This is the unedited version of a profile which appeared in *Australian Doctor* in 2002. The published version may have had minor changes.

Profile: Dr Conrad Macrokanis, man of many hats

Shopping
Conrad Macrokanis has been a snake-catcher, a scientist and an explorer of many worlds along the journey to his true vocation. And now that he is a doctor working in Aboriginal health, he also has become somewhat of an historian.

Ask about his work in far north Queensland, and there's more than a good chance his reply will involve a history lesson. He sees first hand the impact of the Stolen Generation policies on his patients, and the relationship between an individual's medical history and their peoples' broader history.

"Clinically what we see is a population of people who have an overwhelming sense of hopelessness and dislocation and cultural disintegration," he says. "But the culture is extremely strong. These people will survive forever because their culture is amazingly profound and deep."

History also affects his practice in subtle ways. Explaining why he behaves differently with patients depending on their age, Macrokanis tells how Aborigines were moved to missions throughout Queensland early last century.

They wore "dog tags" and had little control over their daily lives - even having to seek permission to marry or travel off the mission.

Macrokanis, 33, says older patients who once lived on missions have a a "different communication etiquette" to younger patients.

"Because I have tried to immerse myself culturally...I can suss out the historical setting of most patients in 30 seconds. Obviously sometimes I am wrong, but this is immensely beneficial in cross cultural communication.

“If the patients are mission, you will be very polite and use their surname and treat them as you would a white elder, for example, helping them to sit down. If you did that to a non mission patient, it’s patronising.”

At the time of our interview earlier this year, Macrokanis was nearly finished his rural GP traineeship, at the Mulungu Aboriginal Medical Service at Mareeba, just west of Cairns. (He is now completing a term as outreach paediatric registrar covering 11 remote communities in Cape York).

Mulungu operates from a light, airy building with high ceilings and has a friendly, welcoming vibe. About 4,000 patients, or one-fifth of the town’s population, are on its books.

The service prides itself on its holistic approach to health, and faces all the problems associated with poverty, overcrowding, malnutrition, and high rates of unemployment, mental illness and chronic disease.

“The frustration in Indigenous health is that because of the lack of resources, a lot of the work we do is literally Band-Aid medicine and what that means is we essentially are in crisis mode and we are trying to manage severe conditions all the time,” says Macrokanis.

“It’s exhausting and just sucks up a lot of resources.

“It is essential that GPs recognise that the only path forward in Indigenous health is through primary health care - screening, counselling and education.”

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Macrokanis grew up in Melbourne in an extended Greek family network, and developed an interest in health early in life. His father had a brain tumour and for several years, family holidays were spent “chasing gurus and healers” in India.

Macrokanis was eight when his parents sold their seafood restaurant and retired to the Gold Coast. “For the first time I noticed I was Greek,” he says. “The Gold Coast was fun but you were isolated culturally.

“I used to cop a lot of crap for being Greek. That was my first racial experience, cultural clash. Then going to India you saw the pathetic way

we don't respect our lives here - the opportunities we have here, the wealth. The combination of those things affected me.'

Macrokanis' interest in Eastern philosophies continued throughout his science studies. After a year's backpacking in South America and an honours degree in neurophysiology in the US, he decided that medicine was a better option than bench work.

"I was processing issues of what it means to be Australian," he says, "and concluded that I wanted to get into natural history and the social political history...and that you've really got to get this Indigenous history sorted out because that's what Australia is all about."

While studying medicine at Queensland University, he worked part time as an herpetologist.

A crucial turning point in his life was working on an archaeological dig at Mt Mulligan in north Queensland, where he became friends with many Aboriginal people. It was also where he met his partner, Natalie Parish, now a high school teacher, specialising in Indigenous numercy and literacy. They have a toddler, Ella.

Macrokanis plans to continue working in Indigenous health. He is disappointed that in a six year medical degree, there was only a one-hour lecture on Indigenous health.

"Sadly there's no formalised structure to become an Indigenous health specialist," he adds, "whereas in the US you can do Indigenous health as a sub speciality."

Macrokanis is conscious of the need to avoid burnout, and makes a deliberate effort to cultivate interests outside his work, including documentary film-making and bird and reptile watching.

Inevitably, however, when he gets together with friends, who include many Aboriginal health professionals, the conversation comes back to history.

"This is what makes my time in Indigenous health so enjoyable," says Macrokanis. "I'm not focused on health, I'm focused more on the natural history and the cultural history of the people.

“You see through the desperation, behind that are people of a completely different culture trying to lead their lives, it’s just really fascinating. Indigenous people are just a great laugh, they have heaps of knowledge, they have a different view of the world.”