



Aboriginal Health Council of Western Australia

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.....MEDIA STATEMENT.....

Media Release: 25 March 2009

New Framework Agreement for Aboriginal health in WA

Western Australia's peak Aboriginal health body is keen to implement the new State Aboriginal health framework agreement that will bring the State into line with the rest of Australia and ensure the State can access future Federal funding to help Close the Gap.

The Aboriginal Health Council of WA's (AHCWA) State Conference "Developing New Health Leadership" opens today, Wednesday 25 March, with a vast array of national Aboriginal health experts discussing a range of issues on how to Close the Gap. The conference is designed to bring together people working throughout the State in the Aboriginal Community Controlled Health Sector.

AHCWA is welcoming keynote speaker Lesley Podesta, the First Assistant Secretary for the Office for Aboriginal and Torres Strait Islander Health (OATSIH) Canberra, who will discuss the Council of Australian Governments (COAG) initiatives in Aboriginal health. The application of the new framework agreement is critical to implementing these initiatives.

AHCWA CEO Darryl Kickett said Western Australia and Tasmania were the only states in Australia that did not have a State Aboriginal health framework agreement in place – and as a result, the State has missed out on significant resources.

Developing an agreement is particularly timely following the Federal Government's \$15 billion package announced at the COAG meeting in Canberra in November, which includes \$850 million for national Indigenous health initiatives.

"Every other State has a functioning framework agreement, which provides a much needed mechanism to outlay COAG funding. Our Aboriginal community controlled affiliate in the Northern Territory has a framework agreement and received \$100 million in Commonwealth funding which recognized that community controlled health services were the key to closing the gap," Mr Kickett said.

"This sort of funding in WA would have a massive impact in addressing the poor health conditions of Aboriginal people in WA. For example, we could provide fully funded resources to locally based Aboriginal community controlled best practice models that provide gold standard services to tackle Aboriginal chronic disease and other epidemics such as maternal and child health outcomes for Aboriginal communities."

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