health outcomes.

#### Specific considerations:

- consider the potential impacts of stigma around sexual health and drug use
- Gender of the contact tracer: check local protocols regarding men's business and women's business
- determine whether client mobility may lead to them being lost to follow-up and/or treatment.
- It is not uncommon for Aboriginal and Torres Strait Islander people to use multiple identifiers and have multiple addresses and care should be taken to:
  - clarify preferred client name(s) and contact details
  - confirm client's preferred method for follow-up and future contact
- be aware that there may be multiple users of a single mobile phone
- confirm the client has fully understood discussions as English may not be their first language
- reassure clients that, if positively diagnosed, they will, in most cases, receive treatment and lead a healthy and long life.

#### Confidentiality and Privacy

- explain what information may be provided to Public Health Units or other third parties (e.g. the Syphilis Register) and why.
- explain who can access their information and how.
- discuss that contact tracing can be conducted anonymously.
- discuss and take into account the potential consequences for the patient if a partner is diagnosed with an STI or BBV, despite efforts to preserve anonymity

#### Contact Tracing

- explain the different methods of contact tracing giving the client a choice. In order to avoid or minimise feelings of shame or fear of retribution, patient-initiated contact tracing may **not** be appropriate.
- emphasise that contact tracing protects the health and wellbeing of the people the client cares about in a non-judgemental manner.
- discuss how close personal relationships will be managed.
- engage the Public Health Unit (who will work in partnership with Aboriginal Community Controlled Health Organisations (where appropriate) to undertake confidential and anonymous contact tracing of people where appropriate and when contacts are located outside the clinic geographical area (in another town or state for example).

#### Reference

[1] Davy, C., Kite, E., Sivak, L. et al. *Towards the development of a wellbeing model for Aboriginal and Torres Strait Islander peoples living with chronic disease.* *BMC Health Serv Res* 17, 659 (2017). <https://doi.org/10.1186/s12913-017-2584-6>

#### Resources

Young Deadly Free: STI and BBV control in remote communities *Clinical Practice and Resource Manual* July 2019 SAHMRI Available from [youngdeadlyfree.org.au](http://youngdeadlyfree.org.au)

*The Kimberley Contact Tracing Guidelines* provide some useful general tips on factors to take into account when talking to patients about contact tracing

Specific state and territory guidelines can be found [here](#)

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