

# AHCSA News



## PLAHS Celebrates 20 Years



**Aboriginal Health Council**  
of South Australia Inc.

**PLAHS**  
Celebrates 20 Years

**AHCSA**  
Respect Test

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Please note that the views expressed may not always be those of AHCSA.

This newsletter may contain photographs of people who have passed away.

Whilst every care is taken to ensure that the information contained in this newsletter is accurate, errors and omissions can occur. We apologise for any error/omission and ask that you report these to Amanda Mitchell for correction in future editions. Email: [amanda.mitchell@ahcsa.org.au](mailto:amanda.mitchell@ahcsa.org.au)

# From the CEO



Welcome to our second and final edition of AHCSA News for 2013.

Although we have only had two editions this year, we have continued to be extremely busy, both Board and Secretariat.

The year has flown by so quickly as we try to keep up with the many changes and programs. I'm sure that this is also the case for AHCSA members across the state. We have plenty of news to share with everyone as we draw closer to Christmas and will have another newsletter early in the new year.

Our feature article for this issue is the 20th year birthday celebration for the Port Lincoln Aboriginal Health Service. AHCSA held its last Board meeting in Port Lincoln to coordinate its visit with the celebrations and were very fortunate to be part of the festivities. Congratulations to the Board Members and CEOs of PLAHS, both past and present, for achieving this milestone and making the health service what it is today. It demonstrates the commitment and hard work of everyone involved and is a shining example of an Aboriginal Community Controlled Health Service (ACCHS). PLAHS is a great role model for many new and established ACCHSs.

Nganampa Health Council will also be celebrating a milestone this year, being 30 years in November since it was established in 1983. What a fantastic achievement and another great example of commitment, hard work and working together for the benefit of our communities. The essence of Aboriginal Community Control! Congratulations to Nganampa Health Council board and staff. We look forward to reporting further in our next newsletter.

As we celebrate these two milestones, the work continues on the establishment of a new ACCHS in Murray Bridge for the Hills Mallee Southern Region. It has been a slow and gruelling process but we are on track to establish an entity in Murray Bridge by 1 July 2014, even if it only starts with three staff.

Since our last edition, Alwin Chong has moved on from AHCSA as Transition Manager and John Evans has joined as the Project Manager to progress the work for the Governance/Interim Board. Thank you to Alwin for the work he achieved in the 12 months he worked with us. It is definitely a challenging role with so many key



stakeholders and partners to coordinate, but it is usually the early stages of development that is the hardest and the one most forgotten. We wish you best in your future endeavours.

At the national level, AHCSA continues to work with our national peak body in many aspects from the Board and national workshops to various programs on the ground. These have included the NACCHO Healthy Futures Breakfast at Parliament House in July to launch the NACCHO Healthy Futures 10-Point Plan 2013-2030 and the Healthy For Life Report Card; the Inaugural NACCHO Ochre Day held in August to launch NACCHO's 'Blueprint for Aboriginal Male Health' and as a way for NACCHO to raise awareness, gain support for, and communicate with the wider Australian public about issues that have an impact on the social, emotional health and wellbeing of Aboriginal males; as well as the Inaugural NACCHO Aboriginal Health Summit held in September in Adelaide. These were all wonderful events and it has been a great opportunity for the State Affiliates and NACCHO Members to work with the NACCHO Secretariat to progress Aboriginal health the right way through Aboriginal hands.

The AHCSA Secretariat continues to fluctuate in numbers and programs as we draw close to the end of June each year and enter a new financial year. One example of this has been the Trachoma Elimination Program where the funding ceased at the end of the 2011/2012, however we are continuing to work with Country Health SA and are confident that we will be able to secure resources to continue the program. I'd like to acknowledge both Desley Culpin and Christina Whap for their work on both our eye health programs. Desley has moved back to her former role as Coordinator Eye Health & Chronic Disease Specialist Support Program and whilst Christina backfilled for Desley, has now moved on. We continue to be challenged by government bureaucracy and funding opportunities, however, we have solid relationships that help to get us through. We do know that new funding opportunities will be limited in the current financial environment where both the State and Commonwealth are implementing saving strategies.

AHCSA's Registered Training Organisation (RTO) work continues to grow. There will be a major focus on our compliance with the new national system under the Australian Quality Skills Authority and the implementation of the new qualifications for Aboriginal Primary Health Care.

We said a sad farewell to a number of staff: Graham Williams, Monique Williams, Kathryn Freeman, Nick Heyne, Wendy Barth, Emma Barritt, Karen Atkinson, and John Solar; and welcomed new staff: Trent Wingard and Pietta Jackson to the Workforce Team; Sarah Fraser, Wendy Lawrie, Mark Thyer, Gwen Troutman-Weir, Kim O'Donnell to the Education Team; as well as Brad Nott and Janet Stajic.

AHCSA continues to meet regularly with our funding bodies through the State and Commonwealth Governments, universities and non-government organisations. We have met with the new Minister for Health and Ageing, Jack Snelling, as well as the new Chief Executive of Country Health SA Local Health Network, Marie Gerarty, and look forward to building on these new relationships.

AHCSA has a busy few months in the lead up to Christmas with the NACCHO AGM and Members meeting in November in Perth; supporting AHCSA Members with their AGM preparations and attending on the day where needed; and the AHCSA AGM and last Board meeting for the year on 4-5 December in Adelaide.

Thank you to all of our staff and Board of Directors for your continued support and dedication to AHCSA and Aboriginal health. It has been one busy year for AHCSA and its Members and I look forward to giving a further update in our next edition in February/March 2014.

Merry Christmas and a safe and happy new year to you all!

Mary Buckskin  
Chief Executive Officer



# RESPECT TEST

Respect yourself,  
Respect your partner,  
Respect your mob.

[www.ahcsa.org.au](http://www.ahcsa.org.au)

AHCSA's Sexual Health Team (HERO) has been a major partner in a collaborative health promotion project initiated by the AIDS Council of SA in partnership with Nunkuwarrin Yunti, Kornar Winmil Yunti, Moolagoo Mob, and SHine SA, along with men and women from the community. The campaign aims to impact STI and HIV awareness, increase testing rates for HIV and STIs in South Australia's Aboriginal communities, and reduce 'shame' and stigma around HIV and STI testing.

The cultural significance of 'respect' was identified as a pivotal concept that the project partners wanted to emphasise as being important in all relationships; subsequently the term 'respect' became the principle theme of the campaign. Evidence suggests that a deterrent to testing is the perceived sense of 'shame' associated with STI and HIV testing.

Calling the campaign the 'Respect Test' aims to remove the 'shame' that can be associated with sexual health, STI's and HIV. Promoting the 'Respect Test' hopes to





reorient the individual's and community's thinking to one of 'respect'.

The logical slogan for the campaign became 'Respect Test – Respect yourself, Respect your partner, Respect your mob'. Postcards with the poster images were printed with the PEP Hotline phone number and 'PEP act fast 72 hrs is what you've got' on the flipside.

The involvement and participation of Aboriginal community members was vital to the campaign development. A local Aboriginal photographer and local Aboriginal

graphic designer were integral to the 'look' of the overall campaign and models for the posters were all local South Australian Aboriginal identities.

Images of same-sex couples on the posters as well as a heterosexual couple, an older man, a young woman and young man aims to promote and reflect some of the diversity of our community.

For more information contact Sarah Betts on 8273 7200; Sarah.Betts@ahcsa.org.au



# AHCSA Open Day

## Celebrating NAIDOC Week and the Inaugural AHCSA Health Awards

The inaugural AHCSA Health Awards were announced on Wednesday 10 July at the hugely successful NAIDOC Week Open Day at the organisation's head office in Unley.

Garry Goldsmith, Ear Health Project Officer, was MC on the day and he did a marvellous job of bringing fun and pizzazz to the event with his comical nature.

The day began with Aunty Josie welcoming everyone to Country followed by a performance by the Kuma Kaaru Dance Group. Various activities then occurred around AHCSA for visitors from tours; health checks in the training room; ehealth checks; art activities such as face painting, boomerang painting, films; communal painting of a banner to use in the NAIDOC March; face painting; stalls with information about AHCSA's role, services and projects; Ngarrindjeri basket weaving with Aunty Eileen McHughes; and a special football signing session from three Port Adelaide Football Team members - Chad Wingard, Jake Neade, Brendan Ah Chee with Manager, Paul Vandenburg.

Lunchtime was a whole event and experience on its own. There were AHCSA BBQ'd chicken yiros, Warren Miller Traditional Foods (kangaroo, wombat and emu) and the Tauondi Van serving tea, coffee and fruit all day.

After lunch there was the Short Film Festival – Black Shorts with Terri Whiting followed by a dance performance from the Binnanendi Boys Dance Group.

By late afternoon, it was time for our MC to announce the inaugural awards. AHCSA Board Member Mr Wayne Oldfield presented the awards to the winners in the presence of other Board Members, staff and community. The Minister for Indigenous Affairs and Reconciliation, Mr Ian Hunter congratulated recipients and AHCSA on the successful Open Day.

The Aboriginal community members who received the awards were:

- Aunty Eileen McHughes - Outstanding Leadership Excellence Award
- Deanna Stuart-Butler - Aboriginal Health Worker Award Female

- Peter May - Aboriginal Health Worker Award Male
- Anangu Bibi Birthing Program - Outstanding Health Program/Project AHCSA Membership

Deputy Chief Executive Officer Shane Mohor reiterated that the awards were to recognise 'unsung heroes', those Aboriginal community members who are role models in Aboriginal health.

Contributing to the success of the Open Day were partners and community members including Aunty Josie Agius, Council of Aboriginal Elders Choir, Tauondi College, Kuma Kuaru and Binnanendi Boys Dance Group, Allan Sumner, Joelene Rankine, Warren Miller Traditional Foods, Ngarrindjeri Weavers, SAHMRI, Port Adelaide Football Club, and Aussie Party Hire.

Mr Mohor said "The Open Day was a great opportunity for AHCSA's partners and key stakeholders to experience the work that AHCSA does. It also gave them a chance to spend time with community members and hear how important this special day is to us."

Keynote speakers shared about the link between this year's NAIDOC theme 'We value the vision: Yirrkala Bark Petitions 1963' and the self-determination philosophy of Aboriginal Community Controlled Health Services.

We look forward to continuing to strengthen our partnerships and to seeing everyone here again next year. Thank you to the staff who helped to make the Open Day a great event and to our sponsors: beyond... Kathleen Stacey and Associates, Central Adelaide and Hills Medicare Local, and Country North SA Medicare Local for making the Awards possible. Thank you also to the NAIDOC Open Day planning committee for their dedication and commitment to making this event such a successful day.

### Aunty Eileen McHughes

AHCSA would like to pay special tribute to Aunty Eileen McHughes for her participation and commitment to the AHCSA Board for many years representing the Moorundie AHAC. Since the Open Day, Aunty Eileen lost her hard fought battle with cancer. She worked tirelessly in and for the community including the resurrection of the Ngarrindjeri language and basket weaving. Our thoughts will always be with her family and we will miss her dearly.





## Introducing AHCSA's Administration Team...



▲ Back row: Chris Reksinis, Lois Multa, Rachel Telfer, Jason Wauchope, Jeff Mountford, Adam Stewart | Middle row: Belinda Lock, Kerrin Florance, Alison Hambour, Mandy Green, Leanne Ritossa, Lena-Pearl Bridgland | Front: Angela Francisco | Absent: Annie-Rose Thurnwald

AHCSA's Administration Team provides professional executive and administrative support to the Secretariat, Board of Management, students of AHCSA's RTO and various sub committees, including a confidential and comprehensive range of human resource activities.

Angela Francisco, Manager of Administration & Facilities would like to thank all members of the Administration Team for their continued hard work and commitment as well as their ongoing contribution towards improving the health outcomes for all Aboriginal people in South Australia.



# Wheels get turning with Keep It Corka Roller Derby

AHCSA has been awarded a grant through Medibank's Indigenous grants program to establish an exciting new project – Keep It Corka Roller Derby!

The project aims to not only provide a fun, healthy physical activity opportunity for participants but also to strengthen self-esteem among participants and help bring the Aboriginal community and residents of Adelaide together.

The team is open to both men and women, and members will be recruited via two 'come and try' days, with training and games to commence in February 2014.

Mary Buckskin, AHCSA Chief Executive Officer explains that the initiative is also working to help improve fitness, prevent chronic disease, and counteract negative body image perceptions and shame that can affect the confidence of our mob.

"Roller Derby is the fastest growing sport in the world and is synonymous with being a sport that attracts people who 'don't fit' the prescribed mould of most sports," she said.

"It is also characterised as welcoming people of all backgrounds, abilities, and sizes, and it has a unique way of strengthening community ties.

"As participants in Keep It Corka Roller Derby become more agile, fit and strong, they will also be empowered through group support and improved self-esteem.

"Developing sustainable and ongoing representation of Aboriginal people in SA Roller Derby is the ultimate objective of this project," said Mary.

While roller derby might not be the first thing that springs to mind when thinking about making a difference in Aboriginal health and wellbeing, Keep It Corka has been inundated by enquiries since inviting interest via its Facebook page.

"Even before the first come and try session was advertised, people got word of the project and then got busy dreaming up roller derby names for themselves," Mary said.

One such woman is Nancy Bates who says that roller derby isn't as it looks but the fact that it's so much fun makes it easy to forget that you're doing some pretty serious exercise.

"I'm training with Light City Derby and have been happily surprised by the support of a team of people who don't even know me. Everyone is so encouraging - you never feel alone. Seeing women bigger than me flying around the roller derby track is so inspiring because if you look at mainstream media, the ideal images of fit and healthy women seem unobtainable," said Nancy.

"In terms of self-esteem, I feel better about myself than I can ever remember. You start to see you are capable, even at the age of 36, of doing great things with your body - the self perceived limitations start to melt away. I started out 30kgs overweight, felt bad about myself, and mentally I had to deal with associated anxiety/depression.

"I am now on the road to recovery, feel better about who I am, and as a result I am eating better, sleeping better, and have a level of motivation I haven't had for years. Roller derby is just one ingredient I have added to my recipe for life, but what a difference it has made already.

"I have a long way to go in terms of being ready to play but I feel I will get to a level where I will be able to, and I can't wait to put on the skates - so that's a good start," Nancy said.

To find out more about Keep It Corka Roller Derby email [andrea.murphy@ahcsa.org.au](mailto:andrea.murphy@ahcsa.org.au).







# ‘Keep It Corka’

## Social Marketing Campaign Launched

On 19 July 2013, the South Australian Aboriginal community came together to have a fun night at the launch of Keep It Corka, a social marketing campaign that encourages our mob to make small lifestyle changes to enjoy longer healthier lives with family and friends.

Comedian Sean Choolburra was MC for the evening, and was joined on stage by Elder Aunty Josie Agius and some of our state’s most talented Aboriginal singers, dancers and musicians including Hannah Yates, Ricky Wilson Dance Duo and CASM Soul Band, along with deadly Keep It Corka ‘Chair Zumba’ instructors Sarah Agius and Karissa Woolfe.

But perhaps the biggest celebrities on the night were the Keep It Corka ambassadors, including:

- Sarah Agius and her children Blake and Paige Gursansky
- Tea Chester
- Aunty Freda Chester-Mills
- Jake Cooke
- Robert Dann
- Ralph Fewquandie
- Cynthia Fielding
- Noel Hartman
- Leonie McCullum
- Nina Oughton
- Aunty Adeline Smith
- Jamie Smith
- Phillip Starri
- Kriston Thompson
- Ebony Warrior
- Jamaal Warrior
- Jesse Watson
- Chantelle Weidenhofer
- Trent Wingard

Each of these ambassadors are role models in our communities and Keep It Corka by eating healthy, keeping active and/or staying off the smokes. Together they show everyone, including our young ones, that there are ways we can make small changes to avoid getting diabetes, heart disease, kidney disease, and cancer in the future.

Speaking at the launch, AHCSA staff member Mary-Anne Williams, who stood in for Chairperson John Singer, noted that Keep It Corka is a great example of how we can work with other organisations to help improve the health of our people.

“Keep It Corka was formed through a partnership between AHCSA and Murray Mallee Community Health, and this partnership has taken the campaign to new heights,” explained Mary-Anne.

“Working with each other has allowed us to pool our talents, knowledge, and roles to make a suite of resources that we can all be very proud of but which is still tailored to regional communities through the use of local ambassadors,” she said.

This suite of resources is also backed up in practical ways by healthy lifestyle and tackling smoking teams that offer localised healthy eating, exercise, and smoking cessation activities as well as support in the Murray Bridge, Adelaide Hills, Riverland, Southern Fleurieu, and South East areas.

“The fact that these teams live and work within their regions means that activities can be responsive to local community needs and wants in an informed way,” said Mary-Anne.

“It’s only by listening to and working with our communities on a very localised level that we can hope to make a difference.”

For more information on Keep It Corka or to get a copy of an order-resource form, email [andrea.murphy@ahcsa.org.au](mailto:andrea.murphy@ahcsa.org.au). You can also stay connected and get healthy lifestyle tips by ‘liking’ us at [www.facebook.com/KeepItCorkaSA](http://www.facebook.com/KeepItCorkaSA)



# Aboriginal Burns Program Wins State Highly Commended Award

The 'Aboriginal Burns Program - Burn and Fire Prevention in the Aboriginal and Torres Strait Islander Population' jointly managed by the Royal Adelaide Hospital Burns Unit, AHCSA, and the Julian Burton Burns recently won the 2013 State Highly Commended Award.

Presented by Minister O'Brien, the award was accepted by Jill Clausen, Kurt Towers, and Stan Butler from AHCSA along with Deb Bates from the Julian Burton Burns Trust and other partner representatives.

The partners developed innovative and sustainable strategies to prevent burn and fire injuries in the diverse settings within which Aboriginal and Torres Strait Islander people live.

The Aboriginal Burns Program attempts to reduce the 25 times higher incidence of life threatening burn injuries sustained by Aboriginal and Torres Strait Islander people compared to the non-Indigenous population.

Commencing with the 'hands on' involvement of Aboriginal and Torres Strait Islander communities in 2012, the Burns First Aid Community Service Announcement (CSA) was successfully aired nationally over 500 times to more than 1 million Aboriginal and non-Indigenous viewers.

The CFS and MFS were also engaged to provide lectures in domestic and bushfire safety both in Adelaide and the APY lands. This was supplemented with accredited training modules in Burn and Fire Prevention, Management and Rehabilitation for Aboriginal Health Workers which are now available nationally.

Trained Aboriginal Health Workers from the Tiwi Islands, Alice Springs, Ceduna, Coober Pedy, Port Lincoln and Adelaide now conduct community education on an ongoing basis.

The Aboriginal Burns Program is a successful model that effectively engages with stakeholders from various professions to jointly achieve fewer burn injuries through customised and specifically targeted community education.



▲ Winners of the different categories



▲ Left to right: Peta O'Donohue (CFS), Deb Bates (Julian Burton Burns Trust), Francie Tonkin (MFS), Sheila Kavanagh (RAH Burns Unit), Kurt Towers (SA Health), Jill Clausen (RAH Burns Unit), Minister O'Brien



# ‘Stopping the run around’ Comorbidity Action in the North

AHCSA has partnered in the ‘Stopping the run around’ Comorbidity Action in the North (CAN) research project led by the University of Adelaide with other partners including the University of SA, South Australian Network of Drug and Alcohol Services (SANDAS) and Northern Adelaide Medicare Local.

The research, funded by an Australian Research Council ‘Linkage Grant Package’, the Adelaide Metropolitan Health Network and Salisbury Council, is focused on the delivery of effective, timely and culturally appropriate Mental Health (MH) and Alcohol and Other Drugs (AOD) comorbidity (sometimes known as dual diagnosis) service delivery, which may or may not include Problem Gambling (PG), in the Salisbury and Playford local areas.

CAN includes a particular focus on the MH and AOD comorbidity service needs of the Aboriginal community in these two local government areas. This is being accomplished by Hepsi Francis who is a PhD student working under the umbrella of the larger CAN research. Hepsi is working closely with respected Kurna Elder and community researcher for the University of Adelaide, Ms Coral Wilson.

Under the leadership of Professor Charlotte de Crespigny, Coral and Hepsi formed an Aboriginal Working Party in 2012 comprising local community members and Aboriginal Health Workers. Since then, members of the Working Party meet and communicate regularly.

The partners in this research are exploring the MH and AOD service needs of the Aboriginal community ‘on the ground’ and collaborating with them to find out what is needed to provide effective, timely and culturally appropriate MH and AOD comorbidity services for youth and adults.

In early 2014, once all the information has been gathered and analysed, the findings will be presented to the Aboriginal community through workshops, seminars and forums. The recommendations will be communicated to key stakeholders, policy makers, services, and the three tiers of government to guide them on how to systematically

change the way local MH and AOD comorbidity services are designed and delivered to the Aboriginal community to ensure they are culturally appropriate.

For further information please contact the CAN Project Coordinator:

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Or

Professor Charlotte de Crespigny  
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▲ University of Adelaide community researcher, respected Kurna Elder Ms Coral Wilson, and CAN PhD student Ms Hepsi Francis





▲ Current Port Lincoln Aboriginal Health Service Chairman Les Kropinyeri and inaugural Chairwoman Iris Burgoyne



▲ Mental Health North West Operations Group Network Manager Martin Breuker and PLAHS Chief Executive Officer Harry Miller



▲ PLAHS Senior Manager Client Services Angela Dufek, past PLAHS Board Member and employee Rob Dann and past PLAHS employee Angela Francisco

# Port Lincoln Celebrates 20 Years as an Aboriginal Community Controlled Health Service

The Port Lincoln Aboriginal Health Service celebrated its 20th anniversary this month, reflecting on its achievements to support the local Aboriginal community over that time.

Past and present staff as well as board members celebrated with partner organisations and the community at an open day on 3 September followed by a bush tucker cookout at the Mallee Park Wombat Pit.

Emma Richards provided a Welcome to Country and the community heard for the first time the local language revived as spoken by Kaiden Richards-Hancock and Darnell Richards.

Chief Executive Officer Harry Miller acknowledged many of the people who had played a role in the organisation including inaugural Chairperson Iris Burgoyne along with other past Chairpersons and the current Chairperson Les Kropinyeri.

He also acknowledged past partners, many of which were represented at the celebration including AHCSA, Office for Aboriginal and Torres Strait Island Health, and state funding bodies Country Health SA, Drug and Alcohol Services SA, Aboriginal health aged care, Port Lincoln Health Services, Port Lincoln Aboriginal Community Council and Medicare Local.

Mr Miller thanked staff, past and present, for their unwavering commitment to the community's health needs and developing community capacity, which he said had helped change the lives of many individuals and families.

The Port Lincoln Aboriginal Health Service was officially opened by Aboriginal and Torres Strait Islander Commission Chairwoman Lois O'Donoghue on 3 September 1993. Originally, there were 13 staff members - Jack Johncock, Gabriella Burgoyne, Mark Larking, Elizabeth Taylor, Jeremy Coaby, Ollie Flanagan, Alan Evans, Jacqueline Ah Kit, Josie Carbine, Denise Pompey, Shondelle Coleman, Nara Threadgold, and Paul Ashe (CEO) and now there are 43.

The service started as a small team of health, social and emotional wellbeing, substance misuse workers, and administration. Over the years, it has expanded significantly to offer a comprehensive range of services covering primary health care, maternal and child health, family support, allied health, aged care, and a learning centre.

Some of the highlights from the last 20 years have been achieving and maintaining clinical accreditation since 2003; staff qualifications across the health spectrum; and the development of the chronic disease program including activities like the Healthy Lifestyle/Diabetes camps which have grown from about 30 attendees to 140.

One of the aims of the service is to take a holistic approach to health and wellbeing and provide a one-stop-shop for clients through individual case management and by evolving and adapting to clients' needs. "We can all accept there is still a way to go towards improving health outcomes for our people, which means that efficient and affective planning and implementation of social programs like grief and loss, drug and alcohol, homes and housing, and employment need to continue to be achieved," Mr Miller said.

"We must be identified as the preferred provider and this needs the effort of all to understand and convince major funders that community control of health services can deliver best outcomes."





▲ Marshall Carter (AHCSA) and Wayne Oldfield from Medicare Local



▲ Boys enjoying the celebrations



▲ Byron Burgoyne, Rob Dann and John Cooby



▲ Kim Conway, Jane Radford (Baptist Care) and Warren Clements (PLAHS)



▲ Member for Flinders Peter Treloar, Housing SA Regional Manager Irene Adair and PLAHS Chief Executive Officer Harry Miller

# Port Lincoln Aboriginal Health Service Steps into Spring

Staff at the Port Lincoln Aboriginal Health Service (PLAHS) will have an extra spring in their step over the next couple of months through the 'PLAHS Steps into Spring 10,000 Steps Challenge' which aims to boost physical activity and overall wellbeing.

The challenge was inspired by entering a team in the Port Lincoln Health Services Corporate 10,000 Steps Challenge earlier this year. PLAHS 10,000 Steps Challenge coordinator and team member, Health Promotion Officer Maud Heath said this team created enthusiasm and gathered a lot of interest from other staff as they competed to out-step each other.

The 'Steps into Spring Challenge', which began on 23 September and runs until 29 November, has seven teams of five registered. They are walking to Broome, measuring the steps they take against the distance from Port Lincoln via Alice Springs and the Tanami Desert - a total of 4,143,750 steps. Their destination is where Community Services team leader Warren Clements is from and he has chosen the route.

Maud Heath said it would be a good morale building exercise as they inspire and support each other to increase their steps. Apart from increasing their physical activity, the challenge will also include input from the dietician about healthy eating as well as staff events to celebrate reaching destinations. "We are doing it for exercise but also for overall wellbeing," Maud said.



▲ Health Promotion Officer Maud Heath giving Travis Rogers (left) and Robert Varcoe (right) pedometers for the PLAHS Steps into Spring 10,000 Steps Challenge



# Eye Health

## – A Significant Public Health Issue



Trachoma is a significant public health issue in Australia, predominantly in rural and remote Aboriginal communities.

As such, Australia is a signatory to the Alliance for the Global Elimination of Blinding Trachoma by the year 2020, established by the World Health Organisation (WHO). In 2009, the Australian Government funded an initial \$16 million in an effort to eliminate trachoma. Through much discussion and negotiation, the AHCSA Trachoma Elimination Team was established in June 2011 in partnership with Country Health SA as a result of this funding.

The WHO states that trachoma is a contagious infection of the eye caused from specific strains of bacteria known as chlamydia trachomatis. The thin clear covering over the 'white' of the eye becomes red and swollen and small dots and follicles (whitish round spots) appear on the inner eyelid. Chronic conjunctivitis caused by repeated trachoma infections often associated with other bacteria leads to scarring. If not treated, it can cause scarring of the eyelid and inturned eyelashes scratching the eye (known as trichiasis) which can result in blindness if not treated with surgery. The main source of trachoma infection is human cases and is highest amongst pre-school aged children with infections in children persisting longer than those in adults ie young children form a reservoir for infection.

The AHCSA Eye Health & Chronic Disease Specialist Support Program (EH&CDSSP) continues to be successful in supporting Aboriginal communities in South Australia, despite modest funding by the Commonwealth Government. The program provides an Ophthalmologist, Optometrist Specialist Support, and Eye Health Training Program to Aboriginal Community Controlled Health Services (ACCHSs) in rural and remote areas.

Unfortunately, the EH&CDSSP team continue to find occurrences of trachoma, mostly among children aged 5-12. Of further concern is the prevalence of trichiasis which also remains high among older Aboriginal people and this issue, if not treated, can cause loss of sight and other serious issues. The elderly have to face these

concerns along with poor housing, inadequate support for disabilities and the many other major environmental and health concerns.

The Trachoma Elimination Team was funded to provide:

- Screen Aboriginal children, aged 5-9, for trachoma and screen Aboriginal adults over the age of 40 for trichiasis.
- Provide training workshops for Aboriginal Health Workers in correct trachoma screening and treatment practices.
- Develop a Trachoma Training Program and course material.
- Establish a South Australian database.

This opportunity also enabled the EH&CDSSP to continue working with the Trachoma Elimination Program and closer working partnerships with other leading eye health entities such as Vision 2020, Royal Society for the Blind, Optometrists Association of South Australia, the Guide Dogs of SA, and many other interstate and national Aboriginal eye health programs.

In line with Vision2020 and WHO, AHCSA has and will continue to adopt a resolution to eliminate blinding trachoma by 2020. To achieve this, AHCSA will follow the WHO's recommended strategies, work in partnership with ACCHSs in South Australia, and continue to build on the strong relationships already established with other eye health government and non-government agencies including:

- Royal Australian and New Zealand College of Ophthalmologists
- Optometrists Association of South Australia
- National Trachoma Surveillance Unit
- South Australian government:
  - Communicable Diseases
  - Country Health SA
  - Department of Education & Children's Services
- Vision2020



- Rural Doctor's Workforce Agency
- Medical Specialist Outreach Assistance Program
- Visiting Optometrist Support Scheme
- Guide Dogs of South Australia
- Royal Society of the Blind
- Flinders Medical Centre & Royal Adelaide Hospital Eye Clinics
- Alice Springs Hospital

The EH&CDSSP has been supporting rural and remote ACCHSs for 10 years and works closely with the Trachoma Elimination Program in following the guidelines for the public health management of trachoma in Australia.

Trachoma is one of the earliest recorded eye diseases in history and is the leading cause of blindness worldwide. Australia is the only developed country that still has trachoma. Whilst trachoma disappeared from mainstream Australia 100 years ago due to improvements in hygiene and environmental health rather than a specific trachoma control program, it still occurs far too frequently in remote Indigenous communities. It has also been eliminated from some third world countries such as Ghana, Morocco and Iran in the past 5-10 years through trachoma control programs.

Current data in reference to the prevalence of trachoma in South Australia suggests that it is decreasing, however, it is known that infectious trachoma still persists in remote Aboriginal communities. Therefore, further work is required in health promotion, training and health education with particular reference to clean faces, clean hands, healthy lifestyles, and annual check-ups with the Eye Doctor.

Although a majority of health professionals are aware of eye diseases, research indicates that unless they are trained in the area of eye disease or have continual involvement with a trachoma control program, there is either a lack of knowledge about the causes and treatments as well as the prevalence of trachoma.

There are many brochures, books and educational tools available and the Trachoma Elimination Team will continue to work with these and work towards introducing new and innovative activities such as song and dance, music and media relevant to each community.

Trachoma and trichiasis are completely preventable. The WHO recommends a combination of interventions known by the acronym 'SAFE' which stands for Surgery for trichiasis (inturned eyelashes), Antibiotics, Facial cleanliness and Environmental improvement. These recommendations were modified to the Australian context in 2006 in the Guidelines for the Public Health Management of Trachoma.

The first two components of the SAFE strategy utilise simple curative measures that treat active forms of the disease. Surgery targets the late stages of the disease to prevent blindness among adults who have been exposed to trachoma throughout their lifetime. Antibiotics specifically target the active, infectious stage of trachoma and it has

been shown that a single dose of azithromycin can eliminate the infection from individuals. However, if active trachoma is found it is important that not only the primary patient is treated but the entire household due to its infectious nature.

The last two components of the SAFE strategy require larger interventions. It is essential that facial cleanliness and environmental improvements occur for a sustained, long-term reduction in trachoma prevalence. This is particularly evident in the disappearance of trachoma from Europe and North America without the use of antibiotics or surgery. Control of trachoma in these parts of the world came about predominantly through an increase in living standards accompanied by improvements in environmental conditions and changes in behaviour regarding personal hygiene.

Trachoma control in endemic regions requires a holistic, coordinated and sustained public health response with the involvement of public health units, primary health care services, and housing and essential services in affected geographical regions. These interventions must be community-targeted and seek community involvement through a primary health care approach.

The Trachoma Elimination Program and the EH&CDSSP teams are responsible for assisting the health services in Oak Valley, Yalata, Coober Pedy, Oodnadatta, and Whyalla with trachoma control and prevention, supporting member services in their efforts to eliminate trachoma as well as providing training to Aboriginal health professionals across South Australia.

Outstanding support has been received from Sight for All, in particular Ophthalmologist Dr James Meucke who has consulted with AHCSA and researched excellent eye health promotion in the form of songs, DVDs, and videos which can be found at [www.sightforall.com/Aboriginal](http://www.sightforall.com/Aboriginal)





# Rising Spirits: A Community Resilience Project

Rising Spirits is AHCSA's response to Tauto Sansbury's article 'The 13th Day' which highlighted the unacceptably high rate of premature death and suicide in South Australian Aboriginal communities.

The project aims to document what programs AHCSA member services and others already offer and what is still needed to address grief and loss. Community capacity to address grief and loss is being assessed and AHCSA is working with services to help increase this capacity by facilitating the development of action plans. Community resources will then be developed to raise awareness and promote community engagement with grief and loss programs.

The partners in the project are AHCSA as the lead organisation, beyondblue as the funder, South Australian Health and Medical Research Institute, University of South Australia, and interested representatives from the ten Aboriginal Community Controlled Health Services and seven Aboriginal Health Advisory Committees.

Meetings will be facilitated around the state to provide the opportunity for individuals, communities, and services to talk about programs and services and whether they are meeting people's needs regarding grief and loss. Participation in these meetings is voluntary and the privacy of people will be respected. The research

team will also use these meetings as an opportunity to talk about the project, its history, aims and intended methods. Feedback will be used to refine existing methods and engagement processes.

The primary methods for collecting project data will include yarning circles and/or individual interviews whereby participants will be invited to discuss the strengths, weaknesses, and gaps in existing programs and referral pathways. The project is designed to be responsive to the needs of local communities and will be continually shaped by their input.

The anticipated benefits from Rising Spirits for partner services include:

- Identifying 'best practice' programs and services to address grief and loss issues in the community.
- Working with communities and health services to develop action plans to address grief and loss issues in the community.
- Helping to develop capacity for quality improvement processes where wanted.
- Working with communities to develop local community awareness activities to engage community members in programs and services.
- Facilitating the sharing of 'good news stories' among member services and beyond.
- Producing a resource kit with examples of 'best practice' from Aboriginal communities.
- Using the findings from the project to influence government funded programs and policy.



▲ Group launch



▲ Smoking ceremony



# Introducing the Wardliparingga Aboriginal Research Unit



The Wardliparingga Aboriginal Research Unit has a broad program of research that covers the management of chronic conditions, especially heart disease and diabetes, and their many complications.

They focus on disparities between Aboriginal and non-Aboriginal people with access to services, quality of care, and health outcomes.

Professor Alex Brown has spent the past 15 years studying the connection between heart disease, diabetes, and depression in Aboriginal people. Now at the South Australian Health and Medical Research Institute, he continues to explore why it is that these conditions often appear together in so many Aboriginal people and why there is such a gap between the health status and treatment outcomes of Aboriginal and non-Aboriginal people.

Concentrating on attitudes and responses of service providers to Aboriginal people, cultural factors, the role of family support, environmental issues, impacts of grief and loss on health and service usage, and how racism may affect health status, Wardliparingga seeks to understand the reasons for these disparities in health outcomes.

Working with health services, both mainstream and Aboriginal community-controlled, ensures that the research is relevant, beneficial to the community, and delivers a strong impact on health outcomes as soon as possible.

The clinical research gathers information from individuals and biological materials. This provides a better understanding of the mechanisms of chronic conditions and the most effective way to deliver treatments. Through experimental work with treatments such as combination medications

and other interventions, prevention or better management of chronic diseases can be understood.

Wardliparingga strives to tell the story that emerges from analysing data and statistics about Aboriginal people and aims to get a better understanding of health, wellness, resilience, and challenges to the health of Aboriginal people in South Australia.

A growing team of people are undertaking the research and seeking to influence both policy and practice. There have been some gains in the status of Aboriginal people in the past 10-15 years but the gap is still evident and there remains quite a significant gap in some areas.

Wardliparingga are committed to building the capacity and strength of Aboriginal research in South Australia. By training Aboriginal people in research skills and providing a network for sharing experiences as researchers and research participants, opportunities are created for people to move into research or incorporate research into their health care roles.

Through the development of a strong partnership with Aboriginal Elders, the Aboriginal community controlled health sector and health services, Wardliparingga hopes to deliver beneficial outcomes for the Aboriginal community.

Wardliparingga translates to 'house on the river' and is the name for the Milky Way in Kurna language. Painted by Professor Alex Brown, the Wardliparingga logo depicts the Torrens River surrounded by the stars of the Milky Way. The coloured shapes that border the river represent communities, organisations, and partners which are connected together through Wardliparingga.



▲ Left to right: Back Row: Katharine Brown, Dr Carol Davy, Kim Morey, David Banham, John Gray, Dr David Johnson, and Dr Paul Yerrell. Middle Row: Elaine Kite, Tania Marin, Peter Azzopardi, Odette Gibson, Dr Rachel Reilly, Dr Rebekah O'Shea, Anna Dowling, and Karen Laverty. Front Row: Kathy Mott, Professor Alex Brown, and Vanessa Williams



# Pini Drual Wowakal Lead the Way



## Pini Drual Wawakal Men's Group

Caretakers of Boandik Country



▲ Proud Grandfather

▲ United We Stand

Pini Drual Wowakal, meaning 'Strong and Young Men', resulted from Pangula Mannamurna's successful bid to OATSIH for funding to support the Strong Fathers Strong Families initiative.

The program commenced in 2011 in Mount Gambier to promote and empower the role of Aboriginal and Torres Strait Islander fathers, sons, partners, grandfathers, and uncles, and since then the group has become stronger.

The Strong Fathers Strong Families program encourages men to actively participate in their children's and families lives, particularly in the antenatal period.

Historically in and around Mount Gambier, it was the women who took the front seat in community affairs. But now in 2013, it is also the men who have 'got off the couch' to actively contribute to local Aboriginal affairs.

Not only has the Strong Fathers group voiced their concerns about issues affecting their lives and the lives of their families, they are also actively participating in addressing some of those issues.

This proud group regularly participates in cultural, recreational, social, and educational gatherings with support from the local Aboriginal Strong Fathers Strong Families Worker John Watson.

Peter May, the Aboriginal Health Worker and Health Promotion Officer in Mount Gambier also offers support and previously attracted funding from the South East Regional Community Health Service to financially contribute to the purchase of the men's group t-shirts which creates a sense of ownership and group identity.

The group gatherings have grown from six men to 25. "That is just TOO DEADLY!" said Peter May.

Pini Drual Wowakal has a strong focus on empowering local Aboriginal fathers and young men to take control of and enrich their lives. The group believe that through building stronger individuals that this will lead to healthy family relationships.

Instilling a stronger sense of cultural responsibilities in taking care of family is top priority and the younger members are increasingly attending activities with their dads, grandfathers, and uncles, and the pride amongst the group is evident.

In a discussion with three new dads they said, "Being part of the Pini Drual Wowakal group has helped us to socialise more with other men, built our confidence and made us aware of the positive qualities we have in helping each other".

The group attend fishing, camping, and other activities to spend quality time with their sons, grandsons or nephews. These activities provide the opportunity to practise and teach culture such as through traditional net and spear fishing and making boomerangs.

Pini Drual Wowakal have also been increasingly active in learning about and caring for country through site visits and re-vegetating regional areas in the South East. Strong linkages with the Coordinator Aboriginal Communities for the South East Natural Resources have been developed.

Participating in the group on a regular basis and



▲ A lighter moment

▲ Getting in shape

▲ Re-vegetating regional areas in the South East



# for Local Men in the South East

being involved in various programs and education opportunities has improved things on the home front too. The young dad's said that attending the group antenatal session helped them to understand the changes that were happening now in the family and also the changes once baby arrived. "It is really important for me to stay healthy so that I can take care of my family and baby", said one proud dad.

The Pini Drual Wowakal members and their families also report that they are happier and more motivated to be involved in other activities around the home with the family, and they are teaching their families about what they have been doing. Another young dad stated that he is closer to his partner and family now as he has learned more about parenting skills.

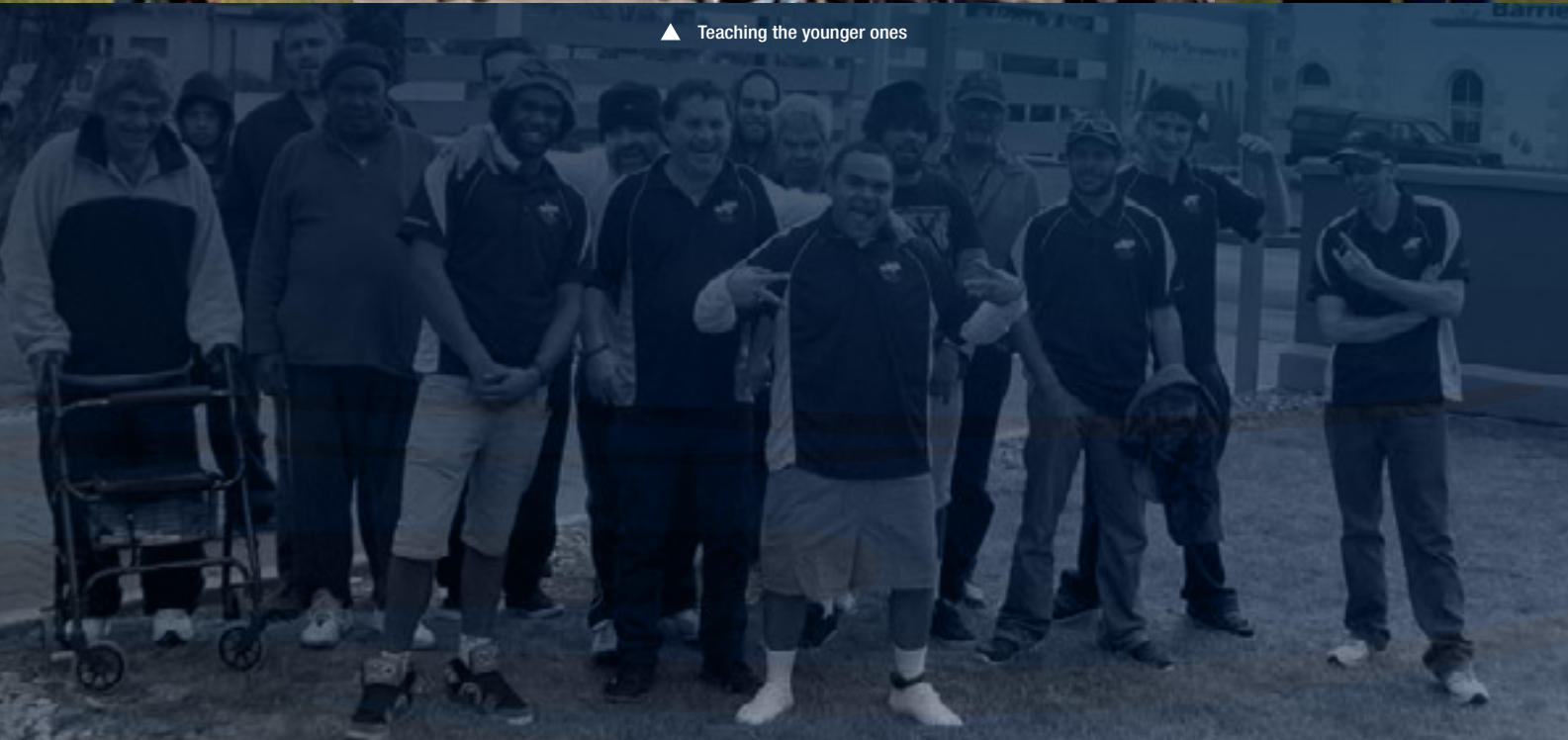
Pini Drual Wowakal continues to be part of developing further working partnerships by attending various meetings called by community and others.

Another highlight for the group was travelling to the MCG for the past two years to attend 'Dreamtime at the G'. For many, it is simply a dream come true and a once in a lifetime experience.

Pini Drual Wowakal pays full credit and appreciation to the more senior members of the group. "Their cultural wisdom, knowledge and general input provides younger members with a greater connectedness to our rich and wonderful culture. We can see the group getting stronger and the positive outcomes achieved are for the individual, and also for our community," Peter May said.



▲ Teaching the younger ones



▲ Re-vegetating regional areas in the South East

▲ Spending quality time together

▲ Traditional net fishing



# For the Rights of Aboriginal Elders

What would you do if you knew an older person in the community who was having their pension or medication ripped off by somebody they knew?

Maybe you know someone in an aged care facility who isn't being treated right or an older person who is being denied access to a particular service.

These are just a few examples of the wide range of issues that are dealt with on a daily basis by the Aged Rights Advocacy Service (ARAS), an independent not-for-profit organisation based in Adelaide which services all of South Australia. ARAS has an Aboriginal Team which, since 2003, has been upholding the rights of Aboriginal people aged 50 or over in aged care services and/or who are experiencing abuse. Team Leader Louise Herft and Aboriginal Advocates Andrew Davis and Simone Kenmore, who both joined ARAS earlier this year, travel the state to meet with Elders' groups and regularly put older people in touch with aged care service agencies and community-based support programs.

Many older people do not know of their rights and entitlements when they are receiving aged care services so when things go wrong for them they do not know who to speak to or how to resolve the issue. ARAS provides a free, confidential service to inform older people about their rights and responsibilities and will advocate on the older person's behalf to service providers if they wish. Alternatively, ARAS may work with the older person or their representative or family member to help them resolve the issue themselves. It is important to note that the client maintains control throughout the entire process. After all, everybody deserves the dignity and the basic right to be in control of their own life.

Unfortunately, many older people do not have such control over their lives. ARAS is hearing more and more disturbing stories of abuse of the elderly in our communities. ARAS, which works in collaboration with the Council of Aboriginal Elders of SA (CAESA), says the community is now talking

about abuse of the elderly and how we can all work together to put an end to this. These conversations are the culmination of a joint ARAS/CAESA 18 month project called 'Preventing Abuse of Aboriginal Elders', which was funded by the Attorney-General's Department, asking Elders how they would like to tackle the issue.

CAESA says, "Any abuse of an Aboriginal Elder is a real dog act. It's a real shame job. We will not tolerate it." CAESA's recently appointed Executive Officer Mr Garth Dodd said, "We need to ensure that our Elders maintain their rightful place as leaders of our community".

ARAS, in collaboration with CAESA, has successfully applied for funding to hold a second 'Mentoring Camp' later this year. This initiative was conceived in 2011 when Coober Pedy Elders told ARAS that they believed they could restore respect to the Elders by teaching young Aboriginal people about their culture and traditions. The Elders said they would like to do this in a traditional setting in the form of a mentoring camp. May 2012 saw this wish come to fruition when Aboriginal Elders and youths from all over South Australia gathered at Ten Mile Camp in the desert country near Coober Pedy. Representatives from a number of service providers and members of the Aboriginal community of Coober Pedy also attended the camp. A second camp was scheduled for October 2013 with hopes for more in the future.

ARAS hosted the second National World Elder Abuse Awareness Day Conference in June this year in Adelaide. This conference saw representatives from more than 100 organisations come together with a view to building a national approach to prevent the abuse of older Australians. Marilyn Crabtree, CEO of ARAS said, "International and Australian experts in the field were keen to share current innovations and future visions. This event provided an opportunity to showcase and celebrate the progress that is being made."

ARAS and the Aboriginal Program Team is working hard to ensure that the best practices shared and the good work done at the conference continues and is further built upon for the benefit of our highly valued, older Australians.

ARAS can be contacted via telephone on **8232 5377** or toll free **1800 700 600**, or by email at [aras@agedrights.asn.au](mailto:aras@agedrights.asn.au). Further information is also available on the ARAS website at [www.sa.agedrights.asn.au](http://www.sa.agedrights.asn.au).



aras



aged rights advocacy service inc.

Aboriginal  
Advocacy Program



▼ Stephen 'Gadlabardi' Goldsmith and Jamie 'Nungana' Goldsmith from Taikurtinna dance group performing the Welcome to Country at the 2013 World Elder Abuse Awareness Day Conference

## Aboriginal Advocacy Program

For the Rights of Older People



Aged Rights Advocacy Service  
Tel (08) 8232 5377  
Country Toll Free 1800 700 600  
[www.sa.agedrights.asn.au](http://www.sa.agedrights.asn.au)



▲ Aboriginal Advocates Andrew 'AJ' Davis and Simone Kenmore delivering an ARAS presentation to Elders and community members at Raukkan in February 2013



# ATSIHRTONN Launches New Look

ATSIHRTONN was proud to launch its 'new look' at the NACCHO Health Summit held at the Adelaide Convention Centre on 20-22 August 2013.

"The Summit was a great event to launch our new look designed by Dreamtime Public Relations and we received lots of great feedback from those who attended," ATSIHRTONN National Coordinator Darrien Bromley said.

A flyer was designed for each ATSIHRTONN RTO Member which captured all of the qualification that are on offer at their organisation.

In the near future, a new website will be launched featuring more functionality and information about where to study

and what's involved in the Aboriginal and/or Torres Strait Islander Primary Health Care qualifications.

Copies of the flyers are available from Rachel Telfer on tel: 08 8273 7200 or email [rachel.telfer@ahcsa.org.au](mailto:rachel.telfer@ahcsa.org.au)



## 2013 AHCSA General Practice Forum

The 3rd Annual GP Forum, held by AHCSA at Nunkuwarrin Yunti in August, was attended by 27 General Practitioners who work in Aboriginal Community Controlled Health Services throughout South Australia and other services working predominantly with Aboriginal clients in Adelaide.

The themes were Diabetes and Mental Health. Key note speaker Professor Alex Brown, Director of the Aboriginal Health Research Program at the Wardliparingga Aboriginal Research Unit, South Australian Medical Research Institute, spoke of the impact of social emotional wellbeing on cardiac health, providing a strong linkage between the Forum themes.

A session on the role of Ngangkari was a highlight of the day with Clem Dahby, Josephine Mick, and Maringka Burton from the NPY Women's Council Ngangkari group enthralled the western medicine trained doctors.

The opportunity to discuss important clinical and emotional health problems among colleagues together with Specialists involved in Aboriginal health care was invaluable.

Thanks to the Rural Doctors Workforce Agency, Adelaide to Outback GP, and Southern Fleurieu Education and Training for their generous sponsorship of the event.



▲ Angela Lynch, Maringka Burton, Josephine Mick, Bill Edwards, and Clem Dahby



▲ Professor Alex Brown addressing the Forum



# Country Referral Unit – What does it do?

The Country Referral Unit (CRU), located at Nuriootpa in the beautiful Barossa Valley provides the following programs:

- **Transition Care Package** – managed by Aboriginal Transition Care project Officer Vince Buckskin, this is a country-wide program with a rehabilitative focus and aims to improve a client's level of function. Clients need an Aged Care Assessment completed while they are still in hospital, to receive a package.
- **Country Home Link** – a country-wide, short term (7 days), package of care to help clients leave hospital earlier so they can return home. Services are delivered for no longer than seven days.
- **Access2HomeCare** – a country-wide referral service for clients needing long term Home and Community Care support within their own home or needing an Aged Care Assessment.
- **Palliative Care End of Life Choices Program** – a country-wide program to support those with terminal illnesses.
- **Healthlink** – provides referrals to community health services for clients living in the Gawler, Barossa, Lower North, and Yorke Peninsula areas.

The CRU accepts referrals from hospitals and GPs. People can also refer themselves for some programs and health workers can refer as long as they have client consent. Staff speak with clients and collect some information to help them receive the services they need.

For further information, contact the CRU:

## **Transition Care Program**

85 612 186 (Monday – Friday 9:00 am – 5:00 pm)  
chstransitioncareprogram@health.sa.gov.au

## **Country Home Link**

1800 258 688 (every day – 8:00 am – 6:00 pm)  
Health.chsacountryhomelink@health.sa.gov.au

## **Access2HomeCare**

1300 130 551 (Monday – Friday 9:00 am – 5:00 pm)  
Health.chsaaccess2homecare@health.sa.gov.au  
www.sa.gov.au/seniors/access2homecare

## **End of Life Choices**

8393 1684  
Kevin.hardy@health.sa.gov.au

## **Healthlink**

1800 003 307 (Monday – Friday 9:00 am – 4:30 pm)  
chshealthlink@health.sa.gov.au

## Finding References for Your Project Work Made Easy!



Are you studying, working on a community project or generally have an interest in Aboriginal and Torres Strait Islander health? Then check out Lit.search on the Lowitja Institute website [www.lowitja.org.au/litsearch](http://www.lowitja.org.au/litsearch)

The Lowitja Institute, in partnership with Flinders University and with help from experts in the field of Aboriginal and Torres Strait Islander health, have developed an online resource that can help you find health related articles to strengthen your work.

Lit.search is a free resource that lets you search PubMed, one of the largest health databases in the world for

all available information on Aboriginal and Torres Strait Islander health, or one of 27 specific search topics. Whatever your choice, you'll be able to refine your search with keywords and timeframes. PubMed is basically 'big mobs of different knowledge from around the world' including articles on other First Nations peoples.

The Project Manager Dr Jennifer Tieman from Flinders University said, "Given the importance of the Closing the Gap strategy, access to the research knowledge about Australian Aboriginal and Torres Strait health is crucial. The Lit.search resource helps health care providers, community organisations, academics, researchers and policy makers find this information quickly and easily".

The Lowitja Institute is Australia's only national health research institute with a sole focus on Aboriginal and Torres Strait Islander peoples.



## AHCSA Members

### Aboriginal Community Controlled Health Services

#### Nganampa Health Council

**Umuwa Office**  
Ph: (08) 8954 9040  
Fax: (08) 8956 7850  
**Alice Springs Office**  
3 Wilkinson Street  
Alice Springs NT 0871  
Ph: (08) 8952 5300  
Fax: (08) 8952 2299  
**Postal Address:**  
PO Box 2232  
Alice Springs NT 0871  
[www.nganampahealth.com.au](http://www.nganampahealth.com.au)

#### Nunkuwarrin Yunti of SA Inc.

Ph: (08) 8406 1600  
Fax: (08) 8232 0949  
182 Wakefield Street  
Adelaide SA 5000  
**Postal Address:**  
PO Box 7202, Hutt Street  
Adelaide SA 5000  
[www.nunku.org.au](http://www.nunku.org.au)

#### Port Lincoln Aboriginal Health Service Inc.

Ph: (08) 8683 0162  
Fax: (08) 8683 0126  
19A Oxford Terrace  
Port Lincoln SA 5606  
**Postal Address:**  
PO Box 1583  
Port Lincoln SA 5606  
[www.plahs.org.au](http://www.plahs.org.au)

#### Tullawon Health Service

Ph: (08) 8625 6237  
Fax: (08) 8625 6268  
**Postal Address:**  
PMB 45, Ceduna SA 5690  
[www.tullawon.org.au](http://www.tullawon.org.au)

#### Umoona Tjutagku Health Service Aboriginal Corporation

Ph: (08) 8672 5255  
Fax: (08) 8672 3349  
Lot 8, Umoona Road  
Coober Pedy SA 5723  
**Postal Address:**  
PO Box 166  
Coober Pedy SA 5723  
[www.uths.org.au](http://www.uths.org.au)

#### Pangula Mannamurna Inc.

Ph: (08) 8724 7270  
Fax: (08) 8724 7378  
191 Commercial Street West  
Mount Gambier SA 5290  
**Postal Address:**  
PO Box 942  
Mount Gambier SA 5290  
[www.pangula.org.au](http://www.pangula.org.au)

### Ceduna Koonibba Aboriginal Health Service Aboriginal Corporation

Ph: (08) 8626 2600 Admin  
Ph: (08) 8626 2500 Clinic  
Fax: (08) 8625 2898  
1 Eyre Highway, Ceduna SA 5690  
**Postal Address:**  
PO Box 314, Ceduna SA 5690

### Pika Wiya Health Service Aboriginal Corporation

Ph: (08) 8642 9904  
Fax: (08) 8642 6621  
40-46 Dartmouth Street  
Port Augusta SA 5700  
**Postal Address:**  
PO Box 2021  
Port Augusta SA 5700

### Oak Valley Aboriginal Health Service

**Maralinga Tjarutja Administration Office**  
Ph: (08) 8670 4207  
Fax: (08) 8670 4208  
Email: [maratjar@maralinga.com.au](mailto:maratjar@maralinga.com.au)  
43 McKenzie Street  
Ceduna SA 5690  
[www.wangkawilurrara.com/oakvalley](http://www.wangkawilurrara.com/oakvalley)

### Nunyara Aboriginal Health Service

Ph: (08) 8649 4366  
Fax: (08) 8649 4185  
17-27 Tully Street  
Whyalla Stuart SA 5608  
**Postal Address:**  
PO Box 2253  
Whyalla Norrie SA 5608  
[www.nunyara.org.au](http://www.nunyara.org.au)

### Substance Misuse Services

#### Aboriginal Sobriety Group Inc.

Ph: (08) 8223 4204  
Fax: (08) 8232 6685  
Email: [sobriety.asg@asg.org.au](mailto:sobriety.asg@asg.org.au)  
182-190 Wakefield Street  
Adelaide SA 5000  
**Postal Address:**  
PO Box 7306, Hutt Street  
Adelaide SA 5000  
[www.aboriginalsobrietygroup.org.au](http://www.aboriginalsobrietygroup.org.au)

#### Kalparrin Community Inc.

Ph: (08) 8532 4940  
Fax: (08) 8532 5511  
Karoonda Road  
Murray Bridge SA 5253  
**Postal Address:**  
PO Box 319  
Murray Bridge SA 5253  
[www.kalparrin.com](http://www.kalparrin.com)

### AHCSA Board of Management

#### Executive Members

##### John Singer

AHCSA Chairperson  
Director - Nganampa Health Council

##### Bill Wilson

AHCSA Vice Chairperson  
Moorundie Aboriginal Health Advisory Committee

##### Les Kropinyeri

AHCSA Secretary  
Port Lincoln Aboriginal Health Service

##### Arlene Burgoyne

AHCSA Executive Member  
AHCSA Treasurer  
Eyre Aboriginal Health Advisory Committee

##### Polly Summer-Dodd

AHCSA Executive Member  
Aboriginal Sobriety Group Inc.

##### Leonard Miller

AHCSA Executive Member  
Ceduna/Koonibba Aboriginal Health Service Aboriginal Corporation

##### Vicki Holmes

AHCSA Executive Member  
CEO - Nunkuwarrin Yunti of SA Inc.

##### Lucy Evans

AHCSA Executive Member  
Chairperson - Mid North Aboriginal Health Advisory Committee

##### Robin Walker

AHCSA Executive Member  
Umoona Tjutagku Health Service Aboriginal Corporation

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#### Yvonne Buza

Chairperson - Northern Aboriginal Health Advisory Committee

#### Kingsley Abdulla

Riverland Aboriginal & Islander Health Advisory Group

#### Lyn Smith

Chairperson - Nunyara Aboriginal Health Service

#### Wayne Oldfield

Chairperson - Wakefield Aboriginal Health Advisory Committee

#### Marshall Carter

Kalparrin Community Inc.

#### Rodney Chuna

Chairperson - Tullawon Health Service

#### Veronica Milera

Director - Pika Wiya Health Service Aboriginal Corporation

#### Fiona Wilson

Chairperson - South East Aboriginal Health Advisory Committee

#### Clayton Queama

Oak Valley Health Service

#### Gwen Owen

Pangula Mannamurna Inc.