



# NACCHO

National Aboriginal Community Controlled Health Organisation

## Media Release

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### **No Frills, No Strategy in Aboriginal Health Budget: NACCHO\***

There were no frills and no clear strategy to embrace the opportunities in Aboriginal health in last night's budget says Mr Justin Mohamed, Chair of National Aboriginal Community Controlled Health Organisation (NACCHO).

"The budget's largest overall health investment has been chewed up in the hospitals deal. Much less was allocated for primary health care and out of that our medical services have to compete piecemeal with mainstream GP services," Mr Mohamed said.

"From the budget announcements, there is still no clear capacity building plan agreed between our services as a whole and the government recognising our expertise built up over 35 years of providing frontline primary health care in our communities.

"The Federal Government, COAG, the National Health and Hospital Reform Commission, the Productivity Commission and the Health Department etcetera all say Aboriginal health is front and centre of the health reform agenda.

"Yet for the health reform agenda to be meaningful the role and experience of the community controlled Aboriginal medical services and NACCHO, as their peak body, must be valued rather than treated as an afterthought.

"The budget is essentially business as usual in Aboriginal health with a few incremental improvements.

"Our 150 services nationwide in urban, rural and remote areas will have to chase grants out of the budget's mainstream bucket for improvements.

"However NACCHO will continue pushing for a significant boost to the sector and support for new community controlled Aboriginal medical services in communities that need them.

"At this stage there is no assistance for Aboriginal communities to develop their own new medical services, instead the government is investing Aboriginal health dollars in the new "Medicare Locals" and mainstream GP services," Mr Mohamed said.

The only specific new "Indigenous" expenditure announced in the health budget was for the further roll out of Opal petrol in remote communities, costing \$38m, \$6m for Aboriginal Male Health programs focusing on the family, announced last week, and \$10m for changing 50 CDEP jobs in the Torres Strait Islands to aged care and sport positions.

There was a welcome extension of the Quality Use of Medicines programs in Aboriginal communities under the Fifth Pharmacy Agreement.

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