I wish to take this opportunity, in the first instance, to thank all of my staff at Winnunga AHCS for your hard work, passion, devotion and commitment, to all of our clients and to the Aboriginal and Torres Strait Islander community over this last year.

I am so proud of everything that we have achieved together and of the positive effect we have had on the lives of thousands of our brothers and sisters. Each one of you can be rightly proud of the work you do. Each of you has in some way as a part of the Winnunga team, made a difference. A real and measurable difference in the lives of members of our community and that is not a privilege that many people can claim to have been a part of.

I thank the Chairman, Craig Ritchie and members of our Board for their personal support and guidance. I thank also all of the organisations and individuals who support us in the work we do including the public servants from both the Commonwealth and ACT Public Service. I look forward to continuing to work with you to advance the interests of our clients and the Aboriginal community.

I also wish to extend season’s greetings to all staff and to our clients as well as the broader community. I am acutely aware of the pressure and stress which many of our families in the Aboriginal community experience in their lives, including at this time of year, as they seek to balance competing demands on often limited resources. Winnunga AHCS will always be here for you and if there are any issues which you think we may be able to assist with please know we will always do what we can to support.

This year has been, for Winnunga AHCS and the Aboriginal community a year of highs and lows. I have been very pleased with the progress made in planning for the operation of a standalone Winnunga AHCS health and wellbeing clinic in the AMC.

Julie presented Russell Taylor with a piece of artwork by Artist ‘Will’.
This is an Australian first and I believe will in time prove to be one of the most significant advances in the care and rehabilitation of Aboriginal detainees that we will see. I am also pleased we are moving along the path to the construction of a new purpose built health facility which will when completed transform our capacity to meet the needs of our community. I am pleased with the success of the justice reinvestment trial and believe that with enhanced and secure funding it has the potential to transform the lives of many of our clients.

While there is much to celebrate there are also a range of continuingly poor outcomes being suffered by many Aboriginal residents of the ACT. The ACT has the highest ratio of Aboriginal peoples in prison of any State or Territory in Australia. We also have the highest rate of contact of Aboriginal children with the care and protection system and the third highest rate of removal of Aboriginal children from their families. 35% of Aboriginal children live in poverty and the rate of illicit drug use in our community is the highest in Australia.

There is still much more that needs to be done. Together we at Winnunga AHCS can continue to make a difference but it is clear we will never close the gap in life outcomes experienced by our peoples until Governments of all persuasions make a genuine commitment to work with us and to invest in services and support to the degree needed to address the disadvantage and poverty experienced by so many Aboriginal and Torres Strait Islander peoples.

Winnunga AHCS is always grateful of donations received. These donations contribute towards a range of resources and materials we require in order to support individuals, families, Winnunga AHCS groups (ie mums and bubs/parenting group, women’s group and men’s group) and the community. All donations over $2 are tax deductible. If you would like to donate, you can come and see our finance team in person, send a cheque/money order to Winnunga AHCS PO Box 40, Narrabundah ACT 2604, or deposit directly into our donations bank account.

Account Name: Winnunga Nimmityjah Aboriginal Health and Community Services Donations
BSB: 032-729
Account Number: 337085

We thank you for your support.

Fact: In 2017-2018 Winnunga AHCS provided 55,747 occasions of service (excluding transport, groups and admin services).
Compliment from Senator Pat Dodson

The Winnunga Health Service in Narrabundah is a First Nations oasis in suburban Canberra. Whenever I have health issues while the Senate is sitting in Canberra, I know I can go there and receive highly professional confidential and well rounded advice and treatment. I recommend their services to all First Nations people in Canberra and the ACT. This is the place for you to start looking after yourself and your family.

But the Winnunga Health Service does more than just health care, and it has been a community hub for decades. The work they do with the inmates of the Alexander Maconochie Centre (AMC) I know is outstanding, wrapping culturally appropriate services for young Koorie who find themselves inside. They deserve our support, and it’s good to know that Winnunga is there for them.

Senator Patrick Dodson
Senator for Western Australia

‘Senator Pat Dodson was elected to the Senate for Western Australia in 2016. He was the Chair of the Council for Aboriginal Reconciliation from 1991-1997.’
The ACT Government Takes the Lead in Australia

The latest Australian Bureau of Statistics report, Prisoners in Australia 2018, released on 6 December has confirmed what every Aboriginal person in Canberra already knew, that when it comes to locking up black fellas the ACT is without peer.

The headline finding in the report is that the ACT has the highest ratio of Aboriginal and Torres Strait Islander peoples in prison of any jurisdiction in Australia. While this is a matter of the deepest shame for the national capital of Australia, the most prosperous city in Australia, it probably also means here in Canberra we lock up Indigenous people at a higher rate than any country in the world.

An Aboriginal person in Canberra is 17.5 times more likely than a non-Aboriginal person to be sent to prison. The next highest ratio in Australia is in Western Australia where the ratio is 16, followed by the Northern Territory where the ratio is 12.

The ACT’s disgrace does not, however, end there. The ACT also has the highest recidivism rate in Australia with 75% of all prisoners in the AMC having previously been imprisoned. The national average is 57%.

To cap it off the ACT also has the highest proportion of unsentenced prisoners in Australia, comprising 38% of the total prison population.

This report card is a resounding fail for the ACT Government and the ACT justice system. Having said that just imagine how much worse the position would be if the AMC wasn’t a ‘rehabilitation focussed human rights compliant prison’, that we didn’t have the nation ‘leading Throughcare program’, the AMC wasn’t the most generously funded prison in Australia and the ACT Government wasn’t ‘committed to Aboriginal specific drug and alcohol rehabilitation services’. Imagine how bad things would be then?

Fact: The full report can be found at http://www.abs.gov.au/ausstats/abs@.nsf/mf/4517.0
Aboriginal Children in Out-of-Home Care: The New Stolen Generation?

The Family Matters Report 2018, which measures the trends in the over-representation of Aboriginal and Torres Strait Islander children in out of home care in all jurisdictions across Australia, makes for sad and sobering reading.

The report, which includes detailed report cards of each jurisdictions performance against the four building blocks of the Family Matters Roadmap as well as against the Aboriginal child placement principles, reveals once again that the ACT Government is among the worst performing jurisdictions in Australia, and against some measures the worst performing jurisdiction, when it comes to the care of Aboriginal children in contact with the child protection system.

For example the ACT is the only jurisdiction in Australia that has refused to include in its child protection legislation any of the recognised elements of a human rights based framework for participation in child protection decision making consistent with the Child Placement Principle. The principles which the ACT Government has chosen to ignore include:

* Aboriginal and Torres Strait Islander self-determination – a recognised principle
* Aboriginal and Torres Strait Islander participation and/or consultation - a decision making principle
* Consultation/participation of an external Aboriginal and Torres Strait Islander agency - expressly required for all significant decisions
* Consultation with an external Aboriginal and Torres Strait Islander agency - expressly required prior to placement decisions
* Input from external Aboriginal and Torres Strait Islander agencies - expressly required in judicial decision making.

It was disturbing to read in the Family matters report that the ACT Government, in seeking to justify to the Family Matters report authors the absence of investment in Aboriginal and Torres Strait Islander community controlled child protection and family support services, that it makes no such investments because ‘the ACT does not have Aboriginal and Torres Strait Islander community controlled child protection services.’

That response is artful to the point of misleading. The reason there is no funded Aboriginal community controlled child protection and family support services in the ACT is because the ACT Government refuses to resource or support the operation of one. Winnunga AHCS has the clear capacity and has expressed a strong willingness to provide such services but has been directly and deliberately excluded from any role in, for example, the Stepping Up for Our Kids program by the Government.

Fact: The Winnunga AHCS Midwifery Team provided 229 individuals with 2,126 episodes of care in 2017-2018
Aboriginal Children in Out-of-Home Care: The New Stolen Generation? (cont’d)

The reason there is no Aboriginal community controlled role in child protection services in the ACT is because the Government has chosen to work only with non-Aboriginal mainstream organisations. The distressing and dire consequences of refusing to involve the Aboriginal community in child protection services are, unfortunately, readily apparent from a reading of the Family Matters report.

Some of the more remarkable outcomes in the ACT are:
* The highest ratio of Aboriginal children in touch with care and protection services in Australia
* The third highest rate of Aboriginal children in out-of-home care in Australia with an Aboriginal child in the ACT 13.9 times more likely to be in out-of-home care than a non-Aboriginal child
* The lowest level of funding for intensive family support in Australia
* The second lowest level of family support in Australia
* The only jurisdiction in Australia that refuses to fund or include an Aboriginal Community Controlled Organisation in child protection and out-of-home care
* A dramatic increase in Aboriginal children in out-of-home care since the inception of the Strengthening Families (Step Up For Our Kids) Program
* The number of Aboriginal children placed with Aboriginal families well below the national average.

A key recommendation of the Family Matters report has a particular resonance in the ACT, in light of changes made in respect to long-term orders in relation to children in out-of-home care. The recommendation is:

‘Permanent care orders and adoption are not used for Aboriginal and Torres Strait Islander children in out-of-home care. Aboriginal and Torres Strait Islander peoples must be provided with opportunities to design alternative policies to support stability for Aboriginal and Torres Strait Islander children in connection with kin, culture and community. Where permanent care orders are used, they must never be applied without clear evidence that the Aboriginal and Torres Strait Islander Child Placement Principle has been fully applied, and without oversight of an Aboriginal and Torres Strait Islander agency.’

Current ACT Government practice breaches every component of this recommendation.

Fact: Winnunga AHCS delivered 30 Mums and Bubs/Parenting Groups in 2017-2018.
ACT Drug Strategy

The ACT Government has released the ACT Drug Strategy Action Plan 2018-2021. While the strategy covers a range of issues and proposes a range of ‘actions’ which the Government commits to undertake over the next three years it does not, of course, include a commitment to any new funding.

Winnunga AHCS in its submissions to the ACT Government has insisted, having regard to the high levels of illicit drug use within the Aboriginal community and the role which drugs and alcohol play in the high levels of Indigenous disadvantage, that the highest priority for funding support of people with a substance abuse issue in the ACT is an Aboriginal community controlled residential drug and alcohol rehabilitation facility.

Only one of the 43 actions included in the strategy specifically refers to the Aboriginal community and that is Action 31 which is to ‘Collaborate with Aboriginal and Torres Strait Islander services, mainstream specialist Alcohol and Other Drug services (AOD) and other stakeholders to determine specialist AOD implementation priorities, including residential rehabilitation for Aboriginal and Torres Strait Islander people.’

This action is gratuitously offensive to Winnunga AHCS and the Aboriginal community.

The ACT Government determined in 2007 that an Indigenous specific residential drug and alcohol rehabilitation facility was the highest priority in the ACT at that time and fully funded the construction/operation of an eight bed facility of that description, and for that purpose. The facility has been built but has been converted to other uses and is no longer available for use for the purpose for which it was intended as well as funded.

That ACT Health did not have the capacity to operationalise that AOD rehabilitation facility should not require the initiation of a new talk fest to establish the need and priority for such a facility.

With respect, it is not at all clear to Winnunga AHCS what role or insight mainstream drug and alcohol services have in determining the needs of the Aboriginal community, which in any way adds to or enhances the expertise of an Aboriginal community controlled health and community service.

To be frank, the Aboriginal community had the right to expect a bit more from an ACT drug action plan than an undertaking to hold discussions about whether an Aboriginal residential drug and alcohol rehabilitation facility is a priority when that decision was made twelve years ago. The action plan in effect proposes we return to where we were twelve years ago and start the process all over again.
Inquiry into Workplace Culture in ACT

Winnunga AHCS CEO Julie Tongs has made a detailed submission to Mr Mick Reid, Chair of the Independent Review into Workplace Culture Within ACT Health. In her submission Julie highlighted the importance of the inquiry taking into account the experience and perspective of Aboriginal peoples who work within the ACT Health system as well as of the potential impact of workplace culture within the health system on members of the Aboriginal and Torres Strait Islander community who access its services.

Without suggesting that Aboriginal peoples working in or accessing ACT Health Services have necessarily experienced racism, Julie believes it is naive to assume institutional racism is a thing of the past and has been eliminated in workplaces throughout Canberra. Julie urged the review to listen to Aboriginal voices as part of its inquiry, and referred to examples of problematic or poor outcomes experienced by Aboriginal peoples within the ACT health system.

Julie took the opportunity to highlight a number of issues where the delivery of health services takes little account of the particular circumstances of Aboriginal peoples. For example, the absence of Indigenous specific drug and alcohol rehabilitation and the consequences for Aboriginal peoples who, because of the incidents of the disadvantage and discrimination they have endured, live in poverty and are further disadvantaged in accessing timely health care because of being unable to afford private health insurance.

Julie also raised concern about the implications for Aboriginal children who having been placed in out-of-home care and are adopted or fostered by non-Aboriginal people who withdraw them from contact with Aboriginal controlled health and other services and hence lose a vital cultural connection with the Aboriginal community.

Aboriginal Self-Determination

Not

Racism or Discrimination

Winnunga AHCS Dates

Opening times over Christmas and New Year:

Winnunga will close at 1pm on Monday 24 December and re-open in a 9am to 5pm capacity on Wednesday 2 January 2019.

We will be open from 9am to 1pm on the days that are not public holidays for GP services (Thursday 27, Friday 28 and Monday 31 December).
Quote by Professor Mick Dodson

We came across the powerful quote below by Professor Mick Dodson in a recent issue of the Koori Mail which we thought everyone should take note of...

"It's time for mainstream Australia to abandon the ill-informed deficit discourse and recognise that Aboriginal and Torres Strait Islander peoples themselves hold the key to positive social, political, cultural and economic prosperity."

– Professor Mick Dodson, chair of the Indigenous Governance Awards

See pages 30-31

‘Professor Mick Dodson is a Yawuru man from the Broome area in Western Australia. He was the first Indigenous Australian to receive a law degree following studies at Monash University in Melbourne.’
Christmas Present’s Drive

Winnunga AHCS launched a Christmas Presents Drive to provide gifts to those in our community who don’t have much.

We would like to acknowledge and thank the following organisations and businesses for their donation of gifts:

- ACT Courts and Tribunal
- ACT Corrective Services
- JACS People and Workplace Strategy (Human Resources)
- Office of the Director-General
- Emergency Services Agency
- Legislation, Policy and Programs
- ACT Government Solicitor
- Rorks Projects

“We acknowledge and thank the many businesses and organisations who donated to our Christmas Present’s Drive.”

John Paul Janke and Junior Associates from Rork Projects with Winnunga AHCS CEO Julie Tongs.

Winnunga AHCS CEO Julie Tongs with David Pryce, Deputy Director-General Community Safety.
Children’s Christmas Party

‘The Children’s Christmas Party is an annual event held by Winnunga AHCS.’
Children’s Christmas Party

‘Our children are our everything.’

Do it with us, not to us
‘Despite the overcast weather, a great day was had by all.’
Congratulations!

Congratulations to Uncle Brian Demery, the winner of the ‘NAIDOC 2018 Summer Golf Day Willyama Indigenous ICT Services, Because of Her We Can’ trophy.

Uncle Brian and Reeion Murray

TIS Tips

With Christmas and the New Year just around the corner, our thoughts often turn to the year that was and the new year ahead. All sorts of things come to mind. If quitting smoking is one of those things, here are some handy tips from Winnunga AHCS Tackling Indigenous Smoking (TIS) Workers Chanel and Bobbi.

Triggers

Certain things trigger or turn on your need for a cigarette. They can be moods, feelings, places, or things you do. Knowing your triggers helps you stay in control, the following may tempt some people to smoke:
TIS Tips (cont’d)

Tips for people trying to stay quit:

Be prepared: For cravings at special events like Christmas parties. You may have never experienced these events before as a non-smoker so you’ll associate them strongly with smoking. Have some fast-acting Nicotine Replacement Therapy (NRT), like inhalers, gum or mouth sprays with you just in case.

Delay: When an urge to smoke strikes, remember that although it may be intense, it will be short-lived, and will probably pass within a few minutes. Each time you resist a craving, you’re one step closer to stopping smoking for good.

Parties: Quitting smoking may impact your social life. You don’t have to skip parties altogether, but if you do go, don’t accompany your friends when they go outside for a cigarette. If people are smoking indoors, or if it’s an outdoor party, try to sit or stand as far away as possible from people who are smoking. Step out for a breath of fresh air if you need to.

Alcohol: After you have had a drink, it’s possible that your resolve not to smoke may weaken. You may choose to give up or cut down on drinking alcohol when you first quit smoking. Varying the kind of alcohol and the place where you drink may help break the trigger, but it will not help with the weakened willpower.

New Year resolution tips:

1. Feel the fear and do it anyway
2. Write your feelings down in a quit journal
3. Have a quit coach or buddy you can call
4. Eat well, drink water and exercise
5. Renew your resolve to quit daily and be patient

If you need support or advice over the Christmas and New Year period, please call the Tackling Aboriginal Quit Line number 137 848.

Fact: Smoking 10 cigarettes a day doubles the risk of dying prematurely and smoking a pack a day increases the risk four- to five-fold.
Quitters!

If you need some motivation and inspiration to give up the Boondah, meet two deadly Winnunga AHCS staff members who have done just that!

Both Beth and Bronwyn were long time smokers and each smoked over 20 cigarettes a day but they decided enough was enough and gave it away. Each had a specific reason as to why they stopped and they share their quit smoking journey with us.

Beth

How long has it been since you gave up smoking/how many days not smoked for?
838 days (that’s over 2 years!), 23 hours, 25 minutes.

Why did you quit?
I quit because of serious health reasons. I have also seen too many of our mob die. This is preventable and you need to be strong and think hey I don’t want to smoke anymore.

How many cigarettes did you smoke a day?
Approximately 25 per day.

How do you feel now that you no longer smoke?
I feel better. My energy and oxygen levels are back to normal. I’m breathing a lot better. Blood circulation has improved. My lung function has improved by 30%.

How many cigarettes not smoked?
20,974 Boondahs not smoked.

How much money saved from not smoking?
$16,779.20 money saved.

What’s your best tip to keep going, when you feel like starting to smoke again?
A reminder I have is still hearing the words from the Doctors – ‘if I continue to smoke I will die’. These days, I only have minimal cravings now. I keep myself busy and drink plenty of water. It also helps seeing the TIS non-smoking advertisements on the TV. I also have the ‘My Drop It’ App on my phone, it guides me as well. I also seek assistance from the Drs and the TIS workers at Winnunga and also attend the NMB (No More Boondah) group each Thursday here at Winnunga.

The other day at NMB, a 5 year old girl came up to me and said ‘No Smokes, You Win’. It’s those little comments like that, that makes me proud.

Fact: Winnunga AHCS delivered 52 ‘No More Boondah’ groups in the 2017-2018 financial year.
Quitters! (cont’d)

Bronwyn

How long has it been since you gave up smoking/how many days not smoked for?
It’s been 9 months since I gave up smoking, works out to be 250 days.

Why did you quit?
I quit because of my family and for my job as a Family Partnership Worker. As I work with first time mums, I could not go telling them how bad smoking was for them and their unborn child and then go and light one up myself, it just didn’t sit well with me.

How many cigarettes did you smoke a day?
I would smoke at least 20 smokes a day.

How do you feel now that you no longer smoke?
I feel heaps better. I breathe better. I no longer have a cough and I don’t have the smell of smoke on my clothes and I found the patches from No More Boondah was a great help.

How many cigarettes not smoked?
540.

How much money saved from not smoking?
In 9 months, money saved would be $4,212.

What’s your best tip to keep going, when you feel like starting to smoke again?
My best tip is to give is to stay strong. What I do is, I think back on the way I felt before giving up smoking. I could not breath properly, I coughed way too much. Now thinking back on those days, it makes me feel sick in my tummy. Also keep yourself busy.

Fact: In 2017-2018 financial year, Winnunga AHCS Tobacco Control Workers provided 501 clients with 1,856 occasions of service.
Surviving the Silly Season

We asked deadly Winnunga AHCS Dietician Lyndall Hayes for her top tips for surviving the silly season and these were her suggestions.

Include more vegetables – make some seriously simple swaps and people won’t even know that they are snacking on healthier options because they taste so good. Swap creamy dips and crackers for salsa or beetroot dip with vegetable sticks. Instead of using crackers for bases for your dips (or other toppings) slice cucumbers into rounds and place your toppings such as cottage cheese with salmon and sprig of dill on top.

Using a toothpick, skewer a cherry tomato and a piece of feta cheese and top with a basil leaf. Serve yourself a large leafy green salad and make this the focus of your plate before adding meats and other sides.

Practice portion control - remember that the first and last mouthfuls taste the same, it’s all the mouthfuls in between that cause the problems. By this, I mean savour your food. Take time to smell, taste and enjoy the texture of whatever you are eating and stop before you are full.

Limit alcohol - start off with a large still or sparkling water to quench your thirst before your first alcoholic drink. Make your alcoholic drink last by sipping slowly and focusing on conversation and then have another water. A serve of wine is less than half a cup but what is served (particularly in a large glass) may easily be twice that. Stubbies of full strength beer are nearly 1.5 standard drinks, so having what you think are only 2 drinks may actually be 3 or 4. If we compare that to food, a couple of small glasses of wine would be the same as having a large chocolate bar, or a cheese and tomato sandwich or 30 jelly beans! You can see how quickly drinking may sabotage your healthy eating plans.

Keep moving - make exercise a priority. I find that getting up and going for a walk first thing sets me up for the rest of the day. It also means that as your day fills up you don’t end up feeling guilty if you run out of time for your exercise of choice.

Remember that Christmas is ONE day - have your favourite (portion controlled) meal/dessert and enjoy it. Enjoy your time with family and friends, focus on conversations, play games, watch an old favourite movie together, do things that don’t revolve around food.

Fact: Winnunga AHCS delivered 37 Healthy Cooking Groups in the 2017-2018 financial year.
Do it with us, not to us

Aboriginal Health in Aboriginal Hands

Staff Profile

Name: Bobbi Bradnam

Position: Tackling Indigenous Smoking (TIS) Officer.

Who’s your mob?
Wiradjuri.

Where’s your country?
I was born in Canberra and have lived here for 20 years.

Who is your favourite singer/band?
I don’t really have a favourite singer. I love a wide range of music especially old country music.

What is your favourite song?
Forever and ever by Randy Travis.

What do you do on the weekends?
Mostly spend time with my family or go shopping.

What is your favourite food?
My favourite food would have to be butter chicken.

What do you like most about working at Winnunga?
What I love most about working at Winnunga is the working environment, everyone is so lovely and have great personality’s which makes it a fun happy work place.

My favourite pet?
I would love to have a shingleback lizard but mum said I can have one when I move out haha.

What is your pet hate?
Dishes I absolutely hate dishes.

Do it with us, not to us