

**Aleeta Fejo**

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Working toward a goal

■ I am writing this guest editorial for this 'Indigenous health' issue of *Australian Family Physician* because I have reached an important goal – one that many times I thought I would not achieve. I would like to share my story with others, particularly my Aboriginal brothers and sisters, so that they may be encouraged to keep going and to reach their goals too.

I thought that this story started when I was 28 years of age, but actually, it started before I was born. I am a Larrakia Traditional Owner, inherited from my father, and I am a Warramunga woman from my mother.

I grew up on my father's tribal land in Darwin in the Northern Territory, and went to local schools there. I wore my first pair of new shoes the day I started high school, after Cyclone Tracey. I matriculated from Nightcliff High School in 1979. I didn't know it at the time, but I was one of only 30 indigenous people who had ever matriculated in the Northern Territory.

In 1989, I worked in health research looking at the low birth weight of Aboriginal babies. It was then that I understood why I attended so many funerals of my extended family. Statistics showed me, for the first time, the real inequalities between Indigenous and non-Indigenous Australians. I found this inequality in health and life expectancies to be totally unacceptable.

My mother taught me that if you don't like the way something is done, then you should try to change it yourself. My father taught me to be proud of who I am and where I am from. As a Larrakia Traditional Owner, I have a responsibility to take care of my family and my people. I decided then, that I would become a doctor, and try to help my people.

So I undertook a 3 year science bridging course at Monash University in Melbourne, and started medicine at Melbourne University in 1992. I struggled. In 1993 I gave birth to my third child. It was difficult to study, work part time and still raise a family. I transferred to science in 1994, and moved back to Darwin as a divorced mum of three children. I completed my science degree, and my baby grew.

I then packed up my kids and moved to Adelaide, to start again at Flinders University. I was a single mum with three kids, studying medicine, working part time and volunteering. It was hard, but

I got through. I relocated to Darwin for the final 2 years of my degree and remarried.

My dad died.

I finally graduated in 2004. I was so happy, and then I was scared. I worked every extra shift to gain experience, knowledge and confidence. That was very hard. I don't know how, but somehow I got through. I joined a general practice training program, and in the second year left my family and took a job in Katherine, 300 km away. I drove home every weekend.

I was elected to General Practice Registrar Liaison Officer with Northern Territory General Practice Education, then to National Indigenous General Practice Registrar Liaison Officer, and I am a member of The Royal Australian College of General Practitioners (RACGP) National Standing Committee on Aboriginal Health. I also work full time as a general practitioner at Humpty Doo, a rural town south of Darwin, and volunteer as the Australian Football League local team – the 'Thunders' – under 16s and under 18s team doctor. I am currently studying for a Diploma in Child Health, and next year will sit for my RACGP Fellowship exams.

I am so blessed to have a family that have given me 100% support. I have also met and made friends with many incredible people along the way – all of whom have helped bring me to this place. I would like to think that I have done what my parents advised in honouring where I came from and doing what I can to change things.

The theme articles in this issue of *AFP* show us the work many other people are doing in order to change things for Indigenous Australians. Paul Burgess, Albert Mileran and Ross Bailie discuss the health findings of a study which examined 'caring for country' practices in a remote Aboriginal community; Hung The Nguyen discusses the concepts of cultural safety and cultural acceptance to reduce the disparities in indigenous health status; and Trish Nagel and Carolyn Thompson discuss the need to focus on effective and efficient brief interventions in remote indigenous communities that promote self management skills in mental health.

Indigenous health statistics are still unacceptable to me, and I realise I still have a lot of work to do... we all do.

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