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Transcript: AMA President, Dr Michael Gannon with Tim Shaw, 2CC, *Breakfast*, 23 August 2017

Subject: National Press Club Address, Marriage Equality, Private Health Insurance, Immunisation, Welfare Drug Test Trial

TIM SHAW: The National Press Club today will host Dr Michael Gannon, he's the AMA President. And I've got to tell him, at minus three this morning when I got to work, it felt like minus six. It's presently three in the capital, feels like zero. But his address to the National Press Club today as the AMA president is *Beyond the Freeze*.

And I'm pleased to say Dr Michael Gannon joins us on 2CC *Breakfast*. Michael Gannon, good morning.

MICHAEL GANNON: Good morning, Tim.

TIM SHAW: Yeah, look, it was a bit cold in Canberra. Why are we having an address from you called *Beyond the Freeze*? What's it all about?

MICHAEL GANNON: Look, the AMA will comment on many public policy health and social issues, but we can't comment on the weather, Tim. But there'll be plenty else to talk about today.

TIM SHAW: Absolutely. I've spoken to doctors here in Canberra; they love their practice, they work so hard to maintain the best possible health for their patients, but they're concerned, they're confused, as are former Presidents of the AMA, as to why you've come out as the President of the AMA saying that Australians' mental health is at risk unless we vote yes in this survey. Were you verbed or is that what you said?

MICHAEL GANNON: Well, if you're referring to our *Position Statement on Marriage Equality*, we do see this as an issue of discrimination and inequity, and where that exists it will often adversely contribute to mental and physical health. We know that there are a lot of our members unhappy about the Statement. We know we've had resignations. That's the right of members to make their point in that way.

What does need to be said is that an overwhelming number of our members have indicated support for the policy. We don't make our policies to seek popularity, but we believe we're in line with community sentiment and, most importantly, we believe we're in line with the health issues on this Statement.

TIM SHAW: Yeah, no, it's interesting. And you and I spoke about representation last year when you addressed the National Press Club, and I was pleased that you were also on this program last year. Isn't it difficult? Effectively, the Australian Medical Association is a lobby group; you do your best to represent the views of some doctors. You've got more than 30 per cent of Australian doctors as practitioner members of the Australian Medical Association. But it does become tough when effectively you're only representing a minority view of doctors. How do you get more members to join the AMA? Do you have to have more of an open conversation with your members to attract greater membership and therefore be even more representative of Australian doctors?

MICHAEL GANNON: Well, one of the great laments of our organisation internally is that non-members enjoy many of the same benefits as members do. And you know what any group of people or any society's like, there are people who are prepared to do the heavy lifting, and there are other people who are along for the ride, that's just a fact of life.

But the fact that there's no compulsion to be a member gives us legitimacy to speak out. There are other areas, even within the health industry, where doctors pretty much have to be a member, or have to hold a policy, or have to have a relationship with one of the Colleges whereas, with the AMA, people can choose to come in, to come out, they can resign to make a point, they can join to make a point.

But we are the only organisation that represents the entire profession, from medical students through to retired doctors. We are the only organisation that can possibly claim to look after the interests of GPs, hospital doctors, surgeons, physicians, et cetera, and that gives us great legitimacy when we speak out.

TIM SHAW: I've got to say, I back you 100 per cent on this comment you've made regarding the end of junk health policies. Health insurance is so damn confusing, Michael Gannon, that a lot of my listeners are saying, 'Tim, we're spending \$2000-\$3000-\$4000 dollars a year and we still don't know what we're insured for'. What are you calling for, Dr Michael Gannon?

MICHAEL GANNON: Well, I couldn't agree with you more on that point, Tim. Because what policy holders, what patients are entitled to is transparency and clearness and clarity on exactly what they are covered for. Now, in terms of the levels of coverage, that can be debated; in terms of what's in the policy, that needs to be discussed, and we've certainly got our opinions on that.

But at the very least, we've got to get rid of this deliberately confusing and bewildering number of policy options. Very simply, if you're privately insured, you're entitled to the expectation that you're entitled to see a private doctor in a private hospital, and that basic value proposition is what sets private medicine apart from the very good product that serves many Australians in the public system.

TIM SHAW: Yeah, well said. Can I check with you whether the AMA was verbally by Minister Porter on *The 7.30 Report*? Did the AMA ever say that the no jab, no pay policy - regarding the vaccination of children - did the AMA ever say that this policy would never work?

MICHAEL GANNON: No, no, I think that we've supported Mr Porter and the Government on this element of policy. Now, what we did do was say that we needed to look at it very carefully, and we believe in a balanced approach of both of sticks and carrots. But I've been happy to commend Mr Porter on this policy initiative.

We're always uncomfortable in telling people exactly what to do, but on issues of population-wide childhood vaccination, we are strongly supportive of it, and have been advocating on that front long before Minister Porter or any other member of this Government took an interest in it.

TIM SHAW: Yeah, too true. And look, you and I and our listeners are very concerned about the dearth and the spread of methamphetamine - ice. There's a new trial, very similar to that idea of no jab, no pay; if you're found to have consumed drugs and you're also a welfare recipient, particularly in the Canterbury-Bankstown area, they're doing a trial there. Do you support the idea that Government, in part, should link welfare payments - Newstart payments - to someone that may be a drug user? And if they're found to have drugs in their system the second time, they'll be referred to some form of drug rehab. What's the AMA's view on this new policy?

MICHAEL GANNON: Well, this is one area where I do have disagreement with Minister Porter, and I've written to him on this exact issue. We do not think that drug testing should be linked to welfare payments. We don't think that drug testing should be involved when people turn up to work in a hospital, or turn up to work in the Parliament for that matter.

Drugs of addiction like ice should be treated as health issues, and we should be trying to help people. If you expose individuals, who let's hope are trying to get themselves off one of these poisons, who are trying to put their life back together, applying for jobs, working in the community, the last thing we want to do is set them backwards, discriminate against them, make their life worse by withdrawing welfare payments -

TIM SHAW: Thank you -

MICHAEL GANNON: The ultimate aspiration is to get these people back to being productive members of our community.

TIM SHAW: Well said, I'll look forward to your address at the National Press Club today. Thank you so much for your time.

MICHAEL GANNON: Good morning, Tim.

TIM SHAW: Dr Michael Gannon, President of the Australian Medical Association.

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