Work It Out; a self-management and rehabilitation program  
for urban Aboriginal and Torres Strait Islander people  
Dr Alison Nelson and Samara Dargan

What is the project?  
The Work It Out program is a self-management and rehabilitation program designed to assist urban Aboriginal and Torres Strait Islander people in preventing and/or managing their chronic disease(s). It offers participants a unique opportunity to learn about managing chronic disease and to start making practical changes to lifestyle in a way that is reflective of the distinct needs and perspectives of Aboriginal and Torres Strait Islander people.

Why was it undertaken?  
The Aboriginal and Torres Strait Islander Community Health Service (ATSICHS) located at Woolloongabba, identified a need for services aimed at addressing the needs of their clients with a chronic disease.

What are the objectives?  
- Promote self-management of chronic disease by empowering participants to take control of their health and wellbeing through a combination of education and exercise
- Promote inclusion of family and community to achieve improved health of the broader Aboriginal and Torres Strait Islander community, not just the individual
- Developed to reflect the holistic nature of Aboriginal and Torres Strait Islander concepts of health and wellbeing. As such, the program addresses physical, social, emotional, spiritual and functional aspects of health.
- Decrease the burden of chronic disease in urban dwelling Aboriginal and Torres Strait Islander people.
- The program is flexible and participant-centred, tailoring information, activities and exercise to suit the needs of the clients. The program also makes allowance for participants to prioritise family commitments, sickness and sorry business when necessary.
- Reduce barriers to accessing Work It Out; this includes providing a free program, providing a free transport service to and from sessions, running the program through Aboriginal and Torres Strait Islander health services and ensuring all staff are equipped with the knowledge and skills to create a culturally safe environment.

What are the outcomes?  
- The program has seen more than 300 clients attend the program at least once, with approximately 70 currently active.
- Preliminary data analysis was undertaken over 4 locations between the 15th February 2012 – 6th May 2013. During this period there were 146 unique participants with 55 male and 91 female. The average age of all clients was 54 years, with a minimum of 18 years and a maximum of 83 years.
- Preliminary data analysis was performed on two key health outcome indicators – blood pressure (BP) and blood glucose levels (BGL), with 146 participants on 1883 individual observations
- Using a linear model, systolic BP and BGL both improved over time on a group level. For systolic BP, the results demonstrated that for each session attended, the mean systolic BP dropped by 0.044 units (95%CI = 0.004 to 0.084 units), p < 0.05.
  - For BGL, the results demonstrated that for each session attended, the mean BGL reading dropped by 0.042 units (95%CI = 0.028 to 0.056 units), p < 0.001.
- Qualitative interviews were also conducted with approximately 30 clients. Positive themes with the three most common being; social and emotional benefits; physical benefits and community connectedness.
- More analysis is required

What is the key lesson learned?  
Most important common learning is allowing there to be flexibility in the program. Having no mandatory start and finish is much easier for the clients to attend and regain their routine if sickness has occurred or other family business for example, if a client cannot start on week 1 of the current cycle but can start week 3 we still allow the client to enter the program at week 3 and not wait for the current cycle to finish before starting the client at week 1 of the new cycle.