This years ACT NAIDOC Awards were very special for Winnunga AHCS and I can’t express how proud I am of the recognition we received on the night. I would like to share a statement with you by our Chairperson Craig Ritchie.

’It was a joyous moment for all when the MC said the winner of the ACT Aboriginal/Torres Strait Islander Organisation of the Year is Winnunga Nimmityjah Aboriginal Health and Community Services. I felt privileged as the Chairperson of this wonderful organisation to be able to accept the trophy on behalf of my fellow Board Members and all the wonderful staff at Winnunga.

Aunty Thelma Weston won the Elder of the Year Award so congratulations Aunty on behalf of myself, the Board and the staff. Julie won the Person of the Year award and great for her to be recognised for the work she has done over more than 20 years of dedication to Winnunga. Thank you all again, this award belongs to each and every one of you and the Board members and I have absolute appreciation for what you do everyday.’

I am very pleased and proud to report that Winnunga has once again passed our three yearly Quality Innovation Performance (QIP) accreditation and met all five standards required to receive and maintain the QIP accreditation. The accreditation assessment team made special mention at how extremely impressed they were by the Walan Girri case management plan and the way Perri and the Social Health Team conducted their business in relation to clients. Kacey was also commended by the assessment team for her professionalism and proficiency at her role of Accreditation Manager.

It would be a nice change if we had some more positive matters to update you on, from this point onwards in my update, but I’m afraid there isn’t. The decision by the ACT Government to terminate the process for the return of Boomanulla Oval to Aboriginal management and control has come as a complete shock to me, and I am sure the entire Aboriginal community.

As shocking as the decision to terminate the tender is, the inability of the Government to provide a believable or even reasonable explanation of its actions, is even more worrying.

This sorry attempt at excusing the Government’s actions is simply not credible. During the course of meetings and negotiations on the tender over the last two years, the Government was advised repeatedly and in writing that because of the manner in which the tender had been constructed, it was simply impossible for a compliant tender to be developed. For example, on 1 September 2016, I wrote the following in a letter to the ACT Director of Sport
and Recreation Services:

‘We have previously advised that it is not possible for Winnunga (or we believe anyone else) to provide a compliant tender in strict conformance with the RFT. We have also indicated that such a proposal is unworkable and not financially feasible without long term lease tenure surety and the Territory’s support to a variation to the Territory Plan. Our views on this have not changed.’

In response to that letter and despite the clear and unambiguous assertion by me of the impossibility of producing a compliant tender the ACT Government not only encouraged Winnunga AHCS to develop a full response to the tender, in a form discussed with and agreed by it, but it also provided funding of $50,000 to assist in its preparation. The resources separately devoted by Winnunga AHCS to progress the tender will have been substantially more than that.

The consequence of the incoherent management by the ACT Government of the proposed return of Boomanulla Oval to Indigenous management is that after being closed for four years and let run down to the point where it will take $3.5 million to return the Oval to a state that it can be used for sport, the ACT Government will manage the Oval itself. There is no plan B for involving the Aboriginal community in the management of this Aboriginal facility.

Not only has the Aboriginal community been sidelined but the use of the Oval will be restricted to community gatherings and events. The Government has declared that sport will not be allowed at Boomanulla Oval until the Oval has been restored. There is no money allocated in the 2018-19 budget or the forward estimates for the restoration of the Oval so it is not clear at this time when, if ever, sport will be played at Boomanulla Oval again.

Following the pre-emptive decision of the ACT Government to close down the tender and manage Boomanulla Oval itself, I informed the ACT Government that Winnunga AHCS would in future not engage in tender processes for the delivery or management of Indigenous specific services or programs until the ACT Government developed and committed to the implementation of a comprehensive, overarching Indigenous policy centred on and incorporating a commitment to self-determination and self-management.

As a first step, I have formally withdrawn an expression of interest lodged by Winnunga AHCS for funding and other support for an Indigenous specific innovative affordable housing project.
CEO Update (cont’d)

I am simply not prepared to keep committing the time, energy and resources to open tender processes for the provision of services or support to the Indigenous community knowing that the Government not only does not have policies relevant to the specific needs of the Aboriginal community, but that it also has no regard for the incontrovertible evidence of the fundamental importance of Aboriginal community controlled organisations in the delivery of services to Aboriginal peoples.

Unfortunately the decision to deny Aboriginal involvement in the management of Boomanulla Oval is not an isolated or one-off decision but follows the rejection in recent times of tenders by Winnunga AHCS to be involved in Aboriginal specific aspects of the Strengthening Families Program in order to support Aboriginal children and families in touch with care and protection; the decision to exclude Aboriginal community control of the Ngunnawal Bush Healing Farm and the associated decision to abandon its commitment to an Aboriginal drug and alcohol residential rehabilitation facility, and the decision to hand the management of Indigenous specific housing for vulnerable Aboriginal families to non-Aboriginal mainstream organisations.

It is a matter of great regret to me that the ACT Government has shown no interest in or commitment to developing an Indigenous policy to guide it in the development of appropriate services and programs for the Indigenous community of Canberra.

It is a matter of great regret to me that the ACT Government has shown no interest in or commitment to developing an Indigenous policy to guide it in the development of appropriate services and programs for the Indigenous community of Canberra. The absence of such policies, or anything approaching an action plan, for responding to the range of problematic outcomes experienced by so many members of the local Aboriginal and Torres Strait Islander community, as a result of the disadvantage and discrimination they have endured throughout their lives, is without doubt a major reason that the ACT performs so poorly when it comes to meeting the needs of Aboriginal people.

I have decided that I am no longer prepared to sit back and wait patiently for the ACT Government to recognise and acknowledge that self-determination and self-management should be central to its relationship with the Aboriginal community and to commit to the development, in conjunction with the Aboriginal community, of an Indigenous policy and associated plan of action that reflects those fundamental principles.

I therefore propose to initiate, with the support of the broader Aboriginal community, a program of direct action to shame the ACT Government into recognising and respecting our rights to be directly involved in designing and managing the services fundamental to the welfare and advancement of our peoples.

I look forward to receiving the support of, and working with not just the Aboriginal community but also the broader community in seeking justice for the Aboriginal people of Canberra.
ACT NAIDOC Awards

One of the bigger events on the Aboriginal and Torres Strait Islander social calendar here in Canberra is the A.C.T NAIDOC Ball and Awards night. Our mob shone, not only, in the deadly styles they wore but in what they had achieved and accomplished. From our youth to our Elders, the nominees and winners, each were inspirational and deserving of their nominations. Congratulations to Winnunga AHCS for being awarded Organisation of the Year, Julie Tongs for being recognised as Person of the Year and Aunty Thelma taking out Elder of the Year.

ACT Health NAIDOC Award

Winnunga AHCS was awarded the 2018 ACT Health Aboriginal and Torres Strait Islander ‘Team’ NAIDOC Award for the Care and Support Clinic Team. Ros Kirk, ACT Program of Experience in the Palliative Approach (PEPA) Manager at Clare Holland House, nominated us in the ‘Team’ award category for those who demonstrate outstanding effort and commitment to improving health care delivery and services to Aboriginal and Torres Strait Islander peoples and their families of the ACT and surrounding region.

Winnunga AHCS meets monthly with staff and specialists from the Clare Holland House to discuss mutual clients who may be requiring palliative care or are identified as needing palliative in the not too distant future. We try to ensure clients are identified early on, supports are put in place, end of life plans so we know the clients’ wishes when it comes time for them to enter palliative care, whether it be at the Clare Holland House, or at home or at the Tent Embassy. Our care and supportive approach allows for both clinical and Social Health Team engagement.
Morning Tea at Government House

Winnunga AHCS was invited by the Governor-General, His Excellency General the Honourable Sir Peter Cosgrove AK MC (Retd) and Lady Cosgrove to a morning tea at Government House in Yarralumla during NAIDOC Week. The gathering was an opportunity for Sir Peter and Lady Cosgrove to meet local Indigenous leaders and the ACT NAIDOC Week Award winners.

Boomanulla Oval Plan Infuriates Indigenous Community

_The Canberra Times, Tuesday 24 July 2018, Steven Trask_

A plan to return Boomanulla Oval to Indigenous control has been rejected by the ACT government in a shock decision criticised for ignoring Aboriginal self-determination.

The neglected park in Narrabundah has huge cultural significance to the local Aboriginal community, but is currently managed by the government after its previous owners went into voluntary administration in 2014.

After two years of negotiations and spending $50,000 on a proposal to put Boomanulla back in Aboriginal hands, the ACT government has decided to manage the oval itself.

Winnunga Nimmityjah chief executive Julie Tongs was involved in developing the Boomanulla bid and was furious at the government’s unexpected decision to reject the plan.

She said the decision lacked transparency and showed the government had ‘no commitment to the principle of Aboriginal sovereignty and self-determination’.

Fact: Boomanulla Oval gates were closed in November 2014.
The recent ACT budget allocated $770,000 to upgrade the oval, although it is understood these improvements will only allow ‘informal recreational use’ and the oval will still not be suitable for sport.

In 2016 Winnunga began discussing plans with the ACT government to place Boomanulla back under Indigenous management. Ms Tongs said the upfront cost of making the dilapidated park usable was $3.5 million, with ongoing maintenance expected to cost about $500,000 per year. To meet these costs, Winnunga sought the certainty of a long-term lease as well as planning variations that would allow a section of the site to be developed. At the outset Winnunga warned the government such a proposal would not comply with tender requirements and would require some kind of special consideration or exemption. Without this, Winnunga said it was unlikely anyone would be able to put forward a sustainable plan for the oval.

The ACT government subsequently encouraged Winnunga to flesh out the idea, providing $50,000 to do so, and held regular meetings to discuss the plan’s progress. Ms Tongs said the final plan was lodged with the government in September 2017 and, after almost a year of consideration, was unexpectedly rejected last month. ‘The decision ignored the significance of the site to Aboriginal people and represented a denial of the right of the Aboriginal community to self-determination and self-management of a place of the deepest significance to them,’ Ms Tongs said. Ms Tongs said the process had left such a bad taste, she was no longer ‘prepared to commit the time, energy and resources to open tender processes for the provision of services or support to the Indigenous community’.

Winnunga Nimmityjah Aboriginal Health Service is a community-controlled organisation and one of the largest outfits of its kind in the territory. The ACT government asked for expressions of interest from organisations keen to manage Boomanulla Oval in March 2016.

‘…we are looking forward to identifying a new management organisation that is passionate about the prosperity of the oval, and that is committed to managing Boomanulla as a facility that the community can use for a range of activities,’ the announcement read. A spokeswoman from the ACT’s economic development directorate did not address questions about Winnunga’s bid or the ongoing management of the oval.

‘The ACT government understands and respects the significance of Boomanulla Oval to the local Aboriginal and Torres Strait Islander community and is committed to seeing the facility reopen as soon as possible,’ the spokeswoman said. ‘Since 2016, the government has been working in good faith with the community to develop an innovative approach to ensure the long-term, sustainable management of the oval.’

The oval is named after Indigenous advocate Mervin John "Boominulla" Williams, and as a significant football ground for the national Aboriginal community it once hosted training sessions for visiting NRL teams.
Canberra Must Stand Up For Bernard Collaery

Julie Tongs, CEO of Winnunga AHCS, is calling on the people of Canberra to rally behind former ACT Deputy Chief Minister and Attorney-General, Bernard Collaery, against whom the Commonwealth has initiated a criminal prosecution because he dared to embarrass the Australian Government over its disgraceful and bullying attack on the sovereignty of East Timor and on its people.

Bernard’s crime was to represent an Australian intelligence officer who blew the whistle on the odious and illegal actions of the Australian Government in bugging the cabinet offices of the East Timorese Government in order to gain information that would allow Australia to swindle and cheat the people of Timor out of ownership of their natural resources.

Julie Tongs noted that Bernard Collaery was one of Winnunga AHCS longest and strongest supporters. She said that not only is Bernard a patron of Winnunga AHCS and not only has he been its long standing legal representative, but that he has invariably represented many Aboriginal individuals and families on a pro bono basis.

She said that Bernard’s representation of the principled and courageous Australian intelligence officer at the heart of the criminal prosecution was entirely consistent with his commitment to the rule of law, freedom of speech, social justice and the oppressed.

Julie Tongs said that Winnunga AHCS and the Aboriginal community would stand with Bernard Collaery and she called on everyone in Canberra to do the same.

Fact: Bernard Collaery advised the East Timor Resistance for more than thirty years. He spent considerable time in East Timor working with Resistance leaders and providing advice on international law and other matters during the United Nations Administration 1999-2002 and thereafter.
The ACT Government has released a consultation draft for the ACT Drug Strategy and is seeking submissions and feedback on the draft.

Winnunga AHCS will take the opportunity to formally respond to the draft strategy and highlight its disappointment at the absence of an Indigenous specific drug and alcohol residential rehabilitation facility. There can be no argument that the most serious gap in drug services in the ACT is the lack of this facility which is compounded by the absence of Aboriginal community controlled involvement in the delivery of drug and alcohol services.

Winnunga AHCS will also be raising questions about the process which it is proposed be used for considering the need to ban smoking in the AMC. The Draft strategy provides that consideration will be given under the strategy to ‘the need for smoke-free areas, including smoke-free-correctional facilities’.

In light of the phrasing of the draft strategy, namely a proposal that the ‘need’ to ban smoking in correctional facilities be examined, it was disappointing to hear further not about the need for such a policy but the basis on which the ban will be implemented.

A question central to the banning of tobacco in the AMC surely is, ‘what possible reasons would detainees have for rioting if tobacco was banned in the prison?’ There are also a range of quite serious and complex issues that require robust and objective consideration if tobacco is to be banned at the AMC.

On what basis does the Government consider it appropriate to deny to people in prison access to something which does not pose a security risk, which does not come at a cost to the Government and which every other adult in Australia is legally entitled to possess and use?

What is the rationale for this policy? What are the outcomes it hopes to achieve? What are the risks and likely consequences of imposing a ban on tobacco? Is the proposed ban deliberately punitive?

A ban on tobacco will have the effect of creating a black market within the prison for tobacco. Tobacco will, like illicit drugs and mobile phones become another high value tradeable product. The price will obviously go through the roof but tobacco will continue to be readily available just as are the full range of illicit drugs and mobile phones.

The ban on tobacco will almost certainly exacerbate the state of relations within the AMC between prisoners and prison officers, and between prisoners. The ban will be particularly difficult for prisoners who cannot afford to purchase illicit drugs and will have serious implications for vulnerable detainees.

ACT Drug Strategy (cont’d)

An issue which unfortunately receives little attention and which needs to be considered in any inquiry into the ‘need’ to ban tobacco as well as more broadly, is the extent to which power relationships and imbalances among detainees in the AMC impact on families.

Drugs purchased in the AMC must of course be paid for and the networks of supplying the drugs extend throughout the community. A consequence of banning tobacco will be that many detainees who have chosen tobacco over drugs inside the AMC for cost reasons, will inevitably be faced with a choice of either illicit drugs or contraband tobacco, neither of which they can afford. It would be naïve to think that they will simply decide to quit. Rather inmates will run up debts for which their families will be pursued on the outside or which they will be forced to pay in kind to the dealers inside the prison.

Drug Treatment in the AMC

Time For a Detox Centre

The relationship between drugs, offending, imprisonment and recidivism is accepted without demur by anyone with any interest in or knowledge of these matters. It is also accepted by anyone with an interest in the AMC and the management of corrections in the ACT that illicit drug use is rampant among detainees at the AMC. It is also known that the number of detainees at the AMC on the methadone program is the highest in Australia.

Aboriginal people in the ACT are arrested and detained at a massively disproportionate rate. The ACT has the second highest rate of Indigenous incarceration in Australia. The most recent data accessed by Winnunga AHCS reveals that an Aboriginal person in the ACT is 19 times more likely than a Non-Aboriginal person to be sentenced to a term of imprisonment. The rate at which Aboriginal women are imprisoned is, shamefully, even worse.

It is also accepted, as a fact, that Aboriginal people in the ACT use illicit substances at a higher rate than the average rate for Aboriginal people across Australia. In the ACT 46% of Aboriginal males over the age of 15 used a substance in the last 12 months as did 39% of Aboriginal females over that age. By comparison the Australian average rate of use by Indigenous males over the age of 15 was 34% and for females was 27%.

It is known that the recidivism rate of Aboriginal people who have served a sentence of imprisonment in the AMC is almost twice as high as the non-Indigenous rate.

Fact: In 2016, around 3.1 million Australians reported using an illicit drug. In 2016, the most common illicit drug was cannabis.
Drug Treatment in the AMC

Time For a Detox Centre (cont’d)

These facts surely tell us something. They tell us that here in Canberra we have a major problem with the level of illicit substance use in the Aboriginal community and the consequent massive over-representation of Aboriginal people in prison. Importantly it also tells us that what we are currently doing to try and address substance abuse and the over-representation of Aboriginal people in the justice system is not working.

This of course begs the question why the ACT Government has abandoned its commitment to an Aboriginal residential drug and alcohol rehabilitation centre, particularly after having spent $11 million to build one, and why it continues to ignore the importance of working with and empowering the Aboriginal community in seeking to address the crisis in drug use and imprisonment rates.

The decision by the Labor/Greens Government to abandon plans for an Indigenous residential drug and alcohol facility adds to the urgency of developing other options and strategies for addressing drug misuse within the Aboriginal community and to break the nexus between drug use and offending, and imprisonment.

One such option is the establishment of a detoxification facility in the AMC. The data on the link between drug use and offending, particularly in the Indigenous community is well known. Drugs are available in the AMC and too many prisoners who enter the prison addicted to drugs remain addicted when they leave.

Indeed there is anecdotal evidence of prisoners taking up drug use for the first time while detained in the AMC in order to deal with the extreme boredom and monotony of living in a prison in which there is limited programs, structure and activity.

While it is concerning from the recent report by the Auditor-General into rehabilitation at the AMC that the Government does not currently see the rehabilitation of prisoners as important or as a priority, one initiative which would assist in changing that perception would be the establishment inside the prison of a drug detoxification facility.

Fact: Addiction is defined as a chronic, relapsing disorder characterised by compulsive drug seeking and use despite adverse consequences (www.drugabuse.gov/publications/drugs-brains-behavior-science-addiction/drug-misuse-addiction).
Access to Phones in Prison

The French Government will shortly begin the installation of a landline phone in every cell in prisons across France.

The decision to install a phone in all cells followed a successful two year trial at a prison in Montmedy in northern France. The assessment of the Montmedy trial revealed not only a 31% drop in the number of illicit mobile phones seized in the jail but that ready access to a phone reduced tensions among the prison community as well as promoting rehabilitation and reintegration into the community post release because of the very positive impact it had in maintaining family ties.

While it is not known just how many mobile phones are in use inside the AMC, or of course the means by which or by whom they are trafficked, it is accepted that the presence of contraband mobile phones is a reality. As with drugs in prisons, despite every effort by authorities in the ACT and across the world to prevent their entry, mobile phones continue to find their way in.

The French response to trafficked mobile phones in prison and the need for a more equitable approach to access phones by detainees is a precedent that ACT Corrections should follow at the AMC.

Avoid the Flu This Winter!

Just a friendly reminder that the Flu Vaccine is still available at Winnunga AHCS.

The seasonal flu vaccine is available free for:

- All children aged 6 months to under 5 years
- Aboriginal and Torres Strait Islander people 15 years of age and over
- People 65 years of age and over
- Pregnant women
- Anyone over six months of age with underlying medical conditions, which predispose them to the risk of complications from influenza.

Fact: Like other countries, France has struggled against the smuggling of mobile phones into prisons. More than 19,000 handsets and accessories were seized in the first half of 2017, for an overall prisoner population of about 70,000.
White Privilege

By Kim Davison

I always struggled with the cause of my ill health and so many other Aboriginal workers within the NGO/public service space. When self-care is always a priority. Where strategies are in place to deal with it. All along we were dealing with something beyond our control – white privilege and we don’t have a vaccine for that. No doctor can cure that.

What do I mean by white privilege: Being born white means that you were born into a system that validates and reaffirms that you are socially included and being socially included, is a very valuable privilege. Look at the ACT Government – we have no Aboriginal representation at levels that can effect change. From Ministers to all the Directorates – zero. An Elected Body that is restricted – therefore deemed useless to the community, your hierarchy system, you turning up to meetings uninvited, your inability to understand Aboriginal culture, your belief that you not only know what is best for our people but you are far more able to effect change in the lives of our people? Your inability to listen and respect Aboriginal workers at any level because you think that you have a greater education level and your position does not involve taking advice from Aboriginal people – we remain beneath you, your mindset dictates that. Your actions dictate that. You have no idea what an Aboriginal person has endured throughout their individual lives, nor do you want to know. If we don’t fit within (may I say) shifting guidelines, then we don’t meet your expectation. We are forced to be micro managed under funding guidelines when we obviously deliver in a different manner to that of mainstream.

You can all continue with this wilful ignorance, but know your actions contribute to the disempowering of our people, our parents, our kids and those who play a support role to advocate for the various injustices you impose upon them and you must know and accept that you are in fact culturally inept.

What’s more, you place Aboriginal workers within your Departments and mainstream services in a very compromising position, you are damaging them. Those who would rather have a job than to speak out, those who want to rock the boat and speak out but are shut down or moved on. It’s a form of control—they too are smothered by your white privilege.

You need to hear Aboriginal people and learn from them. You need to be strategic in change and you need to admit that we as Aboriginal people—we know what is best for our people.

Fact: The ACT has only two Aboriginal managed and led service delivery organisations; Gugan Gulwan Youth Aboriginal Corporation and Winnunga Nimmityjah Aboriginal Health and Community Services.
White Privilege (cont’d)

You need to stop the white saviour mentality and you must promote self-determination for all Aboriginal people and embrace our culture.

The change I am talking about is huge for mainstream. Because if we are going to be truthful this is far too big for you to truly comprehend let alone implement because it goes against every grain of your white privilege.

If we have any chance of closing the gap for Aboriginal and Torres Strait Islander people, then as a community we must stand together and adopt this statement: ‘Nothing will be done for us – without us!’

Self Determination and Australia’s First Peoples

The right to self determination has particular application to Aboriginal and Torres Strait Islander peoples as Australia’s first peoples. Self determination is an ‘ongoing process of choice’ to ensure that Indigenous communities are able to meet their social, cultural and economic needs. It is not about creating a separate Indigenous ‘state’.

- The right to self determination is based on the simple acknowledgment that Indigenous peoples are Australia’s first people, as was recognised by law in the historic Mabo judgement.
- The loss of this right to live according to a set of common values and beliefs, and to have that right respected by others, is at the heart of the current disadvantage experienced by Indigenous Australians.
- Without self-determination it is not possible for Indigenous Australians to fully overcome the legacy of colonisation and dispossession.

The right of self-determination for Aboriginal and Torres Strait Islander peoples is in addition to the right which everyone has to freedom from discrimination (including under ICCPR articles 2.1 and 26) and which members of all ethnic, religious or linguistic minorities have to enjoy their own culture, profess and practice their religion, and use their own religion.

Fact: Self-determination is the right of all peoples to ‘freely determine their political status and freely pursue their economic, social and cultural development’ (www.workingwithindigenousaustralians.info/content/Culture_7_Self_Determination.html).
The Winnunga AHCS Australian Nurse-Family Partnership Program (ANFPP) Team love what they do and hope to meet you soon, especially first time Mums.

What is the ANFPP?

The ANFPP is a nurse-led home visiting program that supports first time pregnant mums with an Aboriginal and/or Torres Strait Islander baby. To join the program, you need to:

- be a first time mum or this be the first time mothering your baby
- be between weeks 16 and 28 of your pregnancy

The ANFPP is a free service and is a voluntary program. Clients can join the program and opt out at any stage if they want to.

The Program is designed to start in early motherhood from the 16th week of pregnancy right up until bub turns 2 years of age. We understand, this is a unique time in a woman’s life with many changes going on and the ANFPP Team are there to work through the process and assist clients into the next stage of motherhood.

The purpose of the ANFPP is:

- to assist mothers and bubs to have the best possible health
- to support mothers meet their goals in life
- to assist mothers get the support they may need from other services

The program involves home visits during pregnancy, infancy and toddlerhood and gives mums the opportunity to improve pregnancy outcomes through the practice of good health related behaviour and improve outcomes in child health and development.

The Team is made up of two Aboriginal Family Partnership workers (Bronwyn and Fallon), 3 registered Nurse Visitors (Ada, Ruby and Rona) and we have a Nurse Supervisor who is the ANFPP Manager (Malcolm).

If you would like more information about the Program please call Winnunga AHCS on 6284 6222 or mail us at: anfpp@winnunga.org.au
Name: Kylee Shea

Position:
Drug and Alcohol Worker
Social Health Team

Who’s your mob?
Ngunnawal.

Where’s your country?
Canberra.

Who is your favourite singer/band?
Pink. Her music is amazing.

What is your favourite song?
Dear Mr President by Pink but I like a bit of everything.

What do you do on the weekends?
Spend time with family.

What is your favourite food?
Chicken and bacon pasta bake.

What do you like most about working at Winnunga?
Making a difference for our clients.

My favourite pet?
I love all my pets. I have 4 dogs and 2 cats.

What is your pet hate?
Lying.