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**SPEECH TO AUSTRALIAN INDIGENOUS DOCTORS' ASSOCIATION
CONFERENCE**

FAMILY – UNITY – SUCCESS

HUNTER VALLEY, NSW

THURSDAY 21 SEPTEMBER 2017

AMA PRESIDENT DR MICHAEL GANNON

Indigenous health – turning words into action

I acknowledge the Wonnarua People – the traditional owners and custodians of the land, and pay respects to their elders, past and present.

My thanks to the Australian Indigenous Doctors' Association for the invitation to speak here today. It is a great privilege.

Congratulations on your 20th Anniversary. You have come a long way.

Aboriginal and Torres Strait Islander people face adversity in many aspects of their lives.

There is arguably no greater indicator of disadvantage than the appalling state of Indigenous health.

Aboriginal and Torres Strait Islander people are needlessly sicker, and are dying much younger than their non-Indigenous peers.

What is even more disturbing is that many of these health problems and deaths stem from preventable causes.

The battle to gain meaningful and lasting improvements has been long and hard, and it continues.

I sit on the Western Australian State Perinatal and Infant Mortality Committee. Aboriginality is a depressingly regular theme in these Stillbirths and Neonatal Deaths.

I am proud to be President of an organisation that has for decades highlighted the deficiencies in Indigenous health services and advocated for improvements.

While there has been some success in reducing childhood mortality and smoking rates, the high levels of chronic disease among Indigenous people continue to be of considerable concern.

For the AMA, Aboriginal and Torres Strait Islander health is a key priority. It is core business.

It is a responsibility of the entire medical profession to ensure that Aboriginal and Torres Strait Islander people have the best possible health.

It is the responsibility of doctors to ensure that patients – all patients – are able to live their lives to the fullest.

Many of you will know that the AMA has a Taskforce on Indigenous Health, which I Chair.

The Taskforce develops and recommends Indigenous health policy and strategies for the AMA to champion with governments and other agencies.

Along with AMA leadership, the Taskforce has representatives from AIDA, NACCHO, the Royal Australian College of General Practitioners, and the Australian Medical Students' Association.

The Taskforce has been working since 2000. The Taskforce helps the AMA develop its annual Report Card on Indigenous Health.

These Report Cards comment on topical issues in Aboriginal and Torres Strait Islander health, and recommend solutions that we urge governments to embrace.

The consistent message in all of these Report Cards is that the health of Aboriginal and Torres Strait Islander people will not improve until the factors that contribute to poor health, the social determinants of health, are addressed.

This year, the AMA's Report Card on Indigenous Health – to be released in November – will focus on ear health and hearing loss.

Aboriginal and Torres Strait Islander people in Australia suffer from some of the highest levels of ear disease in the world, and experience hearing problems at up to ten times the rate of non-Indigenous people across nearly all age groups.

Hearing loss has health and social implications, particularly in relation to educational difficulties, low self-esteem, and contact with the criminal justice system.

To address ear health issues among Aboriginal and Torres Strait Islander people, it will be necessary to continue raising awareness, improving strategies for prevention, providing funds for further research, and improving access to services.

The AMA hopes the Report Card will be a catalyst for government action to improve ear health among Aboriginal and Torres Strait Islander people.

All our governments must address the broader social determinants of health, which contribute to the development of ear disease.

At every opportunity, the AMA highlights the issues of housing, clean water, transport, food security, access to allied medical services, and other social determinants that contribute to chronic disease and act as barriers to treatment and prevention.

The AMA has said time and again that it is simply unacceptable that Australia cannot manage the health care of the first peoples, who make up just three per cent of our population.

When it comes to Indigenous health, the Federal Government needs to broaden its thinking.

For too long now, people working in Indigenous health have called for action to address the social issues that affect the health of Aboriginal and Torres Strait Islander people.

Education, housing, employment, sanitation, clean water, and transport – these all affect health too.

This is clearly recognised in the Government's own *National Aboriginal and Torres Strait Health Plan 2013-2023*, yet we continue to see insufficient action on addressing social determinants.

One message is clear – the evidence of what needs to be done is with us.

There is a huge volume of research, frameworks, strategies, action plans and the like sitting with governments – and yet we are not seeing these being properly resourced and funded. We do not need more paper documents. We need action.

The AMA recognises that Indigenous doctors are critical to improving health outcomes for their Aboriginal and Torres Strait Islander patients.

Aboriginal and Torres Strait Islander doctors have a unique ability to align their clinical and cultural expertise to improve access to services, and provide culturally appropriate care for Indigenous patients.

But there are too few Aboriginal and Torres Strait Islander doctors and medical students in Australia.

My father grew up in Dowerin in rural WA. He had long lost the title of its best ever footballer before Lance 'Buddy' Franklin was born.

I grew up in Perth and went to primary school with Aboriginal kids. The same was true at high school.

Later in my University training and as a Doctor-in-training, I had regular exposure to a high proportion of Aboriginal patients at Royal Perth Hospital and King Edward Memorial Hospital.

But at University, I had little contact with Indigenous people.

In 2017, there are just 281 medical practitioners employed in Australia who identify as Aboriginal and/or Torres Strait Islander – representing only 0.3 per cent of the workforce.

In 2016, around 286 Indigenous students were known to be studying medicine. It is, as you in this room know, slowly changing.

The Indigenous medical workforce must grow significantly to achieve overall improvements in Indigenous health.

To help boost the number of Indigenous medical students, and ultimately doctors, the AMA has offered a scholarship to an Indigenous medical student each year since 1994.

Over the years, our Scholarship has helped support more than 20 Indigenous men and women to complete their medical degrees.

Our most recent Scholarship recipient, James Chapman, understands the importance of family, culture, and education.

At a young age, James saw both of his parents endure health problems, and unfortunately lost his father to acute myeloid leukaemia after a short battle with the disease.

While he did not realise it at the time, James has said his father was a victim of the gap that exists between Indigenous and non-Indigenous Australians.

His father's death made him realise his potential to contribute to his fellow Indigenous populations by providing access to health services.

James now has a purpose to study medicine so that he can practise in rural and remote Australia, offering Indigenous people access to equal health care, and addressing a major socio-economic inequality in Australia.

He realises that closing the gap between Indigenous and non-Indigenous people isn't a one-man job.

But he takes comfort in knowing that he can contribute and make a difference to his fellow Indigenous people's lives - prolonging and preserving a culture that holds a very important place for himself and many others.

The AMA worked hard to achieve Deductible Gift Recipient (DGR) status for our scholarship, and we are actively seeking donations, hoping to award a second annual scholarship for the first time this year.

Increasing the number of Indigenous doctors is a goal, not just for the AMA, but for all of those involved in closing the gap and improving the health and wellbeing of Australia's first peoples.

The AMA will continue advocating for an increase in the number of Indigenous doctors in Australia.

The AMA has been a persistent, sustained, and powerful voice on Indigenous health for decades.

During that time, much has changed for the better, particularly as a result of the Close the Gap campaign. Recent cuts to funding are a huge concern.

Despite good intention and considerable investment by successive governments, the disparity in health outcomes remains.

Each year, the Prime Minister delivers a report on Closing the Gap, which in recent years has been profoundly disappointing.

The Closing the Gap reports sadly are not delivering on positive outcomes to improve Indigenous health.

Nor do they deliver one extra doctor when and where they are needed most.

They certainly provide no new funding.

Achieving health equality for Aboriginal and Torres Strait Islander Australians is an incredibly difficult task.

There have been some gains, but we need to do more – much more.

We must ensure that our governments do not fatigue in this task. They have the support of the broader Australian community.

It will take time, but most of all it will take ongoing commitment.

Governments at all levels must make meaningful investment in Indigenous health, and work with Indigenous communities to develop solutions that address their unique health needs.

Local Indigenous communities and local Indigenous people have the knowledge and expertise. They know what works. Without using this experience, the gap will remain wide and intractable.

The AMA has repeatedly said that it is not credible that Australia, one of the world's wealthiest countries, cannot address the health and social justice issues that affect three per cent of its citizens.

We will continue to work with governments to take action to improve health and life outcomes for Aboriginal and Torres Strait Islander people.

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