



## Media Release

17 December 2007

### **NACCHO WELCOMES PMs CALL TO COAG**

“Mr Prime Minister, we genuinely thank you for demonstrating your early commitment and interest in Aboriginal issues by visiting the Northern Territory this weekend and promising to do so at regular intervals. However we would like to see you speak with our national Aboriginal health leadership in the near future”, said Dr Mick Adams, Chair of the National Aboriginal Community Controlled Health Organisation (NACCHO).

“We also welcome the Prime Minister’s call to other Premiers to put Aboriginal issues on the COAG agenda as a large life expectancy gap is experienced by all of us not just those in the remote communities making the news”, said Dr Adams.

“Media reports indicated that the Prime Minister will meet NT Indigenous leaders every three months to provide advice to the Federal Government on Aboriginal issues. Whilst this is to be commended, the expertise of this group is mainly limited to issues of the NT. There are broad national Aboriginal issues that need to be addressed”, said Dr Adams.

“At present we lack any true national representative body. We hope the Prime Minister recognises this and will put in place, as a matter of urgency, a process through COAG to create such a representative body where dialogue can occur in a positive and collaborative manner. NACCHO is in a position to play a significant role in this process”, said Dr Adams.

“If we do not create such a body there will be no real dialogue and no sustainable health gain and another missed opportunity, to *‘Close the Gap’*,” said Ms Dea Delaney-Thiele, Chief Executive Officer of NACCHO.

“In the mean time we request that the Prime Minister meet with our national leadership who are representative of over 140 Aboriginal Community Controlled Health Services working at the grass roots level in rural, remote and urban Aboriginal communities. Our services bring their expertise to the health care processes, through their culture, corporate knowledge and their day to day delivery of primary health care to their communities”, added Ms Delaney-Thiele.

“You cannot impose health gain. It will come if all the right investments are made and now is the time” said Dr Adams.

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