

MEDIA RELEASE

22 March 2016

Stanthorpe Hospital commemorates Close the Gap day

Stanthorpe Hospital was one of numerous facilities throughout the Darling Downs and Hospital and Health Service (DDHHS) to commemorate Closing the Gap day last week.

Jan Faulconbridge, Stanthorpe Hospital Director of Nursing, described the Closing the Gap day morning tea as a great success.

“This was the first time we’ve had a Closing the Gap event here at Stanthorpe Hospital and it was a wonderful morning,” Ms Faulconbridge said.

“We fully support initiatives that help to make a real difference to health outcomes for Aboriginal and Torres Strait Islander people and we were very happy to have representatives from Carbal Medical Centre and also people from the local Indigenous community joining us.

“I’d like to particularly acknowledge Jo Bell for her tremendous efforts in organising this event.”

Ms Bell, who is a midwife at Stanthorpe Hospital, said encouragement from DDHHS cultural practice coordinator Rica Lacey got the ball rolling.

“A few weeks ago we were contacted by Rica who spoke to us about holding a Closing the Gap day event,” Ms Bell said.

“The Stanthorpe community has more than 200 people who identify as Indigenous so we thought it was important to host an event and show our support, particularly as this was the tenth anniversary of Closing the Gap day.”

Joanne Lomas, Carbal Medical Centre District Care Coordinator, travelled from Warwick to be a part of the event.

“Closing The Gap Day is very significant for Aboriginal and Torres Strait Islander people,” Ms Lomas said.

“In 2008 the Close the Gap campaign was endorsed by the Australian Government targeting areas such as health, education, employment, education and housing.

“Aboriginal and Torres Strait Islander Medical Centres such as Carbal in Toowoomba and Warwick employ Aboriginal health workers and care coordinators who are committed to closing the gap.

“More recently we have had care coordinators Lee Lingwoodock and Mike Salbro working on the ‘Tackling Indigenous Smoking’ program, to help stop smoking and prevent chronic diseases.

“It’s been 10 years now, and while it is a gradual process, statistics show that it is working, and the gap is closing.

“I’d like to thank Stanthorpe Hospital and staff for hosting this event, and I would also like to thank our Aboriginal elders who joined us.”

DDHHS Acting Chief Executive Dr Peter Gillies said Closing the Gap would continue to be a priority throughout the health service.

“At a special Closing the Gap event at Mt Lofty Heights nursing home in Toowoomba last week I was joined by members of the DDHHS executive team to sign a pledge to continue working to improve the health outcomes for Aboriginal and Torres Strait Islander peoples across the health service’s 20 public hospitals and six nursing homes,” Dr Gillies said.

“While we have been working in a number of key areas such as reducing the impact of chronic disease, maternal and child health, public health and mental health, we acknowledge there is more work to be done.

“Across our region there are more than 11,000 residents who identify as Aboriginal or Torres Strait Islander.

“I am pleased we will be collaborating more closely with the Aboriginal Medical Services to close the gap to improve the health and quality of life of local Aboriginal and Torres Strait Islander people.

“We have made significant progress in training our staff in how to provide care in culturally appropriate and sensitive ways, with seven in 10 employees having completed our cultural practice program.”

Dr Gillies said national agreements in 2008 had committed to achieving six targets for closing the gap in health, education and employment outcomes. The two health-specific targets are:

- to close the gap in Aboriginal and Torres Strait Islander life expectancy within a generation (by 2033) and
- to halve the gap in mortality rates for Aboriginal and Torres Strait Islander children under five within a decade (2018).

Queensland Health Closing the Gap figures reveal the six leading drivers of the health gap between Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander Queenslanders, which together explain 70% of the health gap are:

- Cardiovascular disease – an estimated 21% of the health gap
- Diabetes – an estimated 15% of the health gap
- Mental health – an estimated 11% of the health gap
- Chronic respiratory disease – an estimated 10% of the health gap
- Intentional injuries – an estimated 7% of the health gap
- Cancers – an estimated 6% of the health gap.

Ends

MEDIA: Contact Darling Downs Hospital and Health Service Media Team 4699 8725, 0448 996 296 or DDHHS_media@health.qld.gov.au