

# Victorian Aboriginal Health Service

## Revitalizing Health for All Project

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### The Project

This project is a case study that looks at Comprehensive Primary Health Care (CPHC) at the Victorian Aboriginal Health Service (VAHS). It will serve as an evidence base for community-controlled CPHC, which is the preferred model of health care delivery for Aboriginal people.

## The project was designed to address these questions:

- What are the key characteristics / elements of the VAHS CPHC approach?
- What are the significant factors that influenced the establishment, development and ongoing continuity of CPHC at VAHS?
- What have been the benefits of establishing and delivering a CPHC in Melbourne?
- How has and does VAHS work individually and collaboratively to address the other broader issues that impact on Indigenous people's health in Melbourne and Victoria?



#### Acknowledgements

All of the participants in the project: Victorian Aboriginal Health Service (VAHS); Victorian Aboriginal Community Controlled Health Organistaion (VACCHO); Cooperative Research Centre for Aboriginal Health (CRCAH); The Lowitja Institute; Queensland University of Technology; Monash University; and The University of Melbourne

## History

VAHS is located in Melbourne, Victoria
Australia. Melbourne is a large urban city of 4
million people. Only around 0.4% of the
population are Aboriginal or Torres Strait
Islander people.



VAHS was set up in 1973 by Aunty Alma Thorpe, Uncle Bruce McGuiness and other concerned community members.



It was a place where Aboriginal people could access medical and social care in a time when racism and other barriers prevented Aboriginal people accessing care. Now, after nearly 40 years VAHS has evolved to become an organisation with over 100 staff, who care for thousands of Aboriginal people across all of Victoria and Australia.



VAHS today delivers a comprehensive range of services across the key areas of:

Medical; Women's and Children's; Men's Program; Community Programs; Family Counselling and Dental.

### **CPHC at VAHS**

In describing CPHC at VAHS, one participant said that VAHS is a place where

'everyone can come and get something, or receive something or participate in something, in a holistic way'.

#### Another participant stated that:

'Aboriginal health services are quite unique, there are things that we do different that don't happen anywhere else in primary health care services like the community health centre up the road. A couple of things that make us unique is our structure, Aboriginal community control. That is quite unique probably in the world. And the second one is the introduction of Aboriginal health workers into that sector... we looked at the Western model and said yeah we will take the best bits of that like the doctor, maybe a nurse, but we also want to add our cultural aspects around what we do'.

#### Another person expressed about CPHC,

'... is a one shop stop where a person can go and get the whole thing checked out, and I walk in to see the dentist, but I am not just worried about the tooth I have to worry about my diabetes my blood pressure my heart problem, everything. So I know if I go and see [a dentist], he would go and ask me to go and check my blood pressure and blood sugar before he looks at me. So comprehensive primary health care is where you can get holistic approach to health'.



#### Another person said:

We have also made it what we wanted it to be, like I said, put those Aboriginal cultural constructs into how we deal with things, you know Aboriginal health workers, the way that people even the way that our health service is called a home away from home

## **Empowering Self & Others**



#### VAHS has worked hard:

- Offering health and wellbeing services
- ★ Supporting the local community
- Supporting other Aboriginal groups to set up their own health services

#### One former VAHS worker remembered this:

'... we went in, we provided people with the tools to get it up, at no stage would the health service take control of it, the local communities ran their own health services. But we would be there all the time supporting them, supporting them, supporting them, but we wouldn't in those days tell them what to do. they had to do it themselves'.

- Helping others to set up the State and National NGO representative organisations
- Campaigned for better housing, employment, land, social justice and against racism
- Advocating and lobbying against health inequities and other forms of activism



#### FUNDING

This work was curried ask with support from the Global Health Research Initiative (GRIII), a cullaborative research unding partmentals of the Considerant Initiative of Health Research, the Canadian International Development Research, the Canadian International Development Research Centre, and the Public Health Agency of Canadia." In this work has also been produced as part of the activative of the Cooperative Research Centre for April (GRIII) and The Lowing Institute. The CRCAH is a collaborative partnership partly funded by the CRC Program of the CRC Progra