

MEDICAL TREATMENT FOR INDIGENOUS PEOPLE

**564. Hon DERRICK TOMLINSON to the Minister for the Kimberley, Pilbara and Gascoyne:**

As the minister knows, on 30 August the Australian Bureau of Statistics presented a statistical representation of the health and welfare of Australia's Aboriginal and Torres Strait Islander peoples. The statistical representation reported that 45.6 per cent of hospital separations of indigenous males and 42.7 per cent of indigenous females is for haemodialysis; in remote areas the incidence of end stage renal disease among indigenous peoples is 30 times higher than the national incidence; and 44 per cent of hospital treatments of indigenous peoples is for kidney disease or end stage renal disease.

Given those figures and given the high proportion of indigenous persons in the remote communities for which the minister has direct ministerial responsibility, is he satisfied that the measures in the budget will address the problem in his region?

**Hon TOM STEPHENS replied:**

I am aware of the shocking statistics in that region, and the needs that flow from those statistics about which Hon Derrick Tomlinson expressed concern, not only in my capacity as Minister for the Kimberley, Pilbara and Gascoyne but also as Minister for Housing and Works

I hope Hon Derrick Tomlinson recalls that when I was in opposition I regularly raised with the Department of Health officers, during the estimates hearings, the specific statistics about which the member spoke. I described them in opposition as an extraordinary explosion and a crisis looming in the field of Aboriginal health. I called for the then Government to dramatically lift its response to that looming crisis. Since that time, I have not stopped lobbying for a response from the previous Government and this Government to this enormous challenge. Recently a significant number of young people in the Aboriginal community have died, and their deaths were attributable in large measure to the awful reality of diabetes and renal failure.

In the three regions that I represent the task can be met only by a determined effort by commonwealth, state and local governments, with support from the entire community, including the Aboriginal community, to respond to the realities of diet, nutrition, health, hygiene and lifestyle. The response required is large and the resources of government are needed. The State Government will do its bit to respond. The task is beyond this Government's specific resources. We will need increased support from the Commonwealth Government to lift our game. The member and the House must be aware that in my housing portfolio, I must find resources to assist the Aboriginal community to adjust its lifestyle in ways that will improve the health, hygiene and circumstances of the Aboriginal community. and create conditions in which a healthy diet and nutrition, which are pivotal to this issue, can be adopted. I have been charged with the task of providing accommodation for people who have experienced renal failure so that they can return from the autumn centre in Hon Derrick Tomlinson's electorate to their communities, towns and homes to access dialysis programs in Broome, Port Hedland and other locations throughout regional parts of Western Australia. This is a big problem for which the Government will need additional resources to help the entire community respond to this huge challenge.