



A H C S A  
NEWS MAY 2006

..... Over 70 AHWs Graduate in 2005 -  
..... Significant Changes to APHCW -  
..... World Leader in Chronic Disease -  
..... Aboriginal Adult Health Check -  
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The Aboriginal Health Council of SA Inc. (AHCSA) is the peak body representing Aboriginal community controlled health and substance misuse services, and Aboriginal Health Advisory Committees in South Australia at a state and national level.

From 1 July 2006, AHCSA News will be published three times per year. Editorial and photographic contributions are welcomed at any time from AHCSA members and associated government departments and agencies. Please send your contributions to: Aboriginal Health Council of SA Inc., 78 Fullarton Road, Norwood SA 5067 (PO Box 787, Kent Town SA 5067), Tel: (08) 8132 6700 Fax: (08) 8132 6799 Email: [ahcsa@ahcsa.org.au](mailto:ahcsa@ahcsa.org.au), Website: [www.ahcsa.org.au](http://www.ahcsa.org.au).

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Enquiries should be addressed to the Chief Executive Officer. 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)

**Cover Photo:** Braddon Queama from Tullawon Health.



## EDITORIAL

Well here we are in a new year and it is already shaping up to be a very busy year for everyone.

I am happy to say that I have now been appointed to the Chief Executive Officer position for AHCSA following a recruitment process. I look forward to continuing to work with the dedicated staff within the Secretariat and with all our members. I thank the Board for the opportunity and will work very hard to live up to their faith in appointing me to the position.

The Board Executive has had its first meeting and the first full Board meeting was held in early March. The Chairperson and Deputy Chairperson have attended several meetings including one with Jim Birch and David Filby from the Department of Health to progress the review of AHCSA.

The review is a collaborative approach between AHCSA, the Department of Health and the Department of Health and Ageing and is focusing more on developing the future strategic directions for AHCSA rather than a review or audit. The Board will continue to review AHCSA's constitution throughout the year in order to improve and maintain efficiency and effectiveness.

AHCSA staff have been completing their six monthly progress reports to our funding bodies, some have travelled and the Centre for Aboriginal Health Education and Training (CAHET) has commenced the first study blocks. There are 27 new Certificate 3 students this year.

The National Aboriginal Community Controlled Health Organisation (NACCHO) review continues to be a major issue. An Extraordinary General Meeting was held in Adelaide on 9 March to vote on the proposed reform.

The First Annual Review of the Sector Statewide Strategic Plan is currently being finalised and will be sent out to all members after the Board has endorsed it. We are hoping to be able to secure further funding to continue with the implementation of the plan.

Following the signing of the Framework Agreement for South Australia, the partnership is now working on the implementation plan for the agreement. Stan Butler has returned to the Coordination and Support Team as Acting Coordinator for six months and Ben Sanderson has joined the team as the Senior Project Officer.

AHCSA has also been working with the Cancer Council on convening a forum in May to look at the issues around cancer for Aboriginal and Torres Strait Islander people.



## FROM THE CHAIRPERSON

I would like to welcome you all to this edition of the AHCSA Newsletter. Firstly, I wish to acknowledge the service and contribution of the outgoing Chairperson, Mr Robert Dann. I would also like to congratulate Mary Buckskin on her recent appointment as Chief Executive Officer of AHCSA. Her previous experience in our sector equips her well for her new role. The Board will be working closely with Mary to ensure that the priorities of the Council's Secretariat reflect the needs and wishes of the members and remain responsive to these over time.

I would also like to welcome the Chairs of the Aboriginal Health Advisory Committees as full members of the AHCSA. This development represents an important step towards extending the coverage of the Aboriginal Community Controlled Health sector in South Australia, and especially to parts of the State that have been historically most under funded and under serviced.

Some of the main priorities in my role over this coming year will be to:

- Ensure that the AHCSA Board continues to operate as an effective lobby group with Governments,
- That our programme priorities are responsive to the needs of community people and member organisations,
- Continue to develop community controlled alternatives in regions where Aboriginal people currently only have access to mainstream services,
- That we work with governments to recruit more doctors, nurses and allied health professionals for our services (especially in rural and remote areas of the State),
- That our own AHCSA recruitment and employment practices support career development for Aboriginal people, and
- That the National peak body adequately represents the particular interests of the AHCSA.

The most important challenge we face, I believe, is to ensure that our work as a representative body benefits Aboriginal people in practical ways at the community level across South Australia.

I look forward to working with the Board, Secretariat and all of our staff at AHCSA during 2006.

**John Singer**



*Photos:*

*Top: Coober Pedy; Centre L-R: Darrien Bromley, Lorraine Buckskin, Mary Buckskin, Kathy Chisholm & Mandy Green; Bottom: Near Pipalyatjara.*

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## EDITORIAL cont'd

We hope to be able to attract participants from around the country and also Aboriginal people who have been directly affected by cancer.

We are continuing to work with the Central Northern Adelaide Health Service (CNAHS), Cancer Council and Aboriginal Health Division in support of the Adelaide based Aboriginal Women Survivors of Cancer Support Group. This is a group of women who want to be able to support other Aboriginal families affected by cancer.

AHCSA has also been working closely with Dana Shen from CNAHS on other issues including support for the Aboriginal Hospital Liaison Officer program, the redevelopment of the Step Down Service and support for Aboriginal patients coming to Adelaide for dialysis. These are all complex issues and so we expect to be working on these for some time.

In closing, I would like to again thank the AHCSA Secretariat for their continued hard work and dedication.

**Mary Buckskin**  
Chief Executive Officer

## PROFILES

### AHCSA SECRETARIAT

**Ben Stewart, Information Officer**

Ben Stewart commenced with AHCSA in June 2003. He previously worked with the Aboriginal Prisoners and Offenders Support Service, University of SA, and the Office for Aboriginal and Torres Strait Islander Health in administration, finance, information technology and project work. It didn't take long for Ben's computer skills and knowledge to be discovered and he has become a valuable asset to AHCSA.

Whilst Ben provides the IT support, he is also called upon to assist staff with various other related tasks from installing a new computer to commissioning the server network for the organisation. He is our general all round Mr Fix-It!

Over the last couple of years, Ben had the opportunity to work with Jerry Moller on the Data Collection project which saw him liaising with and presenting to the Ceduna/Koonibba Aboriginal Health Service, Pika Wiya Health Service and Port Lincoln Aboriginal Health Service, to name a few. With Jerry's retirement, data collection knowledge remains a vital necessity for the Aboriginal community controlled sector to ensure that government funding is used to provide the most needed services to communities, and one day Ben can hopefully carry on this important work.

In August 2005, Ben won the permanent position of Information Officer, and hasn't come up for 'air' since. He is currently working with Anna Leditschke on the Enhanced Primary Health Care Program, so keep an eye out for him on his travels around the state.

### ABORIGINAL HEALTH WORKER

**Natalie Williams, Aboriginal Hospital Liaison Officer**

**Born:** Paddington, New South Wales

**Qualification:** Certificate 3 and 4 in Aboriginal Primary Health Care

**Employment:** Works as part of a team with Douglas Sansbury at The Queen Elizabeth Hospital

**Committees:** Aboriginal Primary Health Care Workers Forum

**Hobbies:** Long distance driving, browsing in second hand shops and old buildings

**Family:** Three children, five grandchildren and two dogs

**Most Exciting Holiday:** Round trip to Antarctica

## CCRE SCHOLARSHIP STUDENT

Courtney Thompson

Courtney Thompson recently completed a Bachelor's degree with Honors in Biomedical Engineering at Flinders University in addition to a Bachelor in Science. With her graduation she becomes the first Indigenous Engineer to graduate in South Australia and the First Indigenous Biomedical Engineer in Australia. So she has much to celebrate.

In her final year of studies, Courtney's Honors thesis involved working on a 'basic life support simulator' (BSL) which is similar to the resuscitation dummy used to teach mouth-to-mouth resuscitation but has more life-like reactions.

The purpose of the simulator is to train people including medical professionals on how to perform correct examinations of vital signs and basic airway management on an unconscious victim who is experiencing sudden

cardiopulmonary distress. When you tilt back the head, lift the jaw and then breathe into the dummy's mouth it warns you if the air isn't getting into the airway.

Courtney won third place in a competition for student papers for the Institute of Electrical Engineers.

Over the past couple of years, during the January holidays, Courtney worked as a mentor and houseparent at the Indigenous Australian Engineering Summer School in Sydney. This summer school is to encourage Indigenous young people around Australia and the Torres Strait to pursue an interest in engineering.

Now she has finished her studies, Courtney has begun work as a research assistant at the Repatriation Hospital supporting PhD students who are conducting research on sleeping disorders. This work keeps her awake all hours of the night.



## CHIEF INVESTIGATORS' RESEARCH OVERVIEW

The Centre for Clinical Research Excellence (CCRE) Chief Investigators meet regularly to explore research options for the Centre and to monitor the priorities and directions of project work conducted under the auspices of the CCRE. This group will:

- Provide research leadership and advise and contribute to the work of the research 'Project Reference Group'.
- Support the research process and encourage innovative research activities.
- Assist, as mentors and research leaders, the development of new researchers.
- Share information on research activities.
- Promote the work of the CCRE and attract new funding to expand the research base of the CCRE.

During 2006, the research team will be concentrating on documenting and publishing the outcomes of research into the management, self-management and prevention of chronic illness within Indigenous communities and establishing new research projects that build upon successful work to date. A specific focus will be the creation of sound research evidence relating to the effectiveness of structured systems of care and the involvement of Aboriginal people in emerging self-management programs that have resulted from work in the National Sharing Health Care Chronic Disease Self-Management project.

The ability of health services to collect and analyse data on the impacts and outcomes of the programs and services they offer in their communities is becoming increasingly important in the process of seeking and attracting ongoing population-based funding. One of the key roles of the CCRE is to assist communities to develop and sustain their capacity for such high quality research so that they are well positioned to take advantage of evolving trends in health care funding. For example, if a community were to produce sound research evidence that care planning and participation in structured systems of care can improve health outcomes and quality of life for its members that community would be well placed to attract ongoing support to extend such approaches into the future.

For further information contact Peter Harvey on (08) 8132 6705 or Malcolm Battersby on (08) 8276 8350.



## WORLD LEADER IN CHRONIC DISEASE SELF-MANAGEMENT VISITS PIKA WIYA HEALTH SERVICE

As readers of this newsletter, no doubt you know only too well that there are very high rates of chronic conditions amongst Aboriginal and Torres Strait Islander Australians across the country.

South Australia has been doing considerable work in developing self-management programs for patients with chronic conditions or diseases. Some of you will be aware that this includes various efforts in Aboriginal Health Services (AHS) in SA, including Ceduna/Koonibba, Pika Wiya (Port Augusta) and Port Lincoln. This article introduces some of the important work being done at Pika Wiya.

At Pika Wiya, the self-management team, with support from the Spencer Gulf Rural Health School (based at Whyalla), have developed a self-management approach for Aboriginal and Torres Strait Islander Australians. Fiona Coulthard and Kate Warren worked with Aboriginal patients with chronic conditions in the Sharing Health Care (SHC) SA chronic condition self-management project.

This work was useful and beneficial for Aboriginal patients by increasing their access to health services and by increasing community members' confidence to ask questions of doctors and other health professionals. To achieve this is important and means addressing several matters.

Across Australia, an ongoing issue is the ineffective communication between Aboriginal patients and health professionals. (Note: the CRC [Co-operative Research Centre] for Aboriginal Health has conducted significant research on this important issue, known as 'Sharing the True Stories' project.)

Under the SHC work at Pika Wiya, patients were encouraged to exercise their right to ask questions of health professionals so that both parties exchange information more successfully. There is a long and persistent history of a power imbalance between patients and doctors (and other health professionals), even more so when the patients are Aboriginal. For Aboriginal people, there is also the 'shame' factor.

After successful conclusion of the SHC work, Kate and Fiona continued working on manuals about their work (more on this below), for health services to use to develop the ability of their patients to manage living with chronic conditions. In 2004, Fiona and Kate went to the US to study for a 'Master Trainer' qualification in self-management with leaders in this area, Professor Kate Lorig and her team at Stanford University in California. Kate and Fiona are the first Aboriginal Australians to obtain this qualification.

In August 2005, Professor Lorig visited Australia. This included a visit to Pika Wiya which was Prof. Lorig's first visit to an AHS in Australia, although she has been to Australia before. Her work focuses on teaching people, with long-term medical conditions, how to continue doing what they like to, as much as possible.

For Kate Lorig's visit, Fiona arranged a group of Pika Wiya patients to share some time and food with Kate. Professor Lorig told the group something of her background. Her first job after she qualified was in a clinic similar to Pika Wiya, with 'American Indians and Spanish speakers'. At Pika Wiya the patients shared stories and asked questions about various conditions, many feeling they lacked real choices in dealing with their issues.



### **Community input to culturally sensitive self-management course**

Among the group of local people who attended were eight Aboriginal people from Port Augusta and the near area who had completed the LIFE course (Living Improvements For Everyone). Initially Fiona and Kate started with the Stanford self-management course, but with the important and invaluable input of Pika Wiya patients they developed a course and approach that is more culturally sensitive to Aboriginal people. The course provides practical advice and strategies for people and families living with ongoing and multiple health issues. (In particular, the approach is sensitive to Port Augusta Aboriginal people. It may require some adjusting for other Indigenous Australians.)

At the session with Kate Lorig, several of the Aboriginal people talked of how they had benefited from the course. For example, they gained more understanding of the medical condition, or conditions, that they were dealing with. They learnt how to more effectively manage their situations - their self-efficacy increased. This included learning about the impact of various foods, advice for increasing their physical activity, and encouraging self-confidence and self-esteem to deal with the range of issues they confront.

In the sharing of stories, Professor Lorig made various suggestions about specific illnesses raised by patients. She reassured patients that people with chronic conditions can live quite normal lives. They could reduce the damaging effects, including pain, of their various chronic conditions with a range of strategies, depending on their conditions and situation. Patients' quality of life could be improved; likely they could do more of the things they liked doing. For Professor Lorig, this is a critical element of her work – educating patients about their conditions, so they are more involved in making decisions that impact on their quality of life.

### **Secure funding and ongoing support for workforce and patients necessary**

At a seminar in Adelaide the day before her visit to Pika Wiya, Prof Lorig gave a presentation in which she commented that the self-management approach had achieved positive results in many of the places that it is being implemented, including Australia and China.

However, successful use of the approach relies on secure funding and having dedicated, appropriately skilled volunteers and health professionals. Programs also need to have ongoing funding, rather than limited

time project funding. There needs to be ongoing support for patients and staff using the approach.

The experiences at Pika Wiya, developing the LIFE course and working with the community about chronic conditions, have shown that it is vitally important to have and/or develop mutually respectful relationships with the patients and community, for whom a service addressing chronic conditions/diseases is provided.

Fiona and Kate continue to work on the LIFE course they have developed. Self-management is a key element of their course, but they do more than that. Fiona and Kate aim for an integrated model of chronic disease management, including elements of health promotion. Kate and Fiona encourage utilising the various Enhanced Primary Care (now Chronic Disease Management) Medicare items that relate to care planning for patients.

### **Training for local trainers in culturally appropriate self-management approach**

Part of Kate and Fiona's work is about producing a manual for others to be able to learn in detail about the LIFE course and how they could use and run the course (this is nearly complete). Kate and Fiona offer to train 'leaders' at Aboriginal health/medical services in the LIFE course. These trained leaders then conduct training sessions for patients and community in the LIFE program approach that they have learnt with Fiona and Kate.

If you would like further information please contact:

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## CONGRATULATIONS JOANNE AGIUS 2005 CHILDREN'S WEEK AWARD WINNER

Joanne Agius recently received an award for the work she is doing to improve the long-term health and wellbeing of deaf Aboriginal children through positive role modelling and outreach programs to Aboriginal communities based at Deaf SA Adelaide.

The Children's Week Awards were open to South Australians who have made an outstanding and consistent contribution to the needs, interests and welfare of children either in a voluntary or paid capacity.

## WHAT IS PALLIATIVE CARE?

A project to increase Aboriginal people's access to palliative care in South Australia recommenced in November 2005. The project is being undertaken by the SA Department of Health with funding from the Australian Government's National Palliative Care Program.

The first stage of the project involved a review of the national resource kit 'Providing culturally appropriate palliative care to Aboriginal and Torres Strait Islander People' that was completed in May 2005.

Consultations were undertaken with Aboriginal health care providers and mainstream palliative care providers about the kit and valuable information was obtained. The current work is actioning this feedback.

Information about palliative care is being provided to Aboriginal Health Workers and Aboriginal communities and information about providing culturally safe care is being developed for mainstream palliative care providers. This is occurring by:

- Providing grants to health services to increase their local Aboriginal community's knowledge about palliative care.
- Collaboration with the 'Program of Experience in the Palliative Approach' (PEPA), providing information about palliative care to Aboriginal Health Workers.
- Assisting mainstream palliative care providers to develop and maintain partnerships with Aboriginal Health Workers and Aboriginal Health Services.
- Implementing a SA Resource Kit for mainstream palliative care providers to assist them to provide culturally safe care.
- Developing a practical, local Companion Resource to the SA Resource Kit for mainstream palliative care providers.

By assisting mainstream palliative care providers to develop partnerships with Aboriginal Health Services and teams, it is anticipated that local information is shared between services so that culturally safe services occur.

For more information about the project please contact:

### **Josie Owens**

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Department of Health  
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#### *Photos:*

*Top:* Joanne Agius.

*Bottom:* Tjimarri Sanderson-Milera,  
Tal Kin Jeri dancers.



## DO YOU KNOW ABOUT THE ABORIGINAL ADULT HEALTH CHECK?

The Aboriginal Adult Health Check is used by Aboriginal Health Workers and other health professionals in the early detection and prevention of illnesses for Aboriginal people. It aims to be a 'whole of life' check, looking at your physical, social, emotional and spiritual health.

### Are you an Aboriginal person aged 15 to 54 years?

Has anyone in your family had:

- ✓ High blood pressure
- ✓ Heart attack
- ✓ Stroke
- ✓ Diabetes
- ✓ Kidney problems
- ✓ Asthma or other lung problems
- ✓ Social and Emotional well being issues

### If so...

The next time you go to your clinic or health service ask about the Aboriginal Adult Health Check.

It can give the health professional the information to help you design a simple strategy for healthy living.

More importantly, it might even tell you that you are fit and well!

If you would like further information you can contact your regional Aboriginal community controlled health service, clinic, or contact:

#### **Anna Leditschke**

Enhanced Primary Care Project Officer  
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## NOARLUNGA HEALTH VILLAGE OPEN DAY

The Aboriginal Health Team at the Noarlunga Health Village, together with Neporendi Aboriginal Forum Inc. participated in the Noarlunga Hospital and Health Village Open Day on Sunday 26 February 2006.

The purpose of the open day was to showcase the services provided by both groups as well as the services offered by the Noarlunga Health Village.

Local Nunga people were in attendance which made it a pleasant day for everyone.

Daphne Rickett from Neporendi provided a comprehensive display of Aboriginal arts and crafts which were for sale to the public, as well as information on the services provided by Neporendi.

Members of the Aboriginal Health Team included Paul Newchurch, Mark Thompson, Jamie Reed, Shane D'Angelo, Christine Clark and Theresa Francis.

Some great healthy food was available and entertainment was provided by a range of performers including gay and lesbian country and western singers.

For information on health services for Nungas in the south, telephone the Aboriginal Health Team at Noarlunga Health Village on (08) 8384 9266. For information on services for Nungas provided by Neporendi, telephone (08) 8322 5077.

The Noarlunga Health Village would like to acknowledge and thank Christine Clark who moved on from the Aboriginal Health Team on 7 April. Christine has accepted a position with the Adelaide Central Community Health Service and commenced on her birthday, 18 April.

#### *Photo left:*

Anna Leditschke, Enhanced Primary Care Project.

#### *Photo right:*

Paul Newchurch, Shane D'Angelo, Christine Clark & Mark Thompson.

## OVER 70 ABORIGINAL HEALTH WORKERS GRADUATE IN 2005

What a year the Centre for Aboriginal Health Education and Training experienced in 2005!

Over 70 students celebrated their achievements in completing Certificates 3 and 4 in Aboriginal Primary Health Care.

The first graduation was held on 15 September 2005 at the Port Pirie Regional Aboriginal Community Centre. **Mona Wilson, Lucy Evans, Melissa Hands, Kerry White** and **June Dunstan** all received a Certificate 3 in Aboriginal Primary Health Care. It was a very special day for Auntie Mona, who achieved this qualification at the age of 75.

The Pirie group was followed by the Ceduna class on 29 September. Auntie Pearl Seidel conducted the welcome to country at the ceremony which was held at the Sports Complex. Among the graduates was **Braddon Queama** from the Tullawon Health Service. Braddon has given over 17 years of service to his community of Yalata. **Milly Wanganeen, Harriet Coleman** and **Alwyn Graham** from the Ceduna/Koonibba Aboriginal Health Service have all enrolled in further study. **Warren Miller** has recently won a position at ShineSA in Adelaide, while **Colleen Montgomerie** is working in Port Lincoln. **Janice Braun** works for Stepdown in Ceduna.

On 20 October, the Berri Resort hosted a large evening celebration for the 10 Riverland graduates. Uncle Barney Lindsay welcomed the gathering to country while Uncle Oscar Abdulla spoke about the pride that the Riverland communities have for the graduates. Auntie Frances Day hosted the ceremony. The students graduating with a Certificate 3 were **Natasha Lehane, Leah Dutschke, Michelle Wise, Mark Upkett, Michelaine Yasserie, Kellie Matthews, Vivi Healy, Florence Wilson, Delilah Lindsay** and **Eunice Abdulla**.

**The graduation in Port Lincoln took place on 23 November at Mallee Park. Elizabeth Saunders, Ellen Miller, Daphne Miller and Sharon Liddell** all received a Certificate 3.

The final graduation ceremony for the year was hosted by AHCSA on 16 December at the Adelaide Town Hall for 30 Aboriginal Health Workers. Most of the graduates already work in the Adelaide metropolitan area providing a range of services to the Aboriginal community. Graduating on the day were:

**Robert Varcoe, Ricardo Hartman, Des Wilson, John Webb, Sandy Wilson, Jason Benbolt, Eunice Aston, Leona Agius, Julie Paige, Gilbert Rigney, Darryl Cameron, Gary Agius, Allan Sumner, Renee Tur, Tina Miller, Katie Agius, Christine Clark, Lizzie Pichugin-Graham, Belinda Stillisano, Phyllis Williams, Gloria Wilson, Damien Rigney, Jocelyn Turner, Peta Jackson, Georgie Trevorrow, Andrew Brown, Karen Bates, Rowan Smith, Natasha Sumner and Leanne Quirino.**

The graduations are an outstanding achievement for all concerned. Special thanks must go to the lecturers responsible for delivering the Aboriginal Primary Health Care courses, those being Leslee Warrior, Monique Williams, Andy Merrigan, Justin Gladman, Desley Culpin, Allan Sumner, Anna Leditschke, Richard Nelson, Franco Princi and Graham Williams. A number of these lecturers have spent many nights away from home to provide the kind of training requested by communities, namely, face-to-face contact in communities with the student group as the primary learning resource.

The success of the students is an example of what can be done when a number of agencies statewide unite to develop training opportunities for Aboriginal community people. Prominent among these agencies were:

- Port Lincoln Aboriginal Health Service
- Ceduna/Koonibba Aboriginal Health Service
- Pika Wiya
- Nunkuwarrin Yunti
- Muna Paiendi
- Flinders University Rural Clinical School
- Port Pirie Regional Health Service
- Stepdown
- TAFE SA (Murray Bridge, Berri, Mount Gambier and Ceduna)
- AIDS Council of SA

Another 150 students are due to complete their training in 2006 in Certificates 3 and 4 as well as the Diploma. Support for the graduates will continue with opportunities for further study and career pathways.



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*Photos:*

1. Braddon Queama from Tullawon Health.
2. Auntie Nellie Queama and family.
3. Warren Miller, Colleen Montgomerie, Harriet Coleman, Braddon Queama, Janice Braun, Muriel Wanganeen.
4. *Front row:* Natasha Lehane, Leah Dutschke, Michelle Wise, Tenisha Upkett (accepting for her Dad Mark), Michelaine Yasserie.  
*Back row:* Graham Williams CAHET Coordinator AHCSA, Andy Merrigan CAHET lecturer AHCSA, Mary Buckskin a/CEO AHCSA, Pam Lennon AHCSA, Kellie Matthews, Vivi Healy, Yvonne Koolmatrie (accepting for her daughter Florence Wilson), Heather Brimson, Flinders University Rural Clinical School.
5. Braddon Queama's family.
6. Milly Wanganeen's family.
7. Children at the graduation ceremony.
8. Harriet ('Ringer') Coleman from Ceduna/Koonibba.
9. Port Pirie students after their graduation.



Photo:  
Temaana Sanderson-Bromley.

## SIGNIFICANT CHANGES TO THE ABORIGINAL PRIMARY HEALTH CARE WORKERS FORUM

A discussion paper outlining the review of the Aboriginal Primary Health Care Workers Forum (APHCWF) was submitted to the AHCSA Board of Management in March for feedback and endorsement. The paper also briefly discusses the history, aims and objectives of the APHCWF and proposes changes to membership and meetings to enhance an already strong and dedicated representative body for APHCWs.

The Forum was established in 1990 as a sub-committee of AHCSA with the aims to:

- Acknowledge and adhere to the constitutional aims and objectives of AHCSA.
- Operate for the purpose of representing South Australian Aboriginal Primary Health Care Workers (APHCWs) and provide advice on APHCW issues to the AHCSA Board.
- Promote the professional identity and unity of APHCWs.
- Provide support and advocacy for APHCWs.

In 2004, it was decided to review the membership and aims/objectives of the Forum to ensure that it was representative and to reaffirm and strengthen its role as a peak committee supporting APHCWs.

A working group was established to direct the work required. The review has been a standing agenda item for the last 18 months and it has been proposed that the Forum continues to include the evaluation at each meeting.

Significant changes to the Forum structure include:

### The extension of positions for:

- Aboriginal Hospital Liaison Officers (AHLOs) to include country AHLOs
- Aboriginal Sobriety Group to include other state Aboriginal substance misuse services
- Pika Wiya Health Service to include the Port Augusta sub region
- Umoona Tjutagku Health Service to include APHCWs in surrounding areas

### Five new positions will also be offered:

• Oak Valley Maralinga	2	• AHCSAs Rural AHW Program	1
• Wakefield Region	1	• South East Region	1

The new positions will allow for increased formal support to the AHCSA auspiced Rural AHW Program and also offer the opportunity for remote services to be involved. Two positions have been allocated to the Oak Valley Health Service, and the South East and Wakefield regions have been included to recognise the growing number of APHCWs employed by services in these regions.

### Reduction of meetings:

- The Forum will meet three times per year, instead of four. This will allow for the increase in membership and also provide the financial opportunity to bring working groups together inbetween meetings to progress work.
- Proposed Breakdown of meetings:  
2 Adelaide Meetings    1 Rural or Remote

The Forum Review is now complete and awaiting AHCSA Board Executive endorsement on 31 May.

A copy of the discussion paper can be obtained from members of the Aboriginal Primary Health Care Workers Forum or from **Ngara Keeler** at **AHCSA** on (08) 8132 6700 or email: [ngara.keeler@ahcsa.org.au](mailto:ngara.keeler@ahcsa.org.au).



### Aboriginal Primary Health Care Workers Forum Details

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#### Photos:

Left L-R: Kay Wilson, Brenda Carter & Paul Newchurch.

Centre L-R: David Willis, Dianne Strangways & John Webb.

Right L-R: Sandy Wilson, Ngara Keeler & Eunice Aston.

## HEART WEEK 2006

### Invitation to all Aboriginal Health Workers

If you are interested in updating your knowledge of cardiovascular health, the evidence, current management and practices, contact the Heart Foundation for the next seminar dates.

The most recent seminar was held on Friday, 5 May, at the Fullarton Park Centre.

The seminar program is as follows:

- Heart Foundation's Tick Food Information program
- Opportunities to prevent childhood overweight: a family perspective
- New physical activity recommendations for people with cardiovascular disease
- Quality use of cardiovascular medicines
- Implementing evidence-based cardiac rehabilitation and secondary prevention services for Aboriginal and Torres Strait Islander People

For further information call **Jacquie Smith**, (08) 8224 2827 or email: [jacquie.smith@heartfoundation.com.au](mailto:jacquie.smith@heartfoundation.com.au)



## INDIGENOUS ALCOHOL CLINICAL PRACTICE GUIDELINES

An Adelaide based consortium including Flinders Consulting Pty Ltd, Flinders University School of Nursing and Midwifery, Aboriginal Drug and Alcohol Services of SA and the Drug and Alcohol Services Council of SA has been contracted by the Australian Government Department of Health and Ageing Drug Strategy Branch, to develop Indigenous Alcohol Clinical Practice Guidelines for health professionals working with Aboriginal and Torres Strait Islander people.

The Indigenous Alcohol Clinical Practice Guidelines will be submitted to the Department of Health and Ageing at the end of May 2006, and it is expected this practical resource will be made available to Indigenous and non-Indigenous health professionals and other interested people shortly thereafter. The title of the final resource is still to be confirmed and its selection has been included in the community consultation process.

This resource will be provided free of charge as part of a range of excellent National Drug Strategy alcohol and other drug resources. Check the alcohol publications and resources section at [www.alcohol.gov.au](http://www.alcohol.gov.au) after June 2006 for further information on the publication release date.

### Ensuring the guidelines are both clinically and culturally sound

Over the last eight months a National Clinical Reference Group has been convened to advise on and review key processes involved in the development of the document and the clinical and cultural content contained in the final alcohol clinical practice guidelines.

Membership of the National Clinical Reference Group includes Indigenous and non-Indigenous specialists in the fields of alcohol and other drugs, psychiatry, general practice, nursing, pharmacology, Indigenous health and Indigenous research.

Alwin Chong, AHCSA's Senior Research and Ethics Officer is the National Aboriginal Community Controlled Health Organisation (NACCHO) representative. Other Indigenous National Clinical Reference Group members include 2006 Senior Australian of the Year and Congress of Aboriginal and Torres Strait Islander Nurses (CATSIN) Chairperson, Dr Sally Goold; developer of the Indigenous Risk Impact Screening and Brief Intervention tool, Ms Coralie Ober; Director of Port Lincoln Aboriginal Health Service Inc, Ms Jackie Ah Kit; and General Practitioner and lecturer in Aboriginal health at Flinders University School of Medicine, Dr Tamara Mackean.

*Photo top: Glenn & Danny.*

Ms Wendy Casey, co-author of a range of alcohol and other drug resources developed under the Strong Spirit Strong Mind: Aboriginal ways to reduce harm from alcohol and other drugs banner has also been involved in a key advisory capacity.

### Developing a practical resource for health workers and communities

Community consultations have been held with Indigenous health professionals from community controlled and other health services across Australia, and other key informants. The purpose was to gather advice on how best to present the evidence based Indigenous Alcohol Clinical Practice Guidelines so that they are practical and in a user-friendly format. Information on how a wide range of Indigenous and non-Indigenous health professionals can best be supported to use the clinical practice guidelines in their interactions with individuals, families and communities was also gained.

In South Australia, members of the project consortium have visited clinical and administrative staff at Ceduna/Koonibba Aboriginal Health Service, Pika Wiya Health Service, and Port Lincoln Aboriginal Health Service. They have also had the opportunity to meet with members of the Aboriginal Primary Health Care Workers Forum at the Arkaba Hotel in Adelaide.

Other site visits in Australia include:

**Perth:** Indigenous Health InfoNet; WA Government Aboriginal Alcohol and Other Drugs Program; National Drug Research Institute (NDRI)

**Alice Springs:** Royal Flying Doctor Service; Centre for Remote Health

**Darwin:** 'Spin Dry' (Sobering Up Unit, Mission Australia), NT Health Services Drug and Alcohol Unit

**Nguiu, Bathurst Island, Tiwi Islands:** Ngawuniwani (Tiwi Mental Health Service); Northern Territory Police; Aboriginal and Islander Alcohol Awareness and Family Recovery (Centacare); Tiwi Youth Diversion

**Sydney:** Daruk Aboriginal Medical Service, Mt Druitt; Royal Prince Alfred Hospital; National Drug and Alcohol Research Centre (NDARC)

Further details on this project can be obtained from **Ms Amanda Tovell**, Project Coordinator with **Flinders Consulting Pty Ltd**, email [amanda.tovell@flinders.edu.au](mailto:amanda.tovell@flinders.edu.au), telephone (08) 8201 7569.

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## WHY ME? ... NEW SOUTH AUSTRALIAN FILM DEPICTS THE TRUE STORY OF ABORIGINAL HISTORY...

On 23 March 2006, the SA Link-Up Program, Nunkuwarrin Yunti of South Australia Inc., launched *Why Me?*, a film featuring five Aboriginal people in four stories, selected at random, showing the human costs of a policy which removed children from their families and country.

The film shows the careful work of restoring meaning and connection to dislocated lives. Re-enacted scenes from the 1950s and 60s in three of the stories puts viewers in touch with the emotional journey of the children of our stolen generations.

The major actors, all Aboriginal South Australians, arrived by limousine and walked down red carpet to a 'booked out' venue at the Mercury Cinema in Morphett Street, Adelaide.

Sid Graham, Doris Kartinyeri, Lyn Jones, Brenda Rogerson and Evelyn Rogerson who act their own stories in the film received a heroes welcome for their willingness to open themselves to the pain of their past and share their story for the benefit of others in the same position.

The children who feature in the 1950s and 60s recreations of Sid and Doris's stories were equally applauded for their outstanding 'first-time' acting roles:

- Shana Karpany who plays young Doris
- Tjimarri Sanderson-Milera who plays young Sid
- Toni Karpany who plays a girl in an institution
- Leticia Rickett who also plays a girl in an institution
- Jemima Rickett who plays young Doreen
- Tianna Sansbury who plays a girl in an institution
- Jake Dodd who plays a child being removed
- Peter Love/Sumner who plays a young boy in the race at Norwood Primary School
- Lisa Karpany who plays young Brenda

Even though *Why Me?* shows the trauma of separation, it is a positive film which demonstrates the enormous inner strength, resilience and determination of Aboriginal people to survive as a race and to hold onto their identity and culture.

*Why Me?* also shows the importance of family and of who you are and where you are from. Each story presents a different angle on survival – the skills and knowledge that SA Link-Up's clients have drawn on to help heal some of their wounds.

Today Sid Graham is a leader in the Aboriginal community and has organised community healing reunions. Doris Kartinyeri is a well known author and has written poetry and published books.

The removal of Aboriginal children from their families has occurred since colonisation under the different guises of government policies and practices including assimilation, segregation, and welfare. They have been adopted, fostered out and institutionalised.

The effect of these policies is devastating and has been passed on from generation to generation. Aboriginal people suffer from trauma, grief and loss, anger, poverty, lack of parenting skills, abuse, a high level of incarceration and mental health issues.

Today Link-Up's around Australia are working with not only 1st generation removals, but also 2nd, 3rd, 4th and 5th generations who are trying to piece together their family jigsaw puzzle of identity and culture.

The idea of producing a film to tell the stories of people who were removed came from several communities around South Australia which SA Link-Up visits on an annual basis.

The concept was to produce a film that would acknowledge and honour the stories of the Stolen Generations in a way that would enlighten the Aboriginal community about their history, to assist in educating the general public and to promote the work of Link-Up in restoring meaning to Aboriginal people's lives.

Acknowledging Australia's past practices and policies and the effect on the Aboriginal community is an important part of healing and provides a way forward.

A Light Image Production, the film was produced by Nunkuwarrin Yunti of South Australia Inc. (SA Link-Up Program), and was supported by the South Australian Film Corporation, Department of Health and Ageing (Office for Aboriginal and Torres Strait Islander Health), and the SA Regional Centre for Social and Emotional Well Being. The Southern Adelaide Health Service kindly provided financial support for the launch.

Light Image demonstrated considerable commitment, passion and sensitivity to the filming of *Why Me?*, while Dreamtime Public Relations produced a beautiful culturally appropriate design for the poster, DVD, wristbands and t-shirts, and also assisted with the launch program, speeches and media coordination.

The launch received a fantastic media response with several radio interviews, requests for material from newspapers and interviews with ABC television who featured *Why Me?* as one of the lead stories on the news that evening.

SA Link-Up is looking forward to further television coverage with screenings currently being negotiated and interest being received from the ABC and SBS. *Why Me?* will also be entered into several international film festivals and it is available for purchase as a DVD.

For further information or to purchase a copy of the DVD, please telephone SA Link-Up on (08) 8223 5217.



*Photos:*

*Top L-R:* Evelyn Rogerson, Lyn Jones, Doris Kartinyeri, Sid Graham and Brenda Rogerson; *Centre:* The children of *Why Me?* with Caseworker Kerry Poole; *Bottom L-R:* Kay Goodman-Dodd & Polly Sumner (Nunkuwarrin Yunti) with Janet Craig (Dreamtime Public Relations).

## PBA FM, Drug & Alcohol Service South Australia & Nunkuwarrin Yunti

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With Bondy, Gazza & Mandy  
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- Music, from yesterday's greatest hits to today's number one songs

You can call us to talk about anything on 8250 3735 or send a request for songs, interviews and announcements.



## PARTNER PROFILE - SOUTH AUSTRALIAN ABORIGINAL HEALTH PARTNERSHIP

### Aboriginal Health Commitment Renewed!

Former AHCSA Chairperson, Robert Dann; Federal Health Minister, Tony Abbott and State Health Minister, John Hill came together on 18 November 2005 to sign the 'Agreement on South Australian Aboriginal Health and Wellbeing 2005-2010'.

This tri-lateral Agreement establishes the basis for collaboration between AHCSA, the State Department of Health (DH) and the Commonwealth Department of Health and Ageing (DoHA).

The renewed Partnership Agreement aims to:

- Develop transparent community endorsed Aboriginal health improvement planning, delivery, monitoring and accountability mechanisms with respect to enhancement of health and wellbeing related services for Aboriginal people.
- Facilitate the development of accessible, accurate and affordable data collection and information systems that support an evidenced based approach to planning, delivery and evaluation of Aboriginal health improvement planning approaches.
- Develop a competent health workforce by ensuring community capacity building, cultural, clinical and management skills are supported by appropriate training, supply, recruitment and retention strategies.
- Increase statewide and regional resource allocation to meet identified need on an equitable basis.
- Establish effective linkages with sectors responsible for improving the social, economic and environmental determinants of health inclusive of the 'Whole of Government' approach.

This is the third Agreement signing since the inception of the South Australian Aboriginal Health Partnership (SAAHP) in 1996.

### SA Getting to Know its Business

SAAHP's 'Knowing the Business' Aboriginal health data document has proved a very popular resource within the health sector (public and community) and across a range of other agencies with over 500 copies distributed to 30 December.

The document has generated much discussion and thinking around how responses to Aboriginal health and

health-determinants can be more locally relevant and effective and the data is proving invaluable for enabling mainstream services and personnel to more appropriately understand the complexities of Aboriginal communities 'lived experiences'.

Similarly, for Aboriginal workers and community members, the data has been a strong reinforcer of their current knowledge and understanding of health issues facing Aboriginal communities, families and individuals.

While the collation of this data was an exercise in 'what could be possible' in presenting pictures of Aboriginal health in this state, it seems that the real question is 'how come we didn't do this sooner?', but we all recognise the clarity of hindsight!

The SAAHP Coordination and Support Team (CST) have developed a 5-day workshop process that facilitates interpretation of the data and increases 'regional' capacity to plan, deliver and monitor meaningful and community credible health outcomes.

The workshop process intends to build a sense of common purpose and cross-agency cohesion towards development of a cross-sector, evidence-based regional Aboriginal health improvement plan.

For information regarding the Aboriginal Health Indicators data, please contact Rob OBrien on (08) 8226 6280 or [rob.obrien@health.sa.gov.au](mailto:rob.obrien@health.sa.gov.au)

### Southern Evidence Supports Health Planning

The Southern Adelaide Health Region became the first health region to utilise the SAAHP 'Knowing the Business – SA Aboriginal Health Indicators 2005' document in a whole of region planning process during October and November 2005.

Staff from across Southern Adelaide Health Service; Children Youth and Women's Health; Drug and Alcohol Services of SA; Marion Youth Centre; the Repatriation Hospital and from the local Aboriginal community worked tirelessly for five days (over five weeks) to develop an evidence-based Regional Aboriginal Health Improvement Plan.

The five-day workshop process, beginning with an introduction to reading and interpreting data, was both challenging and insightful for participants.



*"The data and workshop process has highlighted the complexity of issues being faced by Aboriginal people – I hadn't got that before!" (Mainstream health worker)*

By combining the (new) data with existing local knowledge, the group developed a highly attuned, outcome-focused regional plan that supports a collaborative and coordinated approach across and between organisations, sectors and Aboriginal communities to achieve common outcomes.

*"It has just reinforced that what we are already doing and what we would like to do, is the right way of doing the business. We can develop the right types of programs that are most effective, supported by the evidence of the statistics." (Aboriginal Health Worker)*

The next stage for the Southern Adelaide Health Service is to gain Community and Regional Board endorsement of the plan and to engage with other organisations eg Department of Further Education Employment Science and Technology, SA Police, and the Aboriginal Housing Authority in its implementation.

For further information regarding the Health Improvement Planning workshops, please contact Rob OBrien on (08) 8226 6280 or [rob.obrien@health.sa.gov.au](mailto:rob.obrien@health.sa.gov.au)

### **Makeover for Coordination and Support Team**

Since the September edition of AHCSA News, the SAAHP CST has undergone some major changes.

In October, Senior Project Officer, Stan Butler, took up a new position with the Aboriginal Health Division as Senior Policy and Planning Officer.

Four weeks later, the State Coordinator, Barbara Power, undertook a new role with Central Northern Adelaide Health Service as Project Consultant within the Service Development Directorate.

As of 6 January, our Administration Officer, Kellie Samuel, commenced six months maternity leave and her new son (Lachlan William) arrived on February 8. All of us at the Partnership wish Kellie and her family all the very best.

In the meantime, we have welcomed Anthony Day as Kellie's temporary replacement until her return on 6 July.

Recruitment of the State Coordinator and Senior Project Officer positions occurred in early January and Ben Sanderson joins our team as the new Senior Project Officer.

Stan Butler has returned to the Partnership as Acting State Coordinator until a new recruitment process occurs for this position.

So with all of our 'seats' filled once again, the CST is fully functioning and open for business, so please give us a call or email if we can assist in any way.

For other information, please contact the SAAHP Coordination and Support Team on:

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*Photo left page: Community members in Ceduna.*