

MEDIA RELEASE



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RDAA President takes direct action on climate change: urges Government to take direct action on rural health

The President of the Rural Doctors Association of Australia (RDAA), Dr Paul Mara, is taking direct action on climate change, maintaining a commitment to plant 5000 trees each year indefinitely in his local town of Gundagai.

In return, he's asking the Federal Government to take direct action on rural health...in particular by implementing an urgent review of the Australian Standard Geographical Classification – Remoteness Areas (ASGC-RA) system that is making it substantially more difficult to recruit doctors to many small rural towns across Australia.

Dr Mara said his mass planting at Gundagai this year would be a mix of locally sourced eucalypts and bushes—and some deciduous trees—to create an arboretum, as well as completing planting in a local watercourse.

“We’ve been very pleased with the growth of our trees to-date” he said. “The season has been wonderful and after five years of planting we’re really starting to see the impact on the land and wildlife. We just wish we could see the same long-term commitment from governments to growing the rural health workforce.”

Dr Mara said while he firmly believes in human-created climate change and the need for action, “I’m not convinced a carbon tax will really reduce emissions...it could simply be another costly exercise for not much return.

“After all, governments don’t have a great track record on the environment. Look at the Murray Darling Basin, pink batts and the solar panel scheme in NSW. There’s been a whole lot of waste, failure to really consult with those affected, and bureaucratic mismanagement.

“At the end of the day, individuals have to take personal responsibility and not leave it all to governments. The total personal investment of my wife and I in the environment this year will be at least \$20,000, but may increase considerably if plans go ahead for the installation of solar panels on our surgery. We are looking at a 10.4kW system but the current uncertainty around solar schemes is making the decision difficult.

“In this sense, rural health policy is a bit like environmental policy. Uncertainty in policy-making continues to impact negatively on great outcomes, and there continue to be the usual chestnuts of failure to properly consult and failure to put in place the right signals to encourage long-term investment in sector.

“RDAA continues to push a broad policy agenda for rural health, with the aim of establishing the right environment to attract doctors with the qualifications, skills and commitment to meet the needs of rural communities.

“But it’s an uphill push when you’re dealing with a bureaucratic system which doesn’t recognise the difference for doctors and their families between a major regional centre (offering schools, restaurants, shopping malls, pristine beaches, sporting facilities, well-resourced hospitals and little or no after-hours duties) or a smaller town with only a main street, pub, Chinese restaurant, war cenotaph and small hospital at which the local doctor can expect to spend a lot of time after-hours as the on-call doctor.

“Unfortunately, under the ASGC-RA, doctors are now receiving the same retention and relocation incentives whether they choose to practise in some larger regional centres (including Hobart and various pristine coastal centres) or small rural towns like Gundagai.

“While it appears that the Government considers an urgent review of the ASGC-RA to be akin to the mammoth task of saving the environment, we’ll keep pushing for this as the ASGC-RA is one heavy rural polluter that must be cleaned up.”

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