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VICTORIAN ABORIGINAL HEALTH SERVICE  
ANNUAL REPORT 1978

Statistics

January 1st 1978 - December 31st 1978

TOTAL NO. OF PATIENTS AT FITZROY CLINIC - 7823

PREVIOUS YEAR - 6140

This represents an increase of 27.4%.

30.2% of patients seen at Fitzroy clinic are rural residents.

The Shepparton Clinic has been attended by 458 patients on multiple visits.

The Morwell Clinic has been attended by 329 patients on multiple visits.

Camp Jungai, East Gippsland(Lake Tyers), Framlingham, and Cummeragunja

Clinics saw approximately 2000 patients in their own areas.

The Victorian Aboriginal Health Service will be in the next 12 months seeking more comprehensive statistical and data gathering methods which will enable future efficiency and planning.

ADMINISTRATOR'S REPORT

The 1978 Calendar year saw a continuing extension of the basic services offered to the community in response to a growing need existing all over Victoria. The basic operations of providing treatment, referral, preventive medicine, liaison with public hospitals, Government departments and Aboriginal community continued. Base for all operations of the Victorian Aboriginal Health Service remained at 229 Gertrude Street, Fitzroy. In response to continuing requests, medical teams from VAHS conducted weekly visits to Morwell and Shepparton and monthly visits to Framlingham and Cummeragunja. In addition, our services to country patients was improved by the use of our Mobile Dental Clinic, which in 1978 made a complete tour of country areas and is at present half way through another complete tour. There exists through a dramatic necessity for at least one more dental mobile clinic to ensure adequate basic coverage of the dental needs of the Victorian Black Community.

UNDER 5's CLINIC

One of the innovative services provided last year was the under 5's childrens clinic which was run on a weekly basis. At this clinic mothers were encouraged to attend with their babies and to participate in a program of regularly monitoring of the child's health and to learn more about hygiene, nutrition and cooking. Babies were each week weighed, measured and their progress recorded on a growth chart. This clinic has been an important and successful addition to the services we offer the community and is expected to grow as more mothers indicate a desire to be involved.

### VISITING SPECIALISTS AND CLINIC STAFF

The Victorian Aboriginal Health Service clinic in Gertrude Street, was fortunate in being able to utilize the services a range of visiting specialists. These included regular sessions by Physiotherapist Anne Farrell, attendance one day a week by Gynaecologist and Obstetrician Mr. John Campbell and Mr. Phil Hunt Consulting Surgeon of Monash University School of Surgery at Prince Henry's Hospital. In addition there was a monthly visit by eye specialists Dr. Mark Lazarus and Dr. Lloyd Stewart. Furthermore, the Royal College of General Practitioners continues to provide us with a third doctor as part of their Family Medicine Programme. The R.C.G.P. pays half their wage and their doctors have been of the highest standard. These doctors feel that their presence in our clinic of substantial benefit to themselves educationally and this can only be of long term benefit to the Aboriginal community. In terms of other medical personnel, two St. Vincent's Hospital nurses are in attendance each Wednesday and this has led to (on their part) a greater appreciation of the health problems of the Black community. Also, we were used last year as a placement agency for 2nd year Social Work students from Melbourne University. As well the Preston Institute of Technology, Diploma of Nursing Course provides us with personnel from the third year of the course on fortnightly placements.

This has meant that we have been able to direct more of our Aboriginal personnel into a comprehensive home visiting service. The VAHS has therefore found this external assistance and co-operation most beneficial in terms of improving the services we offer to the Black Community.

### PROPOSED HEALTH WORKER TRAINING SCHEME

Perhaps the most frustrating element of the past 12 months has been our inability (due to lack of adequate funds) to initiate our proposed Health Worker Training Scheme. This scheme was first conceived in May 1970 by Mr. Bruce McGuinness and is a vital necessity if the VAHS is to continue improving the standard of health care available to the Victorian Black Community. It is hoped that this year, after a nine year wait, that the Health Worker Training Programme will begin in earnest.

### LIASON WITH EXTERNAL FACILITIES

One of the more positive aspects of the VAHS operations in the past year has been the increasing degree of co-operation with external health institutions. We have a continuing liason with Clarendon Clinic in East Melbourne and Footscray Psychiatric Clinic. Additionally we maintain a close liason with Prince Henry's Hospital (via Phil Hunt, Consulting Surgeon), and paediatricians at Queen Victoria Hospital and the Royal Children's Hospital. We are also fortunate to receive full co-operation from all staff at the Mercy Maternity Hospital.

The most substantially beneficial co-operation we are receiving is from the Lincoln Institute, Department of Communication Disorders. We are in



conjunction with the Institute, planning a hearing screening program which will be a statewide project and will be of major importance to the Aboriginal Community.

#### FUNERAL FUND AND NINDEEBIYA WORKSHOP

The funeral fund has been operational for approximately 4 years and is designed to provide financial assistance to bereaved Aboriginal families. Money for the fund is raised by voluntary donations and through fund-raising functions.

Nindeebiya Worksho, originally began as a subsidiary operation of the VAHS and was designed to provide meaningful recreational and craft activities for Aboriginal people. Since the initial success of the project, VAHS has consistently fought for the right of Nindeebiya Workshop to become a fully independent organisation but the customary near-sightedness of D.A.A. has prevented this.

#### NATIONAL ABORIGINAL AND ISLANDER HEALTH ORGANISATION

One of the most pleasing aspects of our work has been the growing mutual co-operation and understanding between VAHS and Aboriginal Health Services in other states. This culminated in the establishment of the National Aboriginal and Islander Health Organisation in April, 1973. NAIHO must be seen as a positive step toward solidarity and mutual assistance between Black Health services. It is beneficial to VAHS in that it provides us with a national body to represent us in negotiations with some of the more "difficult" federal government agencies (e.g. D.A.A.). It is also an important organisation in regard to the development of strategies and priorities in Aboriginal Health nationwide. VAHS supports fully NAIHO and intends to do all it can to strengthen and develop the organisation as the authoritative body in Aboriginal health throughout Australia.

#### DENTAL SERVICE

The Dental Service continues to operate in the premises next door to the VAHS. Additionally, the mobile dental clinic is in the course of its second statewide tour, and there remains the absolute necessity for a second mobile clinic. The Dental Service employs two qualified dentists, 4 Dental Nurse Trainees and 1 field officer/driver. One of our Aboriginal Trainees has been apprenticed as a dental technician to a private firm, having competed with numerous applicants from the general community with greater secondary qualifications.

#### POLICY IN REGARD TO ALCOHOL AND DRUG DEPENDANCE

The VAHS reiterates its policy that we do not regard people who drink excessively because of overwhelming political, social and economic pressures, as alcoholics. We consider their problem a social, political and economic problem to be treated as such.

#### PUBLIC RELATIONS SECTION

The VAHS has recently established a public relations section which publish a regular newspaper and pamphlets. It will also involve itself in other information disseminating activities, all of which is designed to create a greater public awareness of the VAHS, its aims and activities. The public relation section will be responsible for the publishing and distribution of health educational material aimed specifically at the black community.

#### CONCLUSION

These then have been the day to day activities of the VAHS for the past twelve months. On behalf of the staff of the service I would like to extend warm thanks to everyone who has been assistance to us in our work. In the words of a notable Chinese, "we must help each other to help ourselves", this then is an important component of the philosophy of the VAHS and we look forward to another year "serving the people".

Thank You.

ALMA THORPE,  
ADMINISTRATOR.

21st February, 1979.