

Talk-About

The official newsletter for the Aboriginal and Torres Strait Islander Health Unit

April/May 2017

Metro North Hospital and Health Service *Putting people first*

Aboriginal and Torres Strait Islander Family Fun Day

A family fun day will be held at St Columban's College as part of NAIDOC Week Celebrations (2-9 July 2017).

The 2017 NAIDOC theme – *Our Languages Matter* – aims to emphasise and celebrate the unique and essential role that Indigenous languages play in cultural identity, linking people to their land and water, and in the transmission of Aboriginal and Torres Strait Islander history, spirituality and rites, through story and song.

The event, to be held from 10am – 2pm on Tuesday 4 July, is designed as a family fun day for the Aboriginal and Torres Strait Islander communities on the north side including Zillmere, Caboolture and Redcliffe.

Hospital and health staff will also be invited to attend, and key stakeholders will be invited to participate by holding a health promotion stall at the event.

The event will feature a Welcome to Country, Aboriginal and Torres Strait Islander dancing, art and cultural workshops, traditional games, language and storytelling.

MNHHS Aboriginal and Torres Strait Islander Health Unit Director Paul Drahm said NAIDOC Week was an important time of the year to celebrate Aboriginal and Torres Strait Islander history, culture and achievements.

“It provides an important opportunity for our staff, community members, local elders, patients and visitors to all come together to recognise the contributions that Indigenous Australians make to our country and our society,” Mr Drahm said.

“There really is something for everyone at our family fun day and I encourage our staff, patients and local communities to come together as one to celebrate our unique and diverse Indigenous culture in Queensland”.

The Aboriginal and Torres Strait Islander Health Unit will also be supporting two community events – Kilcoy NAIDOC Celebration on Sunday 2nd of July at Yowie Park and the Northside NAIDOC Event held on Koobara Kindergarten grounds in Zillmere on Thursday 6th of July.

The event will feature a Welcome to Country, Aboriginal and Torres Strait Islander dancing, art and cultural workshops, traditional games, language and storytelling.



Metro North Hospital and Health Service *Putting people first*

2017 NAIDOC CELEBRATION

Caboolture Family Fun Day



PROGRAM

- 10am–10.30am**
Welcome to country and official opening
- 10.30am–11.30am**
Aboriginal and Torres Strait Islander dancing
- 11.30am onwards**
Sausage sizzle and lunch from food vans
- 11.30am–12.30am**
Cultural workshops: language, basket weaving and face painting
- 12.30pm – 1.30pm**
Emergency services presentation, sports clinics and Indigenous games
- 2pm**
Event closure

PLUS

- A FREE SAUSAGE SIZZLE
- JUMPING CASTLE
- ANIMAL FARM
- TRADITIONAL GAMES
- SPORTS CLINICS

The event is proudly supported by the MNHHS Aboriginal and Torres Strait Islander Health Unit, Community, Indigenous and Subacute Services and St Columban's College



Contact information

Indigenous Hospital Liaison Officers

Royal Brisbane and Women's Hospital, Floor 5, Ned Hanlon Building	Fax: 3646 2284
Wendy Lewis	Ph: 3646 7489
Bernadette Bird	Ph: 3646 1696 or 3647 4171
Tyler Lea	Ph: 3647 4178
Dell Hagan	Ph: 3646 4154
Patricia Kennedy	Ph: 3647 9535
After Hours Service (RBWH)	Friday and Monday 3.30pm to 8pm Saturday and Sunday 10am to 6.30pm
Enquiries (Hospital Switch)	Ph: 3646 4154 or 3646 8111
Aunty Janet Layton	Ph: 3647 4183 or 3646 5106
Candice Simpson	Ph: 3647 4171
The Prince Charles Hospital, Ground Floor, corridor leading to the Coronary Care Unit)	Fax: 3139 5810
Aleacha Hopkins	Ph: 3492 1818 or 0439 082 908
Mark Budd	Ph: 3139 5165
Caboolture Hospital, Allied Health Department, Ground Floor	Fax: 5433 8730
Stella Laidlaw	Ph: 5433 8249
Redcliffe Hospital, Safety Quality and Performance Unit, West Block	Fax: 3049 6767
Rox-Anne Currie	Ph: 3049 6791
Improving the Patient Journey	Email: Improving_the_Patient_Journey@health.qld.gov.au
Rayna Cowburn	Ph: 3646 5612 or 0408 023 733
After Hours Liaison Officer (RBWH)	Friday and Monday 12 noon to 8.30pm Saturday and Sunday 10am to 6.30pm
After Hours, Robert Brown	Ph: 0409 583 967
The Prince Charles Hospital, Temiah Henaway:	3139 6429 or 0429 897 982
Royal Brisbane and Women's Hospital, Ronald Agie	Ph: 3646 5612 or 0439 274 152
After Hours Liaison Officer (TPCH)	Friday and Monday 12noon to 8.30pm Saturday and Sunday 10am to 6.30pm
Indigenous Acute and Primary Care Team	
Manager: Robyn Chilcott	Ph: 3492 1823
Sexual Health Team	
Manager: Robyn Chilcott	Ph: 3492 1823
Indigenous Strategic Development Team	
Manager: Isaac Simon	Ph: (07) 3139 4912 or email Isaac.Simon@health.qld.gov.au



Give us feedback

Talk-About

We welcome your feedback, contributions, story ideas and details on any upcoming events. Please contact Aboriginal and Torres Strait Islander Health Unit Communications Manager Renee Simon at Renee.Simon@health.qld.gov.au or phone (07) 3139 3231.

Aboriginal and Torres Strait Islander Health Unit

If you have any feedback regarding the Aboriginal and Torres Strait Islander Health Unit services, programs and initiatives, you can contact the following:

Mail to:

Aboriginal and Torres Strait Islander Health Unit, Building 26, Cherside Community Health Centre, 490 Hamilton Road, Cherside QLD 4032.

Email to:

A_TSIHU_MNHHS@health.qld.gov.au

Alternatively, call and ask for our Safety and Quality Officer on 3647 9531.

Executive Director's message

Community, Indigenous and Subacute Services



Chris Seiboth
Executive Director, Community,
Indigenous and Subacute Services
Metro North Hospital and Health Service

This month we will celebrate National Reconciliation Week (27 May – 3 June) by officially signing our Statement of Commitment to Reconciliation as a service. Our Executive Team will gather on Tuesday the 30th of May for the signing at Brighton Health Campus as a first step in our path of developing a CISS Reconciliation Action Plan (RAP).

The RAP will form part of our public commitment to undertake practical actions within the health field to contribute to reconciliation in Australia. This will outline our actions to build strong relationships and enhanced respect between Aboriginal and Torres Strait Islander peoples and other Australians. As the CISS RAP sponsor, I hope to build more opportunities for our Indigenous workforce and to contribute to enhanced partnerships to help close the gap on life expectancy outcomes.

This statement of the commitment is just the first step. We want to take time to carefully plan the RAP through working groups with staff and executive leadership. Rather than just say what we are going to do within the RAP, we want to show what we can achieve together as a service by building a culturally responsive and safe environment for all. Our workforce development and planning will occur with clear targets and deliverables over the next 24 months. I'm committed to achieving real and meaningful change as we walk the path towards reconciliation.

A brilliant example of this was our touch football match held last year with the CISS All Stars and Aboriginal and Torres Strait Islander Health Unit teams as part of Reconciliation Week. Not only was the game a fun opportunity to get to know each other, all of our services and community came together as one. I still have vivid memories of our food services staff dressing as cheerleaders in the Aboriginal flag colours, cheering us all on from the sidelines.

This year we will again hold a special Reconciliation Shield match with our staff on Friday the 2nd of June. All staff are invited to take part. If you would like to register a team or to even enjoy the match from the sidelines, please contact (07) 3139 4117 or email Phillip.Ahmat@health.qld.gov.au.

Chris Seiboth
Executive Director,
Community, Indigenous and
Subacute Services

A word from the Acting Director



Paul Drahm
Acting Director, Aboriginal and Torres
Strait Islander Health Unit

In March we held a farewell morning tea for the former Director of the Aboriginal and Torres Strait Islander Health Unit, Angela Scotney.

I'd like to acknowledge Angela's commitment to the role over the past 6 years and her achievements, including improved hospital access for Aboriginal and Torres Strait Islander patients and growing the cultural capability of our services from 6 staff to now over 50 identified positions.

On behalf of all the Aboriginal and Torres Strait Islander Health Unit, I wish her well for the future.

I was pleased to see a commitment across Metro North Hospital and Health Service to recognise Close the Gap day on March 16th.

Our unit hosted a special event for staff at Brighton Health Campus with Aunty Brenda Kanofski sharing her healthcare journey story. Something pertinent from Brenda's words was that 'we are all in this together' and improving the gap on health outcomes is a journey we must take as one.

At the event I told the audience that Brisbane will have the highest population of Indigenous people across Australia, with the 2031 population projected at 133,189, almost double all other states in Australia.

As you can see, with this growth, we now more than ever, play an integral role in the health of our people. Over the next 12 months we will be committing to:

- A further roll-out of our Identification campaign. Just a few weeks ago MNHHS endorsed a new policy for Accurate Indigenous Identification, meaning staff at all levels now have the tool to ensure our Aboriginal and or Torres Strait Islander patients are correctly identified. Correct identification of Indigenous status is fundamental to understanding and measuring their personal health needs, service monitoring, evaluation and planning in a culturally appropriate manner.

- Launching our statement of commitment as the first step in our Reconciliation Action Plan.
- Working towards our new models of care for Ngarrama Child Health, Sexual Health, Acute and Primary Care and our Hospital Services.
- Improving our cultural integration within CISS core business and framework. This commitment ensures Indigenous influence and participation within all models of care and dedicated cultural education schedules for all CISS staff.

I'd also like to acknowledge the commitment from our staff during the recent CISS accreditation. Our Safety and Quality Manager Tracy Grant coordinated all of our accreditation requirements and ensured we were fully compliant with our mandatory training status. This is no easy task and I would like to thank Tracy. The Cultural Capability Officers also delivered multiple face-to-face training sessions to a total of 450 CISS staff members. We continue to receive positive feedback from the sessions and this further enhances our commitment to making *Indigenous health everybody's business*.

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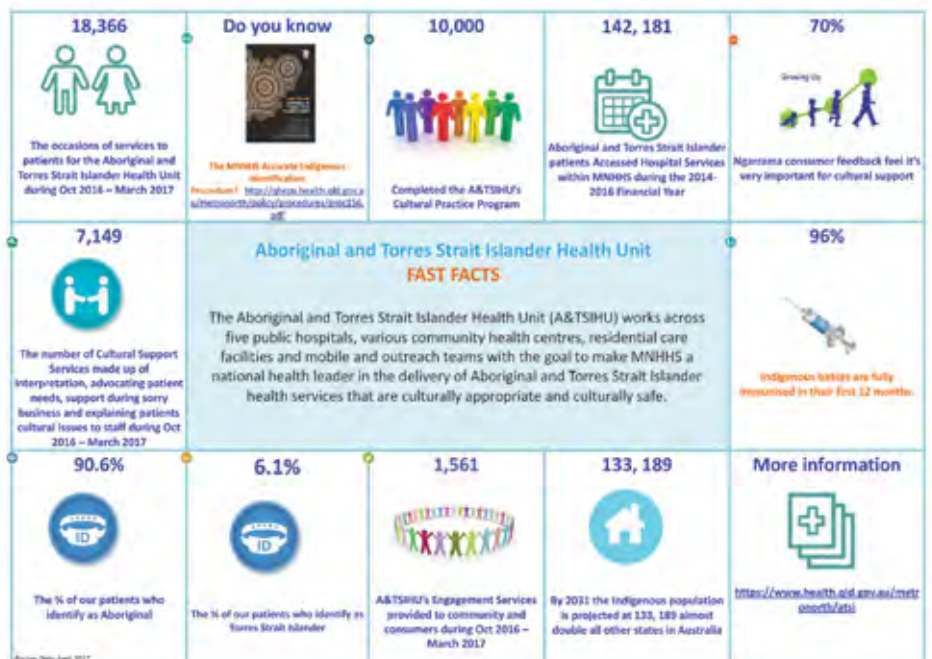
Safety and Quality with Tracy Grant



The past 6 months leading up to Accreditation has been a very eye opening experience for me in my role as Indigenous Safety & Quality Officer. I have gained so much knowledge which is just the beginning in the Safety & Quality world. I would like to take this opportunity to acknowledge the support from all staff in A&TSI Health Unit and the ladies in CISS Safety & Quality Unit and CISS Education in the preparation, participation and celebration of this event.

Those who participated in the A&TSI Health Unit interview at Chermside Community Health Centre with the Surveyor – Virginia West were:

- A&TSI HU Management represented by phone conference Paul Drahm – Director
- The Adult Acute Primary Care Team represented by Laurel Lincoln and consumer Aunty Faye Gundy
- The Indigenous Hospital Service represented by Natasha White – Program Manager and Alecha Hopkins – Team Leader
- The Indigenous Strategic Development represented by Isaac Simon – Program Manager
- The Ngarrama Project Team represented by Kelly Smith – Project Lead



- CISS Safety & Quality – Gai-Maree Cain and A&TSI HU Indigenous Safety & Quality – Tracy Grant

The A&TSI Health Unit staff worked together with persistence to demonstrate our participation in Accreditation. I look forward to what the future holds.



Indigenous Acute and Primary Care Team

with Manager, Robyn Chilcott

Clients often see how their experiences in the group have created a special bond and identity between group members. By sharing feelings, accomplishments, losses, and humour known only to those who experience chronic illness on a daily basis, community members can develop strong emotional ties to one another. Clients who may already have a highly supportive network of family and friends can find that a group provides a place to continue to share feelings without overburdening loved ones and by offering a safe place to express and explore their feelings.

The Indigenous Acute and Primary Care Team have a primary goal of improving, maintaining and supporting clients in the community and post discharge from hospital services ensuring they can safely return home from hospital with services provided to support their health needs. The team follow up with regular home visits to support clients in the community and coordinate care required to avoid hospital readmission.

Learning to Develop Effective Coping Skills

Support group participants to learn to regain previous levels of coping or to develop more effective coping skills. By sharing information and resources, learning how others have coped with similar problems, and witnessing the coping styles of others, clients can improve their own problem-solving abilities. Our client morning teas/ support groups offer realistic feedback as they learn new coping skills, learn to be more assertive with health care professionals, and share their health journey with significant people in their lives.

CLIENT MORNING TEA / SUPPORT GROUP

As a result of community feedback, the team hold regular morning teas/ support groups for clients of the service who have complex chronic illness. These groups provide an opportunity for feedback and a safe environment for clients to share their stories.

At the April morning tea; the team invited an Occupational Therapist from CISS to present to the community on how to prevent falls and to educate the group on further support services that were available. This was well received by the client group and education on health concerns is a regular part of our client morning tea/support groups.

Apart from providing education on health issues and awareness in the community; these groups support our clients in a number of ways:

Decreased Sense of Isolation

Perhaps one of the most important benefits of participating in a support group is a decreased sense of the isolation so many people feel when they are experiencing chronic illness. In a culturally appropriate support group environment, feelings of anger, depression, guilt and anxiety can be expressed, validated by others and accepted as a normal response to dealing with chronic illness.



L-R: CISS Occupational Therapist Michelle Kearney, Indigenous Community Liaison Worker Sandra Markwell and client Aunty Loraine Franks. Michelle presented to the group on ways to prevent falls as part of 'April No Falls' month.

A sense of emotional strength can return as clients gain a sense of control and their own capacity to make decisions during a difficult crisis.

Emotional energy can help clients cope with other life issues and challenges as they become more confident in managing their own health.

For further information, please do not hesitate to call : Robyn Chilcott, Manager, Indigenous Acute & Primary Care Team & Sexual Health Team, (07) 3492 1823.

Enhanced Self-Esteem

The morning tea also creates an environment where clients benefit from enhanced self-esteem when they improve their coping abilities.



Members of the Acute and Primary Care Team (back) with Local Indigenous Elders (front row)

Vision

To ensure that all Aboriginal and Torres Strait Islander people within the Metro North Hospital and Health Service catchment and beyond, have equitable access to health services that are culturally appropriate and culturally safe.

Mission

To increase health services for Aboriginal and Torres Strait Islander peoples within the MNHHS area and to urban, and rural and remote communities across Queensland in order to improve health outcomes and contribute to the Council of Australian Governments' (COAG) Close the Gap initiatives.

We will do so by delivering high quality and culturally safe holistic health care to our Aboriginal and Torres Strait Islander patients, families and their communities accessing our hospitals and facilities.

Core Values

- To be committed, honest and work together for our Aboriginal and Torres Strait Islander people
- To advocate for positive health outcomes
- To display respect and dignity to our patients and their communities
- To respect our patients cultural beliefs and understand their needs

Indigenous Sexual Health Team

with Program Coordinator, Ronald Abala

The Indigenous Sexual Health Team, based at Pine Rivers Community Health Centre, delivers services to communities within the Metro North Hospital and Health Service (MNHHS) catchment area and offer referral to service providers who can meet the needs of the community.

The team regularly visits community centres and areas where marginalised and potentially high risk people reside. Education is offered as required and may be group or one to one addressing individual needs. Condom distribution is provided at each venue and provision of culturally appropriate support.

The ISHT provides innovative services to the wider community via various mediums, including the following outreach programs:

- New Farm Neighbourhood Centre – weekly attendance
- Aspley Acres Caravan Park (Art Workshop)
- Sandbag Sandgate – fortnightly attendance
- (KYC) Kids Youth Community – as required
- The North West Aboriginal and Torres Strait Islander Community Association (NWAICA) – education programs are delivered on a needs basis – these programs generally are delivered over 6 weeks
- 139 Club – request for male staff to provide sexual and reproductive health education and supports to men's group (weekly)

If you would like further information regarding the outreach programs, please contact the following staff members:

Team Leader/Health Worker

Ron Abala – 07 3492 1822
or 0437 692 632

(CNC) Clinical Nurse Consultant

Dene Campbell – 07 3492 1807
or 0448 946 566

Advanced Health Worker

Kim Wedel – 07 3492 1803
or 0439 983 051

What is Contact Tracing – a commonly used term in Sexual Health

Contact tracing is the identification, diagnosis and tracing process of sexual partners of infected individuals, testing them for infection, treating the infected and tracing their contacts that may have come into contact with the infected person.

This process is undertaken with due care, respect and confidentiality towards any individual in these circumstances.

We undertake this process contact tracing when requested by other Sexual Health services and workers, GP's, Public Health Units, Syphilis Register and other service providers.



Indigenous Strategic Development Team (ISD)

with Manager, Isaac Simon

Over the past two months, the Cultural Capability Officers have been busy conducting cultural audits throughout all of our Community, Indigenous and Subacute Service (CISS) facilities, 13 in total. A comprehensive assessment of environmental factors that contribute to the service of Aboriginal and Torres Strait Islander consumers, as well as identifying systems and process that will enable a better service to be provided to Aboriginal and Torres Strait Islander consumers was completed.

The main topics for environmental factors included reviewing:

- Visual representation and Acknowledgement of Indigenous Australians (flags displayed, plaques with Acknowledgements to country and artwork)
- Indigenous healing gardens and relaxing spaces
- Welcoming language and statements upon arrival to facilities

- Staff wearing Indigenous lanyards and pins
- Comfort of the environment internally and externally
- Friendliness of staff
- Resources available

Topics for systems and process included:

- Indigenous versions of mainstream publications available
- Accurate Identification processes and FAQ displayed for staff
- Training needs of staff
- Support mechanisms in place for Indigenous consumers
- Quality assurances of processes ensuring consumers are not missed through the Identification process

A series of recommendations will be provided to the Executive Director on ways to improve the cultural safety and appropriateness of the facilities and to ensure a consistent service is provided to our Aboriginal and Torres Strait Islander Patients.



We are also seeing a direct improvement of identification rates across our services due to the mandatory policy being introduced across MNHHS.

Our patient identification over the past 3 months is:

- 41.1% Male (1596 patients)
- 58.9% Female (2283 patients)
- 90.3% Aboriginal (3482)
- 6.3% Torres Strait Islander (242)
- 2.4% both Aboriginal and Torres Strait Islander (94)
- 1% Other (31) – partner or child of Aboriginal or Torres Strait Islander

Ngarrama Child Health

The Importance of consulting with elders

By Maddie Mitchell, Ngarrama Indigenous Social Worker

Any new service addressing the needs of Aboriginal and Torres Strait Islander people will always benefit from a consultative process with community Elders. In the initial development stage of a new service design, the Elder's feedback can help identify community expectations and needs, gaps in services, other services or if there is any competing or conflicting interests in community. They can identify the areas in which the needs are the most immediate and intensive support is critical and what the community consider to be the most important and urgent issues. The advantages to the service model integrating feedback from Elders can strategically augment the new service, as community has ownership and buy-in, creating a sense of belonging. Elder support of a new service is fundamental to how the service is received in community and consequently how well it is attended.

Ultimately the Elder's can be the bridge between the community and the service.

However, the most important step in an Elder's consultation process is showing respect to the Traditional Owners and the Elders by asking permission for the new service to practice on their country. Historically, the hierarchal structures of leaders in the Indigenous clans were stripped away by colonisation. Facilitating a consultation process will give a voice to our leaders/Elders and the ability to determine support options, giving agency back to the community. Adhering to Indigenous protocols can be the crucial element in a successful service that is well utilised by community members.

The original Ngarrama Child Health Service went through a community Elders consultation process in 2012, where it was granted the right to practice under the name "Ngarrama" by Aunty Barra Hubbert. From the Yuwaalayaay language, meaning Guardian Birth Spirit, Ngarrama, was a free antenatal and birthing service for Aboriginal and Torres Strait Islander families who choose to birth at the Royal Brisbane and Women's Hospital, Caboolture, Kilcoy and Redcliffe Hospitals.

With the newly designed Ngarrama Family Health Service there will be an upcoming Elders Consultation event held in May at the Brighton Health Campus.



Ngarrama social worker Maddie Mitchell pictured at the recent Ngarrama Family Day held at Brighton Health Campus.

The event will be lead by the Acting Director of the Aboriginal and Torres Strait Islander Health Unit, Mr Paul Drahm with the Ngarrama Family Health Project Team, who will present the model of service to the Elders. Following this, there will be an open discussion forum and time for the Elders to provide feedback on the new Ngarrama Family Health Service.

This was purposefully planned at this time so the project team has opportunity to make the necessary changes to the model of service in the design phase before the envisaged roll out later this year. There will be a morning tea and a light lunch available at the forum.



Pictured are Elders consulted during the launch of the Ngarrama Maternity Services in 2012, including Aunty Barra Hubbert (centre right) who named the service Ngarrama from the Yuwaalayaay language.



Indigenous Hospital Services

with Natasha White, Program Manager

We travelled to Woorabinda, Rockhampton and Gladstone to talk about issues experienced.

Throughout the meetings the following themes appeared to affect their community when traveling to Brisbane:

- Cultural
- Financial Issues
- PTSS – Patient Travel Subsidy Scheme
- Hospital Administration
- Discharge Summaries
- Lady Cilento Children’s Hospital

Engagement throughout Central Queensland has highlighted the need to design and develop a consumer induction kit for travel to Metro North Hospital, review PTSS approved listings of accommodation services showing current gap fees surrounding RBWH and TPCH and engage better with our communities.

Engagement Survey

We would like to hear from Aboriginal and Torres Strait Islander people, who are travelling to Brisbane from rural and remote communities for medical purposes and using the MNHHS hospital facilities, specifically The Royal Brisbane and Women’s Hospital and The Prince Charles Hospital. By completing the survey you will allow us to gain better knowledge of what type of support you and your family require.

The survey will take 5-10 minutes to complete and all respondents will go into the draw to win a ‘Proud to Identify’ polo shirt. If you have any questions, please contact Rayna Cowburn, Indigenous Service Improvement Coordinator, Phone: 3139 6622 OR rayna.cowburn@health.qld.gov.au.

The survey can be found on our website <https://www.health.qld.gov.au/metronorth/atsi>

Indigenous Hospital Services Engagement

In March Rayna and I travelled to Central Queensland, to engage with health and community based agencies in relation to Aboriginal and Torres Strait Islander population accessing Metro North Hospitals. The focus of these meetings was to gain some knowledge of the region and the needs of our mob that travel to Brisbane for medical purposes.

Indigenous Access

Indigenous consumers accessing Metro North HHS 2014, 2015, 2016 Financial Years

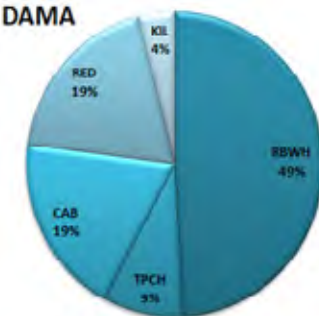
Over a three year period, 2014-2016 financial year, analysis of data collected has indicated that there was a total 142,181 Aboriginal and Torres Strait Islander consumers recorded as accessing Hospital Services within Metro North, this is outlined in the below drawing.

MNHHS Indigenous population of approximately 14,951 (ABS Census 2011). In 2016 alone MNHHS serviced 53,717 Indigenous consumers. That compared to the Census indicates there is an estimated 38,766 increase in the number of Indigenous consumers accessing facilities.

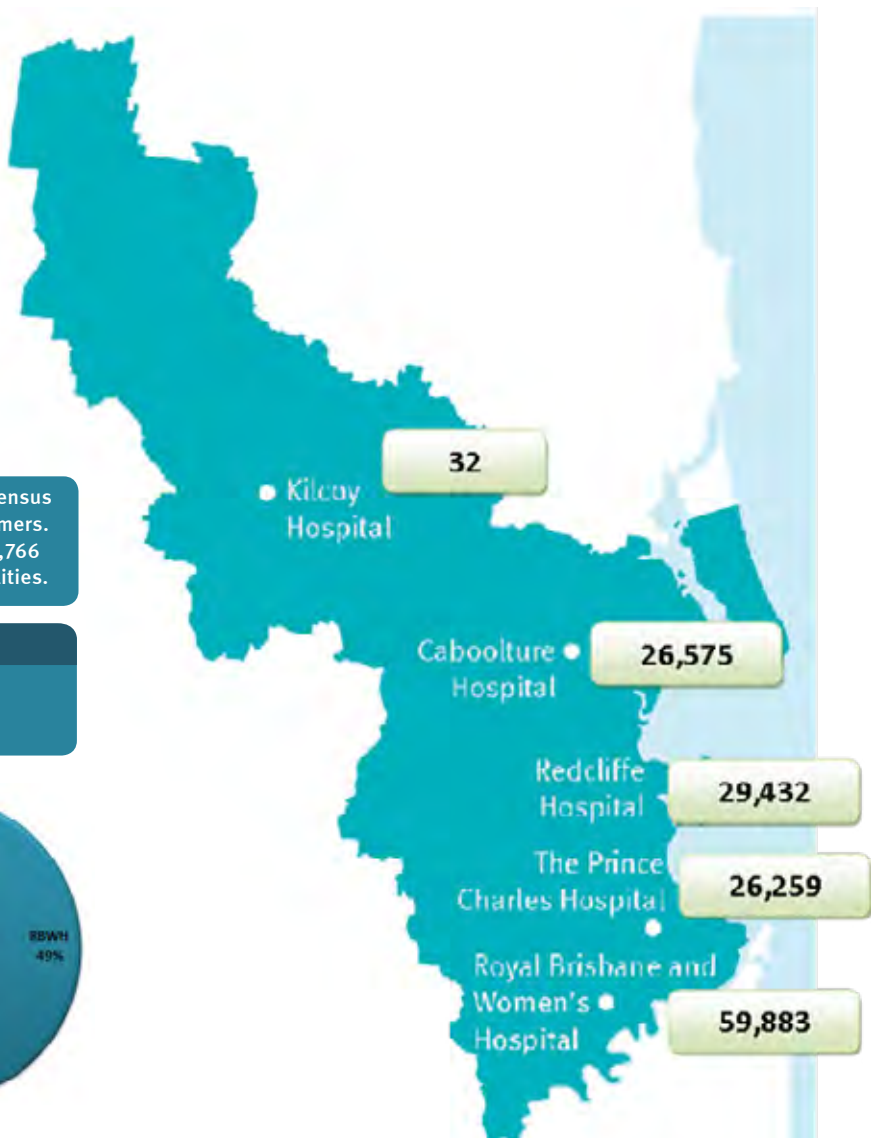
- TOP 5 HHS:**
- Metro North
 - Metro South
 - Central Queensland
 - Wide Bay
 - Sunshine Coast

ADMISSIONS DAYS

90% Monday – Friday
10% Saturday – Sunday



Over the three year period Indigenous consumers accessing the four main hospitals, has increased on average of 1,051.89 consumers per year, with the most growth at Caboolture, TPCH and Redcliffe Hospitals.



Creating a ripple to start a change

Tracy's commitment to improving nutritional health outcomes for Aboriginal and Torres Strait Islander Communities



When Tracy Hardy questioned why the gap between Indigenous and non-Indigenous life expectancy and health outcomes was so wide, her best friend and Auntie said, "Well what are you going to do about it?".

Tracy, with her self-described determination, took on the challenge and is now close to finishing a Bachelor of Nutrition and Dietetics at the University of the Sunshine Coast.

She will be just one of very few Aboriginal and Torres Strait Islander dietitians in Australia and will spend the next 12 months undertaking an honours program evaluating the cultural safety of a chronic disease project in Gympie with the Primary Health Network (PHN).

Tracy also works as the Student Board Director for the Indigenous Allied Health Australia (IAHA), a growing association encouraging Aboriginal and Torres Strait Islander people to consider, pursue and succeed in allied health careers.

"When I left high school I didn't think I would study nutrition or even go to university. Those were not aspirations I was encouraged to have," Tracy said.

"One of my Aunties said 'your ancestors have been leading you this way'. I've known people with nutrition issues and experienced them myself. At the time, I was also working in a very high-pressured job in beauty therapy and seeing a lot of clients with health conditions associated with diet.

"Everything has been leading me to this path. My mum was a shearer's cook so I've always been brought up with old school traditional foods and being on the country we didn't have a lot of takeaway.

"I've observed over the years the growing rates of chronic disease in Aboriginal and Torres Strait Islander communities, a lot nutrition related, either preventable or manageable with good nutrition. I feel that's where I can have the biggest impact."

Tracy is a proud Kamilaroi woman, with her ancestors from the Barwon River area in North Western NSW. She was born and raised in Kooma country in a remote town of a few thousand people called St George in Central Queensland. She now resides in Kabi Kabi country on the Sunshine Coast.

"I am very privileged to have incredibly inspiring and supportive people in my life, including a community of brothers, sisters, Uncles, strong Aunties and Elders within the Kabi Kabi/Gubbi Gubbi community and the team at the University of the Sunshine Coast's Indigenous Services Unit," she said.

"When my schedule allows me, I am able to connect and gather strength from my culture by attending and volunteering at local community events. I always find peace and spiritual and cultural connection at Nungeena Aboriginal Corporation for Women's Business."

Tracy has just completed a placement at Redcliffe Hospital and Community, Indigenous and Subacute Services (CISS) at Brighton Health Campus.

Working at CISS confirmed her desire to work in a community-based setting.

"I'm all for preventative health and working in a community-orientated environment. Working within the hospital was a good motivator to see the end stage of where a client can be and to prevent this from happening," she said.

"The placement within the transition care team was amazing as I got to work with patients who are moving from an acute or rehab stage back to their home. I find that exciting, as I want to work with people in an environment where they are most comfortable, often their home. I was able to see how the patient was adjusting at home and what support they needed with their healing." As well as working with communities, Tracy hopes to influence the younger generation.

"If children have the ability to grow their own vegetable gardens at school or learn how to cook meals, it has a very powerful effect on the whole family. It's important to influence the children, as they influence us," she said.

"I know for my daughter she never used to eat cucumber until we grew it in our own vegetable garden. Wouldn't it be great for our children to be pestering us for something healthy versus not so healthy?"

As for the future, Tracy believes we are on the right path.

"We have powerful and supportive health champions. I'm excited to see the change occur and see what the outcomes will be. It would be fantastic to see in my lifetime a close in the gap," she said.

"I'm only one person, but I liken it to being one pebble creating a big ripple of change. Someone has to be the pebble to start the ripple and bigger wave of change."

TRACY'S TIPS FOR HEALTHY EATING AND WELLBEING

1. GET BACK TO THE BASICS

Don't fall for advertising that you can buy a whole bucket of nuggets for \$20 and it's a healthy option. You can actually create a spaghetti bolognese for all your family that's really simple and is going to cost the same or less.

2. EAT SOMETIMES FOOD, SOMETIMES

Don't make take-away foods an everyday food, make them a sometimes food.

3. FRESH IS BEST

Eat fresh food if it is available, avoid processed foods. 4 out of 5 Australians are not eating enough fruit and vegetables. The guidelines are 2 fruit and 5 vegetables each day.

4. PREPARE TRADITIONAL FOODS

For people living in an urban environment, cooking with traditional foods may help maintain connection to culture.

5. COOK WITH YOUR FAMILY

Make it something you do together and embrace your family connection.

6. KEEP IT SIMPLE

If you find something in your fridge/freezer you can make yourself, do it. Food preparation doesn't have to be complicated; something like a serving of chicken and fresh vegetables is quick, easy and good for you.

INFOCUS

Connecting services to benefit the patient



“All of the services joined together to go above and beyond to ensure Barbara would return to a safe environment and to help her health improve,” she said.

“Once our patients leave the hospital we really want them to focus on improving their health and wellbeing. IUIH and other service

The Indigenous Hospital Liaison Service at The Prince Charles Hospital (TPCH) and The Institute for Urban Indigenous Health (IUIH) Connect program are working together to create a seamless transition from hospital to community for Aboriginal and Torres Strait Islander patients.

Aunty Barbara Bundle is a long-term client of Indigenous Hospital Liaison Officer Mark Budd, after having a heart bypass at TPCH and spending recent time within the hospital due to complex and chronic health conditions.

Over the past six weeks, Mark and Indigenous Outreach Worker Uncle Terry Williams and Care Coordinator Corsino Bacatan (known as ‘Ino’ in the community) from the IUIH Connect program, have worked closely together to ensure Aunty Barb can return to a new home environment and to live independently with the support of other community services.

Aunty Barb was receiving support from the Hospital and the Home program in recent times, but the situation at home wasn’t ideal for nurses and other health staff to provide medication and treatment. She was transferred to the medihotel for an extended stay and part of the discharge plan was to include long-term support and finding a new home with the Department of Housing.

“When I was in hospital Uncle Terry, Ino and Mark helped me with a lot of things. I had trouble with my son, he wasn’t very supportive and when they got me this place I was happy,” Aunty said.

Mark said he would meet weekly with Uncle Terry and Ino, the medihotel and home assist prior to Barbara’s discharge. A local removal company also donated their time to support with the move and Nexuscare provided support for food parcels.

providers have worked seamlessly together to ensure Barbara is taking the right medication, that her home is set-up appropriately to reduce falls and she is able to attend her regular medical appointments.”

The IUIH Connect program assists patients with the transfer from acute care back to community.

“It’s discharge planning from the community side. It could be organising a GP for a patient, providing transport and linking to an appropriate aged care service. We’re basically making it easier for the patients going home and providing a continuity of care,” Ino said.

Mark said the relationship between the Indigenous Hospital Liaison service and IUIH Connect ensures they are able to work out a plan to benefit the patient.

“We can have those hard conversations. It’s about us working with community as they have the support services once someone like Aunty Barb returns home,” he said.

IUIH Connect was able to work with the Department of Housing to find Aunty Barb a more suitable lowset residence, with wheelchair access and modifications within the home to reduce falls. They also liaised with the Department of Housing to assist Barb’s son to get his own place.

“It’s about taking a holistic approach to health. We not only work / support the individual, but the family and community as a whole,” Mark said.

Aunty Barb, an Elder from Woorabinda, said it has been a tough journey moving from her home of 32 years in Keperra.

“At first I wasn’t happy. I had my sister in law come along and say ‘Barb take it, it’s really nice’ I’ve been at Keperra for a long time and moving here was a big step for me and I still miss the place,” she said.

“It was hard to leave, but now I am happy where I am. I like being back at home. It’s really clean and I’m just happy.”

Once our patients leave the hospital we really want them to focus on improving their health and wellbeing



L-R: IUIH Indigenous Outreach Worker Uncle Terry Williams, TPCH Indigenous Hospital Liaison Officer Mark Budd and IUIH Connect Care Coordinator Corsino ‘Ino’ Bacatan.

Boxing their way to good health

Male staff from the Aboriginal and Torres Strait Islander Health Unit are swapping their take-away lunch breaks for a joint boxing session in an effort to keep fit and healthy.



The initiative started with Indigenous Strategic Development Manager Isaac Simon and Cultural Capability Officer Henry Nona running a competition on who could lose the most weight over three months.

Both started swimming in their lunch breaks and going for walks before joining up to the Nitro Boxing Fitness Centre in Chermside. The fitness centre is directly opposite The Prince Charles Hospital campus and a regular training spot for hospital workers.

As a group we are seeing a reduction in sick leave and a boost in team morale

Other staff within the A&TSHU showed interest and now all the males at the Chermside Community Health Centre office attend daily group training sessions.

“Working in an office environment, I found myself sitting a lot and getting take-away for lunch. I’ve also put on a lot of weight due to this and was really encouraged by my colleague Henry to improve my health and wellbeing,” Isaac said.

“What started as a bit of banter has now turned into a daily program of exercise. Not only am I personally seeing the results, as a group we are seeing a reduction in sick leave and a boost in team morale.”



Cultural Capability Officer Elwyn Henaway warms up



Senior Project Officer Phil Ahmat packs a few punches

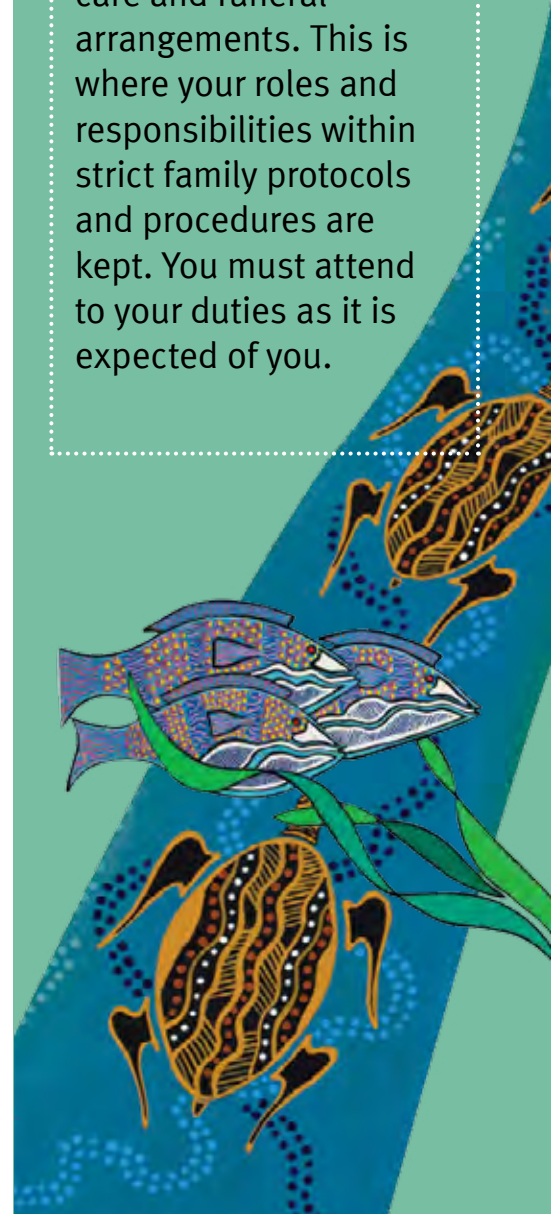
Word of the Month:

“Sorry Business/ Sad News”

Sorry Business is the term Aboriginal people use around death and dying.

Sad News is the term Torres Strait Islanders’ use.

The terms are associated with the activities of the family, care and funeral arrangements. This is where your roles and responsibilities within strict family protocols and procedures are kept. You must attend to your duties as it is expected of you.



Close the Gap Day

Redcliffe Hospital

Redcliffe Indigenous Hospital Liaison Officer Rox-anne Currie coordinated a special Close the Gap day event at Redcliffe Hospital to coincide with the monthly staff BBQ.

Plenty of hospital staff took part in planting the Sea of Hands in recognition of identities, cultures and history and signing the Close the Gap day pledge to reduce Indigenous health inequality.



Medical Student Shannan Searle plants a message and sea of hands



Palliative Care Nurses Judy Parker (left) and Rowena Jayme (right)



Indigenous Hospital Liaison Officer Rox-anne Currie presents Finance Support Officer Kim Simpkins with the raffle prize.



Ngarrama midwives celebrate close the gap day



Aunty Minnie Mace



One of the Ngarrama babies at the event proudly wearing her identification shirt.

Ngarrama Royal Brisbane and Women's Hospital

Ngarrama maternity program at the Royal Brisbane and Women's Hospital organised a morning tea event for hospital staff and Aboriginal and Torres Strait Islander patients in recognition of Close the Gap Day.

Aunty Minnie Mace performed an Acknowledgement to Country and spoke to the significance of the Ngarrama name and program for Aboriginal and Torres Strait Islander families.

Brighton Health Campus

Over 50 guests gathered for a morning tea held at Brighton Health Campus for Close the Gap Day on March 16th.

Staff from A&TSIHU and CISS had the opportunity to listen to Aunty Brenda Kanofski share details about her healthcare journey.

She told the audience of health care workers they need to walk together to truly make a difference on closing the gap in health outcomes.

"We still have a very long way to go. It's people like you who can walk the path to increase education of not only closing the gap on health outcomes, but also the gaps with each other. We have not only a great history but lots to share and to educate all on the way of our health," she said.

Aunty shared her story of being in a coma for months at The Prince Charles Hospital and her recovery journey.

"I was nurtured by the staff, both Indigenous and non-Indigenous. Sandra Markwell was with me for my first shower and Indigenous Hospital Liaison Officers Aleacha and Mark helped me many times at the bedside to understand the medical staff. I took great comfort from these people and I would like to acknowledge how strong you all are as healthcare workers," she said.

"To close the gap I encourage hospital staff to consult with the Indigenous staff. They represent our culture and know our ways. Education is the top priority to closing the gap and also knowing the mental health of who you're caring for."



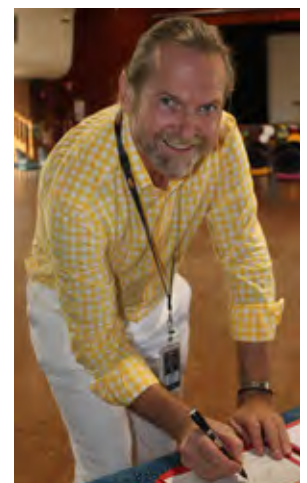
Front row left Aleacha Hopkins, Aunty Brenda Kanofski, CISS Executive Director Chris Seiboth. Front back left Indigenous Health Worker Sandra Markwell and TPC Indigenous Hospital Liaison Mark Budd.



Cultural Capability Officer Melanie Kielly (right) and Indigenous Hospital Services Northern Area Team Leader Aleacha Hopkins (left) celebrate their achievements in helping close the gap for patients, families and communities.



Staff from the Aboriginal and Torres Strait Islander Health Unit promote the message 'Indigenous Health is everyone's business'.



CISS Executive Director Chris Seiboth signs the organisational pledge to reduce Indigenous health inequality.

Record Ngarrama numbers helping Close the Gap

More local families than ever before are benefitting from Redcliffe Hospital's Indigenous maternity service, with the Ngarrama team now seeing triple the number of families it was five years ago when the service began.

The service was introduced as part of the Close the Gap initiative to improve health outcomes for Indigenous Australians. In its first year of operation, just 50 families identified as being of Aboriginal or Torres Strait Island consent – a far cry from the 175 Indigenous families Ngarrama assisted with birthing last year.

Ngarrama midwife and Indigenous Infant and Maternal Health Worker, Jodi Dyer, is thrilled by the success to date of the program she is passionate about.

"We've made so many gains in the past five years and it is likely we will break even more records as time goes by," Jodi said.

"My job now is to identify a family's needs and meet them all. It's a personal experience getting to know the family and walking beside them during pregnancy and after birth.

"One day there won't be a need for closing the gap because we will have closed it."

More than 95 per cent of mothers in the Ngarrama program attend antenatal classes at Redcliffe while babies' birth weights are steadily increasing with the biggest baby born within the program recently weighing over 10lbs.

The Close the Gap initiative has raised community awareness as well as challenged government and health service providers to address disadvantage and provide culturally sensitive programs such as Ngarrama.

Harmony Day



Director Paul Drahm and Indigenous Hospital Liaison Mark Budd



Cultural Capability Officer Henry Nona (left) coordinated the event and shared stories about the Torres Strait Islands with Chermide Community Health Worker Guy (right).

The Aboriginal and Torres Strait Islander Health Unit hosted a morning tea at Chermide Community Health Centre as part of Harmony Day celebrations held on March 21.

Harmony Day is a celebration of cultural diversity – a day of cultural respect for everyone who calls Australia home. The Day coincides with the United Nations International Day for the Elimination of Racial Discrimination.

Since 1999, more than 70,000 Harmony Day events have been held in childcare centres, schools, community groups, churches, businesses and federal, state and local government agencies across Australia.

This was the second event held at Chermide Community Health Centre. Staff enjoyed sharing stories about their cultural heritage and sharing different dishes including cabbage stew and chicken curry.



The room was adorned with cultural artefacts including traditional kente cloth from West Africa and a welcome totem from Vanuatu.

Staff from Chermide Community Health Centre celebrate Harmony Day by sharing cultural stories and food

Angela Scotney Farewell



Angela (second from left) with staff from the Aboriginal and Torres Strait Islander Health Unit

Staff gathered for a special morning tea to farewell Angela Scotney.

Angela, a proud Worimi and Biripi woman, has worked in Aboriginal and Torres Strait Islander Health for the past 24 years.

For the past six years as Director, Angela worked towards Close the Gap initiatives including providing appropriate, accessible and affordable services, improving the patient journey in and out of our tertiary hospitals and decreasing smoking rates during pregnancy for Aboriginal and Torres Strait Islander families.

She also created the Accurate Indigenous Identification project across all Metro North Hospital and Health Service facilities - a topic close to her heart.

"Our people suffer with many complicated conditions and quite often have several conditions at the one time. By identifying as Indigenous, the clinician can be aware of these issues and screen for other conditions where there is a high prevalence. Holistic health care is so important and you cannot just treat a person with one condition when there can be many," Angela said.

Five year mental health report shows females, indigenous teens at risk

The rate of mental illness among Australia's young people has increased by 4 per cent in half a decade, according to new analysis, with females and Aboriginal and Torres Strait Islander teenagers most at risk. The Five Year Mental Health Youth Report released today by Mission Australia and Black Dog Institute found almost one in four 15 to 19 year olds "met the criteria for having a probable serious mental illness", rising from 18.7 per cent in 2012 to 22.8 per cent in 2016.

<http://www.theaustralian.com.au/national-affairs/health/five-year-mental-health-report-shows-females-indigenous-teens-at-risk/news-story/8f85351168c8cc590d061b56d7de179f>

Culturally appropriate resource helps Indigenous Australians discuss end of life

New resources to help Aboriginal and Torres Strait Islander people start the discussions about their end of life wishes have been launched this week by Minister for Aged Care and Minister for Indigenous Health, Ken Wyatt.

<https://www.agedcareguide.com.au/talking-aged-care/culturally-appropriate-end-of-life-resources-launched>

New mums and bubs hub in Brisbane to boost indigenous health services

Indigenous mothers and their young children will have access to some of the best facilities and support networks in southeast Queensland after a new hub was launched. The Salisbury Mums and Bubs Hub was officially opened last week by Queensland Health Minister Cameron Dick. The hub houses the Birthing in Our Community program — a joint initiative between the Institute for Urban indigenous Health, the Aboriginal and Torres Strait Islander Community Health Services Brisbane and the Mater Mothers' Hospital.

<http://www.couriermail.com.au/questnews/southeast/new-mums-and-bubs-hub-in-brisbane-to-boost-indigenous-health-services/news-story/df4edf81f36ae7bbd136fdd5191f3b88>

How Katherine Hospital, once Australia's worst for Indigenous health, became one of the best

Katherine Hospital in the Northern Territory has gone from one of the worst facilities in the country when it comes to Indigenous health care to one of the best. Their secret: engaging with Indigenous patients and supporting doctors.

<http://www.abc.net.au/news/2017-03-28/katherine-hospital-from-worst-in-the-country-to-one-of-the-best/8392792>

Minister Scullion: First Australians' ancestral remains return to country

A repatriation ceremony was held at the Australian Embassy in Berlin to respectfully acknowledge the unconditional return of three Indigenous ancestral remains from German institutions. Two ancestral remains were returned to community members and direct descendants from Indigenous communities located in Far North Queensland and the Clarence River region in New South Wales.

<http://www.indigenous.gov.au/news-and-media/announcements/minister-scullion-first-australians%E2%80%99-ancestral-remains-return-country>

Shortfall on indigenous health targets prompts new reform drive

The failure to adequately improve Aboriginal and Torres Strait Islander health has prompted the Turnbull government to order a sweeping review of its multibillion-dollar primary health programs. The target of closing the life expectancy gap — 16 years for Indigenous women and 21 years for Indigenous men — will not be reached by 2031.

<http://www.theaustralian.com.au/national-affairs/indigenous/shortfall-on-indigenous-health-targets-prompts-new-reform-drive/news-story/483b07d6e5edd61380fd5bb14619a8e3>

Indigenous people admitted to Townsville HHS more than anywhere else in Queensland

Indigenous people are admitted to hospital for chronic illnesses in Townsville more than anywhere else across Queensland. For every non-Indigenous patient, there were 4.3 Indigenous people admitted to the Townsville Hospital and Health Service in 2015-16.

<http://www.townsvillebulletin.com.au/news/indigenous-people-admitted-to-townsville-hhs-more-than-anywhere-else-in-queensland/news-story/3e12009ac0e8602339037837d5b7793a>

Racism in the health system plagues efforts to close the gap for Indigenous Australians, report shows

Yamatji-Badimia woman and aspiring nurse Banok Rind said racism was an enduring problem among healthcare providers. The 22-year-old is about to enter a system of ongoing racism that exacerbates the yawning gap between Indigenous and non-Indigenous health, according to a damning new report.

<http://www.smh.com.au/national/health/racism-in-the-health-system-plagues-efforts-to-close-the-gap-for-indigenous-australians-report-shows-20170315-guyhz4.html>

Torres Strait taking vital step towards healing

As the people of the Torres Strait embark on a healing journey, they do so with an eye to self-determination. The recent launch of the Torres Strait and Kaurareg Aboriginal Peoples' Healing Strategy is seen as a vital step towards addressing the colonisation-related trauma affecting Torres Strait communities.

<http://www.indigenous.gov.au/news-and-media/stories/torres-strait-taking-vital-step-towards-healing>

Minister Wyatt: Aboriginal and Torres Strait Islander Health — My Life, My Lead

My Life, My Lead is a new online public consultation portal to highlight the issues that support or impede Aboriginal and Torres Strait Islander people to have good health. The Minister for Indigenous Health, Ken Wyatt AM, MP, said that the launch of the new portal will give more Aboriginal and Torres Strait Islander people an opportunity to lead the discussion about the life they live now, and the life they want in the future for themselves, their families and their communities. The portal will support shaping the next iteration of the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan (2013 – 2023), the Government's key blueprint to help Close the Gap. A number of face-to-face forums will also be held across Australia.

<http://www.indigenous.gov.au/news-and-media/announcements/minister-wyatt-aboriginal-and-torres-strait-islander-health-%E2%80%94-my-life>



A Day in the Life of Caley Malezer



1. What does your role involve?

I'm currently working as a Support Project Officer in the Indigenous Safety and Quality portfolio.

I support our Safety and Quality Officer, Tracy Grant, to ensure all processes within the Aboriginal and Torres Strait Islander Health Unit (A&TSIHU) are in accordance with the National Safety and Quality Health Service Standards. This includes within our hospitals and Community, Indigenous and Subacute facilities.

2. You worked as the Executive Support Officer for the Director of the Aboriginal and Torres Strait Islander Health Unit for the past 4 years. What was this experience like and what are some of the main highlights?

It was one of the best roles I've worked in. The experience gave me the opportunity to grow and learn new skills. It challenged me to improve my current skills as well.

I learnt a lot about our culture working within the role and I still continue to learn on a daily basis.

I had the opportunity to work with a really great and supportive boss, Angela Scotney, who mentored me and provided opportunity for me to grow into a higher role.

Some of the highlights were organising our NAIDOC event at Musgrave Park a few years ago, having the opportunity to get out and about and attend community events and to travel to all teams to work and interact with staff across the A&TSIHU.

I've also seen staff numbers double during this time, with new teams coming on board including Indigenous Strategic Development.

3. You have worked across various Metro North Hospital and Health Service facilities, including at Butterfield Street, the Royal Brisbane and Women's Hospital, Aspley Community Health Centre and now Pine Rivers. How positive has the experience been working with MNHHS?

I feel like we are now in the right place with CISS. Our Executive Director, Chris Seiboth, is very supportive of our agenda and an active champion for Indigenous health and our unit. It's a good fit as most of our services are community based.

Most of the staff I've come across at Metro North Hospital and Health Service are supportive of the work we do, but there is still a lot of work to be done. We provide a lot of interaction and education, but it would be nice to see more MNHHS staff willing to participate and take leadership towards our close the gap initiatives. This could be as simple as attending more of our culturally hosted events throughout the year, providing feedback and utilising our services to further build a culturally safe environment for our patients. I hope to influence this agenda within my new role with Safety and Quality.

4. Have you always been interested in working in the field of Indigenous Health?

I've worked with Queensland Health for the past 10 years. This includes during a few restructures and now operating as Metro North Hospital and Health Service.

I started as a receptionist then moved to an Executive Support Officer when we were called Southern Area Health Services. Most of the time I've worked within facility roles.

With my type of skills I didn't realise there would be an opportunity to work within the Indigenous Health Unit. When I was told about the Executive Support Officer role with the Director of the Aboriginal and Torres Strait Islander Health Unit I jumped at the opportunity. I didn't end up winning the position but was second in line after the first person left after a couple of months.

The role as given me the opportunity to learn more about my culture and myself. I've learnt a lot about the health issues surrounding our Indigenous people.

5. What does a typical day look like for you?

In any of my roles no two days were the same. I've only just joined the Safety and Quality portfolio a few weeks ago and during a busy period of accreditation.

Each day I check with my Manager, Tracy Grant, to see what she needs support with. We are currently reviewing all of the Safety and Quality folders and are developing an Action Plan for each healthcare standard.

I'm also studying a Certificate 4 in Government through Queensland Health. We are already learning about Safety and Quality and Project Management, so this new role is a nice fit.

6. Can you share where you come from and your family history?

My father's family is from the Gubbi Gubbi tribe on the Sunshine Coast, with ancestral links to the Butchulla people.

My dad's grandfather was born in Noumea in New Caledonia, hence the Malezer name which is French and originally spelt 'Malezieux'. He jumped ship in the Torres Strait Islands and married my great grandmother, an Aboriginal woman from Kilkivan.

My mum is from Irish descent. She was born and bred on the Gold Coast and now resides across the border in Byron Bay. She used to work in Queensland Health as a Business Manager and now works for NSW Health supporting the Chief Financial Officer for the district.

I was raised by my mother in Redcliffe and would see my dad on school holidays and weekends.

My dad has two sons and four girls including me. My mum also has four girls including me. My younger sister, who lives in Ipswich, and I are 13 months apart and have the same

parents. The rest are half siblings and are all spread out across Australia and New Zealand.

7. Your father, Les Malezer, is well known for campaigning for Aboriginal and Torres Strait Islander rights and has represented community interests at the local, State and national levels. He is the previous Co-Chair National Congress of Australia's First Peoples. In 2008 he won the Australian Human Rights Award, and his contribution to coordinating Indigenous Peoples' advocacy for the adoption of the UN Declaration on the Rights of Indigenous Peoples by the UN General Assembly is well known and respected. Do you draw strength from your father and have any desire to follow in his footsteps?

Most of my family on my dad's side are strong Indigenous activists. I draw leadership and strength from my mum and dad - both are leaders.

Unfortunately due to my dad's work he was away a lot. I missed a lot of opportunities to learn everything I could from him. As a child I remember going to public rallies and watching him speak. He used to take us for work trips to Darwin, Palm Island, Townsville, Hobart and Canberra. We also travelled to Europe when he was based with the UN in Geneva.

One of my highlights was attending the Woodford Folk Festival with him and my sister. He would do yarnning circles and public speaking. As a kid, I didn't realise what he was doing. To me, my dad is my dad, not a public figure. But my understanding and appreciation of his work and role has grown now since I'm older.

I guess in some ways I have taken a leadership role from him, but public speaking is for my dad, not for me. I prefer to work behind the scenes.

I feel like working in Indigenous health gives us a bond and mutual respect. Each time I see him we talk about work and what I'm doing.

I, along with all my family, am very proud of him and all he has done.

8. What do you like doing outside of work?

I like hanging out with my friends and family. I love outdoor activities - fishing, camping and four-wheel driving.

I also recently built a house with my fiancé so at the moment we are busy with landscaping.

UPCOMING EVENTS

26 May 2017

National Sorry Day

National Sorry Day offers the community the opportunity to acknowledge the impact of the policies spanning more than 150 years of forcible removal of Aboriginal and Torres Strait Islander children from their families. The first National Sorry Day was held on 26 May 1998 following the 1997 HREOC report Bringing Them Home which recommended that a national day of observance be declared.

27 May 2017

Anniversary of the 1967 Referendum

In 1967 over 90% of Australians voted in a Referendum to remove clauses from the Australian Constitution which discriminated against Aboriginal and Torres Strait Islander Australians. The Referendum also gave the Commonwealth Government the power to make laws on behalf of Aboriginal and Torres Strait Islander people.

27 May–3 June 2017

Reconciliation Week

National Reconciliation Week was initiated in 1996 to provide a special focus for nationwide activities. The week is a time to reflect on achievements so far and the things which must still be done to achieve reconciliation.

National Reconciliation Week offers people across Australia the opportunity to focus on reconciliation, to hear about the cultures and histories of Australia's Aboriginal and Torres Strait Islander peoples, and to explore new and better ways of meeting challenges in our communities.

The Week is timed to coincide with two significant dates in Australia's history, which provide strong symbols of our hopes and aims for reconciliation: 27 May and 3 June.

3 June 2017

Mabo Day

Mabo Day marks the anniversary of the High Court of Australia's judgement in 1992 in the Mabo case. This is a day of particular significance for Torres Strait Islander Australians.

1 July 2017

Coming of the Light

This is a particular day of significance for Torres Strait Islander Australians.

It marks the day the London Missionary Society first arrived in the Torres Strait. The missionaries landed at Erub Island on 1 July 1871.

Religious and cultural ceremonies are held by Torres Strait Islander Christians across the Torres Strait and on the mainland to commemorate this day.

2 July-9 July 2017

NAIDOC Week

NAIDOC Week is a celebration of Aboriginal and Torres Strait Islander cultures and an opportunity to recognise the contribution of Indigenous Australians in various fields. The 2017 theme is Our Languages Matter.

4 August 2017

National Aboriginal and Torres Strait Islander Children's Day

Children's Day and the week leading up to it, is a time to for Aboriginal and Torres Strait Islander families to celebrate the strengths and culture of their children.

The day is an opportunity for all Australians to show their support for Aboriginal children, as well as learn about the crucial impact that community, culture and family play in the life of every Aboriginal and Torres Strait Islander child.

9 August 2017

International Day of the World's Indigenous Peoples

The International Day of the World's Indigenous Peoples is observed on August 9 each year to promote and protect the rights of the world's indigenous population.

This event also recognises the achievements and contributions that indigenous people make to improve world issues such as environmental protection.

It was first pronounced by the General Assembly of the United Nations in December 1994, marking the day of the first meeting of the UN Working Group on Indigenous Populations of the Sub-commission on the Promotion and Protection of Human Rights, in 1982.

6 September 2017

Indigenous Literacy Day

Indigenous Literacy Day aims to help raise funds to boost literacy levels and improve the lives and opportunities of Indigenous Australians living in remote and isolated regions. This day needs your support to help raise funds to buy books and literacy resources for children in these communities.

13 September 2017

Anniversary of the UN Declaration on the Rights of Indigenous People

The United Nations Declaration on the Rights of Indigenous Peoples was adopted by the United Nations General Assembly during its 61st session at UN Headquarters in New York City on 13 September 2007.

Cultural capability services



Here to support staff

Building a culturally capable hospital and health service

Contact: 3139 3237 or A_TSIHU_MNHHS@health.qld.gov.au

Supported by the MNHHS Aboriginal and Torres Strait Islander Health Unit.



RECIPE

Cabbage Beef Stew by Jarrod Parter



INGREDIENTS

- Chuck (Stewing) Steak
- 1 Large Capsicum
- 1 Clove Garlic (x3 wedges)
- 1 Whole Cabbage (either normal or sugarloaf)
- 4 Rashers Bacon
- Salt and Pepper
- Soya Sauce (x5 tablespoons)

What to do

1. Cut the chuck steak into small cubes and place into pot on medium with garlic, until brown.
2. While the steak is browning cut up your capsicum, bacon and cabbage and set aside until steak is cooked.
3. Once the chuck steak is cooked; firstly place your cabbage then your capsicum followed by your bacon on top of the chuck steak. Drizzle your soya sauce, salt and pepper and a tablespoon of water. Did not stir through.
4. Put the lid on and put temperature to medium, give 15 minutes for steam to go through cabbage, bacon and capsicum.
5. Once you have noticed the cabbage has gone down due to the steam, take lid off and stir through.
6. Put temperature to simmer for another 5 mins, stir through again.
7. Repeat step 6 another (x4) times.
8. Turn stove off and let it sit for 15 mins before serving.

We welcome your feedback, contributions, story ideas and details on any upcoming events.

Please contact Aboriginal and Torres Strait Islander Health Unit Communications Manager Renee Simon at Renee.Simon@health.qld.gov.au or phone (07) 3139 3231.



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