



# The voice not heard

**This little boy who can't speak at the age of three seems to have slipped through the health care net. JOHN ANDERSEN reports**

LORETTA Bookie stands on the red ground of the Marmanya community at Urandangi with her three-year-old son Sylvester balanced on her hip.

Peewees peck at grass seeds in the sand and dogs lie sleeping in the sun. Clouds are building out over the border and Loretta wonders if it will rain.

She talks of the things Sylvester can do. He can 'break down a tyre', that is, help remove a damaged tyre from a rim.

He knows how to use a brace to loosen the wheel nuts in order to take a flat tyre from a rim and replace it with a new one.

He sees his father jack up a car to change a tyre and he wants to help. He wants to be operating the jack.

These are the sorts of mechanical skills Aboriginal boys living in desert communities learn at an early age.

Sylvester plays games with other children and he'll take up a rake and work alongside his mother when she is raking the ground around their home amongst the gidyea and spinifex at Marmanya.

He does all the things little boys do, but he doesn't talk.

Sylvester has never spoken except to say 'mum' and 'Baboo'. Baboo is the nickname given to him by his three brothers and sisters.

What confounds his mother and other people in this remote community of about 40, just 48kms east of the Northern Territory border and 200km south-west of Mount Isa, is that Sylvester has never been examined by a speech pathologist from the Mount Isa-based North and West Queensland Primary Health Care Association Inc which visits the area on a fortnightly basis. Locals

complain that health teams comprising a psychologist, speech pathologist, dietician and other allied health professionals, including even a podiatrist, visit the area, but never actually treat people.

Local publican Pam Forster is scathing of the way the federally funded NWQPHC goes about its business in the community.

"They say they have the service, but they don't have the delivery," Ms Forster said.

"They don't sit down and get to know the people.

"They need to get to know the people so that they can understand their issues.

"They need to encourage the people to talk to them.

"They don't see anyone.

"We've got people here they could be working with.

"There's Sylvester, a three-year-old boy who has never spoken."

Ms Bookie's three other children are all healthy and had started speaking at around two years of age which is considered normal by speech pathologists and paediatricians.

Paediatrician Dr Mark Patrick, who has just completed a Masters in Public Health and Tropical Medicine at James Cook University, said that any child not speaking by three years of age should have already been assessed by a speech pathologist and been treated by a paediatrician.

"Most kids are using words and phrases by two years of age. You wouldn't be chasing anyone at two if they weren't speaking, but if he is approaching three and not speaking you should be after him," Dr Patrick said.

He said Sylvester, by now, should have been examined to find out if he can hear.

"He needs his hearing tested. From a medical point of view his hearing needs to be tested. He could have an ear infection," Dr Patrick said.

"If this was Brisbane he would have seen a speech pathologist and a paediatrician by now and

just because he is in Urandangi doesn't mean he shouldn't have the same access."

Judith Rathmell is a speech pathologist and Queensland councillor with Speech Pathology Australia. She said Sylvester Bookie needed treatment urgently.

"If he's three, he should be speaking in sentences quite fluently and he should be telling simple stories," Ms Rathmell said.

"If he's three and he's only got two words, he is a long way behind.

"The remoteness of the child should not be an issue in 21st century Australia. It should not be a barrier to him getting the treatment he deserves."

Ms Rathmell said if Sylvester was not treated straight away he would be at serious risk of losing literary skills.

"If he isn't treated now he might never develop the skills to read or write. He needs treatment now," she said.

Sue Fanning from the NWQPHC has defended the service's operation, saying that her organisation had an informal and formal complaints process. She said no complaints regarding the issue of treatment procedures in Urandangi had been raised with her organisation.

"Small teams travel to Urandangi on a two week basis to attempt to work in with other service providers, but each allied health discipline is only on community every six weeks," she said. "This can mean it may take two or three visits to engage with clients. We do not currently have a speech pathologist for this group of communities and are actively recruiting."

Ms Bookie, like any mother, loves her son, and wants what is best for him, but feels powerless to move what she perceives to be the mountains that need to be moved in order for Sylvester to receive treatment.

Sylvester has been checked by



doctors from the Royal Flying Doctor Service which conducts monthly clinics in Urandangi.

Loretta said that one of the doctors had written to the 'government' asking that Sylvester be assessed by a speech pathologist, but that there had been no reaction to the letter from any government body.

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understands that the RFDS has written at least two referrals to the allied health service for Sylvester to be assessed by a speech pathologist.

"The RFDS check him and they say he should see what they call speech therapist (pathologist). The doctor said he might get better and he mightn't, but we never hear yet from any speech

therapist," she said.

Loretta said speech 'therapists' had spoken to her and told her that Sylvester might start talking when he gets older.

"They said that to me. They didn't spend any time with him," she said. "He's good at everything. He can do a lot of things. He can play games. He just can't talk."



**SPEECHLESS...** Loretta Bookie and her son Sylvester, 3

Photo: JOHN ANDERSEN