



## MEDIA STATEMENT

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### **Indigenous doctors demand real and long term results in Aboriginal and Torres Strait Islander kids' health**

The Australian Indigenous Doctors' Association (AIDA) urges for a measured, far-reaching and sustainable approach in implementing the Australian Government's plan to tackle child abuse issues in the Northern Territory.

"Failure to take such an approach will most certainly undermine any real attempts to deal with these issues," said Dr Mark Wenitong, AIDA President.

Dr Wenitong cautioned against the rushed approach that has not included consultation with Indigenous people or the medical community.

"Protecting and nurturing our children is our first priority. We welcome any just initiative that promotes the safety, wellbeing, health and equality of opportunity for our children. However, these issues are by no means new and have been raised with governments for a very long time."

"Indigenous children are dying at three times the rate of non-Indigenous kids and have been for a long time. We have considered this to be a 'national emergency' for some time. We need action across the length and breadth of this country."

"While AIDA welcomes the bipartisan and bilateral commitment of all governments in overcoming child abuse in Aboriginal communities, the underlying factors are serious and complex and must not be treated in isolation from sustainable and far-reaching measures."

"As medical professionals, we question the notion that you can treat poverty, dispossession, marginalisation and despair (the root causes of substance misuse and sexual, physical and emotional abuse) with interventions that further contribute to poverty, dispossession, marginalisation and despair."

Associate Professor Helen Milroy, child and adolescent psychiatrist, warned that the government's approach to conduct compulsory health checks for Indigenous children under 16 was well-meaning but short-sighted. "Given the layers of trauma in communities, a healing approach must be taken otherwise we will just repeat the past under a different guise."

Associate Professor Milroy, who as a clinician working for five (5) years in a sexual abuse unit, conducted hundreds of medical examinations, said “often the results are inconclusive at best and normal examinations do not rule out abuse...forcing children to submit to an intrusive examination without good evidence or parental consent is akin to abuse. You really need the expertise to know what you are doing.”

Dr Wenitong said that “any meaningful response must be conducted within a holistic and intersectoral framework. For example, land and culture are central to Aboriginal and Torres Strait Islander peoples’ wellbeing and any real gains will need to take these on board. Comprehensive health infrastructure, including environmental health measures must also be part of the picture”.

“To really restore functioning in our families, and address long standing neglect, a culturally appropriate mental health response must be included in the package,” said Associate Professor Milroy.

AIDA strongly appeals to the Australian and NT governments to also recognise the education of our children as priority requiring the same level of commitment.

We fully support Ms Anderson’s and Mr Wild’s finding about the centrality of education. Education and health measures properly implemented will be an immediate, direct and major contribution toward closing the gap in life expectancy between Aboriginal and non-Aboriginal kids.

“However it is not enough for our kids to just attend school. Attendance at school does not necessarily equate to good education. We need quality schools, quality teachers, parental engagement and adequate resources.”

AIDA calls on governments, our colleagues in the Australian Medical Association and other health and medical organisations to work with Aboriginal and Torres Strait Islander health organisations, such the National Aboriginal Community Controlled Health Organisation and the Congress of Aboriginal and Torres Strait Islander Nurses, and practitioners to ensure that the government’s plan will result in long-term improvements to the health of our people, that last beyond the budget cycle.

“I am concerned about the implementation detail to support these initiatives. If the Australian government is genuine in its commitment to Aboriginal and Torres Strait Islander health, this initiative will need to be supported by carefully considered implementation in consultation with Indigenous people” said Dr Wenitong.

Media contact

Mary Guthrie 02 6273 5013 or 0400 970 656 or [mary@aida.org.au](mailto:mary@aida.org.au)