



THE UNIVERSITY OF
MELBOURNE



MELBOURNE SCHOOL OF POPULATION HEALTH

ANNUAL REPORT 2011

CENTRE FOR MEGA EPIDEMIOLOGY

CENTRE FOR HEALTH POLICY, PROGRAMS & ECONOMICS

CENTRE FOR HEALTH AND SOCIETY

CENTRE FOR WOMEN'S HEALTH, GENDER AND SOCIETY

CENTRE FOR INTERNATIONAL MENTAL HEALTH

McCAUGHEY VICHEALTH CENTRE

SEXUAL HEALTH UNIT

VACCINE AND IMMUNISATION RESEARCH GROUP

INDIGENOUS EYE HEALTH UNIT

FACULTY OF MEDICINE, DENTISTRY AND HEALTH SCIENCES



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MELBOURNE SCHOOL OF POPULATION HEALTH

Summary Report 2011



Head of the
Melbourne
School of
Population
Health,
Professor
Terry Nolan.

MESSAGE FROM THE HEAD OF SCHOOL

POPULATION HEALTH THRIVES

2011 has been a year of growth, consolidation and collaboration for the School which saw the Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology and Centre for Women's Health, Gender and Society (CWHGS) move from 723 Swanston Street into redeveloped Levels B1 and 3, 207 Bouverie Street joining our other centres, units and groups along with the School Executive in this building.

The School has established an Advisory Group chaired by Mr John Brumby, University of Melbourne Vice-Chancellor's Professorial Fellow and former Victorian Premier; Dr Mike Walsh, Chief Executive Officer of Cabrini Health; and Mr Jim Craig, who serves as an Executive Director of Macquarie Bank Limited, Director of Cell Care Australia Proprietary Limited, Murdoch Childrens Research Institute and Director of Trinity College. The Advisory Group provides strategic advice to the School.

The Department of Education and Early Childhood Development (DEECD) Research and Evaluation Partnership projects have begun with the three initial projects for 2011 involving our staff in close collaboration with the Melbourne Graduate School

of Education and Melbourne Institute of Applied and Social Economic Research.

We tendered successfully for Australia's first major longitudinal study of male health. The Australian Longitudinal Study on Male Health, called 'Ten To Men', will recruit 58,000 males between the ages of 10 and 55 to take part in a broad-ranging program of research. The study is led by Professor Jane Pirkis and Professor Dallas English from the Centre for Health Policy, Programs and Economics (CHPPE) and Centre for MEGA Epidemiology.

We launched a completely re-engineered Master of Public Health (MPH) degree in 2011. Our students are very enthusiastic about the program and unprecedented growth in student numbers was seen. This has prompted expansion of the program for 2012 with the introduction of an Indigenous Health specialisation and overseas placements for the new Professional Practice Unit.

We welcomed new senior staff to the School: Professor Billie Giles-Corti as the Director of the McCaughey Centre; Professor Rob Moodie as Director of Teaching and Learning; Professor Philip Clarke as the University's first Chair in Health Economics. Dr Peter Kremer also joined us as a Senior Research Fellow who is a key analyst on the DEECD Research and Evaluation Partnership's Data Linkage Project.

I am also delighted to report the award of major honours to three leading academics associated with our School. Professor Hugh Taylor AC has been appointed as University of Melbourne Laureate Professor, and both Professor David Studdert and Professor Warwick H. Anderson were appointed Australian Research Council (ARC) Laureate Fellows. Melbourne Laureate Professors are awarded by the University to its most distinguished academic staff, and Professor Taylor joins a highly select group. His award recognises his outstanding contributions to eye health research and ophthalmology.

Dr Marion Frere, Deputy Director of the McCaughey Centre since its inception in 2006, has taken up a

The Melbourne School of Population Health's vision is to inculcate a population health approach in all areas of health care and in the community where opportunities for disease and injury prevention exist.

WHAT IS POPULATION HEALTH?

Population health is an approach to health that aims to improve the health of the entire population and to reduce health inequities among population groups.

The study of population health is focused on understanding health and disease in the community, and on improving health and well-being through priority health approaches addressing the disparities in health status between social groups (*Australian Institute for Health and Welfare*).

OUR MISSION

To conduct and enhance research that addresses issues of population health and health social sciences, and to educate undergraduate and postgraduate students, clinicians, scientists, professionals and public health leaders through the enrichment of our educational programs in public health.

The Melbourne School of Population Health aims to strengthen the understanding, capacity and services of society to meet population health needs and to improve the quality and equity of health care.

The population health approach recognises that health is a capacity or resource rather than a state, a definition which corresponds more to the notion of being able to pursue one's goals, to acquire skills and education and to grow.

This broader notion of health recognises the range of social, economic and physical environmental factors that contribute to health (*Public Health Agency of Canada*).

new position at the Victorian Department of Justice. Dr Frere joined the McCaughey Centre, bringing extensive public policy experience from her previous work in the Victorian Department of Premier and Cabinet, to serve as Deputy Director as well as to lead the McCaughey Centre's research stream on reducing violence as an upstream determinant of mental health and community wellbeing. In this role, she has been instrumental in building a vibrant network of family violence research collaborators across the University and in undertaking policy-relevant research on family violence reform. She also contributed to the development of Community Indicators Victoria. Dr Frere has taken up a new position as Director, Innovation and Strategy Unit in the Victorian Department of Justice.

Finally, my thanks to the dedicated, innovative and hard working staff of the School and to our partners who have supported and assisted us throughout the year.

HIGHLIGHTS

Population Health Relocation from 723 Swanston St to Levels 3 and B1, 207 Bouverie Street

Works have been completed on Level 3 and Level B1 of 207 Bouverie St (Building 379), which saw the Centre for Women's Health, Gender and Society (CWHGS), Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology and South of Grattan Street IT (SGSIT) Cluster moving to these spaces from their previous home at 723 Swanston St. The two floors were officially opened on 21 April by the Dean and Head of School. The works incorporate videoconferencing facilities, partially funded by the Rural Health Academic Centre within the Faculty of Medicine, Dentistry and Health Sciences (MDHS), which have enabled the School to ensure the comprehensive delivery of teaching and

learning to students within the Master of Health Social Sciences (MHSS) program, particularly students located in Shepparton.

Funding for expansion of Levels 4 and 5, 207 Bouverie Street

The School successfully applied for further funding to expand the McCaughey Centre on Level 5 of 207 Bouverie Street and the Centre for Health and Society (CHS) on Level 4 of 207 Bouverie Street. Rooms in Level B1 of 207 Bouverie Street have been acquired to accommodate up to 28 of our Research Higher Degree (RHD) students.

Australian Health Workforce Institute

The Australian Health Workforce Institute (AHWI) will join the School in 2012. Led by Professor Peter Brooks AM, AHWI was established as a Faculty of Medicine, Dentistry and Health Sciences (MDHS) Institute in 2007. AHWI aims to develop and expand Australia's health workforce via education, training, policy and delivery.

Professor Lesleyanne Hawthorne has resigned from her role as Associate Dean (International) for MDHS but will continue with the Faculty as a full-time academic within AHWI.

Centre Reviews

The Centre for Health and Society: Completed its planned quinquennial review chaired by Professor Geoff McColl, Deputy Dean, MDHS. The review committee comprised: Professor Trevor Burnard, Head, School of Historical and Philosophical Studies, Faculty of Arts, University of Melbourne, and Professor Lyn Yates, Pro Vice-Chancellor (Research), University of Melbourne. In addition, the external panel members were Professor Annette Braunack-Mayer, Head, School of Population Health and Clinical Practice, University of Adelaide, and Associate Professor Papaarangi

Left: Professor Jim Angus and Professor Terry Nolan officially open Levels 3 and B1, 207 Bouverie Street.

Right: Open office space on Level 3, 207 Bouverie Street.



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Reid, Tumuaki/Deputy Dean, Maori, School of Population Health, University of Auckland. The review findings were highly complimentary.

The Centre for Health Policy, Programs and Economics also underwent its quinquennial review in 2011 with the panel chaired by Professor McColl. The panel comprised Associate Professor Jackie Cumming, Director, Health Services Research Centre, School of Government, Victoria University of Wellington, Professor Philip Davies, Professor of Health Systems and Policy, School of Population Health, University of Queensland, Ms Leonie Young, former Chief Executive Officer, beyondblue, and Professor Tony Harris, Deputy Director, Centre for Health Economics, Monash University. Review findings noted the substantial growth in the Centre of funding, staff, publications and RHD students over the past five years.

Staff Achievements and Awards

The Leaders in Indigenous Medical Education (LIME) Unit won the Rio Tinto Award for Excellence in Innovation in Indigenous Higher Education. In addition the Selection Committee has selected the LIME team as a University of Melbourne 2011 nominee for the Australian Awards for University Teaching – Awards for Programs that Enhance Learning (Category: Educational partnerships and collaborations with other organisations).

Dr Marie Bismark, Senior Research Fellow, CHPPE, has been awarded the Gerry Murphy Prize by the Australasian Faculty of Public Health Medicine and the Royal Australasian College of Physicians. This prestigious prize is given annually for the best paper by an advanced trainee in public health medicine. Dr Bismark won for her work on complaint prone doctors (with Dr Matt Spittal and Professor David Studdert).

The Indigenous Eye Health Unit (IEHU) led by Professor Hugh Taylor AC launched the 'Projected Needs for Eye Care Services for Indigenous Australians' and 'A Critical History of Indigenous Eye Health Policy-Making: Towards Effective System Reform' on 27 May. Distinguished attendees included the Hon Warren Snowden MP, Minister for Indigenous Health and Minister Assisting the Prime Minister on the Centenary of ANZAC, Aunt Joy Murphy, Mr Rod Jackson, Chief Executive Officer of the Victorian Aboriginal Health Service, Ms Glenda Thorpe, Chairperson of the Victorian Aboriginal Health Board, board members of the Ian Potter Foundation and the authors of the reports: Professor Taylor, Ms Jilpia Nappaljari Jones AM, Professor Ian Anderson, Mr Graeme Henderson, Ms Nerelle Porocho, Professor David Dunt, Dr Arthur Hsueh and Mr Alex Brando.

Dr Anna Harris, whose PhD thesis was titled: *International medical graduates in the urban Australian hospital: An ethnographic study*, was awarded the MDHS Dean's Excellence Award in PhD thesis.

Staff Promotions

Dr Richard Chenhall – Senior Lecturer, CHS.

Dr Gillian Dite – Senior Research Fellow, MEGA.

Dr Louise Keogh – Senior Lecturer, CWHGS.

Dr James McCaw – Senior Research Fellow, Vaccine and Immunisation Research Group (VIRGo).

Dr Melanie Matheson – Senior Research Fellow, MEGA.

Dr Aung Ko Win – Research Fellow, MEGA.

Dr Julie Simpson – Associate Professor, MEGA.

Dr Andrea De Silva-Sanigorski – Associate Professor, McCaughey Centre.

Dr Adrian Bickerstaffe – Research Fellow, MEGA.

Senior Staff Appointments

Professor Billie Giles-Corti, the Foundation Director of the Centre for the Built Environment and Health at the University of Western Australia, has been appointed McCaughey Centre Director from July 2011. For the last 15 years, Professor Giles-Corti has been at the forefront of developing a new field in health promotion, focused on understanding environmental factors that contribute to community wellbeing and which influence physical, social and mental health. In recent years, her research has been expanded to include a range of the social determinants of health, including sense of community, social capital, urban design, safety and fear of crime. She has studied the impact of the built environment across the life course from children through to older adults with the aim of influencing urban design policy and practice to create healthy and sustainable communities. She is recognised nationally and internationally for her research. She has over 200 publications, including 126 refereed journal articles, many highly cited, and 73 technical reports with substantial policy impact. She is frequently invited to contribute to international conferences and seminars. In the last five years, she has attracted research funding of around \$8 million.

Professor Rob Moodie became the School's first Director of Teaching and Learning, and was appointed to a Chair in Public Health. Prior to this he was the inaugural Chair of Global Health at the Nossal Institute for Global Health (NIGH). He first worked in refugee health care in the Sudan and later for Congress, the Aboriginal community controlled health service in Central Australia. He was the inaugural Director of Country Support for UNAIDS in Geneva from 1995-98, and was CEO of VicHealth from 1998-2007. He chaired the National Preventative Health Taskforce from 2008-2011 and was a member of the Commission on AIDS in the Pacific. He chairs the technical advisory panel of the Gates Foundation's HIV prevention program in India. He has particular interests in non-communicable diseases and HIV/AIDS and teaches a number of courses here and in Mozambique on public health leadership and health promotion. He has co-edited and co-authored four books including *Promoting Mental Health*, *Hands on Health Promotion* and his latest, *Recipes for a Great Life* written with Gabriel Gaté. Professor Moodie will oversee the development and running of graduate subjects within our degree programs (particularly the Master of Public Health (MPH)), in the Melbourne Medical School's Doctor of Medicine (MD), and in the planned intercalated MPH/MD. He will chair the School's Teaching

and Learning Committee, Graduate Programs Committee and our Graduate Health Professional Degrees Committee (overseeing our contributions to the MMS's MD program). Professor Moodie will teach into and coordinate the School's various subjects in public health leadership and management and in health promotion in which he has previously been involved. In addition, Professor Moodie will have a role across the Graduate Schools and Institutes of MDHS in promoting research and knowledge exchange in the prevention of, and in health promotion related to, non-communicable diseases.

Professor Philip Clarke is the School's inaugural Chair in Health Economics, situated in CHPPE. Professor Clarke completed his Bachelor of Economics at the University of Newcastle, Master of Economics at the University of Sydney, and a PhD in Health Economics at the Australian National University. He has held faculty appointments at the University of Oxford, the Australian National University, and most recently at the University of Sydney's School of Public Health. He holds visiting appointments at the Harvard School of Public Health, the University of Chicago, the University of Oxford, and at Lund University in Malmö, Sweden. At a time when Australia's health care system is engaged in significant change as a result of the recommendations of the National Health and Hospitals Reform Commission (NHHRC), the National Primary Health Care Strategy (NPHCS) and the National Preventative Health Strategy (NPHS), Professor Clarke will strengthen the School's existing capability in health economics and health policy as one of Australia's brightest health economists. Professor Clarke will lead the development of an overarching health economics research strategy that will substantially enhance our international standing in this area, and further build capacity in this important discipline.

Dr Peter Kremer commenced within the McCaughey Centre as Senior Research Fellow working on the DEECD Research and Evaluation Partnership's Data Linkage Project.

TEACHING AND LEARNING

New Master of Public Health

The MPH has been restructured for entry in 2011 post-Public Health Education and Research Program (PHERP), with substantial collaboration and input from staff of NIGH. A record total of 104 students enrolled, including 34 international students.

AusAid Graduate Students

On 26 October we hosted a function for our Australian Agency for International Development (AusAID) funded students. AusAID has supported awards and scholarships to citizens from developing countries around the world for study opportunities in Australia since the 1950s to develop capacity, linkages and leadership skills so that they can contribute to development in their home country. The University hosts 202 AusAID scholars, of whom 45 are enrolled in our courses, mainly the MPH. The 45 students make up a significant proportion of our international students and the School hosts more AusAID students than any other school or department within the University. Our AusAID students are from Africa, Asia and the Pacific region. Next year, AusAID is offering more scholarships in Africa and for the first time South America. The World Health Organisation (WHO) estimates that globally there is a shortfall of some 2.4 million health workers.

The function was well attended by over 30 students and was a great opportunity for staff to meet our AusAID scholars and gather feedback. The students themselves are very keen to take an active role in the School and with the leadership of Professor Moodie we anticipate deeper engagement with our current students and alumni.

AUSTRALIAN DEVELOPMENT SCHOLARSHIP STUDENT PROFILES



CHARLES MAKASI

What course are you doing?
Master of Public Health.

What was your pathway to studying at the University of Melbourne? I am trained as a medical doctor, completing my studies at the University of Dar-es-salaam in the 2000. In 2002, I began to work as a medical researcher for the National Institute for Medical Research (NIMR), which is

the largest research institute in Tanzania. My first assignment was in Handeni District, north-eastern rural Tanzania. This is traditionally a pastoral area where many traditional Masaai live. My first research project was 'Study 13-Tanzania' where

a protocol was being implemented. This was a clinical trial sponsored by the WHO/NIMR, which was testing the survival benefit of a suppository as pre-referral treatment for malaria when patients cannot reach injectable treatment rapidly. Part of the recruitment process in study 13-Tanzania included community mobilisation, and community health education on Malaria and other infectious diseases. This is where my journey to public health started.

How did the Australian Development Scholarship assist you in your studies? AusAID provides a scholarship, which covers my school fees and supports my living expenses in Australia. The scholarship also offers a lot of academic and social support.

What do you plan to do upon completion of your course, and how will your course assist you? I am planning to go back to Handeni and answer the rest of the scientific questions from the previous study, 13-Tanzania. I also plan to design a lot of health research studies to improve the health system in Tanzania and elsewhere.

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NORMA BULAMU

What course are you doing? The Master of Public Health.

What was your pathway to studying at the University of Melbourne? I responded to an advertisement for scholarships from AusAID through the Ministry of Education in Uganda. I was shortlisted, interviewed and offered the scholarship.

Why did you choose to do your course at the University of Melbourne? Pursuing a career in public health was my goal so as to obtain a broader perspective of health and be equipped to address the dynamic global health challenges. I chose the University of Melbourne because it offers the best MPH program in Australia.

How did the Australian Development Scholarship assist you in your studies? The scholarship has assisted me a great deal; I would not be in position to afford the tuition fees and living expenses here in Australia if I did not have the scholarship. In

addition, the IAP program run by AusAID through the University was a great way for me to transition from the traditional learning system back home to the system here in Australia.

Can you recall a particularly interesting day/event during your course? My course has been fascinating thus far with lots of new things to learn on a daily basis both in class and in the society. The free interaction between lecturers and students is very helpful for learning especially at masters' level.

Describe for us your student life. I have not had any other commitments besides the course thus far. In the social arena, I have been able to find a church that I go to every Sunday; this is a lovely community with great people. The AusAID student community at the University regularly organises excursions and social occasions, which are a great opportunity to socialise with fellow students. The Ugandan community in Melbourne also organises social events such as on 9 October, which is Uganda's independence day. This is a fantastic opportunity to meet fellow Ugandans living in Melbourne.

What do you plan to do upon completion of your course, and how will your course assist you? I plan to pursue a career in health economics and economic evaluation under the big umbrella of public health. I hope to go back to Uganda and implement the knowledge I have acquired working directly with the government or indirectly through the non-government organisations.



YOGESH JHA

What course are you doing? I'm doing a Master of Public Health.

What was your pathway to studying at the University of Melbourne? I come from a background in the healthcare industry in Nepal. Having done my graduation in Radiologic Technology and Medical Imaging, I worked as a Radiological Technologist

for a couple of years in a tertiary care university teaching hospital in Nepal. Afterwards, I had an opportunity to be associated with the migration health department of the International Organisation for Migration, which was working in Nepal in coordination with UNHCR for the resettlement of Bhutanese refugees in developed countries. My work was basically related with radiological screening of refugee migrants for infectious diseases, primarily tuberculosis. It was there I got introductory exposure to the public health arena and thought it could be an interesting area to work in. I ended up

as a public health student here at the University of Melbourne after being selected as an AusAID scholar through the Australian Development Scholarship Awards in 2011.

Why did you choose to do your course at the University of Melbourne? The University of Melbourne has been consistently ranked as a premier academic institution not only in Australia but on a global scale. However, the most important thing that influenced my decision to come here was the flexibility in tailoring the course as per a candidate's area of interest.

How did you become aware of the Australian Development Scholarship? Through the internet and national broadsheets in my country that announced applications for postgraduate scholarships.

What do you plan to do upon completion of your course, and how will your course assist you? I haven't come up with any concrete ideas yet. However, I would definitely love to be associated with global health organisations working in my own country as well as other countries in the near future. I think that the Master of Public Health at Melbourne University will transform me into a competent public health professional. I am developing day-by-day, and I think by the time I complete my studies, the broader understanding of preventive medicine and population health strategies will help me to utilise my skills and knowledge in the area of global health.

LEARNING AND TEACHING ENROLMENTS 2006 – 2011

For 2011 there were 425 continuing students within the MSPH postgraduate coursework programs and 66 research higher degree students.

ENR = Enrolments
SL = Effective Fulltime Student Load

PhD	2006		2007		2008		2009		2010		2011	
	ENR	SL	ENR	SL	ENR	SL	ENR	SL	ENR	SL	ENR	SL
Public Health	79		84		85	52.18	99		83	68	92	75
RESEARCH												
*MPubHlth	4		2	1.86	3	2.95	2	0.9	-	-	-	-
*MSocHlth	2		1	.46	3	1.68	3	2.0	-	-	-	-
*MWomensHlth	9		1	1	2	1.28	2	1.1	-	-	-	-
MPhilosophy							3	0.5	3	2	2	2
COURSEWORK												
MBioStat	26		22	6	16	4.88	15	4.4	17	4.8	16	3.75
MEpid	19		26	11.75	15	8.13	11	5.3	14	6.6	16	7
*MIMH	2		2	3	7	3.5	1	0.3	-	-	-	-
MPubHlth	192		199	109.5	219	121.38	261	147.4	281	151.7	324	168.89
MSocHlth (now Master of Health Social Sciences (MHSS))	30		25	10.2	24	10.68	15	4	9	3.5	18	8.62
MWomensHealth	10		10	6.25	9	4.25	6	2.1	2	0.4	1	0.25
PGDIP												
GDipSocHlth	8		7	1.74	7	2.74	5	1.7	2	0.7	-	-
PGDipBio	23		25	6.5	22	7.37	15	4	1	0.13	2	0.38
*PGDipWH	3		1	.25	3	1.74	1	0.5	-	-	-	-
PGCERT												
PGCertBio	6		6	1	3	1	2	0.3	1	0.1	2	0.38
PGCertPubHlth(SexHlth)	14		9	2.25	17	4.5	16	3.9	13	3.6	15	2.87

RESEARCH AND RESEARCH TRAINING

Publication Type	2006	2007	2008	2009	2010	2011
A1 - Books - Authored - Research	3		2		1	
A2 - Edited Books	2	2			5	
A5 - Textbooks	0			1		1
A6 - Authored Books - Other	1	2	1		1	
B1 - Chapters in Research Books	6	11	11	16	14	9

*Discontinued

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Publication Type	2006	2007	2008	2009	2010	2011
B2 - Chapters in Books	5	11		9	14	12
C1 - Journal Articles - Refereed	204	222	249	243	268	328
C2 - Unrefereed Journal Articles	15	14	20	13	6	3
C3 - Unrefereed Letters or Notes	23	18	31	28	14	23
C5 - Other Refereed Contributions to Refereed Journals	11	10	11	30	34	44
D4 - Major Reference Works	1		5	1	6	1
E2 - Editorial Board Member				4		
E3 - Guest Editor				1		
F - Conference Proceedings						1
F1 - Conference Publications - Full written paper - refereed	0	10	4	2	3	8
F2 - Fully Written Unrefereed Conference Papers	7	4	1	1		1
G4 - Major Reports	36	33	38		31	
G5 - Minor Reports/Working Papers	5	6	2	-1	3	1

PHD COMPLETIONS

Name	Supervisors	Thesis Topic
Hayes , Barbara Jean	Gillam L, Cartwright C, Lim K	Ethical CPR decision-making.
Armstrong , Rebecca Louise	Waters E, Burns C	Evidence-informed public health decision-making in local government.
Nasir , Sudirman	Kavanagh A, Rosenthal D, Moore T, Mallett S	Stories from the Lorong: Drug use and non-drug use among young people in a slum area in Makassar, Indonesia.
Riggs , Elisha May	Waters E, Gibbs L, Gussy M	Addressing child oral health inequalities in refugee and migrant children.
Otim , Michael Ekubu	Kelagher M, Carter R, Anderson I, Doran C	Priority setting in health: Contextualising the Program Budgeting and Marginal Analysis (PBMA) in Indigenous health.
Walker , Jennifer Gaye	Hocking J, Fairley C, Gurrin L, Bradshaw C	The epidemiology of Chlamydia trachomatis and Mycoplasma genitalium in young Australian women.
Fethers , Katherine Ann	Fairley C, Bradshaw C	Bacterial vaginosis: A riddle, wrapped in a mystery, inside a vagina.
Ong , Katherine Susan	Carter R, Anderson I, Kelagher M	A method for incorporating vertical equity for disadvantaged groups into health economics evaluations: Cost based equity weights applied to the Australian Aboriginal and Torres Strait Islander population.

MASTER OF PHILOSOPHY COMPLETIONS

Van Dort , Pauline Troy	Dunt D, Day S	An exploration of the model of reciprocal determinism in an aged care environment.
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Professor Terry Nolan and Mr Greg Massey.



Professor Terry Nolan and Dr Yin Paradies



Professor Terry Nolan and Dr Aung Ko Win.

2011 MELBOURNE SCHOOL OF POPULATION HEALTH AWARDS FOR EXCELLENCE

Head of School Commendation

Mr Greg Massey

This year the School recognised a member of the University's Property and Campus Services for his outstanding contribution to MSPH. Mr Greg Massey received a Head of School Commendation for Excellent Provision of Building Services. Mr Massey is a first class Building Supervisor for 207 Bouverie Street and goes out of his way to help people, his cheery presence is great for staff morale and he has an uncanny ability to find solutions to any problem, no matter how large or small.

Career Development/New Researcher

Dr Yin Paradies, McCaughey Centre: VicHealth Centre for the Promotion of Mental Health and Community Wellbeing

Dr Yin Paradies thoroughly deserves the New Researcher Award; in fact, he would give many established researchers a run for their money. His work on the impacts of racism on health and wellbeing is groundbreaking. It has been recognised in academic circles, as evidenced by the fact that over the last three years Dr Paradies has secured grants of over \$4.1 million and published 18 journal articles (often in high ranking journals). Perhaps more importantly, his work has influenced policy and professional practice; his advice is regularly sought in a range of high-profile racism forums. Dr Paradies combines strong conceptual thinking with a passion for his subject matter. He is not only a talented and productive researcher, he has found time to serve the relevant practice sector with significant and impactful contributions of his expertise. Dr Paradies has been successful in attracting grant funding and his publications are impressive in terms of quality and quantity, particularly as it is less than five years since receiving his PhD.

Career Development/New Researcher

Dr Aung Ko Win, MEGA

Dr Aung Ko Win is already establishing himself as an internationally respected researcher in the area of modifiers of cancer risk for people who have inherited a mutation in mismatch repair genes, and are therefore at substantial risk of developing a range of cancers. This is despite the fact that he only began his PhD in 2010. He was recognised by the School as someone with immense potential when he completed his MPH in 2009, and is definitely living up to that potential. He has published 13 journal articles in the last two years (nine as first author), has another six submitted, and another eleven on the go! His work has direct relevance for genetic counselors and health professionals. A strong case is made in the application that his research is of a high standard and is addressing problems of relevance to the care of cancer patients, as well as being of relevance to prevention. His strengths in research methodology enhance not only his own studies but promise to be of benefit to research more generally. Not only is he working with world-leading collaborators, he is himself leading significant pieces of work as evidenced by his first-authorship of

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a number of journal publications and conference presentations. Given his short research career and that he has yet to complete a PhD, he has been remarkably productive.

Award for Excellence in Knowledge Transfer Achievement
Viki Briggs, Nicole McMillan, Anke van der Sterren,
Christine Joy, Deb Knoche, Alister Thorpe, Vanessa
Vine, Dallas McKeown-Young, Ngarra Murray and Sarah
McMillan, Centre for Excellence in Indigenous Tobacco
Control (CEITC), CHS

There are alarmingly high rates of smoking among Indigenous Australians (47%) and the devastating burden of tobacco-related disease is a major public health problem. Since CEITC's inception in 2003, CEITC has made important contributions to tackling this problem, particularly through community education programs and tobacco control "toolkits" that have been distributed widely. Smoking in Indigenous populations is now on the national preventive health agenda, and CEITC has played a role in achieving this. This group has done outstanding work and is making a real contribution.

Award for Excellence in Knowledge Transfer Achievement
Professor Elizabeth Waters, Associate Professor Andrea
de Silva-Sanigorski, Lauren Carpenter, Lauren Prosser,
Shalika Hegde, Rhydwyn McGuire, Adina Heilbrunnand
and Deborah Cole (Chief Executive Officer of the Dental
Health Services Victoria), Australian Population Health
Improvement Research Strategy (APHIRST) – Oral Health
Team, McCaughey Centre

Established in 2010, the Australian Population Health Improvement Research Strategy for Oral Health (APHIRST-OH) has quickly become a model for knowledge transfer between University researchers and health services delivery. Its activities around identification and promulgation of best practice in population oral health are particularly impressive.

Award for Excellence in Knowledge Transfer Doctoral
Research

Associate Professor Stephen Lambert, Vaccine and
Immunisation Research Group (VIRGo)



As part of his PhD work, Associate Professor Stephen Lambert developed and validated a cheap, straightforward and effective method for specimen collection in cohorts of children. The method involves enlisting parents to conduct minimally-invasive nasal and throat swabs. By providing an alternative to the costly and inefficient step of having to obtain these samples in a clinical

setting, this method has opened up new possibilities for studying infectious diseases in paediatric populations. Associate Professor Lambert and his collaborators have shared their findings widely, and provided assistance to other researchers around the world who have adopted this approach. Their innovation is changing the way community-based respiratory virus research is being conducted. It is a wonderful achievement in knowledge transfer.



Back row from left: Dallas McKeown-Young, Chris Joy, Keagan James (A.K.A Deadly Dan the Smoke Free Man), Brad Firebrace and Ngarra Murray. Front row from left: Anke van der Sterren, Viki Briggs, Nicole McMillan and Terry James.



Back row from left: Associate Professor Andrea de Silva-Sangiorski and Lauren Prosser. Front row from left: Lauren Carpenter and Shalika Hegde.



Award for Excellence in Teaching

Professor Janet McCalman, CHS



Professor Janet McCalman is clearly worthy of an award for teaching, given her development of two major new University Breadth Subjects (UBS) (which are undertaken by undergraduate Melbourne Model degree students) and the success of these. Professor McCalman has utilised innovative approaches, especially using blogs. She has also supported others to develop UBS, a nebulous concept in the Melbourne Model initially and yet Professor McCalman was able to make it a success based on the numbers enrolled and Quality of Teaching (QoT) scores. It involves massive innovation in ideas and bringing together an interdisciplinary and inter-faculty team, a major undertaking indeed. Good feedback was obtained from students using quantitative and qualitative methods, and gaining such favourable feedback from a diverse undergraduate student body is meritorious in its own right. Professor McCalman dares to take on something different, which many of us would not attempt. She deserves the teaching award for her outstanding effort.

Award for Excellence in Teaching

Associate Professor Julie Simpson, MEGA



Dr Julie Simpson has consistently achieved remarkably high QoT scores for the statistics subjects she teaches. Her classes are the largest taught within the MPH and as Dr Simpson notes, statistics subjects are usually not high on students' list of preferred or enjoyed subjects. Dr Simpson is an excellent biostatistics lecturer engaging her students using innovative teaching and

learning methods in delivering a difficult and often dry subject. She also has to teach the concepts to a diverse group of mature age students from different cultural and career backgrounds. Dr Simpson uses practical examples in her subjects, role-play and small group work.

MANAGEMENT AND GOVERNANCE

School Advisory Group, Mr John Brumby, Chair.

Student & Staff Liaison Committee, Professor Terry Nolan, Chair.

Staff Convocation, Professor Terry Nolan, Chair.

South of Grattan Street IT (SGSIT) Cluster Committee, Professor Dallas English, Chair, Professor Richard Dowell (Department of Otolaryngology), Deputy Chair, Ms Rebecca Bond, Deputy Chair.

Executive Committee, Professor Terry Nolan, Chair, Professor David Studdert, Deputy Chair.

Finance Committee, Professor Terry Nolan, Chair, Ms Rebecca Bond, Deputy Chair.

Research Committee, Professor Jane Pirkis, Chair.

Career Development Committee, Professor Anne Kavanagh, Chair.

Teaching and Learning Committee, Professor Terry Nolan, Chair.

Marketing, Advancement and Knowledge Exchange (MAKE) Committee, Ms Rebecca Bond, Chair.

OHSE Committee, Professor Terry Nolan, Co-Chair, Ms Rebecca Bond, Co-Chair.

Human Ethics Advisory Group, Professor David Studdert, Chair.

Higher Degree by Research Committee, Associate Professor Jane Hocking, Chair.

Graduate Programs Committee, Professor David Dunt, Chair.

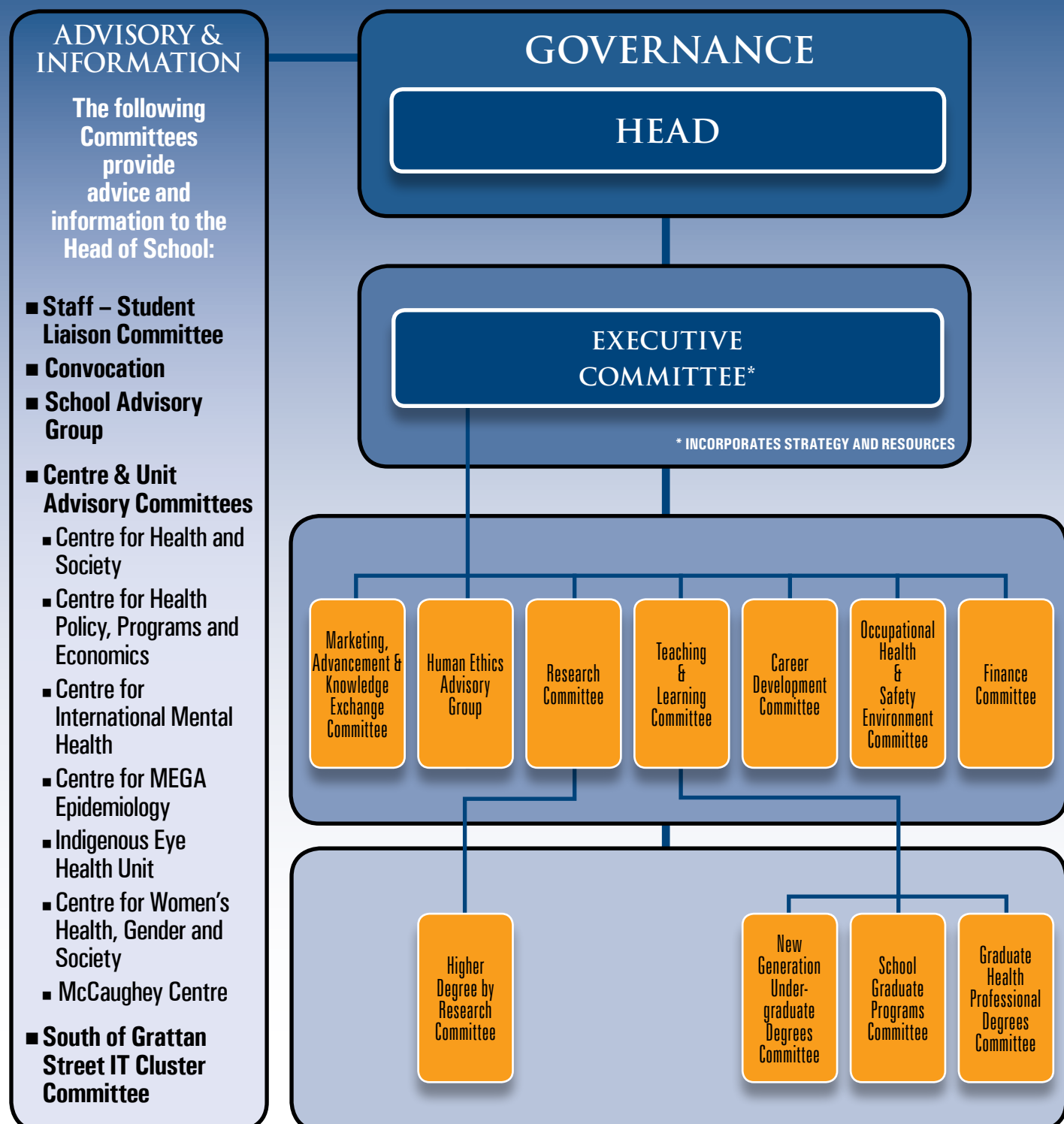
Graduate Health Professional Degrees Committee, Professor David Dunt, Chair.

New Generation Undergraduate Degrees Committee, Professor Janet McCalman, Chair.

SUMMARY REPORT

MELBOURNE SCHOOL OF POPULATION HEALTH COMMITTEE STRUCTURE

(AGREED BY SCHOOL EXECUTIVE COMMITTEE 14/07/2010)





RESEARCH INCOME

Research Income:

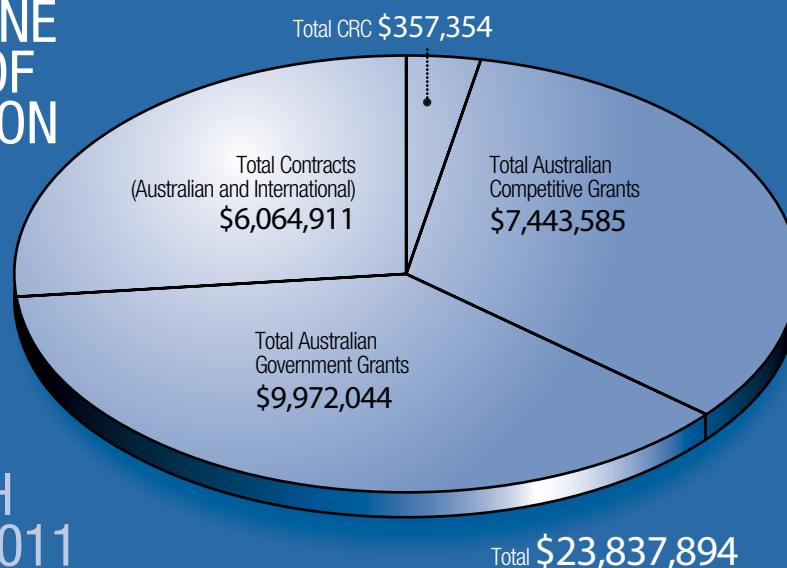
2011 Higher Education Research Data Collection (HERDC)

C1 = Total Australian Competitive Grants
C2 = Total Australian Government Grants
C3 = Total Contracts (Australian and International)
C4 = Total CRC

Dest Cat	2007	2008	2009	2010	2011
C1.1	\$3,375,494	\$5,632,896	\$6,804,235	\$6,215,996	\$7,224,011
C1.2	\$135,794	\$179,871	\$197,657	- \$277	\$219,574
C1	\$3,511,288	\$5,812,767	\$7,001,892	\$6,215,720	\$7,443,585
C2.1	\$47,273	—	\$19,725	\$37,673	\$47,000
C2.2	\$3,218,207	\$3,645,644	\$3,644,995	\$4,176,420	\$3,769,984
C2.3	\$3,502,043	\$4,164,943	\$4,269,901	\$8,435,459	\$6,155,060
C2	\$6,767,522	\$7,810,587	\$7,934,621	\$12,649,551	\$9,972,044
C3.1	\$1,226,542	\$1,281,099	\$505,989	\$565,222	\$485,453
C3.2	\$726,791	\$665,461	\$1,232,622	\$2,362,672	\$1,093,913
C3.3	\$113,583	\$575,661	\$1,685,816	\$885,745	\$2,424,557
C3.5	\$2,629,359	\$1,906,454	\$2,185,728	\$2,743,578	\$2,060,985
C3.5A	\$2,057,336	\$1,818,063	\$2,151,682	\$1,997,114	\$1,250,322
C3.5B	\$572,023	\$88,391	\$34,046	\$746,464	\$611,888
C3.5Cc					198,779
C3	\$4,696,274	\$4,428,675	\$5,610,156	\$6,557,217	\$6,064,911
C4.1	\$206,524	\$481,781	\$482,346	\$266,470	\$357,354
C4.2	\$24,641	\$62,971	\$63,045	—	—
C4.3	\$103,730	\$142,901	\$157,219	\$57,399	—
C4	\$334,894	\$687,653	\$702,609	\$323,869	\$357,354
Total	\$15,309,980	\$18,739,683	\$21,404,326	\$25,746,357	\$23,837,894

MELBOURNE
SCHOOL OF
POPULATION
HEALTH

RESEARCH
INCOME 2011



SUMMARY REPORT

GRANTS COMMENCING 2011

Sponsor	Responsible CI	Description	Grants Income
ARC Linkage Grants			
Partners: Melbourne Citymission, VicHealth, Victorian Women with Disabilities Network	Professor Anne Kavanagh, Dr Rebecca Bentley, Associate Professor Tony LaMontagne , Dr Emma Baker, Dr Shelley Mallet and others	The importance of gender and socio-economic disadvantage for the mental health of people living with disabilities.	\$204,425 over 4 years
Partners: Hanover Welfare Services, Melbourne Citymission, VicHealth	Dr Rebecca Bentley , Dr Emma Baker, Dr Shelley Mallett, Associate Professor Tony LaMontagne , Professor Anne Kavanagh , Dr Deb Keys and others	New directions in health inequalities research: understanding the intersection between housing, employment and health in Australia.	\$130,000 over 3 years
Partners: Family Planning Victoria Inc, Melbourne, IVF Pty Ltd, Royal Women's Hospital, Victorian Department of Health	Associate Professor Jane Fisher, Dr Heather Rowe, Ms Sara Holton and others	Understanding fertility management in contemporary Australia.	\$210,000 over 4 years
Partners: Australian Human Rights Commission, VicHealth	Dr Yin Paradies, Associate Professor Margaret Kelaher, Associate Professor Tony LaMontagne, Dr Marion Frere and others	Addressing race-based discrimination in Australia: A cost-benefit analysis.	\$150,000 over 4 years
Partners: Australian Red Cross, Australian Rotary Health, Banyule Community Health Service, Bendigo Loddon Primary Care Partnership, Central Hume Primary Care Partnership, Central West Gippsland Primary Care Partnership, Centrelink, Lower Hume Primary Care Partnership, Outer East Health and Community Support Alliance, Victorian Department of Health	Professor Elizabeth Waters, Dr Lisa Gibbs and others	Bushfires, social connectedness and mental health.	\$1,285,047 over 6 years
ARC Discovery Projects			
	Professor John Hopper, Associate Professor Mark Jenkins, Dr Enes Makalic, Dr Daniel Schmidt	Information theoretic approaches to optimise genome wide association studies with application to continuous and discrete traits.	\$345,000 over 3 years
	Dr Rebecca Kippen, Associate Professor Hamish Maxwell-Stewart , Dr Daminda Alahakoon, Dr James Bradley, Associate Professor Shyamali Dharmage , Mr Kris Inwood, Professor John Mathews , Mr Michael Shields	Convicts and Diggers: a demography of life courses, families and generations.	\$443,000 over 3 years
	Professor Janet McCalman	Land and life: Aborigines, convicts and immigrants in Victoria, 1835-1985: an interdisciplinary history.	\$510,000 over 3 years
	Associate Professor Jodie McVernon, Dr Kevin Korb , Ms Kathryn Glass, Dr James McCaw , Dr Emma McBryde	Development of an 'ageing household' model for assessing medium to long-term vaccine impact in populations.	\$364,771 over 3 years

	Professor Kevin Dunn, Heather MacDonald, Dr Yin Paradies , Dr Rae Dufty (administered by University of Western Sydney)	Ethnic discrimination in the private rental housing market.	\$442,000 over 3 years
NHMRC Capacity Building Grant			
	Associate Professor Tony LaMontagne	Linking research, policy and health services to build a better evidence base for workplace public health.	\$57,375 over 2 years
NHMRC Program Grant			
	Professor Kerin O'Dea, Dr Kevin Rowley and others (administered by the University of South Australia)	Improving chronic disease outcomes for Indigenous Australians: Causes, Interventions, System Change.	\$8.19 million over 5 years
NHMRC International Collaborative Indigenous Health Research Partnership (Grant on Resilience)			
	Mr Shaun Ewen and others (administered by the University of Western Australia)	Educating for equity: Exploring how health professional education can reduce disparities in chronic disease care and improve outcomes for Indigenous populations.	\$2.08 million (2010-2014)
	Professor Ian Anderson	Strengthening health literacy among Indigenous people living with cardiovascular disease, their families, and health care providers.	\$497,046 (2010-2012)
NHMRC Training Fellowship			
	Dr Naomi Priest	Reducing inequalities in Indigenous child health by combating racism and social exclusion.	\$285,000 over 4 years
NHMRC Project Grant			
	Dr Melanie Matheson, Professor John Hopper, Associate Professor Shyamali Dharmage, Dr James Dowty, Dr Adrian Lowe	A population-based family study of filagrin mutations and allergic disease risk in Australia.	\$299,800
	Associate Professor Lyle Gurrin and others	Environmental risk factors for iron overload-related disease in a cohort study of hereditary haemochromatosis.	\$149,013
	Associate Professor Jane Fisher, Dr Tuan Tran & others	Does weekly iron supplementation increase iron uptake in pregnant women and improve maternal and infant health?	\$800,900
	Associate Professor Mark Jenkins, Professor John Hopper, Dr James Dowty and others	New high-risk variants for colorectal cancer: the post-GWAS era.	\$680,875
	Associate Professor Jane Fisher and others (administered by Murdoch Childrens Research Institute)	Comparison of health and development of young adults born with and without assisted conception.	\$457,200
NHMRC Capacity Building Grant			
	Associate Professor Tony LaMontagne	Linking research, policy and health services to build a better evidence base for workplace public health.	\$57,375 over 2 years.

SUMMARY REPORT

Other Grants			
Victorian Cancer Agency Translational Cancer Research Grant	Associate Professor Mark Jenkins	What do people in mutation-carrying families understand about bowel cancer gene testing, personal risk and prevention behaviors?	\$452,505 over 3 years.
Two VicHealth Innovation Grants	Dr Naomi Priest and Dr Lisa Gibbs		
Victorian Cancer Agency Early Career Seed Funding	Dr Jennifer Stone	The genetic and environmental determinants of mammographic density, a potential clinical tool to predict breast cancer risk.	\$110,000
Helen MacPherson Smith Trust Research Grant	Professor John Wiseman	Development of the CIV capacity building program	\$50,000
beyondblue National Depression Initiative grant	Associate Professor Jane Fisher	New parent's views about the prevention of postnatal depression and anxiety with a new internet resource.	\$50,000.
Dental Health Services Victoria Research and innovation Grant	Dr Andrea Sanigorski	Prevention of early childhood caries with the Caries Management by Risk Assessment (CAMBRA) Protocol – a pilot study to test the application of this intervention in culturally diverse communities in Victoria.	\$32,500 over 2 years
Australian Research Alliance for Children and Youth Seed Funding	Dr Lisa Gibbs	Bushfire recovery – hearing children's voices.	\$15,000
VicHealth Research Project Grant	Professor Anne Kavanagh	Accessibility and price of Alcohol beverages and consumption – findings from VicLanes.	\$13,506
Academy of Social Sciences Joint-Action Bilateral Research Program Grant	Dr Richard Chenhall	Support systems for alcohol related problems in Japan: Self-help groups and the medicalisation of alcoholism.	\$7500
Faculty of Medicine, Dentistry and Health Sciences (MDHS) Equipment Grant	Professor John Hopper	Hitachi data systems storage and backup infrastructure.	\$40,000
University of Melbourne Early Career Researcher Grant	Dr Richard Chenhall	Developing a response: Indigenous youth with co-occurring mental health and volatile solvent abuse problems.	\$40,000
University of Melbourne Sustainable Research Excellence (SRE) Implementation Project Funding	Professor Terry Nolan, Ms Rebecca Bond, Dr David Cookson and Dr Simon Kerr	<i>School executive:</i> Fully funded research? Macro and micro funding cultures.	\$100,000



58,000 TO BE RECRUITED FOR MALE HEALTH STUDY

Two centres within the Melbourne School of Population Health are jointly leading Australia's first major longitudinal study of male health. The Australian Longitudinal Study on Male Health, called 'Ten To Men', will recruit 58,000 males between the ages of 10 and 55 to take part in a broad-ranging program of research.

Funded by the Commonwealth Department of Health and Ageing, the study was commissioned under the Federal Government's 2010 national male health policy. It is charged with providing the evidence base that will inform the development of policies and programs, says Dr Dianne Currier, Ten To Men's study coordinator. "Establishing a strong evidence base will enable us to answer questions such as why men do worse than women on a range of health outcomes, including life expectancy."

The study's two chief investigators are Professor Jane Pirkis, Director of CHPPE (Centre for Health Policy, Programs and Economics), and Professor Dallas English, Director of MEGA (Molecular, Environmental, Genetic and Analytic) Epidemiology. The study was commissioned in June 2011 and at the end of 2011, the infrastructure for Ten To Men was being developed.

Young males will be over represented because, as a group, until now, they have been under researched, Dr Currier says. 7,500 will be recruited for each of two groups: boys aged 10 to 15 and youths aged 16 to 17. "This allows us to examine key transition points in men's lives and the impact it has on lifestyles and health. We can follow these younger groups through school, as they enter the workforce, establish relationships and become fathers." She says this will present policy opportunities for supporting the health and wellbeing of Australian males at these key life stages.

The study's focus on the social, environmental,



behavioural and cultural determinants of health is a novel aspect, as is a planned analysis of the most effective ways to recruit participants for such a major study. Schools, the Australian Electoral Roll and Medicare enrollments are the recruitment methods to be trialled. "The determinants we will consider include masculinity and health, work environments, housing, and, of course, socio-economic status," she says. "We hope to gain a better understanding of the cause and effect relationships between these determinants and male health."

Dr Currier says the rich data resources that Ten To Men is expected to yield would benefit other researchers in the future – but how far into the future would depend on the department's continuing support. "Every year the study continues will reveal more – allowing us to drill down deeper."

SUMMARY REPORT

GRANTS AWARDED 2011

Sponsor	Responsible CI	Description	Grants Income
NHMRC Project Grants for 2012			
	Associate Professor Shyamali Dharmage, Professor Haydn Walters, Dr Melanie Matheson , M Abramson, G Hamilton, Associate Professor Lyle Gurrin , D Johns, P Thomas.	What are the lifetime clinical predictors and risk factors for multiple phenotypes of adult Asthma, COPD and Sleep Disordered Breathing? Following up the TAHS cohort from 1st to 6th decade.	\$1,865,879 from 2012-2015
	Professor Dallas English, J Young, D Buchanan, Dr Laura Baglietto, Dr Daniel Schmidt, Dr Enes Makalic, Dr Elizabeth Williamson.	DNA methylation as a risk factor for colorectal cancer.	\$764,840 from 2012-2013
	Associate Professor Jane Hocking, Associate Professor Marcus Chen , S Tabrizi, W Huston, P Timms, R Guy.	Evaluation of Chlamydia trachomatis treatment failure: a cohort study of women.	\$735,992.50 from 2012-2014
	Professor John Hopper, Dr Gianluca Severi, Minh Bui , M Inouye, A Kowalczyk, Dr Enes Makalic , D Park, Dr Daniel Schmidt , J Zobel.	Complex statistical analyses of genome-wide association studies related to breast and prostate cancers using high performance supercomputing.	\$634,435 from 2012-2014
	Dr Catriona Bradshaw , S Tabrizi, Associate Professor Jane Hocking.	Investigation of candidate aetiological organisms of bacterial vaginosis in diverse and unique epidemiological and clinical studies.	\$546,175 from 2012-2014
	Dr Julie Simpson , R Price.	Optimising severe malaria treatment using pharmacokinetic-pharmacodynamic modeling.	\$211,175 from 2012-2014
	Professor John Mathews.	Modelling the possible effects of low-dose irradiation in young Australians exposed to CT scans.	\$128,690 for 2012
	Melissa Southey, Professor Graham Giles, Dr Daniel Schmidt, Dr Enes Makalic (UoM Dept of Pathology).	Methylation as a risk factor for prostate cancer.	\$964,363 from 2012-2013
Externally administered, Menzies School of Health Research	Ross Andrews, Kerry-Ann O'Grady, Professor Terry Nolan , Peter Richmond, Nick Wood, Helen Marshall, Associate Professor Stephen Lambert, Mark Chatfield.	<i>FluMum</i> : a prospective cohort study of mother-infant pairs assessing the effectiveness of maternal influenza vaccination in prevention of influenza in early infancy.	\$2,481,063 from 2012-2016
Externally administered, Cancer Council Victoria	Dr Laura Baglietto, Professor Dallas English , B Mann.	Risk of recurrence after diagnosis of invasive breast cancer by molecular subtype as defined by ER, PR and her2 status.	\$484,475 from 2012-2014
Externally administered, Queensland Institute of Medical Research	J Young, Associate Professor Mark Jenkins, Dr Aung Ko Win , D Buchanan, C Rosty.	Young Onset Colorectal Cancer: Genetics Pathology and Environment.	\$303,750 from 2012-2013

Externally administered, Murdoch Childrens Research Institute	Martin Delatycki, K Allen, Associate Professor Lyle Gurrin , L Powell, D Crawford, G Ramm, A Nicoll, E Wood.	Venesection or expectant management for moderate iron overload in HFE related hereditary haemochromatosis.	\$824,258 from 2012-2014
Externally administered, National Ageing Research Institute	David Ames, N Lautenschlager, K Hill, B Dow, E Cyarto, Dr Melissa Russell , K Moore.	A randomised controlled trial to improve depression in family carers through a physical activity intervention.	\$697,797 from 2012-2016
Externally administered, UNSW	B Liu, L Jorm, D Preen, Associate Professor Jane Hocking , B Donovan, C Roberts, J Ward, D Mak.	A population-based record linkage study of the impact of chlamydia infection on reproductive health in women.	\$392,260 from 2012-2014
NHMRC Partnership Project for 2012			
	Professor Anne Kavanagh , B Hewitt, Associate Professor Tony LaMontagne , Dr Louise Keogh , Fiona Judd, Associate Professor Lyle Gurrin , Dr Rebecca Bentley .	Does paid parental leave improve a young mothers' social and economic participation and mental health?	\$532,235 from 2012-2016
NHMRC Fellowships			
	Professor John Hopper.	Senior Principal Research Fellowship.	\$844,860 from 2012-2016
	Associate Professor Shyamali Dharmage.	Senior Research Fellowship.	\$580,910 from 2012-2016
	Associate Professor Mark Jenkins.	Senior Research Fellowship.	\$580,910 from 2012-2016
	Associate Professor Lyle Gurrin.	Career Development Award.	\$432,568 from 2012-2015
NHMRC Centre for Research Excellence (CRE) Funding			
Administered by University of Sydney	G Marks, B Jalaludin, M Abramson, G Williams, S Leeder, A Jones, G Morgan, Associate Professor Shyamali Dharmage.	CRE (Population Health) successful bid for Understanding and ameliorating the human health effects of exposure to air pollution from knowledge to policy and public health practice.	\$2,411,828 over 5 years from 2012-2016
Administered by Murdoch Childrens Research Institute	Professor John Carlin , A Forbes, R Wolfe, Associate Professor Lyle Gurrin , Dr Julie Simpson , M Cory.	CRE (Victorian Centre for Applied Biostatistics) successful bid for Building core methodological capacity for population health.	\$2,497,184 over 5 years from 2012-2016
ARC Linkage Grants for 2012			
Partners: The Australian Human Rights Commission, Victorian Equal Opportunity and Human Rights Commission, Victorian Health Promotion Foundation	Dr Yin Paradies , Kevin M Dunn, Bernard Guerin, Anne Pedersen, Scott Q Sharpe and Maria H Hynes.	An exploration of the frequency, outcomes, enablers and constraints of bystander anti-racism.	2011: \$30,000; 2012: \$56,000; 2013: \$44,500 and 2014: \$18,500
	Dr Yin Paradies and others.	Using museums to counter racism and increase acceptance of diversity among young people.	\$175,242 over 3 years

SUMMARY REPORT

	Associate Professor Jodie McVernon, Professor Terry Nolan and others.	Networks, neighbourhoods and newborns: defining household and local area influences on social connectedness, to understand pathways to health.	\$154,000 over 3 years
Other Grants			
Columbia University, National Institute of Health (NIH) Research Project Grant	Professor John Hopper.	Genes, Environment and Breast Cancer Risk: the 15 year follow-up of the PROF-SC.	\$US287,994 from 2011-2012
Foundation for Children Grant	Associate Professor Andrea de Silva-Sangiorski.	Preventing dental decay in young children from disadvantaged communities.	\$159,903 from 2011-2012
Victorian Cancer Agency Palliative and Supportive Care Capacity Building Grant.	Dr Louise Keogh.	A qualitative study of the experience of subtotal versus segmental colorectal cancer resection in individuals with a high future metachronous CRC risk.	\$80,000 from 2011-2012
Australian Communications Consumer Action Network Ltd ACCAN Grants Scheme	Mr Bjorn Nansen.	High-Speed Broadband and Household Media Ecologies.	\$45,934 for 2011
University of Melbourne Research Collaboration Grant	Dr Elise Davis.	Mental health and wellbeing of child care workers.	\$19,615 from 2011-2012
VicHealth Funding Grant for Disability Research Summary	Centre for Women's Health, Gender and Society.	Production of evidence based summary to inform VicHealth's future work in disability and health inequalities.	\$10,800 for 2011
Faculty of Medicine, Dentistry and Health Sciences (MDHS) NHMRC Large Equipment Grant Scheme	Professor John Hopper.	Production level server plus backup for large scale research data.	\$25,000
AusAID Australian Leadership Award Fellowships (ALAF)	Associate Professor Harry Minas.	Mental Health in the Northern East of Sri Lanka. This will fund 13 fellows from Sri Lanka to attend the International Mental Health Leadership Program (IMHLP) run by the Centre for International Mental Health. The 13 fellows will be joined by an additional 13 fellows from Vietnam funded from the Atlantic Philanthropies and further AusAID funding. The IMHLP will be held in September 2011.	\$282,000 for 2011

MELBOURNE SCHOOL OF POPULATION HEALTH PUBLIC SEMINARS 2011

The School continued its very active public seminar series throughout 2011. Some of the highlights included:

Date	Speaker	Presentation
27 April	Professor Hugh Taylor , Harold Mitchell Professor of Indigenous Eye Health, Melbourne School of Population Health, University of Melbourne.	What have football players got to do with clean faces? How to be a one-eyed supporter for trachoma prevention.
11 May	Professor Pip Pattison , Pro-Vice Chancellor, Learning and Teaching, Office of the Provost & Psychological Sciences, University of Melbourne.	Towards an understanding of the role of social networks in health and wellbeing: a modelling approach.
25 May	Associate Professor Harry Minas , Director, Centre for International Mental Health, Melbourne School of Population Health, University of Melbourne.	The movement for global mental health.
8 June	Professor Peter Doherty , Laureate Professor, Microbiology and Immunology, University of Melbourne and Michael F Tamer Chair of Biomedical Research, St Jude Children's Research Hospital, Memphis, USA.	Approaches to influenza immunity.
22 June	Associate Professor Alex Clark , Faculty of Nursing, University of Alberta, Edmonton, Canada.	Progress or pomp? The move to complexity in health outcomes research.
6 July	Dr Martha Morrow , Head, Inclusive Development Practice Unit, Nossal Institute for Global Health, University of Melbourne.	Conducting a baseline survey in the shadow of the Great Leader: politics, minders and research challenges in North Korea.
20 July	Professor Anne Kelso AO , Director, WHO Collaborating Centre for Reference and Research on Influenza, Honorary Professorial Fellow, Microbiology and Immunology, University of Melbourne.	Influenza pandemics, policy and politics.
3 August	Professor Melissa Wake , Director (Research and Public Health), Centre for Community Child Health, RCH, and Professor, Department of Paediatrics, University of Melbourne.	Improving outcomes for deaf children: hand-in-hand population screening, research and translation.
7 September	Associate Professor Andrew Mitchell , Melbourne Law School.	Back in your box: Big tobacco's legal challenges to plain packaging in Australia.
14 September	Professor Trevor Burnard , Professor of History and Head of School, School of Historical and Philosophical Studies, University of Melbourne	Quashie and Bess: Slave names, ethnicity, identity and the pricing of slaves in Jamaica, 1770-1780.
28 September	Professor Sally Green , Co-director, Australasian Cochrane Centre, and Professorial Fellow, Faculty of Medicine, Nursing and Health Sciences, Monash University.	The Sea-Orchid Project: South East Asia – optimising reproductive and child health in developing countries.
12 October	Dr Alan Shiell , Executive Director of the Centre of Excellence in Intervention and Prevention Science (CEIPS) Ltd.	Systems thinking to advance population health.
26 October		MSPH Award Presentation.
9 November	Dr Per Axelsson , Centre for Sami Research, Umea University, Sweden.	A backlash of the welfare state – lessons learned from the Swedish polio epidemics, 20th Ccentury.
23 November	Professor Lyndal Bond , MRC Social and Public Health Sciences Unit, Glasgow, Scotland.	The contribution of regeneration to mental wellbeing in deprived areas in Glasgow, Scotland.
14 December		Christmas Quiz

SUMMARY REPORT

ADVISORY COMMITTEES

CENTRE FOR MOLECULAR, ENVIRONMENTAL, GENETIC AND ANALYTIC EPIDEMIOLOGY

Chair, Professor Alistair Woodward, Head of School, School of Population Health, University of Auckland. Professor Woodward has been Head of the School of Population Health since 2004. His first degree was in medicine and he undertook his postgraduate training in public health in the UK. He has a PhD in epidemiology from the University of Adelaide. Prior to taking up his post at the University of Auckland in 2004 he was Professor of Public Health at the University of Otago, Wellington. Research interests include tobacco control, radio-frequency radiation and health, transport and injury, and climate change. He has worked for the WHO throughout the Pacific, and is a convening lead author for the 5th assessment report of the Intergovernmental Panel on Climate Change. Since 2009 he has been an editor of the Australian and New Zealand Journal of Public Health.

Professor John Lynch, Professor of Public Health, NHMRC, Australia Fellow, Discipline of Public Health, School of Population Health and Clinical Practice, University of Adelaide. Professor Lynch is also Visiting Professor of Epidemiology at University of Bristol (UK). He was previously in the Department of Epidemiology at the University of Michigan (USA) and was a Canada Research Chair in the Department of Epidemiology and Biostatistics at McGill University in Montreal (Canada). In mid 2008 he returned to Australia and took up an appointment at the University of South Australia.

Professor Julian Peto, Research UK Chair of Epidemiology, London School of Hygiene & Tropical Medicine and the Institute of Cancer Research, London. Professor Peto attended Balliol College, Oxford (MA Maths) and Imperial College, London (MSc Statistics). From 1969 to 1974 he worked as a medical statistician at Edinburgh University, the Institute of Psychiatry and the Medical Research Council's T.B. Unit. He joined Sir Richard Doll's ICRF Cancer Epidemiology and Clinical Trials Unit in Oxford in 1974, and was appointed Chairman of the Section of Epidemiology at the Institute of Cancer Research in 1983. He joined the London School of Hygiene & Tropical Medicine in 1998. His Chair of Epidemiology, now at the London School of Hygiene & Tropical Medicine, is supported by Cancer Research UK.

Dr Rosemary Lester, Assistant Director, Communicable Disease Control, Department of Human Services, Victoria. Dr Lester is currently Acting Director, Health Protection, and Acting Chief Health Officer at the Department of Health, Victoria. Her substantive position is Assistant Director, Communicable Disease Prevention and Control Unit and Deputy Chief Health Officer. She is a medical graduate of the University of Melbourne (1980), and was the Medical Officer of Health for the City of Melbourne from 1986 to 1989. She entered the Department in 1989 and completed the Department's Public Health Training Scheme in 1991. She completed a MPH from Monash University in 1992. Dr Lester obtained a Master of Science (Epidemiology) degree in 1993 from the University of California, Los Angeles. She was made a Fellow of the Australasian Faculty of Public Health Medicine in 1994.

CENTRE FOR HEALTH POLICY, PROGRAMS AND ECONOMICS

Professor Deborah Cobb-Clarke, Director, Melbourne Institute of Applied Economic and Social Research, Faculty of Business and Economics, University of Melbourne. Professor Cobb-Clarke joined the Melbourne Institute of Applied Economic and Social Research as Director and Ronald Henderson Professor in 2010. Prior to joining the Melbourne Institute, she has held positions at the US Labor Department, Illinois State University, and the Australian National University. Professor Cobb-Clarke earned a PhD in economics from the University of Michigan (1990) and is the founding director of The Social Policy Evaluation, Analysis and Research (SPEAR) Centre, has been Associate Director of the Research School of Social Sciences at the ANU, and is a former co-editor of the Journal of *Population Economics*. She is an elected Fellow of the Academy of Social Sciences in Australia. Her research agenda centres on the effect of social policy on labour market outcomes including immigration, sexual and racial harassment, health, old-age support, education and youth transitions. In particular, she is currently leading the innovative Youth in Focus Project which is analysing the pathways through which social and economic disadvantage is transmitted from parents to children in Australia.

Professor Kathy Eagar, Director, Australian Health Services Research Institute (AHSRI), University of Wollongong. Professor Eagar has over 30 years experience in the health and community care systems, during which she has divided her time between being a clinician, a senior manager and a health academic. She has authored over 350 papers on management, quality, outcomes, information systems and funding of the Australia and New Zealand health and community care systems. AHSRI has a team of over 50 researchers covering 19 disciplines and includes eight research centres, including the Centre for Health Service Development (CHSD), the Australasian Rehabilitation Outcomes Centre (AROC), the Palliative Care Outcomes Collaboration (PCOC) and the National Casemix and Classification Centre (NCCC). In 2008 she was awarded an honorary fellowship of the Australasian Faculty of Rehabilitation Medicine, Royal Australasian College of Physicians, and in 2010 she was awarded Honorary Life Membership of the Australian Healthcare and Hospitals Association in recognition of a significant, long-term contribution to the Association as well as to healthcare in Australia.

Dr Michael Montalto, Director, Epworth Hospital in the Home Unit. Dr Montalto is a graduate of the University of Melbourne Medical School and is the Director of Hospital in the Home at Royal Melbourne Hospital and Epworth Hospital. He has been involved in the development of clinical practice, policy development, costing and quality measurement in Hospital in the Home since undertaking his doctoral work in that field. He achieved his doctorate in health services research at the Centre for Health Program Evaluation in 1999. He has published in the fields of: hospital-GP integration and communication; salaried general practice; telephone triage systems; and hospital in the home.

Mr Mark Booth, Acting First Assistant Secretary, Primary and Ambulatory Care Division. Mr Booth is currently employed as the Acting First Assistant Secretary in the Department of Health and Ageing in Canberra, where he heads the Primary and Ambulatory

Care Division. His current responsibilities include: Medicare Locals; GP SuperClinics; After Hours Services; divisions of General Practice and Rural Health. Mr Booth's original training was as a health economist and he has many years of policy experience, including 10 years working in the Ministry of Health in New Zealand; one year working as a Senior Health Advisor to the New Zealand Minister of Health; and 16 years working in the academic sector, private and public health sectors within the UK. In 2006 he was a Harkness Fellow in Health Policy and spent a year working at Brown University in Rhode Island looking at funding and quality issues in Long Term Care for the elderly. Mr Booth has published in a number of books and journals and has qualifications from the University of Manchester; the University of Otago and the Australia New Zealand School of Government (ANZSoG).

Dr Jon Evans, Director, Health Strategy, Victorian Department of Health. Dr Evans has held senior clinical, management, consulting and strategy position across the Victorian Health Care system and related industry for over 20 years in community and hospital based settings across the public and private sector. With a background as a psychologist, he has worked in positions from direct clinical practice to the role of Chief Executive Western Health, and now holds a position as Director of Health Strategy within the Department of Health, Victoria, where he has primary responsibility for the development of the Victorian Health Plan 2022.

Professor John Daley, Chief Executive Officer (CEO), Grattan Institute. Professor Daley is the founding CEO of the Grattan Institute, an independent, rigorous and practical think-tank for Australian domestic policy. He has 20 years experience at the intersection of the public sector, private enterprise, and academia. His diverse background includes law, finance, education, and workers compensation. Previous roles include the University of Melbourne, the University of Oxford, the Victorian Department of Premier and Cabinet, consulting firm McKinsey and Co, and most recently ANZ, where he was Managing Director of the online stockbroker, E*TRADE Australia. He has a DPhil in Public Law from the University of Oxford, and degrees in Law and Science from the University of Melbourne.

Dr John Deeble, Emeritus Fellow of the Australian National University. With Dr Dick Scotton, Dr Deeble was co-author of the original proposals for universal health insurance in 1968 when they worked together in the Melbourne University Institute of Applied Economic Research. He was Special Adviser to the Ministers for Health in the Whitlam and Hawke governments, Chairman of the Planning Committees for both Medibank and Medicare and a Commissioner of the Health Insurance Commission for 16 years. Other appointments have included First Assistant Secretary in the Commonwealth Department of Health, Founding Director of the Australian Institute of Health and Welfare, and from 1989 to 2005, Senior Fellow in Epidemiology and Adjunct Professor in Economics at the National Centre for Epidemiology and Population Health at the ANU. Dr Deeble has been a World Bank Consultant on health care financing in Hungary, Turkey and Indonesia and for over 10 years to 2005, an adviser to the government of South Africa.

CENTRE FOR HEALTH AND SOCIETY

Chair, Professor Terry Nolan, Head of School, MSPH. Professor Nolan is Foundation Head of the MSPH at the University of Melbourne, and Associate Dean of the Faculty of Medicine, Dentistry and Health Sciences. He is Head of the Vaccine and Immunisation Research Group, a joint initiative of the MSPH and Murdoch Childrens Research Institute (MCRI), and Director of the NHMRC Centre for Clinical Research Excellence (CCRE) in Child and Adolescent Immunisation.

Mr Demos Krouskos, CEO, Centre for Culture, Ethnicity and Health (CEH). Mr Krouskos is also chief executive officer of North Richmond Community Health. His professional interests include health and cultural diversity, health issues affecting refugees and migrants, health equity and human rights, the health of Indigenous Australians, the development of ethical health care practice and health care service research.

Professor Marian Pitts, Director Australian Research Centre in Sex, Health and Society, La Trobe University. Professor Pitts is a psychologist by training and a leading researcher in the areas of gender and health, and sexuality and relationships.

Ms Janet Laverick, Director, Primary Health Branch, Rural and Regional Health and Aged Care Services Division, Department of Health/Human Services. Ms Laverick is the Director, Aboriginal Health Branch, in the Victorian Department of Health. She has been in this position since 2009. The Aboriginal Health Branch comprises the following business units: Policy and Performance; Programs; and Strategic Projects.

Professor Martin Delatycki, Director, Clinical Genetics, Austin Health, Heidelberg Repatriation Hospital, Director, Bruce Lefroy Centre for Genetic Health Research, MCRI. Professor Delatycki's main research interests are in neurogenetics and community genetics and he heads the Friedreich ataxia research program at the MCRI. His team undertakes research into how and when genetic screening is best offered.

Dr. Hugo Gold, Paediatrician/Endocrinologist, Children's Specialist Centre, Clinical Director of the Children's Bioethics Centre at the Royal Children's Hospital. Dr Gold's past experience is as a clinical paediatrician at the Royal Children's Hospital (RCH), Western Hospital (RWH) and Monash Medical Centre, as well as chairman of the medical staff association. In 2004, the RCH/RWH board initiated the establishment of a clinical ethics committee to advise clinicians dealing with complex ethical and moral dilemmas and he was asked to chair this committee.

Professor Ann Capling, nominee from the Faculty of Arts (University of Melbourne), Social and Political Sciences. Professor Capling joined the University of Melbourne in 1993. She has served in a number of leadership roles in the Melbourne Arts Faculty, including Associate Dean, Academic Programs (2001-03); Head of Department of Political Science (2005-06); Director, Centre for Public Policy (2007); and Associate Dean, Graduate Studies (2008-2009). She is currently Director of the Master of International Relations. She was President of the Australian Political Studies Association (APSA) in 2008-09.

SUMMARY REPORT

Dr Helen MacDonald, nominee from the Faculty of Arts (University of Melbourne). Dr MacDonald is an ARC Future Fellow at The Australian Centre in the School of Historical and Philosophical Studies at the University of Melbourne and a member of the Advisory Board of the Writing Centre for Scholars and Researchers. She is an award-winning historian and writer. Her book, *Human Remains: Dissection and its Histories* (Yale University Press 2006, published in Australia as *Human Remains: Episodes in Human Dissection*, Melbourne University Press 2005) won the biennial Victorian Premier's Literary Award for a First Book of History and was short-listed for the Ernest Scott History Prize. In her latest book, *Possessing the Dead: The Artful Science of Anatomy* (2010) Dr MacDonald explored the history of encounters between medical scientists, dead bodies and the law in England, Scotland and Australia.

Professor Jane Gunn, nominee from MDHS, inaugural Chair of Primary Care Research and Head of the Department of General Practice at the University of Melbourne. A general practitioner, Professor Gunn's current research interests include depression and related disorders. She serves on a number of professional committees such as the beyondblue Victorian Centre of Excellence and is a member of both the National Prescribing Service Research and Development Working Group and the Steering Committee for the National Survey of Mental Health and Wellbeing. She has been Chair and member of the NHMRC grant review panels and serves on the editorial boards and advisory panels of several prestigious journals.

CENTRE FOR WOMEN'S HEALTH, GENDER AND SOCIETY

Chair, The Hon Caroline Hogg. Ms Hogg is a former member of the Victorian Legislative Council from 1982 to 1996 and a minister in the governments of John Cain and Joan Kirner. She worked as a teacher at Fitzroy High School for 15 years and became an executive member of the Victorian Secondary Teachers Association. She was elected to Collingwood City Council in 1970, later serving as Mayor. In 1982, she was elected to the Legislative Council and three years later she was appointed Minister of Community Services. She later served as Minister for Education, Minister for Health and Minister for Ethnic, Municipal and Community Affairs. Since leaving politics, she has been a board member of organisations such as beyondblue, the Infertility Authority and the Victorian Grants Commission.

Ms Wendy Brooks. Ms Brooks holds a Bachelor of Music and Bachelor of Laws (Hons). She is National Head of Business Development, The Trust Company. This recent appointment comes after a 15 year career in marketing and fundraising in the not for profit sector. A keen interest in charity law reform and human rights informs her involvement as Director of a number of Boards and member of the Ministerial Disability Advisory Council. Since acquiring a neuro-muscular condition in 2000, Ms Brooks has used a wheelchair, which has given her family an insight into living with a disability.

Ms Mary Bereux, Manager of Policy and Projects, Office of Women's Policy in the Department of Human Services. Ms Bereux leads a team developing policy and delivering programs that improve the status of women in Victoria, as well as providing advice on a range of issues that have gender implications.

Ms Dale Fisher, CEO, The Royal Women's Hospital. Ms Fisher was appointed Chief Executive of the Royal Women's Hospital in July 2004. She is a leader and advocate for women's health and has focused her career on leading and managing quality public health care services to the Victorian community. In recognition of her achievements in leadership and promoting excellence in women's health, she was inducted into the Victorian Honour Roll in 2011 as part of the centenary celebrations for International Women's Day. Ms Fisher practised as a Registered Nurse for over 10 years before pursuing studies in business management, completing a Bachelor of Business and then a Masters of Business (MBA) in 2002. She was a member of the Board of the Queen Elizabeth Centre (QEC), an early parenting centre in the South East for eight years, two of which she served as Vice President of the Board. She is an Associate Fellow of the Australian College of Health Service Executives (ACHSE).

Dr Gwendolyn Gray. Dr Gray has taught, researched and written on Australian and international health and welfare policies, with a special focus on the way policies affect women. She also researches and writes on federalism. Her publications include *The Politics of Medicare*, University of New South Wales Press, 2004. She has recently published a book chapter comparing the women's health movements in Australia and Canada and is author of "Women, Federalism and Women Friendly Policies", *Australian Journal of Public Administration*, volume 65, number 1, 2006. Currently, she is completing a book, documenting the history of the Australian women's health movement and its impact on public policy. Dr Gray is a member of the Ministerial Advisory Council on Women ACT, Convenor of the Australian Women's Health Network and a long-time member of the Women's Electoral Lobby.

Dr Robyn Gregory, CEO, Women's Health West (WHW). Dr Gregory has been CEO of this organisation since February 2008, when she moved from her previous position as Manager of Health Promotion, Research and Development. Before coming to WHW she worked in women's health and women's services for many years, with experience spanning direct service delivery, research, teaching, policy development, project management and planning. As CEO she assists staff to work with and for women in the western region. This means looking at the big picture, as well as meeting women's immediate needs.

Ms Carmel Guerra, CEO, Centre for Multicultural Youth. Ms Guerra was founder of the Centre for Multicultural Youth, a community-based organisation in Melbourne that advocates for the needs of young people from refugee and migrant backgrounds. She received the Centenary Medal in 2003 for services to young people, migrant and refugee communities, and was entered into the Victorian Women's Honour Roll for services to the community in 2005. Ms Guerra has been a member of the Refugee Resettlement and Advisory Council since its inception.

Ms Keran Howe, Executive Director, Women With Disabilities Victoria. Ms Howe, Victorian Women with Disabilities Network Director and University of Melbourne alumna, was inducted into the Victorian Honour Roll of Women for 2010. She has been recognised for her work promoting the human rights of women, and in particular, women with disabilities, in Victoria.

Ms Lynne Jordan, Chief Executive Officer, Family Planning Victoria (FPV). Ms Jordan has been CEO at FPV for over 10 years and has been

the driving force in developing the organisation as a leader in the field of sexual and reproductive health delivery for women, men and young people. Her collaborative approach has assisted and encouraged others to take action and work towards establishing best practice in service delivery. National and state based advocacy has been an important feature in her work, including the identification of sexual and reproductive health as a State Health Priority and the significant contribution to the work regarding Abortion Law Reform in Victoria. Ms Jordan is also a Director of the Board of the Football Federation Victoria (FFV). As the first elected woman on the Board, she has been a committed advocate for the role of women in football at all levels and for providing clubs with support to ensure development for the future. Ms Jordan has contributed to numerous publications on state and national sexual and reproductive health and was awarded the 2000 Victorian Public Health Award for Innovation.

Professor Anne Kavanagh, Director of the CWHGS at the MSPH. Professor Kavanagh is an epidemiologist with expertise in social and cancer epidemiology. She received her medical degree from Flinders University of South Australia in 1987 and a PhD from the Australian National University in 1995. She was a postdoctoral fellow at the Harvard School of Public Health and the Cancer Council of Victoria. She was a senior research fellow at the Australian Research Centre in Sex, Health and Society at La Trobe University between 1999 and 2004, was appointed to Associate Professor at CWHGS in 2004 and Professor of Women's Health and Director in 2008. She held a NHMRC Training Fellowship from 1996-1999 and a VicHealth Senior Research Fellowship from 2001-2007. She was awarded a Young Tall Poppy Award in 2002 for her contributions to research in the fields of social inequalities in health and cancer screening. Professor Kavanagh has sat on numerous grant review panels and boards in Victoria and nationally. She is Associate Editor of Social Epidemiology for Social Science and Medicine.

Dr Adele Murdolo, Executive Director, Multicultural Centre for Women's Health. Dr Murdolo has worked in the field of immigrant and refugee women's issues for over 15 years, in both academic and community forums. She has completed a PhD on the feminist activism of immigrant and refugee women in Australia. She has published on a wide variety of issues relating to women's reproductive and sexual health, sexuality and media representations, as well as issues for women in immigration detention.

Professor Terry Nolan, Head, MSPH.

Ms Lyn Walker, Executive Manager, Participation and Equity for Health, VicHealth (Victorian Health Promotion Foundation). Ms Walker has a background in human service management and has worked in the public health field for the past 23 years. Her predominant areas of focus have included development of gender-specific services and programs, and advocacy for legislative and policy reform in key areas. Ms Walker has written and co-edited a range of publications focusing on the social and economic determinants of health, and supported development of the first International monograph on Mental Health Promotion: Concepts, Emerging Evidence and Practice. She is a member of the Adult Multicultural Education Services Board and the Global Consortium for the Promotion of Mental Health, and supports the activity of a range of state committees and working parties.

Ms Monica Pfeffer, Director, Strategic Projects, Australia and New Zealand School of Government (ANZSOG). Ms Pfeffer joined ANZSOG after 27 years in the Victorian public service where she held a variety of positions, principally in the Department of Human Services (DHS) and its predecessors as well as three separate stints in the Department of Premier and Cabinet. Her last role was as Director Social Policy in DHS. Ms Pfeffer's social policy subject expertise includes income security and State concessions, ageing, disability, health reform, health inequalities, diversity, poverty and social (in)exclusion, Indigenous Affairs and youth justice. She has also demonstrated a long standing interest in public policy and the practice of government. She is an ANZSOG alumna (EPF 2006), an active participant in the ANZSOG/SSA partnership activities and author of a recent Occasional Paper and a Victorian Fellow of the Institute of Public Administration Australia.

Ms Pam Williams, Director of Policy Coordination and Projects, Victorian Department of Health. Since April 2011, Ms Williams has had responsibility, among other things, for diversity issues, including women's health and wellbeing. She has a background in Government, and in consulting, with a focus on management of policy, programs, research, audit, evaluations and strategic planning in the health, human services, housing, community, environment, justice, education and training sectors.

CENTRE FOR INTERNATIONAL MENTAL HEALTH

Chair, Dr Gerry Naughtin, CEO, MIND Australia.

Mr Paris Aristotle, Director, Victorian Foundation for Survivors of Torture.

The Rev Tim Costello, Chief Executive Officer, World Vision Australia.

Professor Helen Herrman, Professor of Psychiatry, Orygen Youth Health Research Centre, University of Melbourne.

Dr John Mahoney, UK National Counterpart to WHO Headquarters, Geneva.

Professor Vin Massaro, Professorial Fellow in the Centre for the Study of Higher Education and Professorial Fellow, LH Martin Institute for Higher Education, Leadership and Management, University of Melbourne.

Professor Hugh Taylor, Professor of Indigenous Eye Health, Melbourne School of Population Health, University of Melbourne.

MCCAUGHEY CENTRE

Chair, Mr Michael Wright, Managing Director, Miller Consulting,

Professor Ian Anderson, Director, *Onemda* VicHealth Koori Health Unit, MSPH, University of Melbourne.

Mr Paris Aristotle, Director, Victorian Foundation for Survivors of Torture.

Professor Fran Baum, Faculty of Health Sciences, Flinders University; Commissioner, WHO Commission on the Social Determinants of Health.

Ms Helen Fenney, Director, Fenney Letts Consulting.

SUMMARY REPORT

Mr Damien Ferrie, Director, Community Strengthening, Department of Planning and Community Development.

Professor Ruth Fincher, School of Social and Environmental Enquiry, University of Melbourne.

Professor John Langmore, Professorial Fellow, Centre for Public Policy, University of Melbourne; Former Director, United Nations Division for Social Policy and Development.

Mr Tony Nicholson, CEO, Brotherhood of St Laurence.

Professor Terry Nolan, Head, MSPH.

Professor Pip Pattison, School of Behavioural Science, University of Melbourne.

Ms Chrissie Picken, Assistant Director, Health Promotion & Chronic Disease Prevention, DHS, Victorian Government.

Ms Cath Smith, CEO, Victorian Council of Social Service.

Ms Lyn Walker, Director, Mental Health & Wellbeing Unit, VicHealth.

Ms Marion Webster, Chair, Melbourne Community Foundation.

Ms Maria Wilton, Managing Director, Franklin Templeton International.

INDIGENOUS EYE HEALTH UNIT

Chair, Professor Terry Nolan, Head, MSPH.

Professor Ian Anderson, Director, *Onemda* VicHealth Koori Health Unit, MSPH, University of Melbourne.

Professor Glenn Bowes, Associate Dean – External Relations, Medicine, Dentistry and Health Sciences, University of Melbourne.

Mr Trevor Buzzacott, Community Development Officer with the Department of Family and Community Services, South Australia. Mr Buzzacott worked with Professor Taylor and the late Professor Fred Hollows on the National Trachoma Eye Health Program in the 1970s and is a co-author of the 2007 publication *Beyond Sandy Blight: Five Aboriginal Experiences as Staff on the National Trachoma and Eye Health Program*. He was the recipient of a 2011 NAIDOC Award for his outstanding contributions.

Professor John Funder AO, a Harold Mitchell Foundation Board Member. Professor Funder was Director of the Baker IDI Heart and Diabetes Institute in Melbourne until 2001 and is now a Senior Fellow at Prince Henry's Institute. In 2008 he was appointed as Director of Research Strategy at Southern Health, Victoria's largest health service.

Mrs Janet Hirst, CEO of The Ian Potter Foundation and The George Alexander Foundation. She has a special interest in the development of a strategic approach to philanthropy to help ensure that the Foundation's funding has maximum impact, and in encouraging and promoting a vibrant culture of philanthropy in the broader community.

Professor the Hon Barry Jones AO FAA FASSA FAHA FTSE FACE, writer, lawyer, social activist, quiz champion and former Minister for Science in the Hawke Government from 1983-1990. He was appointed a Vice-Chancellor's Fellow at the University of Melbourne in 2005.

Ms Jilpia Nappaljari Jones AM, a Walmadjari woman from the Kimberleys. As a registered nurse she worked with Professor Taylor and the late Professor Fred Hollows on the National Trachoma Eye Health Program in the 1970s and 1980s, and later did ophthalmologic training at Moorfields Eye Hospital in London. She is a co-author of the 2007 publication *Beyond Sandy Blight: Five Aboriginal Experiences as Staff on the National Trachoma and Eye Health Program*. She has a BA from the ANU and worked as a Research Officer in Aboriginal health at AIATSIS. She was awarded an Australian Centenary Medal in 2003.

Mr Luke Littlefield, was appointed Chief Operating Officer of the Mitchell Communication Group in December 2007 and has recently been appointed to the position of CEO of Aegis Media Pacific.

Dr David Middleton, the CEO and proprietor of Mount Mary Vineyard, Lilydale. He was appointed Veterinarian, Zoological Parks and Gardens Board in 1985 and after initially acting as veterinarian, Melbourne Zoo, became veterinarian/curator at Healesville Sanctuary. In 2000, Dr Middleton was appointed a Senior Fellow of the University of Melbourne's Faculty of Veterinary Science and has taught wildlife health to vet students since 1988. He is active in community and philanthropic activities and also serves on the Board of the Cybec Foundation.

Mr Reg Richardson AM, has managed diverse businesses and has many years experience as Chairman for one of Australia's largest financial planning companies. He is also involved with a number of philanthropic organisations, including Melanoma Institute Australia, Friends of the Mater Foundation, Art Gallery of NSW Foundation and the Poche Centre of Indigenous Health at the University of Sydney.

Mr Ian Roberts, Executive Officer of the Harold Mitchell Foundation. He was formerly the General Manager of the Melbourne Festival for six years and the Geelong Performing Arts Centre for five years. He is also Chair of the Victorian Australia Day Committee, Deputy Chair Melbourne International Film Festival, Trustee Victorian Arts Centre, Chair Mpace Arts and Board member of the Australian Centre for the Contemporary Arts.

Professor Hugh R Taylor AC, Director of Indigenous Eye Health Unit (IEHU), MSPH, University of Melbourne.

Associate Professor Michael Wooldridge, Chairman of Neurosciences Australia, Healthsource Australia and the Oral Health CRC, and an Associate Professor at the University of Melbourne. He served as Minister for Health and Family Services from 1996 to 1998 and Minister for Health and Aged Care from 1998 until his retirement in 2001.



STAFF

* denotes part-time staff

MELBOURNE SCHOOL OF POPULATION HEALTH

SCHOOL LEVEL

Head of School and Associate Dean and Professor

Terence Michael Nolan, BMedSc MBBS *W.Aust.* PhD *McG.* FRACP FAFPHM

Deputy Head of School, Professor and Federation Fellow

David Michael Studdert, BA *Melb.* LLB *Melb.* MPH *Harv.* ScD *Harv.*

Professional Staff

School Manager

Rebecca Bond, BA *RMIT* GCert *IMS Monash University* MIMS (Research)
Monash University

Finance and Resources Manager

Nancy Palamara, BBus *VU*

Senior Finance Officer

Kristine Singh

South of Grattan Street IT Cluster Manager

Graham Sadler

Executive Officer

Richard Mohr, BA *Monash*

IT Officers

Niven Mathew, BE *TEIC, MIT Monash*

Glynn Matthews

Dylan McCulloch

Danielle Pullin, BA *Melb*

Academic Programs Manager

Elizabeth Dent

Academic Programs Officer

Jennifer Sievers, BlnfMan *Monash*

Personal Assistant to Head of School

Nora Li, Dip Exec Sec Studies *HK Polytechnic*

PUBLIC HEALTH

Head of Department and Professor

Terence Michael Nolan, BMedSc MBBS *W.Aust.* PhD *McG.* FRACP FAFPHM

Deputy Head of Department, Professor and Federation Fellow

David Michael Studdert, BA *Melb.* LLB *Melb.* MPH *Harv.* ScD *Harv.*

Honorary Appointments

Professorial Fellows

Ian Philip Anderson, MBBS *Melb.* MA PhD *La Trobe* FAFPHM

Warwick Hugh Anderson, MBBS BMedSc MA MD *Melb.* PhD *Penn.*

Ron Borland, BSc *Monash* MSc PhD *Melb.* MAPS

John Nicholas Crofts, MBBS *Melb.* MPH *Monash* FAFPHM

Louisa Degenhardt, BA *NSW* MPsych PhD *NSW*

Jane Rosamond Fisher, BSc *Qld.* PhD *Melb.*

Graham Giles, BSc MSc *Mich.* PhD *Tas.*

Margaret Ann Hamilton, BA *MSW Mich.* DipSocSt

David Hill, AO PhD *Melb.* MD(Hon) *Newcastle* FAPs

Eleanor Holroyd, BAppSc *Curtin* MAppSc *Curtin* PhD *Hongkong*

John Mathews, AM, BSc MBBS MD PhD *Melb.* Hon DSc *NTFRACP* FRCPA
FAFPHM

John Richard Wiseman, BA BSW *Melb.* PhD *La Trobe*

Professorial Fellow and Professor Emeritus

Doreen Anne Rosenthal, AO BA PhD *Melb.* FASSA

Principal Fellows with the title Associate Professor

Catherine Marie Bennett, BSc *La Trobe* MAppEpid *ANU* PhD *La Trobe*

Stephanie Brown, BA *Melb.* PhD *Monash*

Donald Alexander Campbell, MBBS *Monash* MMedSc(Clin Epi)
Newcastle MD *Monash* FRACP

Christopher John Clements, MBBS *Lond.* MSc *Manchester* DipChildHlth
RCP Lond. DipObst *Auck.* FAFPH MFPH MCCM LRCP MRCS

Alex Cohen, BA *NYMA* NYPhD *UCLA*

Michael Coory, BAppSc (Stats) QUT MBBS *Qld.* PhD *Newcastle* FAFPHM

Joan Cunningham, BA *MLibArts* PhD *Harv.*

Craig Lindsay Matthew Fry, BSc *Monash*

Dorota Gertig, MBBS *Monash* MHS(ClinEpi) UBC ScD(Epi) *Harv.* FAFPHM

Peter Greenberg, MBBS *Melb.* MD *Melb.* PhD *Melb.* FRACP

William Hart, MBBS *Monash* MBScPrelim GDipCH *La Trobe*

Fumi Horiguchi, BMed *TokyoWmMed-College* PhD *Keio*

Susan Hurley, BPharm *Vic.Coll.Pharm.* MPharm *Vic.Coll.Pharm.* MSc *Wash.*
PhD *Monash* GAICD

Damien John Jolley, BSc *Melb.* MSc *Lond.* MSc *La Trobe* DipEd *SCVic.*

Heath Kelly, BSc MBBS MPH *W.Aust.* FAFPHM

Colin MacDougall, BA *Flinders* MA *Flinders* PhD *Adel.*

Jan Nicholson, BSc *Otago* BSc *VU* Wellington MSc *Canterbury* NZPhD *Qld.*

Vikram Patel, MBBS *Bom.* MSc *Oxf.* MRCPsych RCP (UK) PhD *Lond.*

Kelly-Anne Phillips, MBBS *Monash* MD *Monash* FRACP

Priscilla Pyett, BA *Monash* PhD *Deakin*

Gianluca Severi, BSc *Genoa* MSc *Milan* PhD *Birm*

Yoland Wadsworth, BA *Monash* PhD *Monash*

Clinical Associate Professors

Catriona Bradshaw, MBBS *Monash* PhD *Melb.* DipVen *Monash* FACHSHM

Marcus Chen, MBBS *Melb.* PhD *Syd.* DipVen *Monash* MRCP UK
FACHSHM FRACGP DTM&H *Lond.*

Darren Russell, MBBS *Melb.* DipVen *Monash* FRACGP FACHSHM

Senior Fellows

Lisa Amir, MBBS *Monash* MMed *Melb.* PhD *La Trobe* IBCLC

Christine Bayly, MBBS *Melb.* MD *Melb.* MPH *Monash* FRCOG

Bruce Bolam, BSc *MMU UK* PGCE *UWL* UK MSc *MMU UK* MSc *Cardiff*
UK PhD *UWE UK*

Julia Brotherton, BMed *Newcastle* MPH *Syd.* GDipAppEpid *NSW Health/VETAB* FAFPHM

Alex Brown, MBBS *Newcastle* MPH *HUJI* PhD *Qld.*

Graham Byrnes, BSc PhD *Syd.* PGDip(AppStats) *Melb.*

Sudipto Chatterjee, MBBS *India* MD *India* DipPsyMed *India*

Prem Kumar Chopra, MBBS *Melb.* MSc *Wollongong* MPsych *Melb.* MD
Melb. MRACMA FRANZCP

Marion Cincotta, BSc *Melb.* GDip *Melb.* PhD *Melb.*

Richard Clark, BSc *ANU* DHSc *Deakin*

John Condon, MBBS *Monash* MPH *Harv.* CertHlthEcon *Monash* PhD
Charles Darwin

William Genat, BSc *W.Aust.* PhD *W.Aust.* PGDipPHC *W.Aust.*

Michael Greenberg, MBBS MD PhD *Melb.* FRACP RACP

Michelle Haby de Sosa, BAppSc *S.Aust.* MAppSc *Syd.* PhD *Syd.*

Mark Hew, MBBS *Melb.* DIC PhD *Imperial College* *Lond.* FRACP RACP

Wendy Holmes, MBBS MSc *Lond.*

Krishna Philip Hort, MBBS *Syd.* DRCOG *Lond* DTCH *Liverpool* MCH *NSW*
FAFPHM

Terry Laidler, BA *Melb.* LLB *Melb.*

SUMMARY REPORT

Raju Lakshmana, MBBS *JIPMER MD.Psy NIMHANS FRANZCP RANZCP*
 Rosemary Ann Lester, MBBS *Melb. MPH Monash MS(Epid) UCLA*
 FAFPHM
 John Mahoney, HonDoc Central England
 Shelley Mallett, BAppSc *La Trobe BA La Trobe PhD La Trobe*
 Catherine Louise Mead, PSM MBBS DPH *Syd. FRACMA FAFPHM*
 Penelope Mitchell, BSc Psych *NSW MPH Syd. PhD Melb.*
 Manjula O'Connor, MBBS *Delhi MMed Melb. DipEd Melb.*
 Leonard Piers, MBBS MD *SJMC MPH Melb. PhD WUR*
 Heather Rowe, BSc *La Trobe PhD Melb.*
 Susan Treloar, BSocStud *Syd. MSc Lond. MSW NSW PhD Qld.*
 Gai Wilson, BA *Adel. MSocSc RMIT*
 Godfrey Woelk, BSc(Soc) Rhodesia MCommH *Liverpool PhD Wash.*
 Ruth Wraith, MPsy Monash DipOc VU

Fellows

Laura Baglietto, BSc *Italy MSc Italy PhD Birm.*
 Kathleen Louise Bagot, BSc BSc Monash PhD Monash
 Nadine Bertalli, BHSc *La Trobe GDipBioEpi Melb.*
 Jade Bilardi, BA MAppSocRes Monash PhD Melb.
 Shelley Bowen, BAppSc *Canb. College MPH W.Syd. PhD NSW*
 Zoe Brady, BSc Griffith
 Kathleen Brasher, BAppSc(Nurs) *Monash PhD Monash GDipArts Melb.*
 CertGeneralNurs *RoyalMelb. CertMidwifery Monash*
 Janet Briggs, BAppSc DipAppSc *La Trobe RN RM*
 Alison Brookes, BA *Deakin PhD Deakin*
 Clare Teresa Brophy, RN
 Ann Elizabeth Brothers, BA *Melb. DipPhys Melb. GDipMus.Stud Deakin*
 Annie Bruxner, BSc Qld.
 Lyndal Bugeja, BA Melb.
 Clare Constantine, BSc *W.Aust. PhD Murd. GDip(CompSc) Murd.*
 Mathew Dafilis, BAppSc Swinburne PhD Swinburne
 Robert Darby, BA *La Trobe BLitt ANU PhD NSW*
 Jennifer Davey, MBBS *Melb FRACGP*
 Joyce Doyle
 Bircan Erbas, BSc MSc PhD *Melb.*
 Susan Feldman, BA *La Trobe MA*
 James Fielding, BSc Melb. MAppEpid ANU GDip Melb.
 Freya Fowkes, BSc Glasgow MScEpid LSHTM Lond. DPhil Oxford
 Craig Lindsay Matthew Fry, BSc *Monash*
 Joyce Goh, BSc *Lincoln Inst*
 Kerry Anne Grenfell, BA Griffith BBusCom QUT
 Sandra Hall, MSc *Melb. PhD Melb. GDipSc Melb.*
 Karin Hammarberg, BSc *Sweden MWH Melb. PhD Melb. RN*
 Todd Harper, BEcon *Tas. PGDipHlthProm Curtin PGDipHlthEcon Curtin*
 Alan Headey, BA *Qld. D.Psych Melb.*
 Alice Holloway, BSc *Melb.*
 Sonja Hood, BA *Melb. MSc Penn.*
 Lana Horng, MBBS *Melb. DipPaed NSW*
 Kellie Horton, BHSc *La Trobe MPH Deakin DPH Flinders*
 Peter Francis Howard, MBBS Lond. MSc Lond. MRCP(UK) FAFPHM FRCP(Edin)
 Sarah Huffam, MBBS Monash MPH&TM James Cook FRACP FACHSHM
 Cecily Hunter, BA *Monash MSc PhD Melb.*
 Terry James, BSc Melb.
 Marita Kefford, DipAppSc *PhillipIT*
 Maggie Kirkman, BA Melb. PhD *La Trobe*
 Louise Kohlman, Cert(GenNurs) *Box Hill GCert (Nurs) Box Hill Cert*
 (Midwifery) *St Georges*
 Nadya Kouzma, BSc *VUMPsych VU DP VU*
 David Michael Lee, BAppSc(UTS) DrPH *Melb. MPH GDip(CritCare) Syd.*
 FRCNA FCN
 Tania Lewis, MBBS *Otago BA Canterbury MA Canterbury PhD Melb.*

Lin Li, BA Sichuan MPH Sichuan PhD Melb.
 Robert MacInnis, BSc Monash PhD Melb. GDipEpiBio Melb.
 Tamara Mackean, MBBS *NSW MBBS MPH Adel.*
 Milica Markovic, BSoc *Belgrade MSoc PhD Qld.*
 John Marrone, BSc *La Trobe MClInEmbryology Monash DrPH Melb.*
 PGDipGenetics *La Trobe*
 Naing Maung, MBBS Inst. of Med Yangon, Myanmar
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 Sonia McCallum, BSc Adel. BHSc Adel. DPhil (HSc) Adel.
 Brian McCoy, BA *Melb. BTheol PhD Melb. GCert CommMentalHlth*
Flinders DipCrim Melb.
 Ann Marie McEvoy, BSc *Caledonian Cert(GenNurs) Law Hosp. School of*
Nursing
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Tokyo MPubAdmin ICU Tokyo
 Roger Milne, BA BSW BComm *Melb. GDipClinEpi Monash*
 Stephen Minas, BA *Melb LLB Melb. MSc LSE*
 Andrew Mohanraj, MBBS India MPsyMED India
 Timothy Moore, BSc *James Cook BA James Cook*
 Alison Morgan, MBBS *Syd. DRANZCOG DTM&H Liverpool*
 Christopher John Morgan, MBBS *Syd. DTCH Liverpool FRACP*
 Katherine Morley, BA Qld. BSc Qld. PhD Qld. GCert(HEcon) Qld.
 Robert Moss, BSc/BE Melb. PhD Melb.
 Jacinta Maree O'Keefe, BSc *Melb.*
 Aleck Ostry, BSc *UBC MSc UBC MA Simon Fraser PhD UBC*
 Shirley Pandolfo, RCert *ALIA*
 Susan Peterson, BNurs Melb. MPH Melb.
 Mairead Phelan, BPsyc *ACU*
 Gregory Phillips, BA MMed Sc *Qld.*
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 College of Law Lond. GDip(AppPsy&Counselling) JN1
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 Mary Rillstone, BA MHS DipTheoSt *Otago*
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 Michael Smith, BDSc *Melb. LDS Melb.*
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 Anthony Stratford
 Mary Sullivan, BA Monash GDip RMIT BLitt Melb.
 Theonie Tacticos, BBus Monash GDipCommDevt RMIT
 David Thomas, MBBS *Syd. MSc NSW PhD NT*
 Kirsty Maree Thompson, BAppSc(OT) *Syd.*
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 Danielle Thornton, BA *Melb. PhD Melb.*
 LUKAR Thornton, BSoc.Sc (Env) *RMIT MEnv Melb. PGDip (Env) Melb.*
 Diane Roslyn Tibbits, BSc PhD *Monash GDip La Trobe*
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 Brian Vandenbeg, BAppSc RMIT BA Monash MPH Melb.
 Lyn Walker, BSW *PhillipITMSW(HumanSvcMgmt) La Trobe*
 Marie West, RN
 Ann Felicity Westmore, BSc MSc PhD *Melb.*
 Bradley Whitton, BN *Syd. CertPublicHealth (Sexual Health) Melb.*
 Allison Yates, BAppSc Lincoln Inst. GDipMgmt RMIT MPH Melb.

Adjunct Staff Professor

Anthony Scott, BA *Northumbria MSc York PhD Aberd.*



CENTRE FOR HEALTH POLICY, PROGRAMS AND ECONOMICS

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Founding Director and Professor

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Associate Professor

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Senior Lecturers

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GDipDietit *Deakin*

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PhD *Michigan*

Lecturer

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Senior Research Fellows

Marie Bismark, MBChB *Otago* LLB *Vic* MBHL *Otago*

Diana Bowman, BSc *Monash* LLB *Monash* PhD *Monash*

Lisa Brophy, BBSc *LaTrobe* BSW *LaTrobe* M.PolLaw *LaTrobe* PhD *Melb.*

Andrew Dalton, BEc *Monash* MEc *Monash* DipEd *Monash* GDipHEcEval *Monash*

Colleen Doyle, BA *Adel.* PhD *Adel.*

Matthew Spittal, BSc *VUW* PhD *VUW*

Research Fellows

Bridget Bassilios, BSc *Melb.* GDipBehHealth *La Trobe* D.Psych (Clin Health) *Melb.*

Alex Brando (Zhang), MBA *Melb*

Joanne Christo DAppSc(Nursing) *VU* BSc(psych)(Hons) *VU*

Andrew Dare, BA *Monash* MPhil *Cantab*

Susan Day, BA *Deakin* BSW *Melb.* MA *Monash* PhD *Melb.*

GDipEval *Melb.*

Angeline Ferdinand, B.Psych *VU* MPH *La Trobe*

Justine Fletcher, BPsych *VU* MPsyh (Clin) *RMIT*

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Genevieve Grant, BA LLB (Hons) *Melb.*

Teneha Greco, BHSc Hons *Deakin*

Kylie King, BSc *Melb.* PGradDipPsych *Melb.* DPsych (Health) *Deakin*

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Rosemary McKenzie, BA *Monash* MPH *Curtin* PGDipHlthProm *Curtin*

Lennart Reifels, DipPsych *Free Uni Berlin, Germany*

Hana Sabanovic, BASc *Melb.* MIP *Melb*

Cathy Segan, BA *Melb.* PhD *La Trobe*

Zewdu Woubalem Wereta, BSc. *Addis Ababa Uni*, MA *Uni Ghana*, AM

Brown Uni, PhD *Brown Uni*

Michelle Williamson, BHlthSc *La Trobe*

Honorary Appointments

Adjunct Professor

Anthony Scott, BA *Northumbria* MSc *York* PhD *Aberd.*

Professorial Fellow

Louisa Degenhardt, BA (Hons) *UNSW*, MPsyh & PhD (Joint degree) *UNSW*

Senior Fellows

Richard Clark, BSc *ANU* DHSc *Deakin*

Michelle Haby de Sosa, BAppSc *S.Aust* MAppSc *Syd* PhD *Syd*

Penelope Mitchell, BSc Psych *NSWMPH* *Syd.* PhD *Melb.*

Fellows

Lyndal Bugeja, BAarts *Melb.*

Alan Headey, BAQld DPsyh *Melb.*

Sonja Hood, BA *Melb.* MSc *Penn* Professional Staff

Sarah Olesen, BA Psych *ANU*, PhD (ClinPsych) *ANU*

Naing Naing, MBBS *Yangon Inst of Medicine, (Burma)* DTM&H *Mahidol Uni (Thailand)*, MPH *Emory Uni (USA)* DrPH *Melb.*

Theonie Tacticos, BBUS *Monash* GDipCommDev *RMIT*

Kiusiang Tay-Teo, BPharm (Hons) *Monash* MPH *Melb.* PhD *Melb.*

Allison Yates, BAppSci (Physio) *Lincoln Institute*, GradDipMgt *RMIT*, MPH *Melb.*

Professional Staff

Centre Manager

Tracey Mayhew

Executive Assistant & Centre Administrator

Joy Yeadon

Finance & Administrative Officer

Amy Uhlhorn

CENTRE FOR WOMEN'S HEALTH, GENDER AND SOCIETY

Director of Centre and Chair of Women's Health

Anne Kavanagh, MBBS *Flinders*, PhD, *ANU* FAFPHM

Deputy Director

Jane R W Fisher, BSc *Qld*, PhD *Melb.* (to Feb 2011)

Jane Hocking, BappSc(MLS) *RMIT* MPH *Melb.* MHSc(PHP)

La Trobe, PhD *Melb.* (from March 2011)

Senior Research Fellow

Heather Rowe, BSc (Hons) *LaTrobe*, PhD *Melb.*

Karin Hammarberg, B Nursing *Boras*, BSc *Gothenburg*, Master Women's Health *Melb.* PhD *Melb*

Senior Lecturer and Coordinator Teaching & Learning

Louise Keogh, BSc *W.Aust*, MA *Monash*, PhD *La Trobe*

Lecturers

Lisa Amir, MB BS *Monash* MMed *Melb.* PhD *La Trobe* IBCLC

Rebecca Bentley, BBSc *La Trobe* PhD *Melb.*

Philomena Horsley, BA *Monash*, Gdip Women's Studies *Deakin* GDipEd (ChildLit) *Deakin*, GcertProfWrit *Deakin*, MmedAnth *Melb.* PhD *Melb.*

Heather Rowe, BSc (Hons) *LaTrobe*, PhD *Melb.*

Catherine Vaughan, BPhysio *LaTrobe*, MPH (International Health) *Monash*, PhD *LSE.*

Research Fellows

Zoe Aitken, BSc (Hons) *Durham (UK)*, MSc *London School (UK)*

Maggie Kirkman, BA *Melb.* PhD *La Trobe*

SUMMARY REPORT

Lauren Krnjacki, BA *Qld*, MPH *Qld*
 Rosemary H Mann, PhD *Melb*. MDevStud *Deakin*, BLetters(Hons) *Deakin*
 Kate Mason, BSc/BA *Melb*. MPH *Melb*.
 Sonia McCallum, BSc *Adelaide*, PhD *Adelaide*
 Carolyn Nickson, BA *La Trobe* GdipEpiBio *Melb*. PhD *Melb*.
 Simone Poznanski, BSc (Hons) *Melb*. MPH *Melb*. PhD *Melb*.
 Jennifer Walker, B App Sci (App Biol/Biotech) *RMIT*, MPH *Melb*.
 Karen Wynter, BSc *Stellenbosch* Mphil Education *Cambridge*, PhD *Cambridge*

Research Officers

Dyani Lewis, BAppSci *RMIT*, PhD *Melb*. MComn *Deakin*
 Chantal Maloney, BN, Grad Cert Sexual Health
 Danielle Newton, BA *Monash*, PhD *Deakin*
 Eris Smyth, BA Dip Ed
 Anna Wood, Reg. Nurse/Midwife, Post Grad Dip Health Care Mgt,
Cardiff, Wales
 Alaina Vaisey, BScPH *George Washington University*, MPH *Melb*.
 Michelle King, BBS *LaTrobe*
 Anne Shaw, Bachelor of Education (*B.Bus*)
 Fabian Kong, B.Pharm, *Curtin M.Epi, Melb*.

Research Assistants

Turi Berg, MPH
 Min Li, B Elect & Inf Eng *China*, M Inf Tech *Melb*.
 Emma Steel BSc *Glasgow*, M of Genetic Counselling *Melb*.

Administrative Staff

Centre Cluster Manager

Sandra Bell (to March 2011)
 Bradley Morgan (from May 2011)

Human Resources Officer

Sandra Heelan

PA to Director and Centre Administrator

Jennifer Kendall (to May 2011)
 Fulya Torun (from May 2011)

Finance and Resources Officer

Vicki King (to Feb 2011)
 Bianca Ebeling (from April 2011)

Administration Assistant

Claire Denby, *ACCEPt Project*
 Mikhailina Dombrovskaya, *ACCEPt Project*

SEXUAL HEALTH UNIT

Director and Professor of Sexual Health

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 FACHSHM

Senior Lecturer

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 MFFP DipGUM FRACGP

Research Assistants

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 Lenka Vodstrcil, BBiomedSc *Melb*. PhD *Melb*.
 Jenny Walker, PhD *Melb*. BAppSc *RMIT* MPH *Melb*.
 Sandra Walker, DPsych (Hlth Psych) *Swinburne*

Honorary Appointments

Clinical Associate Professor

Catriona Bradshaw, MB BS *Monash* PhD *Melb*. DipVen *Monash*
 FACHSHM
 Marcus Chen, MB BS *Melb*. MRCP FACHSHM PhD *Syd*
 Darren Russell, MB BS DipVen *Monash* FRACGP FACHSHM

Fellows

David Michael Lee, BAppSc (UTS) DrPH *Melb*. MPH *Syd*. GDip (CritCare)
Syd. FRCNA FCN
 Susan Peterson, RN *RMIT* MPH *Melb*.
 Bradley Whitton, BN *Syd*. CertPublicHealth (Sexual Health) *Melb*.
 Vanessa Wood, BAppSc Nsg *La Trobe* GDip Mgmt AdvSexualHlth Nurse

Honorary Research

Sarah Huffam

Unit Administrator

Suzanne Amisano

PA to Chair

James Unger

CENTRE FOR INTERNATIONAL MENTAL HEALTH

Head and Associate Professor

Harry Minas, MBBS BMedSc *Melb*. DPM *Melb*. FRANZCP

Professor

John Nicholas Crofts, MB BS *Melb*. MPH *Monash* FAFPHM

Lecturer

Erminia Colucci, DipEd *Martina F.* BPsySc *Padua* PhD CultPsy *Qld*.
 GDipDataAnalysis *Florence*

Principal Fellows with the title Associate Professor

Alex Cohen, BA *NYMA* NYPhD *UCLA*
 Vikram Patel, MB BS *Bom*. MSc *Oxf*. MRCPsych RCP (UK) PhD *Lond*.

Senior Fellows

Ritsuko Kakuma BA *McMaster* MSC *McGill* PhD *McGill*
 Prem Chopra, MB BS *Melb*. M.Sc. *Wollongong* M.Psy *Melb*. M.D. *Melb*.
 Yvonne Stolk, BA *Melb*. MA *Melb*. PhD *Melb*.

Fellows

Sudipto Chatterjee, MD *Bangalore* Dip PsyMed *Bangalore* MB BS
Calcutta
 John Mahoney, HonDoc *Central England*
 Jong-ik Park, MD *Seoul* MPsy *Seoul* DR *Seoul*
 Malinton Costa

Senior Research Fellows

Manjula O'Connor, MBBS *Delhi* MMed *Melb*. DipEd *Melb*.
 Stephen Minas, BA *Melb*. LLB *Melb*. MSc *LSE*
 Joyce Goh, BS *Melb*.
 Nadya Kouzma, BS *Victoria* M.Psych *Victoria* DP *Victoria*
 Anthony Stratford

Research Fellows

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Tokyo MPubAdmin *ICU Tokyo*
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Thuy Nguyen

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Melanie Rygl

Sun Woong Kim

Dr Vinay Lakra

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Indra Peregrin Daroesman

Trish Lapenas

Helen Sakal

MCCAUGHEY CENTRE

Centre Director and Professor

Billie Giles-Corti B App Sc *WAIT*, M App Sc, *Curtin*, PhD *Uni WA*

Deputy Director and Associate Professor

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Associate Professor

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Senior Research Fellows

Rebecca Armstrong, BNurs/BAppSc (Health Prom)(Hons) *Deakin*, MPH
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Elise Davis, BAppSc (Hons) *Melb*. PhD *Deakin*

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Hlth Sc PhD *Melb*.

Yin Paradies, BSc MMedStats MPH PhD

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Sue West, BA *Phillip ITMA RMIT*

Research Fellows

Rosemary Ashbolt, BSc *Tas*, DipEd *Melb*. MPH *Monash*

Hannah Badland BSR *Auckland University of Technology*, MHSc (Hons)
Auckland University of Technology, PhD *Auckland University of
Technology*

Karen Block, BVetSc (Hon) *Melb*. BA *Melb*. MPH *Melb*.

Belinda Burford, PhD, BSc (Hons I)

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Rachel Clark, MSc (Physical Activity, Nutrition and Public Health)
Bristol, BSc (Hons) *Plymouth*

Fiona Clay

Melanie Davern, BSc *Melb*. BSc (Hons) *Deakin*, PhD *Deakin*

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Britt Johnson

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Chantelle Medenilla

Johanna Mithen, BA BSc (Hons) *Monash*, GradDipEd *Melb*. MPH *Melb*.

James Oliver

Kathryn Page, Doctor of Organisational Psychology *Monash*,
Psychology (Hon) *Deakin*, BA *Deakin*

Kathryn Perez

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Theonie Tacticos

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Ms Alexandria Hoare B Health Sci *Deakin*

Lauren Krnjacki

Bjorn Nansen, PhD *Melb*.

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Monica Virgo-Milton, BA/BHSc *Deakin*

Dana Young, BHNutr *Canberra*, MPH *Deakin*

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Centre Manager

Richard Duke

Brad Morgan

Centre Administrative Staff

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Alana Pirrone

Maria Sortino

Anna Vassiliadis

Honorary Appointments

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Professional Fellows

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John Wiseman BA BSW *Melb*. PhD *La Trobe*

Fellows

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Laurence Moore, BSc (Hons) *Bristol*, PhD *Bristol*, MSc MedStats
London School of Hyg & Trop Med

Michael Smith, PhD *UNSW*

Takemi Sugiyama, BE *Nagoya*, March *Virginia*, PhD *Sydney*

CENTRE FOR HEALTH AND SOCIETY

Professors

Marcia Langton, AM, BA *ANU PhD Macquarie* (Chair of Australian
Indigenous Studies)

*Janet Susan McCalman, BA *Melb*. PhD *ANU FAHA FASSA*

Robin Room, BA *Princeton MA(English) Berkeley MA(Sociology) PhD
Berkeley* (Chair of Social Research in Alcohol)

SUMMARY REPORT

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Angela Clarke, BA VUT MPH Deakin

Shaun Ewen, BAAppSc S.Aust. MMIL S.Aust. PhD Melb.

Lecturers

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Rebecca Kippen, BBus La Trobe GDipDemography ANU PhD ANU

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Meg Parsons, BSocSc Waikato PhD Syd.

*Rachel Reilly, BA Adel. DipPsych Melb.

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Alice Wilkin, Bachelor of Health Science and Arts (hons), La Trobe

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Joanne Luke, BSc Melb. MPH Deakin

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Communications Officer

Cristina Lochert, BA La Trobe Gdip Computing Monash Gdip EditingPublishing Melb. MA Melb.

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Leaders in Indigenous Medical Education (LIME) Network, National Program Manager

Odette Mazel, BA LLB(Hons) FUSA; Dip LP (UniSA)

Margo Collins, BA Melb. Grad Dip (Counselling) *Australian College of Applied Psychology*

LIME Project Officers

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Laura Thompson BA BEd Deakin

Caitlin Ryan BA Melb. MSocSci RMIT

Indigenous Support Systems Project Officer

Alister Thorpe

Indigenous Health Promotion Officer

Bradley Firebrace

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Nicole McMillan

Community Development and Communications Officer

Nicole Shanahan

Finance and Resources Officer

Natalie Tong MAC (Acc) Melb. BA Acc DUFE China

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Mayatili Marika

Caden Pearson

Vanessa Vine

CENTRE FOR MOLECULAR, ENVIRONMENTAL, GENETIC AND ANALYTIC (MEGA) EPIDEMIOLOGY

Director and Professor of Epidemiology and Biostatistics

Dallas English, BSc Melb. MS PhD Wash.

Director (Research) and Professorial Fellow

John Hopper, AM BA Melb. BSc MSc Monash PhD La Trobe (National Health and Medical Research Council Australia Fellow)

Professorial Fellow

*John Brooke Carlin, BSc W.Aust. PhD Harv.

Associate Professor

Mark Jenkins, BSc Monash PhD Melb.

Associate Professors and Principal Research Fellows

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Lyle Gurrin, BSc W.Aust. PhD W.Aust.

Senior Lecturers

*Katrina Scurrah, BMath Newcastle PhD W.Aust.

*Julie Simpson, BSc Melb. PhD Open Uni. UK PGDip(MathStat) Camb. UK

Lecturer

*Melissa Russell, B Phys Melb. PhD Melb.

Senior Research Fellows

Carmel Apicella, BSc *Monash* MSc PhD GDipEpiBio *Melb.*
 Dianne Currier, BA *RMIT* PhD *Monash* MPH *Columbia University NY*
 Gillian Dite, BSc. PhD GDipEpiBio *Melb.*
 *Louisa Flander, BA MA *G.Wash.* MA *RMIT* PhD *Colorado*
 *John Heath, MBBS BVSc *Melb.* MS *Harvard* PhD *Melb.* FRACP
 *Miroslaw Kapuscinski, BSc *ANU* PhD *ANU*
 *Melanie Matheson, BSc *Monash* MAppSc *RMIT* PhD *Monash.*

Research Fellows

*Nadine Bertalli, BHSci *La Trobe* GDipBioEpi *Melb.*
 Adrian Bickerstaffe, BCompSci *Monash* PhD *Monash*
 Maree Brinkman, BSc *La Trobe*, MNutrDiet, *Deakin*, PhD, *Catholic University of Leuven, Belgium*
 Quang Minh Bui, BSc *La Trobe* PhD *La Trobe*
 *John Burgess, MBBS *Melb.* MEpi *Melb.* GDipEpiBio *Melb.* PhD *Melb.*
 James Dowty, BSc PhD *Melb.*
 *Kris Jamsen, BSc *Mich.State* MBIostat *Melb.* PGDip *Melb.*
 *Adrian Lowe, BBSc *La Trobe* MPH *Melb.* PhD *Melb.*
 Robert MacInnis, BSc *Monash* PhD *Melb.* GDipEpiBio *Melb.* (to September 2011)
 Enes Makalic, BCompSc (Hons) *Monash* PhD *Monash*
 Marisa Schlichthorst, MBus *Kiel University, Germany*, PhD *Kiel University, Germany*
 Daniel Schmidt, BDigSys (Hons) *Monash* PhD *Monash*
 Jennifer Stone, BSc *Guelph* MSc *Guelph* PhD *Melb.*
 *Aung Ko Win, MBBS *Myanmar* MPH *Melb.* (from November 2011)
 Sophie Zaloumis (Biostatistician), BSc *Melb.* PhD *Melb.*

Research Officer

Anna Forsythe, BSc *ANU*. MMGA *ANU*
 *Rodica Stan, BSc *Bucharest* MSc *Bucharest* PhD *New Jersey*

Research Assistants

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 Driss Ait Ouakrim, BA *Lyon II* MPH *Lyon I*
 Melisa Lau, BMedSc *Melb.*
 *Heather Niven, BSc (Psych) *Syd.*
 *Melanie Reeves, BAppSci *Deakin*
 *Alison Rutstein, BSc (Hons) *Wales, Cardiff UK* PhD *St. Andrews, UK.*
 *Jeeva Sanjeevan, MD *St Petersburg, Russia*

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*Johanna Mithen, BA/BS *Monash*, GDipEd(Secondary) *Melb.* MPH *Melb.*

Study Coordinator

Carly Dunford

Honorary Appointments

Professorial Fellows

Graham Giles, BSc MSc *Mich.* PhD *Tas.*
 John Mathews, AM BSc MB BS MD PhD *Melb.* Hon DSc *NTFRACP*
 FRCPA *FAFPHM*

Principal Fellows with the title of Associate Professor

Catherine Bennett, B.Sc *La Trobe* PhD *La Trobe*. MAppEpi *ANU*
 Michael Coory, BAppSc (Statistics), AStat, MBBS, PhD, *FAFPHM*
 Dorota Gertig, MB BS *Monash* MHSc(ClinEpi) UBC ScD(Epi) *Harv.*
FAFPHM
 Peter Greenberg, MB BS MD PhD *Melb.* FRACP

Kelly-Anne Phillips, MBBS *Monash* MD *Monash* FRACP
 Gianluca Severi, BSc *Genoa* MSc PhD *Milan* PhD *Birmingham UK*
 Heath Kelly, BSc *UNSW* MB BS *UWA* MPH *UWA*

Senior Fellows

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 Mark Hew, MB BS *Melb.* FRACP RACP DIC *Imperial College London*
 PhD *Imperial College London*
 Susan Treloar, BSocStud *Syd.* MSc *Lond.* MSW *NSW* PhD *Qld.*

Fellows

Laura Baglietto, BSc *Italy* MSc *Italy* PhD *Birmingham UK*
 Bruce Bolam, Bsc *Manchester UK*, PGradCertEd *Wolverhampton UK*,
 MSc *Manchester UK*, PhD *West of England UK*, MSc *Cardiff UK*
 Clare Constantine, BSc *UWA* PhD *Murdoch University* GDipCompSci
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 Bircan Erbas, BSc MSc PhD *Melb.*
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 Robert MacInnis, BSc *Monash* PhD *Melb.* GDipEpiBio *Melb.* (from September 2011)
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 College of Law *London* PGradDip (AppPsys and Counselling), *Jansen Newman Institute NSW*
 Marie West, RN

Professional Staff

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 Sandra Bell, Centre Manager (to March 2011)
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 *Leah Braganza, Project Assistant, Australian Twin Registry
 *Jaymes Charlesworth, Research/Data Management Support Officer,
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 Bianca Ebeling, Finance Officer, BCom *Canberra*
 *Emily England, Senior Projects Officer, Australian Twin Registry (to June 2011)
 *Sandra Heelan, Resource Officer
 Nilmini Jayasuriya, Assistant Manager Australian Twin Registry, BSc
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 Vicki King, Finance and Resources Officer (to January 2011)
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 GDipBusAdmin *RMIT*.
 Judi Maskiell, Studies Coordinator/Coordinator of Family Cancer
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 Bradley Morgan, Centre Manager (from May 2011)
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 *Kate Murphy, Manager Australian Twin Registry, BVSc *Massey New Zealand*

SUMMARY REPORT

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*Briony Tupper, Data Clerk, BHealthSci *Deakin*.
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MRCP FAFPHM
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Mathew Dafilis, BAppSc (Hons) PhD
Dora Pearce, BAppSc(Biol) *RMIT* GDipEd *UB* GDipEpid *UoN* MIT *UB*
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Patricia Campbell, BSc (Hons)
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Marita Kefford, DipAppSc *Phillip* TRN

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Sharon Trevorrow, BAppSc *La Trobe* RN

Research Assistants

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Paula Nathan, ADipMedLabSc *RMIT*

Phlebotomists

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Bernadette McCudden

Barbra Sherry

Study Doctors

Jennifer Davey, MBBS *Melb.* FRACGP

Lana Horng, MBBS *Melb.* DipPaed *NSW* FRACP Dip.Hlth *Monash*

Nicole Rose, MBBS *Melb.*

INDIGENOUS EYE HEALTH UNIT

Harold Mitchell Chair of Indigenous Eye Health

Professor Hugh R. Taylor AC, MD *Melb.* MBBS *Melb.* BMedSc *Melb.* DO
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Senior Research Fellow

Mitchell Anjou, BScOptom *Melb.* MScOptom *Melb.*

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Robyn McNeil, BScHons *La Trobe*, MPH *Monash*
Emma Stanford, BA BSc *Monash* Grad Dip Environmental Science
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Academic Visitor

Dr Jeremy Curtin, BA BComm *Syd.* MBBS Hons *Syd.*

Summer Student

Garang Dut, BSc Biomed *Monash Medical Student* *Melb.*

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Project Officer

Josie R Atkinson, Diploma of Fashion, BA Indigenous Studies Major
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Assessment and Training

Health Promotion Project Officer

Fiona D Lange, DipNat *SA*, BHLthSci *New England*

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Rachael Ferguson, Certificate IV Photoimaging Vocation Photography,
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CENTRE FOR MOLECULAR, ENVIRONMENTAL, GENETIC AND ANALYTIC EPIDEMIOLOGY ANNUAL REPORT 2011



Director of
the Centre for
Molecular,
Environmental,
Genetic and
Analytic
Epidemiology,
Professor Dallas
English.

YEAR'S OVERVIEW

In 2011, the Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology continued to make major contributions to the teaching of the Melbourne School of Population Health (MSPH), through delivery of two core subjects and seven elective subjects for the Master of Public Health (MPH), coordination of four Masters degree programs, including the MPH, and by playing a leading role in the redevelopment of the MPH following the closure of the Victorian Consortium for Public Health. A key element of the Centre's strategic plan is recruiting PhD students, especially full-time students. In 2011, three full-time students and one part-time student commenced study.

The Centre has a large research program on the genetic epidemiology of cancer, particularly breast cancer, bowel cancer and melanoma that are funded by the USA National Institutes of Health (NIH) and the National Health and Medical Research Council (NHMRC), and a major program of research on chronic respiratory disease, funded largely by NHMRC grants. In addition, it conducts research on malaria and has collaborations with the Murdoch Childrens Research Institute on food allergy in children and with the Cancer Council Victoria on the Melbourne Collaborative Cohort Study, which is a study of genetics and lifestyle and risk of common chronic diseases of mid to

late life. In 2011, staff of the Centre (including honorary staff) published 109 peer-reviewed papers in the scientific literature, continuing a long period of productive output. Most of these papers were published in Excellence in Research Australia (ERA) A* and A journals, the highest ranked journals for the respective fields.

The Centre had a very successful year in obtaining fellowships, grants and contracts. Professor Dallas English co-led the team that successfully tendered for the new Australian Longitudinal Study on Male Health (known as Ten To Men). Three of six NHMRC projects submitted from the Centre were funded and 10 of 16 other project grants on which Centre staff were Chief Investigators were funded. (The national average of project grants funded was 23%.) Centre staff were chief investigators on two successful NHMRC Centres for Research Excellence grants. All applicants for NHMRC people support were successful. Four other grants submitted from the Centre were successful and Centre researchers were investigators on another seven grants, including two from the US NIH.

In late March, the Centre and the Centre for Women's Health, Gender and Society moved from 723 Swanston St to Level 3 of 207 Bouverie St, which is the building that already housed the rest of the School. The floor, formerly occupied by the Melbourne School of Engineering, was newly renovated. The architects did a superb job in designing a modern, light workspace. Proximity to the other Centres, Units and groups in the School has improved communication and collaboration.

LEARNING AND TEACHING

There was significant change in teaching and learning in 2011, with the launch of the revised Master of Public Health (MPH) program and a subsequent dramatic increase in student interest and numbers. In the subjects taught by Centre staff, 121 students completed Epidemiology, 131 students completed Biostatistics and 49 students completed Study Design in Epidemiology. The second semester subject, Genetic Epidemiology, also saw a surge in interest, with 25 students completing that subject.

CENTRE'S VISION STATEMENT

Our vision is for improved population health. We will contribute to achieving this vision by excellent teaching, research training and research in epidemiology and biostatistics and by translating our research results into practice.



PREDICTING CANCER RISK FOR GENE MUTATION CARRIERS

The work of a MEGA researcher is producing new information that can help predict the risks of bowel, uterine and other cancers for carriers of a specific gene mutation.

Dr Aung Ko Win of the Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology, at the Melbourne School of Population Health, is establishing whether obesity is a risk factor for bowel and uterine cancers for people who carry genetic mutations. His work focuses on mutations of the mismatch repair genes. "These mutations are rare, occurring in approximately one in 1000 people," he said. "However, the effect on cancer risks for people who have them is potentially devastating.

"Previous research has been limited because it has not been possible to get enough carriers to study," he said. However, Dr Win has been leveraging his access to a goldmine of data from the Colon Cancer Family Registry, which is funded by the National Institutes of Health (NIH) in the United States. The largest resource of its type in the world, it contains data sourced from approximately 1500 mutation-carrying families. The Centre for MEGA Epidemiology recruits participants from throughout Australia and New Zealand for this resource and is one the six NIH funded sites internationally.

He said those who carried mismatch repair gene mutations were at very high risk of bowel cancer, uterine cancer and some other cancers but they did not all face the same level of risk. "For example, some of them are diagnosed with cancers when they are young but others never get cancer. This suggests that there will be some factors modifying the cancer risks for these individuals. We do not know much about this.

"What we did find is that obesity around age 18 to 20 years is a risk factor for bowel cancer for the mutation carriers. This is similar for the general population," he said. "So this may indicate that one way to reduce their bowel cancer risk is not to get obese.

"But for uterine cancer, the story is different. Obesity around age 18 to 20 years is not a risk factor for mutation-carrying women. This is different from the general population where obesity is associated with an increased risk of uterine cancer," he said. "So what we learn from this finding is that the development of a uterine cancer in mutation carriers may not depend on obesity."



Dr Aung Ko Win.
Photo: expressions.net.au.

His other major and recent contributions are his discoveries about the risks of bowel cancer recurring after surgery. These findings are expected to be quickly translated into clinical practice, potentially saving lives by informing surgeons about the best strategy to take.

"The most common treatment for bowel cancer is surgery to remove the cancerous part of the bowel," he said. "Usually some of the bowel is left. People who carry a mutation in a mismatch repair gene risk getting a new cancer in the remaining bowel. But the risk of getting a new cancer after surgery is not well understood. And also, the risk factors influencing a new cancer are not known.

"The aim of my research is to estimate the risk of a bowel cancer after surgery for the first bowel cancer in mutation carriers, and to determine whether a new cancer risk depends on the individual characteristic or characteristics of the first cancer.

"I found that for every 100 people with a previous diagnosis of bowel cancer, about 20 will get a new cancer in the next 10 years. I also found that the risk of cancer was lower in patients with more bowel removed. Therefore, we concluded that for mutation carriers, more bowel should be removed during surgery for the first cancer."

Dr Win will continue to investigate other factors that can potentially reduce the risk of cancers in MMR mutation carriers.

As part of the revised MPH the Centre's teaching and learning staff redeveloped one new core subject, Biostatistics, and one elective subject, Study Design in Epidemiology. Within these subjects the subject objectives, content, delivery methods and assessment tasks were reviewed and redesigned. The core subject Biostatistics was reworked to integrate the direct teaching of Stata in computer-based laboratories. Hands on computer based teaching had not previously been attempted on such a large scale by the School and this component of the subject was successfully taught, considering the large numbers of students involved. Additionally, a new core subject was introduced, Epidemiology, replacing the subject previously taught by consortium universities.

Our subjects have continued to obtain consistently high Quality of Teaching (QOT)/Student Experience Survey (SES) scores in 2011. Epidemiology received a score of 4.3 and Biostatistics received a score of 4.5 in the category of whether the subject was well taught. Infectious Disease Epidemiology was also well received by students, receiving a QOT/SES score of 4.8 in the category of whether the subject was viewed as being well taught by students.

In Research Higher Degrees (RHD) in 2011, we had three commencing PhD students awarded scholarships, and PhD student Dr Aung Ko Win received a MSPH New Researcher award.

RESEARCH

Genetic Epidemiology

We received three project grants (NHMRC, Cancer Council Victoria and Bowel Cancer Australia), as well as two NHMRC research fellowships to improve the use of genome wide genetic studies (see below), to study mammographic density of breast cancer (see below) to determine screening effectiveness for bowel cancer, and to develop prediction models for breast and bowel cancer. This granting success was largely due to the large cancer family resources led by the Centre and highlights a new direction for the Centre in epidemiological research.

Statistical Methods

Statistical Methods Inference on Causation from Examination of Familial CON founding (ICE FALCON)

We have applied a novel statistical method (ICE FALCON), developed by Professor John Hopper, to both continuous and binary data.

Based on parental reports of ever having had asthma/hay fever by age seven (or within two years), and of infantile eczema, for 3696 sibships from the 1968 Tasmanian Asthma Study we found that the data were most consistent with eczema in infancy causing hay fever in children with asthma. In contrast, we found that the association of infantile eczema with asthma in children without hay fever was neither causal nor familial. These are novel insights into the aetiology of these diseases not possible using conventional approaches and studies of unrelated children.

We have also applied the ICE FALCON method to longitudinal twin data on mammographic density, a strong and heritable risk factor for breast cancer. The data were most consistent with there being genetic factors that cause variation in age-adjusted mammographic

density, and that this risk-related measure "tracks" through mid-life. Therefore, the aspect of woman's breast cancer risk related to mammographic density might be established early in life, possibly at the time of puberty. This raises the potential for measurement of the mammographic density of young women to provide a means for breast cancer control.

In addition, the ICE FALCON method has been used in a twin study of cortical bone structure and measures of bone repair. This showed that the data are consistent with bone structure determining the rate of repair, while the rate of repair does not cause changes in structure as previously thought.

Genetic variants and cancer risk

We specialise in the use of family data to investigate the role of genetic and environmental factors on the risk of cancer. One of the most novel and important findings is that unaffected siblings of cancer cases are a better choice of controls for studies of risk factors for cancer compared with unrelated controls, which is the traditional design in epidemiology. We have been utilising our recently developed, state-of-the-art statistical methods to estimate the risks of cancer associated with measured genetic variants. Many of our analyses are based on family data with incomplete genotyping. We have specific expertise in methods that account for the relatedness of family members and use this lack of genetic independence to enhance statistical power. A novel finding is that risk of cancer for those with Lynch syndrome (having a mutation in a mismatch repair gene) varies greatly across families, suggesting some people with Lynch syndrome are not at increased risk, while others are almost certain to develop cancer. This is consistent with the existence of additional genetic modifiers of risk for Lynch syndrome. A major aspect of our research is estimating the risk of second bowel cancer for Lynch syndrome showing surgical removal of more bowel is warranted for first cancer. We also demonstrated that for women with Lynch syndrome, obesity is not a predictor of cancer of the uterus, whereas it is for women in general. We also played an important role in large international consortia studies to identify new genetic risk factors for bowel, breast, prostate and skin cancer.

New approaches to the analysis of Genome-Wide Association Studies (GWAS)

This project involves applying ideas from information theory (e.g., minimum encoding inference) and modern logistic regression methods (the adaptive LASSO, non-negative garrote, etc.) to analysis of GWAS data. Together with National ICT Australia Limited (NICTA), we are currently developing statistical algorithms for feature ranking and analysis of SNP x SNP interactions as well as marginal SNP effects. The new algorithms are applicable to ultra high dimensional data sets where the number of features is significantly higher than the sample size. The outcome of the project will be software implementing the aforementioned algorithms that will be deployed on the University of Melbourne's IBM Blue Gene supercomputer, with the help of IBM's supercomputing team. In addition, we are developing permutation-based test statistics for detection of SNPs that are drivers of multiple phenotypes; to date, we have worked on detecting SNPs that are associated with breast cancer as well as mammographic density.



NOT ALL WOMEN IN BREAST CANCER FAMILIES SHARE HIGH RISK

Mothers, sisters and daughters from breast cancer families with known genetic mutations do not all share the same high risk of developing the disease, according to a new international study involving the University of Melbourne.

Women with the breast cancer genetic mutations BRCA1 or BRCA2 are at least 10 times more likely to develop breast cancer than the average woman.

The new study found that women who do not have a genetic mutation, but are closely related to women who do have genetic mutations are at an average risk of developing the disease.

Professor John Hopper from the Melbourne School of Population Health, University of Melbourne, who led the Australian component of the study, said some women in this scenario were worrying unnecessarily.

"Our study revealed that these women have an average risk of developing the disease as opposed to the high risk of their mutation-carrying close relatives and hence do not need to worry unnecessarily and over screen to detect the disease," he said.

"These findings go against a 2007 clinic-based study in the UK which claimed that all women in breast cancer families with known genetic mutations are at increased risk of developing the disease even if they don't carry the family-specific mutation," he said.

"Our results revealed there was no evidence of increased breast cancer risk for non-carriers of the genetic mutations, certainly not the five-fold increased risk suggested by the authors of the 2007 study."



Professor
John Hopper.

The international study is the largest analysis to date of breast cancer risk for non-carriers of family specific breast cancer mutations. It was led by Professor Alice Whittemore from Stanford University School of Medicine, USA, and was published in the *Journal of Clinical Oncology*.

More than 3000 breast cancer families from the population at large were analysed for their genetic risk of the disease. Researchers compared the risk of breast cancer among first-degree relatives of breast cancer patients who did and did not carry a BRCA1 or BRCA2 mutation.

Women were recruited from an international consortium, the Breast Cancer Family Registry, which used population cancer registries in USA, Australia and Canada. The Australian component involved the Australian Breast Cancer Family Registry, led by Professor Hopper.

Professor Hopper said genetic testing could help to clarify which women are at high or average risk.

"Genetic testing will give women a clearer indication of their real risk level and hence clarify what they could or should not do to reduce their risks of developing breast cancer," he said.

Women who think they might be at increased risk for breast cancer due to a strong family history of the disease can attend Family Cancer Clinics around Australia for genetic testing.

Model selection and parameter estimation

This year Dr Enes Makalic and Dr Daniel Schmidt developed a new Bayesian analysis method for sparse regression of ultra high dimensional data sets. The new method is applicable to genomic data where the covariates are highly correlated and the number of covariates is often orders of magnitudes larger than the sample size. Further, we have developed a new Bayesian technique for inference of sparse autoregressive time series models.

Data mining and mammographic density

In 2010 we began developing a prototype for automatic measurement of mammographic density called CIRRUUS for the MATLAB numerical computing platform. CIRRUUS extracts a large number of features from raw mammograms and uses modern machine learning techniques to build predictive models for breast cancer risk. The current version of CIRRUUS incorporates advanced image processing features (for example, fractal dimension and

structural features) as well as state-of-the-art region growing cluster algorithms to identify structurally similar areas of the breast. CIRRU is being tested on a sample of around 3600 women from the Melbourne Collaborative Cohort Study as well as 1500 digital mammograms from the American DMIST trial.

Population pharmacokinetic-pharmacodynamic modelling of antimalarial drugs

This year, headed by Dr Julie Simpson, we developed a prototype for optimal sampling designs for population pharmacokinetic studies of the antimalarial drugs, amodiaquine, lumefantrine, piperazine and mefloquine, in adults, children and pregnant women. We have also assessed the utility of a mechanistic pharmacokinetic-pharmacodynamic model for aiding the clinical development of antimalarial drugs. Our assessment demonstrated that the pharmacodynamic effect of antimalarials predicted from laboratory experiments does not accord well with the effect observed within the patient.

STAFF HIGHLIGHTS

All staff of the Centre who applied for people support programs from the NHMRC were successful, which is an extraordinary achievement. Professor John Hopper was awarded a Senior Principal Research Fellowship. (His current Australia Fellowship, which is a non-renewable award, ends in 2012.) Associate Professor Mark Jenkins and Associate Professor Shyamali Dharmage were each awarded Senior Research Fellowships, while Associate Professor Lyle Gurrin was awarded a level 2 Career Development Fellowship.

Ms Sandra Bell resigned her position as Centre Cluster Manager to take up an appointment elsewhere in the University. We thank her for her dedicated and friendly service and, in particular, for organising the move from 723 Swanston St to 207 Bouverie St. Mr Brad Morgan has now joined us as Centre Cluster Manager.

The following people were promoted in 2011:

Dr Adrian Bickerstaffe from Level A to B

Dr Gillian Dite from Level B to C

Dr Melanie Matheson from level B to C

Dr Daniel Schmidt from Level A to B

Associate Professor Julie Simpson from level C to D

Dr Aung Ko Win from Level A to B

PUBLICATION HIGHLIGHTS

Wang Y, **Gurrin LC**, Wluka AE, Bertalli NA, Osborne NJ, Delatycki MB, **Giles GG**, **English DR**, **Hopper JL**, **Simpson JA**, Graves S, Allen KJ, Cicuttini FM. (2011). HFE C282Y Homozygosity Is Associated with an Increased Risk of Total Hip Replacement for Osteoarthritis. *Seminars in Arthritis and Rheumatology*, **41**, 872-878.

What is known on this topic? People with mutations in the HFE (hemochromatosis) gene are genetically pre-disposed to iron overload. Since excess iron can be deposited in joints, people with HFE mutations may be at increased risk of hip or knee osteoarthritis.

What did we do and find? We examined the relationship between HFE gene mutations and risk of total hip and knee replacement

using data from the Melbourne Collaborative Cohort Study. Data for total hip and knee replacements for osteoarthritis (as a marker of symptomatic osteoarthritis) were obtained from the Australian Orthopaedic Association National Joint Replacement Registry. People who had two copies of the C282Y mutation ("homozygotes") had almost twice the risk of single total hip replacement and six times the risk of bilateral total hip replacement for osteoarthritis.

What does this study add? Our results show that people who have two copies of the C282Y mutation have an increased risk of hip replacement for osteoarthritis.

Lowe AJ, Hosking CS, Bennett CM, Allen K, Axelrad C, **Carlin JB**, Abramson MJ, **Dharmage SC**, Hill DJ. Effect of a partially hydrolyzed whey infant formula at weaning on risk of allergic disease in high-risk children: A randomised controlled trial. *J Allergy Clin Immunol*. 2011; 128:360-365.

What is known on this topic? Various health organisations recommend infants with a history of allergic disease use a special hypoallergenic infant formula to help prevent them developing allergic diseases (eczema, asthma and hay fever), despite limited evidence to support this.

What did we do and find? We tested a hypoallergenic infant formula in the Melbourne Atopy Cohort study, a randomised controlled trial of 620 children with a family history of allergic disease. Infants were given either hypoallergenic, cow's milk or soy formula when breastfeeding stopped. The hypoallergenic formula did not reduce the risk of eczema, asthma or hay fever.

What does this study add? Our results do not support the use of hypoallergenic formula to prevent allergic disease. The findings may lead to changes in infant feeding guidelines.

Cust AE, Armstrong BK, Goumas C, **Jenkins MA**, Schmid H, **Hopper JL**, Kefford RF, **Giles GG**, Aitken JF, Mann GJ. Sunbed use during adolescence and early adulthood is associated with increased risk of early-onset melanoma. *Int. J. Cancer* 2011;128:2425-2435.

What is known on this topic? The use of solariums in Europe and North America causes melanoma. Because Australia has higher levels of ambient sunlight, it was not known whether sunbeds would be detrimental here.

What did we do and find? From the Australian Melanoma Family Study, a multicentre, population-based, case-control-family study, we analysed data for 604 cases of melanoma diagnosed between ages 18 and 39 years and 479 controls. Data were collected by interview. People who had used solariums at least 10 times, had double the risk of melanoma as did people who had never used a solarium.

What does this study add? This study confirms what we have long feared – young Australians who use solariums increase their risk of melanoma, the most deadly type of skin cancer.



NEW GUIDE FOR MALARIA RESEARCHERS

An expert biostatistician from the Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology within the Melbourne School of Population Health is helping to save lives through her work on a new guide for malaria researchers.

In 2010, malaria infected about 216 million people and killed an estimated 655,000. The World Health Organization (WHO) enlisted Associate Professor Julie Simpson to lead an international team to contribute a key chapter to the guide, which is a world first. *Methods and Techniques for Assessing Exposure to Antimalarial Drugs in Clinical Field Studies*, an essential tool for any researchers starting new clinical trials of an anti-malarial drug anywhere on the globe, was published in late 2011.

Associate Professor Simpson's international standing in malaria research, led WHO to select her to chair the chapter on sampling schemes for pharmacokinetic studies. Pharmacokinetics is the process by which a drug is absorbed, used and eliminated by the body. Associate Professor Simpson's work in this specialty since 1996 includes four years in South East Asia, an experience that enriched her understanding of both the complexities of field work and her own contribution as a biostatistician.

Clinical malaria researchers may work under extremely difficult circumstances, such as collecting blood samples from patients in remote areas, she says.

The chapter on optimised sampling schemes provides practical recommendations for each drug, offering strategies that cover critical factors like how many patients to test, and the number and timing of samples in order to exploit the most information rich 'sampling window'. These designs for new pharmacokinetic studies are feasible for the researchers in the field and should result in more accurate estimation of the drug concentration profile, an essential research resource that has been lacking until now, she says.

Under current WHO dosing regimes, all patients get the same weight-adjusted dose. "There is no adjustment for children or pregnant women or people with HIV, for example," Associate Professor Simpson says. "It would



Associate Professor Julie Simpson.

be worth doing more of these studies to know if it's okay to give everyone the same regimen."

The poor quality of anti-malarial pharmacokinetic studies was evident from the international literature review done by her team of experts from Thailand, the United Kingdom and South Africa, in preparing the chapter. Over 14 months, they sourced all available studies, extracted all the data from tables, and then simulated profiles for each drug before determining the optimal sampling windows.

Associate Professor Simpson says the rise of resistance to the highly effective artemisinin derivatives, the most widely used anti-malarial drugs, has highlighted the need for pharmacokinetics to become a higher research priority, rather than an "add on" to other clinical studies. "I think the new guide will ultimately improve the proportion of patients who are cured from the treatment," she says. "And because we are going to be doing better designed studies, it means we will get more information from the data we collect which, in turn, will improve dosing regimens.

"And the better our dosing regimens in all study populations, the more effective the treatment will be." Reliable pharmacokinetic data on specific drugs can, when a treatment is proving ineffective, help to distinguish between sub-optimal dosing and drug resistance, with the former contributing to the latter by exposing the malaria parasite to dosages that are too low to effectively eliminate it.

CENTRE FOR HEALTH AND SOCIETY ANNUAL REPORT 2011



Director of the
Centre for Health
and Society,
Associate
Professor
Marilys
Guillemin.

YEAR'S OVERVIEW

2011 proved to be a productive and successful year for the Centre for Health and Society (CHS). One of our major achievements was the recommendation that we continue as a Centre of the University following a rigorous process of external review. In 2011 we welcomed a number of new staff as well as farewelling others. We were successful in a number of key research grants, continuing our excellent research track record. We were also fortunate to have a number of international visitors who enriched the collegial life of the Centre as well as fostering strong relationships with their home institutions.

Staff changes

We were delighted to welcome a number of key staff. These included:

- Ms Leanne Coombe, Lecturer in Indigenous Public Health Capacity Building Project.
- Ms Margo Collins, Project Manager, Leaders in Indigenous Medical Education (LIME) project (replacing Ms Odette Mazel while on maternity leave).
- Ms Merlyn Gomez, Centre Manager (replacing Ms Meg McKay while on maternity leave).
- Mr Matthew Edwards, Administrative Officer.

- Ms Alice Wilkin, Research Officer, Educating for Equity and Leaders in Indigenous Medical Education (LIME) projects.
- Mr Caden Pearson, Personal Assistant to Professor Marcia Langton (replacing Ms Jessica Cotton while on maternity leave).

During 2011, Ms Jane Yule and Ms Johanna Monk transferred from their positions with the Onemda VicHealth Koori Health Unit to the Lowitja Institute for Aboriginal and Torres Strait Islander Research. Together with Ms Cristina Liley, Ms Yule and Ms Monk were critical in establishing the communication and knowledge exchange portfolio at CHS. We are pleased that they have only moved around the corner so that we can continue to see them regularly.

Dr Therese Riley resigned from the Centre in December 2011 to take up a senior research role with the newly created Centre for Excellence in Intervention and Prevention Science. Dr Riley has been a wonderful contributor to the research and teaching of CHS and we wish her all the very best in her new position.

From its inception, CHS has been a joint centre of the Faculties of Arts and Medicine, Dentistry and Health Sciences (MDHS) at the University of Melbourne. With this have come a number of joint appointments with the School of Historical and Philosophical Studies and the School of Social and Political Inquiry, Arts. To ensure that the strategic directions of the Centre could be fulfilled, we decided to put in place a number of moves from 1 January 2012 that will result in Professor Janet McCalman becoming full time in CHS, Dr James Bradley becoming full time in the School of Historical and Philosophical Studies, Arts and Dr Hans Baer becoming full time in the School of Social and Political Inquiry, Arts. Although this will mean that Dr Bradley and Dr Baer will physically move to Arts, we look forward to continuing to work with them closely. CHS remains strongly committed to being a Faculty of Arts centre and it is anticipated that the current collaborations enjoyed between CHS and Arts will continue, namely

The key focus of the Centre for Health and Society (CHS) is the interdisciplinary study of health, illness and healthcare in local, national and international settings.

The Centre brings perspectives from the humanities and social sciences to the study of health and health care, public health practice and health policy.

VISION STATEMENT

The Centre for Health and Society has a vision to be: A leading social health research and teaching centre with international reach.

This vision is built on our commitment to:

- Intellectual rigour in academic inquiry.
- Strengthening the nexus between theory and practice.
- Excellence in teaching and learning, and research practice.
- Ensuring quality impact of this practice on health through health care workforce development, policy development and service delivery.

This vision is underpinned by values of equity, social diversity and community engagement.



HONOUR FOR LIME NETWORK PROJECT



The LIME group receiving the 2011 Rio Tinto Award for Innovation and Excellence in Indigenous Higher Education. From left: Alice Wilkin, Erin Nicholls, Caitlin Ryan, Odette Mazel, Shaun Ewen and Margo Collins.

Photo: Peter Casamento

Melbourne School of Population Health's LIME Network Project won the 2011 inaugural Rio Tinto Award for Excellence and Innovation in Indigenous Higher Education.

LIME (Leaders in Indigenous Medical Education) is hosted by the Onemda VicHealth Koori Health Unit, within the Centre for Health and Society and is a project of Medical Deans Australia and New Zealand Inc.

This University-wide award recognises the LIME Network's many achievements in supporting greater recruitment and retention of Indigenous medical students, and the development of best practice in Indigenous health curricula within medical schools.

The award was sponsored by Rio Tinto Australia in its role as the foundation corporate partner of Murrup Barak Melbourne Institute for Indigenous Development, at the University of Melbourne.

The corporate partnership, launched in November 2010 at the Narrm Oration, is laying pathways of opportunity that reach from Murrup Barak into Australia's most remote communities through such activities as professional placements for graduate students and research into Rio Tinto's on-site knowledge needs.

Murrup Barak has strong links with the Melbourne School of Population Health. The Institute's Director, Professor Ian Anderson, achieved a distinguished career within the School as a former Director of the Centre for Health and Society and Onemda. His efforts contributed to the School establishing one of the largest concentrations of Indigenous staff and Indigenous research projects at the University.

Ellen Day, Manager of Partnerships and Development

for Murrup Barak, says Murrup Barak's partnership with Rio Tinto Australia is mutually beneficial in business terms. "As a business that operates in remote Australia, Rio Tinto has a very strong motivation for increasing the numbers of qualified Indigenous people among its employees and for investing in the viability of the communities in which it works," she says. "And the University sees the partnership as supporting its core teaching and learning goals by increasing both the number of Indigenous graduates and graduates who are skilled at working with Indigenous communities and by enabling the University to reward staff who are striving for excellence in Indigenous teaching and learning."

Rio Tinto's sponsorship of the annual Narrm Oration, which profiles leading international Indigenous thinkers, is also an important aspect of the partnership program, as is the new Rio Tinto Award, won by the LIME Network.

LIME's Program Manager, Margo Collins, says that "traditionally, medical schools have tended to work in isolation. The LIME Network Project shows unique leadership in that it actively promotes, encourages and engages medical schools in supporting and collaborating with each other to improve the teaching and learning of Indigenous health."

Among the achievements of LIME and its predecessor projects, Ms Collins cites the Critical Reflection Tool, an internal quality review tool designed to assist medical schools to implement, monitor and sustain the nationally agreed Indigenous Health Curriculum Framework. The LIME Network website, newsletter and biennial conference were among the resources and activities it had developed.

through joint Research Higher Degree (RHD) supervisions, research collaborations and other relevant initiatives.

Key achievements

One of the major achievements for CHS in 2011 was the review of the Centre and the subsequent recommendation that we continue as a Centre. All centres of the University are required to be reviewed every five years. The 2011 review was the second review since CHS was established. The Terms of Reference for the CHS 2011 Review were:

To evaluate and make recommendations regarding:

1. The performance of the Centre in relation to its stated aims and objectives in teaching and learning, research and engagement.
2. The breadth and effective use of funding, including research funding and other sources.
3. The management and governance of the Centre.
4. The Centre's relationships with collaborative partners, both locally and internationally; and the mutual benefits of those relationships.
5. The interactions of the Centre within the Melbourne School of Population Health, the Faculties of MDHS and Arts, and the University.
6. Whether CHS should continue to operate as a Centre of the University, and if so, the future direction and activities of the Centre.

We were fortunate to have a distinguished and engaged review panel, chaired by Professor Geoff McColl, Deputy Dean, of the Faculty of Medicine, Dentistry and Health Sciences (MDHS) University of Melbourne. The review committee comprised internal peers: Professor Trevor Burnard, Head, School of Historical and Philosophical Studies, Faculty of Arts, University of Melbourne, and Professor Lyn Yates, Pro Vice-Chancellor (Research), University of Melbourne. In addition, the external panel members were Professor Annette Braunack-Mayer, Head, School of Population Health and Clinical Practice, University of Adelaide, and Associate Professor Papaarangi Reid, Tumuaki/Deputy Dean, Maori, School of Population Health, University of Auckland. The panel was ably supported by Dr Catherine Lees, Business Director, Children's Bioethics Centre, The Royal Children's Hospital.

In their report, the review panel made a number of commendations as well as recommendations that will guide the continued development of the Centre. We were particularly pleased with the panel's recognition of the ways that the Centre's values are embodied in our staff and students, and our activities. To quote from the review report:

"Overall the CHS has successfully met the aims and objectives outlined in the 2008-2012 CHS strategic plan. The work of the CHS highlights its role as a distinguished and differentiating feature of the Melbourne School of Population Health and Faculty of Medicine, Dentistry and Health Sciences and as such is described as being 'essential to its core activities and functions'. The Review Panel

were very impressed that the values of the CHS were so well articulated and that their application were supported by all staff and students. Academic staff, professional staff and students all indicated that the espoused values of equity, social diversity and community engagement were strongly exemplified in the work of the CHS, and a source of attraction to staff and students to work or study there."

Although reviews of this kind are major endeavours requiring considerable time and effort, we have benefited enormously from the process. We are grateful to the panel for their insight, advice and serious engagement with the work of the Centre. Moreover, I wish to thank the CHS graduate students and staff, in particular Dr Shaun Ewen, the Deputy Director, and the CHS portfolio leaders for all their contributions to the review process and ensuring its successful outcome.

International visitors

CHS benefits from a number of close international collaborations, particularly with colleagues in Scandinavia, the United Kingdom, New Zealand and the United States. In 2011 we were delighted to host a number of international visitors. These comprised:

- Professor Mario Garrett, Chair, Department of Gerontology, Director, Center on Aging, College of Health and Human Services, San Diego State University, USA. Professor Garrett spent a number of months at CHS undertaking a comparative study of the economic and health status of American Indian and Alaska Native elders in North America and that of Indigenous populations in Australia. While at CHS, Professor Garrett contributed to graduate teaching, presented a number of seminars and actively engaged in the collegial life of CHS.
- Dr Per Axelsson, Umeå University, Sweden. Dr Axelsson is a researcher in Indigenous historical demography from the Centre for Sami Studies (CESAM) and co-located with the renowned Centre for Population Studies at the University of Umeå in Sweden. Dr Axelsson spent 12 months at CHS working on *Indigenous Demography and the Consequence of Colonisation on Mortality and Health in Sweden and Australia*. Dr Axelsson worked closely with Professor Janet McCalman, Dr Rebecca Kippen, Professor Ian Anderson and Dr Shaun Ewen. Dr Axelsson's visit enabled the commencement of a comparative study of Sami and Australian Indigenous health under colonialism. Dr Axelsson was a keen contributor to CHS and helped to consolidate our relationships with the University of Umeå in Sweden. He presented at a MSPH seminar on his work on polio epidemics and preventive measures in Sweden 1880s-1940s.
- Dr Nina Hallowell, currently Program Lead, at the Public Health Genomics Foundation, Cambridge, UK. Dr Hallowell has a significant research track record in the sociology of health and ethics, and has an international reputation in the area of sociology of cancer genetics. She has been a frequent visitor to Melbourne and Australia and has forged strong Australian links. During her visit to CHS, Dr Hallowell



was a keen and enthusiastic colleague, working closely with academics and students, and presenting her research work at CHS seminars.

- Dr Sue Jackson, Commonwealth Scientific and Industrial Research Organisation (CSIRO), Darwin. Dr Jackson is a Senior Research Scientist, Ecosystem Sciences, CSIRO, based in the Northern Territory. She was at CHS for 12 months, collaborating with Professor Marcia Langton and Dr Meg Parsons. During her visit Dr Jackson worked on developing the Climate Change Adaptation and Impacts on Indigenous Communities research program. This included the development of research grants in partnership with the Bureau of Meteorology and CSIRO.

LEARNING AND TEACHING

The CHS review panel made a point of commending CHS on its achievements in learning and teaching, noting that: "The Centre's use of conceptual tools and analytical approaches used by the humanities and social sciences appear to bring about deeper understanding and critical reflection in student thinking. This was evident through the quality of teaching scores achieved and the conversations held with students."

In particular the panel noted the Centre's unique contributions to ethics and Indigenous health teaching in the professional health sciences degrees; without the contributions of CHS teaching in these areas, these courses could not meet their professional accreditation requirements.

In 2011 we continued the teaching of undergraduate breadth subjects, led by Professor Janet McCalman and Dr James Bradley. In addition, we were pleased to partner with the Rural Health Academic Centre to recruit and support a cohort of seven Aboriginal students from the Goulburn Valley. The potential to professionalise the Aboriginal health workforce in the Goulburn Valley region is a key aim of this initiative, and indeed, the aim of the Aboriginal students who have enrolled in the Master of Health Social Sciences (MHSS) and the Aboriginal leaders of the Goulburn Valley health agencies. With the upgrading of qualifications and skills for this cohort, these students have the potential to contribute at a high level to strategies and interventions to 'close the gap' in the health inequalities and disadvantages suffered by the Aboriginal population of the Goulburn Valley, which is estimated at over 6000 people. This initiative has been made possible by a coordinated approach between the University of Melbourne staff in Parkville and Shepparton. Various local Aboriginal organisations in the Goulburn Valley are also contributing to this initiative by supporting and encouraging their staff to consider higher education.

A new Indigenous Health specialisation has been established in the Master of Public Health (MPH) program. The units available to students in this specialisation include Indigenous Health & History, Indigenous Health: From Data to Practice, and Indigenous Health Management & Leadership. Students also have the option to complete a capstone experience in Indigenous Health, either through a Research Project or as part of the Professional Practice

Unit. Students doing the Indigenous Health specialisation are also able to enrol in up to two additional Indigenous Health electives offered through the University of Queensland, through cross-institutional enrolment, as part of a collaboration to develop and deliver a nationally accessible curriculum in Indigenous Health within the MPH.

The Public Health Indigenous Leadership in Education (PHILE) Network, formally known as the Indigenous Public Health Curriculum Network, has been rapidly expanding during 2011. The PHILE Network leadership group now consists of 18 academics representing 15 institutions and the broader network membership exceeds 200. The PHILE Network has completed the first of the national MPH curriculum reviews to assess the integration of the Indigenous Public Health Core Competencies. The reviews that have been conducted to date were at the University of New South Wales, Flinders University and the University of Adelaide. The PHILE Network has also recently launched a website, www.phile.net.au, to keep stakeholders informed of progress of these reviews and provide access to various resources to assist in strengthening Indigenous Health curricula.

Our postgraduate student group make significant contributions to the collegial life of the Centre. Ms Gemma Carey, together with Ms Karen Block and Ms Lara Williamson were active and enthusiastic postgraduate representatives for 2011. Activities organised by the group in 2011 included a seminar series: "Where can I go from here? Career options & opportunities after your PhD". This comprised a series of presentations, including from PhD alumni, on post-PhD career pathways and opportunities. The annual *Conversazione*, where students present their current research topics or research musings in an informal setting, was very well attended with 16 presenters and several staff attending over the day. Feedback from students suggested that the event is both useful and provides a good opportunity to develop links between students. Student representatives also have the opportunity to sit on committees and advocate for student issues. As part of their professional development, students are encouraged to participate in Centre and School committees; in 2011, Ms Carey took part in the Staff-Student Liaison Committee and the CHS Research Advisory Committee. We are grateful for the wonderful efforts of the postgraduate representatives, whose contributions enrich the student experiences of all postgraduates at the Centre.

RESEARCH

We were pleased with our success in building the Centre's competitive research grants and publication record. In developing a more strategic approach to our research, we have consolidated our research program into four themes:

1. Indigenous Health.
2. Historical and Demographic Change.
3. Alcohol, tobacco and other Drugs.
4. Ethics and methodologies.

These themes are represented in the 2011 grants awarded which include:

Climate Change Adaptation Research Grants Program (ARGP) for the Indigenous Communities: Learning from the past, adapting in the future: identifying pathways to successful adaptation in Indigenous communities, led by Dr Meg Parsons.

Australian Research Council (ARC) Linkage Project: Closing the gap on Indigenous birth registration. Associate Professor Jane Freemantle is one of the chief investigators on this project, with partners including Clayton Utz Solicitors, the Equal Opportunity Commission, Hills Community Support Group, Plan International Australia, Tangentyere Council and the Victorian Aboriginal Legal Service Cooperative. This project investigates the nature and extent of problems faced by Indigenous Australians trying to access the birth registration systems within Australia. Following extensive consultation with Indigenous communities and other key stakeholders, this project will identify the causes of the problem and recommend appropriate solutions.

ARC Linkage Project: Alcohol and caffeinated energy drinks: exploring patterns of consumption and associated harms, led by Professor Robin Room, and partnered with Eastern Health and the Victorian Department of Health. Very little research has been conducted on the functions, contexts, effects and harms associated with combining energy drinks and alcohol, despite the widespread consumption of these beverages by young people. This project will contribute to the knowledge base of this under-researched area and inform harm reduction policy and practice.

ARC Linkage Project: Exposure to alcohol advertising and sponsorship in Australian televised sport: association with explicit and implicit alcohol cognitions and drinking, led by Professor Robin Room and Mr Michael Livingston, with partners from the Australian Drug Foundation and Victorian Department of Health. This project will examine whether alcohol advertising and sponsorship in televised sport is related to positive alcohol-related thoughts and alcohol consumption in young adults. The project will use novel methods that assess both conscious and unconscious alcohol-related attitudes, and will provide important evidence for informing alcohol policy.

ARC Discovery Early Career Research Award (DECRA): When should health professionals override parents' decisions about a child's medical treatment? awarded to Dr Ros McDougall. Doctors and nurses sometimes disagree with parents' decisions about the best treatment for a sick child. This project will establish the ethical responsibilities of both parents and health professionals in relation to medical decision-making for children.

KNOWLEDGE ENGAGEMENT

CHS prides itself on its Knowledge Engagement and we were pleased to have this recognised by the review panel in their statement: "The CHS is to be commended on its successful Knowledge Exchange program and it was noted by the panel that it is better at community engagement than most other departments. This gives the Centre a significant credibility".

One example of this is the *Poverty in the Midst of Plenty: Economic Empowerment, Wealth Creation and Institutional Reform for Sustainable Indigenous and Local Communities*, an

ARC Linkage project, led by Professor Marcia Langton. This project is a comprehensive, interdisciplinary study of the institutional, structural, economic and legal reforms required to end poverty for Indigenous and local peoples and to promote economic empowerment for sustainable Indigenous and local communities. Throughout 2011, research continued on the key themes of the project: linkages between land tenure, cultural heritage and climate governance regimes, the engagement of Indigenous enterprises by resource companies, management of Indigenous revenues from mining projects, the tax treatment of native title payments and other economic development. To this end, in 2011 the project achieved the following:

- Completed, edited and submitted for publication, *Community Futures, Legal Architecture: Foundations for Indigenous Peoples in the Global Mining Boom*, a collection of papers edited by Professor Langton to be published by Routledge in 2012.
- Launched a new working paper series that allows the project team to target emerging research issues relevant to the project while maintaining a high academic quality in a size and format that is useful to a range of audiences. The papers will be made available through the Agreements, Treaties and Negotiated Settlements database (ATNS) website, and will be published online by the National Library of Australia.
- Redesigned the ATNS website (<http://www.atns.net.au/>) and continued building the ATNS database. The upgrade is now complete and the website was relaunched in December. New additions to the site include a 'Current Issues' section, which showcases the current work being conducted by the project, as well as the new working paper series section. Currently, there are over 1500 agreements contained in the database.
- The project Chief Investigators have continued to contribute to government inquiries, presented in a large number of forums and produced a wealth of publications.

Another knowledge engagement highlight was the *Trepang: China & The Story of Macassan-Aboriginal Trade* exhibition, which opened at the Melbourne Museum in July 2011. Professor Langton was part of an accomplished team involved in initiating and producing this exhibition, with works developed by two artists, highly respected Indigenous artist John Bulunbulun and accomplished Chinese artist Zhou Xiaopin. The exhibition showcased the first recorded history of trade relations between China and the Yolngu peoples of Australia. Many of us were privileged to see the exhibition, guided by the expert commentary of Professor Langton. The exhibition includes installations, artefacts, paintings, maps and photographs, as well as the work of other Aboriginal artists. See <http://www.trepangexhibition.com/>

KEY ACHIEVEMENTS

The LIME Project was awarded the Rio Tinto Award for Excellence and Innovation in Indigenous Higher Education, a University of Melbourne-wide teaching award, recognising excellence and innovation in the development of curriculum and higher education



HURDLES AND HARDSHIPS OF OVERSEAS DOCTORS

A PhD thesis that revealed the hurdles and hardships encountered by overseas doctors trying to register to practise in Australia has won the Faculty of Medicine's prestigious 2011 Dean's Award for Excellence in a PhD thesis, in the Faculty of Medicine, at the University of Melbourne.

Dr Anna Harris's thesis moved her examiners to tears and was assessed as "in the top 5 per cent of all PhDs they have read or examined." Dr Harris (pictured) has applied its findings to address the issues facing overseas doctors, many of whom moonlight as taxi drivers navigating city streets while they negotiate the maze of registration bureaucracy.

The findings from her thesis, 'Overseas doctors' adjustments in Australian hospitals: an ethnographic study of how degrees of difference are negotiated in medical practice' have been disseminated nationally and internationally. This pioneering research had its genesis at Tasmania's Launceston General Hospital, where Dr Harris was a medical intern.

"I knew very little then about my overseas colleagues other than they had many stories to tell and vast clinical experience which was underutilised in their junior hospital positions," she said. After completing a Masters in Medical Anthropology at the Melbourne School of Population Health's Centre for Health and Society (CHS), she later did her PhD at CHS, researching the experiences of overseas doctors in Melbourne. She graduated in 2010.

"The thesis was situated in the fields of medical anthropology and sociology, and I used a research method called ethnography. This entailed becoming integrated into three outer-metropolitan Melbourne hospitals and being involved in my research participants' lives while they worked and studied in the hospital," she said.

"For 12 months I shadowed more than 30 overseas doctors working and studying for their exams in these hospitals," she said. "My thesis attempted to capture



Photo: Moniek Wegdam

their perseverance, creativity and determination, while putting their situation in a larger context of Australian workforce issues and medical registration."

Dr Harris's thesis told of the bewildering maze of interconnected but separate bureaucracies that overseas doctors must negotiate as they meet the various registration requirements. These include passing English language tests, written medical exams, clinical exams, workplace assessments and interviews. She said the requirements differed according to where doctors had studied medicine, their visa, their medical specialty, where they would work within Australia and their job position. "And these rules and regulations change frequently," she said.

Her research conclusions focused on practical recommendations that were relevant to the training and support of overseas doctors in Australia. Since finishing the thesis Dr Harris has liaised with policy makers, obtained funding to undertake several support programs for overseas doctors, published a booklet that was distributed freely to hundreds of doctors in Melbourne and has published in international peer-reviewed journals and presented at international conferences.

Dr Harris has since undertaken post doctoral research at Maastricht University in the Netherlands, and is currently working at the University of Exeter in the United Kingdom.

She has called on Australia's medical colleges, boards and associations to take the lead and some responsibility for simplifying the complex registration system. "The critical shortage of doctors in Australia, especially in rural and outer-metropolitan areas, means there is an urgent need to address these difficulties," she said. "The relevant authorities first need to answer a fundamental question: do we consider our overseas-trained doctors as skilled migrants or gap-fillers?"

programs relating to Indigenous Australians. In addition, the Selection Committee selected the LIME team as a University of Melbourne 2011 nominee for the Australian Awards for University Teaching – Awards for Programs that Enhance Learning (Category: Educational partnerships and collaborations with other organisations).

Other major achievements for LIME in 2011 were:

- The LIME Connection IV conference, which was held in Auckland in November/December 2011. The conference attracted 210 delegates and over 80 abstracts relating to the theme, Medical Education for Indigenous Health: Building the Evidence Base. Delegate feedback on the conference was overwhelmingly positive, for example, “The best conference I have attended ... and I have been to many. Thank you”.
- The LIME/Australian and New Zealand Association for Health Professional Educators (ANZAHPE) joint publication of a special edition of the Focus on Health Professional Education journal, the first special edition journal published in the world with a specific focus on Indigenous medical education.
- Publication of the LIME Good Practice Case Studies booklet, showcasing strong and diverse projects being undertaken in the recruitment and retention of Indigenous medical students, Indigenous health curriculum design, teaching and learning and community engagement in both Australia and New Zealand.

STAFF HIGHLIGHTS

The achievements of a number of our staff and PhD alumni were recognised with awards. We join with them in celebrating their success.

We were delighted to join Dr Shaun Ewen and his family in celebrating his graduation of Doctor of Education in December 2011. Dr Ewen's studies were in the area of cultural competence in medical education. **Ewen, SC** (2011). *Cultural competence in medical education: a university case study*. Doctorate, Centre for the Study of Higher Education, Melbourne Graduate School of Education, The University of Melbourne. <http://repository.unimelb.edu.au/10187/11068>

Dr Richard Chenhall's achievements were recognised in his promotion to Senior Lecturer.

Professor Janet McCalman was awarded the MSPH Excellence in Teaching award for recognition of her leadership and contribution to the development of breadth subjects at the University of Melbourne.

The Centre for Excellence in Indigenous Tobacco Control (CEITC) team were recognised for their significant achievements and awarded the MSPH Knowledge Transfer award.

Dr Anna Harris, whose PhD thesis was titled *International medical graduates in the urban Australian hospital: An ethnographic study*, was awarded the MDHS Dean's Excellence Award in PhD thesis. Dr Harris is one of our PhD alumni and is currently undertaking a postdoctoral fellowship at Maastricht University in the Netherlands and the UK.

PUBLICATION HIGHLIGHTS

The Centre continued its established record of high numbers of research publications. These comprised esteemed, peer-reviewed research publications (journal articles and book chapters), and major research reports targeted to a broad audience. These publications covered the areas of health ethics, health policy, drug and alcohol, ethical decision-making, Aboriginal health, medical anthropology and research methodologies. In addition to these academic publications were a number of research outputs that are illustrative of our notable record of knowledge transfer/engagement.

Livingston, M. (2011) A longitudinal analysis of alcohol outlet density and domestic violence *Addiction* 106(5) pp919-925

A small number of studies have identified a positive relationship between alcohol outlet density and domestic violence. This study provides the first longitudinal examination of this relationship, using data from the metropolitan area of Melbourne for the period 1995-2005. Alcohol outlet density measures for three outlet types (pub/club, packaged liquor, on-premise) were derived from liquor licensing records, and rates of domestic violence were calculated from recorded crime data from police. The study found a significant association between alcohol outlet density and domestic violence rates over time, with the association being particularly strong for packaged liquor licenses, suggesting a need for licensing policies that more closely consider the availability of alcohol off-premise.

Ewen, S. (2011) Unequal treatment: The possibilities of and need for Indigenous parrhesiastes in Australian medical education, *Journal of Immigrant and Minority Health* 13(3) pp609-615

This paper examines the relationship between the poor levels of health in Australia's Indigenous population, the very low levels of representation of Indigenous people in the country's medical field, and the potential for parrhesia ('fearless speech') to challenge medical hegemony, and to act as a tool for self-care for Indigenous medical students. The paper considers the current state of Indigenous Australians' health, and Indigenous participation in the health workforce. It then introduces the idea of an Indigenous parrhesiastes, and shows that it could make an important and positive contribution to medicine and medical education in Australia by providing a strong framework with which to address unequal treatment in medicine, and to consider how the future medical workforce is trained. The paper also suggests that Indigenous parrhesiastes in similar contexts around the world could help challenge unequal treatment, and improve access to health and health education globally.

Kippen, R. (2011) Incorrect, loose and coarse terms: classifying nineteenth-century English-language causes of death for modern use. An example using Tasmanian data. *Journal of Population Research* 28(4) pp267-291

This paper describes a cause-of-death classification system for nineteenth-century English-language death data. Made of up 32 distinct categories, it combines aspects of William Farr's nosology



The Koori Youth Will Shake Spears during their performance at the award ceremony for the Rio Tinto Award for Excellence and Innovation in Indigenous Higher Education, which was won by Melbourne School of Population Health's LIME Network Project.

and the modern International Classification of Diseases, and is both broad enough to create meaningful categories for analysis, and specific enough to allow for tracking of particular cause-of-death patterns and trends. The system is demonstrated by applying it to death registration data from the British colony of Tasmania over the years 1838-1899. The paper also describes the history of recording causes of death in Tasmania during the nineteenth century, and discusses several problems particular to cause-of-death data from this period. It also examines the advantages and disadvantages of three existing nosologies with reference to nineteenth-century data. Finally, the paper discusses an application of the classification system for cause-specific child mortality in nineteenth-century Tasmania.

Harris, A. & Guillemin, M. (2011) Developing sensory awareness in qualitative research: a portal into the otherwise unexplored. *Qualitative Health Research* 22(5): 689-699.

Within the social sciences there has been an increased interest in the senses. This paper focuses on interviews and examines the value of expanded interviewing strategies that use the senses as access points. Sensory awareness can enrich interviews by offering a portal to otherwise unexplored illness or health care experiences which are either too difficult to articulate or too intangible to describe. Sensory awareness incorporates not only attentiveness to the research environment but also the utilisation of sensory questions or prompts to gain insight into the research experience. Drawing on a variety of empirical studies, methodological guidance is offered, while exploring ethical and challenging aspects of incorporating sensory awareness into the research interview.

CENTRE FOR WOMEN'S HEALTH, GENDER AND SOCIETY

WHO Collaborating Centre for Women's Health ANNUAL REPORT 2011



Director of
the Centre
for Women's
Health, Gender
and Society,
Professor Anne
Kavanagh.

YEAR'S OVERVIEW

2011 was another successful year in research, teaching and knowledge exchange for The Centre for Women's Health, Gender and Society (CWHGS).

Of particular note were our activities in terms of knowledge exchange and community engagement. In November 2011 we celebrated the 50th anniversary of the pill in an event we co-hosted with The Victorian Women's Trust. In December 2011, a major report entitled 'Precarious housing and health inequalities: what are the links?' was launched at VicHealth. The report was authored by Centre staff Dr Rebecca Bentley, Ms Kate Mason and Ms Lauren Krnjacki in collaboration with Hanover Welfare Services, Melbourne Citymission and University of Adelaide and was funded by VicHealth.

The Centre's research on gender and women's health in 2011 focused on three core themes: sexual and reproductive health; gender and health inequities; and cancer and preventative health care. Details for these are given below.

The Centre's continued grant success included a new National Health and Medical Research Council (NHMRC) Project Grant awarded to Associate Professor Jane Hocking on chlamydia treatment failure in Australia and a NHMRC Partnership Grant to Professor Anne Kavanagh testing an intervention to improve young women's access to paid parental

leave. Dr Louise Keogh was awarded a Victorian Cancer Agency grant to conduct a qualitative study of the experience of subtotal versus segmental colorectal cancer resection in individuals with high risk of colon cancer.

The Centre has taken an active role in the development and implementation of the new Master of Public Health (MPH) Program. Dr Keogh coordinated one of the core subjects, 'Surveys and Qualitative Methods', and Centre staff coordinated six subjects in the MPH and Master of Health Social Sciences.

There were two PhD completions last year. Dr Sudirman Nasir was awarded his PhD for a thesis titled 'Stories from the Lorong: Drug use and non-drug use among young people in a slum area in Makassar, Indonesia', and Dr Jennifer Walker's thesis was titled 'The epidemiology of Chlamydia trachomatis and Mycoplasma genitalium in young Australian women'.

We farewelled a number of long-standing Centre staff members. Associate Professor Jane Fisher was appointed the Jean Hailes Professor of Women's Health at Monash University. Associate Professor Fisher's relationship with the Centre began as a PhD student and then as an academic. Over many years she and her team developed an internationally-regarded program on women's reproductive mental health. Dr Maggie Kirkman and Dr Heather Rowe, who have both made substantial contributions to women's health over many years, went with Associate Professor Fisher to continue their research on joint grants. Dr Sara Holton, Dr Sonia McCallum, Dr Karen Wynter and Dr Karin Hammarberg also joined Associate Professor Fisher at Monash University. Dr Lisa Amir, who has an international reputation for her work on breast feeding, and who worked at the Centre in a part-time capacity for many years, also left the Centre to continue her research at La Trobe University. We wish all these staff well in their ongoing commitment and contribution to improving the health of women.

CENTRE'S VISION STATEMENT

To improve women's health and the health of their families and communities by contributing to knowledge about the effects on health and well-being of gender inequity and other social, economic, cultural, psychological and biological factors.

CENTRE'S MISSION

To be recognised as an international leader in research, teaching and knowledge exchange about women's health, gender, and society and the leading academic centre in the Asia-Pacific.



THE PILL – AN INCOMPLETE REVOLUTION

Fifty years after the contraceptive pill arrived in Australia, the revolution it promised women remained incomplete – and the belief that the pill gave women full control over their fertility was a myth. This was one of the confronting themes of an event co-hosted by the Centre for Women's Health, Gender and Society, which is part of the Melbourne School of Population Health.

Held in collaboration with the Victorian Women's Trust, the November 2011 event's speakers included Dr Louise Keogh, a health sociologist and senior lecturer at the Centre, and Mary Crooks, the Trust's executive director. Billed as 'a free evening of fun and reflection on the first 50 years of the contraceptive pill', the night kicked off with a comedian, was open to the public and drew a 250-strong audience.

Speaking after the event, Dr Keogh said the pill served as "a nice example to help us reflect on how things have changed in the last 50 years." A close examination of the pill's history revealed the extent to which women were short-changed by the deal delivered by the pill, including its nine per cent failure rate, its side effects and contraindications. "Yet somehow we've totally swallowed the myth that it's all been solved," she says. "We've got the pill so we have got fertility management sorted."

Dr Keogh's speech highlighted some glaring contradictions of the sexual revolution in which the pill played such a pivotal role. These included the myth that sex and fertility were separate. In real life, women still balanced the two in tandem, and lived with the impact of the pill's failure. For one in three, that meant having an abortion. "But in reality, no contraceptive is 100 per cent effective, so why don't we expect contraceptive failure and abortion?"

The sexual revolution was supposed to deliver a level of gender equality. Not only did this not occur, she said, but also women were, within their relationships,

taking personal responsibility for a societal failure to share power and control equally between men and women. "We should be looking outwards, asking, 'why we do not yet have gender equality?' And demanding answers."

The ability of women to time pregnancy to fit in with their other life goals was another damaging myth. Women were expected to juggle the demands of careers, travel and relationships with a closing window of fertility. "Why do we act like we have control, when in reality, many of us will not be able to squeeze pregnancy into the narrow bands of time we are offered to do so?"

Commenting later, Dr Keogh said, "The next step is to start being honest. To stop spreading myths about choice and freedom and instead to look closely at the responsibilities that women are carrying and the level of support they have to manage those responsibilities."

"We should be looking outwards, asking, 'why we do not yet have gender equality?' And demanding answers."

Greater honesty about managing fertility would help young women to make more informed decisions about their futures. Furthermore, it was time for society to "be more upfront" about the hidden reality of abortion. "Rather than blaming women for failing to use contraceptive properly, or for being risk-takers, we need to acknowledge that all contraceptives have failure rates – one in two pregnancies are unplanned – and abortion has been with us for a long time, and is likely to continue to be one of the ways we manage our fertility."

She called for more research into developing contraception that met women's needs by being 100 per cent effective and free of side effects. "The research around contraception is too often focused on 'why women don't use contraceptives more effectively'," she said. "But the questions should be 'why aren't they designed to suit women's lives and what women want?'"

**50TH
ANNIVERSARY
OF THE PILL
IN AUSTRALIA**

AN INCOMPLETE REVOLUTION



**A FREE EVENING OF FUN & REFLECTION ON THE FIRST 50 YEARS OF THE CONTRACEPTIVE PILL
FEATURING**

NELLY THOMAS
COMEDIAN

LESLIE CANNOLD
AUTHOR & AGE COLUMNIST

LOUISE KEOGH
MELBOURNE UNIVERSITY SENIOR LECTURER

MARY CROOKS
VICTORIAN WOMEN'S TRUST EXEC. DIRECTOR

WED 23RD NOV / 5.45-7.30PM / BMW EDGE THEATRE
RSVP 11TH NOV E: WOMEN@VWT.ORG.AU OR P: 9642-0422

The invitation for the special event reflecting on the first 50 years of the contraceptive pill.

We were fortunate to appoint two new staff members to teaching and research positions: Dr Cathy Vaughan, who recently completed her PhD at the London School of Economics and is an expert in international women's health, and Dr Rebecca Bentley, a social epidemiologist, who was previously a research fellow at the Centre.

TEACHING AND LEARNING

In 2011, the Centre contributed to the successful first year delivery of the new Master of Public Health (MPH). We also began the process of teaching out the Master of Women's Health (Japanese) that has been delivered in Japanese in both Japan and Australia since 1992. In 2011, we taught two subjects in Melbourne through Melbourne Consulting and Custom Programs: *Research Methodology* and *Health Effects of Violence Against Women*. Both subjects were rated very highly by the students.

Centre staff continue to offer a high quality teaching and learning experience for our students, and with the departure of some experienced lecturers from the Centre, new staff had an opportunity to gain and practice their skills in teaching.

Coursework teaching

In the MPH, the Centre was responsible for the delivery of the new core subject *Surveys and Qualitative Methods* to 140 new students. Elective subjects in the MPH and core subjects in the Master of Health Social Sciences taught to students in 2011 included: *Gender and Health*; *Social Determinants of Health*; *Sexual and Reproductive Health*; *Gender, Violence and Health*; *Women and Global Health*; and *Social Analysis in Health 1*.

Centre staff were also invited to contribute expert lectures in other courses in the Faculty of Medicine, Dentistry and Health Sciences and beyond. For example, staff delivered a lecture on 'Gender and Medical Practice' to medical students in their obstetrics and gynaecology rotation, a lecture on 'Gender and Communication' to Master of Speech Pathology students, and a lecture on 'Cancer Genetics and Population Screening' to Master of Genetic Counselling students.

RESEARCH

Cancer and preventative health

Centre staff conducted a wide range of research on cancer, including studies on breast cancer, colorectal and cervical cancer as well as other human papillomavirus (HPV) related cancers.

In 2011, Dr Louise Keogh in collaboration with clinical geneticist Dr Alison Trainer, surgeons Dr Alexander Heriot and Dr Craig Lynch from the Peter MacCallum Cancer Centre and others received funding from the Victorian Cancer Agency to conduct qualitative research into the experience of subtotal colectomy for treatment of colorectal cancer.

Dr Keogh was invited to give an 'Update from the Behavioural Sciences' at the Collaborative Group of the Americas on Inherited Colorectal Cancer meeting in October 2011 in Montreal, Canada, and while in Canada was invited to deliver Grand Rounds at Toronto Hospital on her work on the disclosure of genetic research results by the Colon Cancer Family Registry, from an Australian perspective.

In 2011, Dr Keogh published findings from a qualitative study of how women at high but unexplained familial risk of breast cancer interpret and manage their risk. This publication generated a large amount of media interest, given the findings that women were under-utilising available services to manage risk. She was also invited to present findings from this study at the Australian and New Zealand Breast Cancer Trials Group Annual Meeting on the Gold Coast.

Centre staff continued a long-term research program focusing on breast cancer screening. Professor Anne Kavanagh, Dr Carolyn Nickson and Ms Kate Mason worked in collaboration with Professor Dallas English, from the Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology, and Dr Graham Byrnes, from the International Agency for Research on Cancer, to evaluate the mortality benefit of screening, presenting key findings at the BreastScreen Australia Conference and the Australasian Epidemiological Association annual scientific meeting in Perth.

Professor Kavanagh maintained her involvement as Chief Investigator (CI) on the National Breast Cancer Foundation lifepool project, which continued recruitment of BreastScreen Victoria participants into a longitudinal study of breast cancer risk. This research is in collaboration with investigators from the Peter MacCallum Cancer Centre, BreastScreen Victoria, the Royal Women's Hospital and the Centre for MEGA Epidemiology.

Professor Kavanagh along with Dr Nickson and Ms Zoe Aitken continued their research on a project funded within the lifepool project investigating how mammographic density affects accuracy of screening and how screening policies might be adapted to improve screening outcomes for women with higher breast density.

Dr Nickson leads a research program to devise and test image processing methods to automatically characterise breast density from mammograms. The work was funded by the University of Melbourne, the Victorian Breast Cancer Research Consortium and through in-kind contributions from the Commonwealth Scientific and Industrial Research Organisation (CSIRO), undertaken in collaboration with the University of Melbourne, Department of Computer Science Software Engineering and the CSIRO. The project team included Centre staff Ms Zoe Aitken and Ms Min Li and produced results that were presented at a range of forums including Queensland Health and the 5th International Workshop on Breast Densitometry and Breast Cancer Risk Assessment, San Francisco.

Dr Nickson was also a CI on the National Breast Cancer Foundation (NBCF) Collaboration Grant Think Tank 'The Australian Mammographic Density Network (TANDEM)', which hosted a national think tank in Kingscliff, New South Wales, and she continued her collaboration with radiology experts and fellows at BreastScreen Victoria and the University of Sydney examining radiologist performance in the screening program. She was an invited speaker at the Royal Australia and New Zealand College of Radiologists 62nd Annual Scientific Meeting in Melbourne.

The Centre also contributed to studies of HPV and cancer. Associate Professor Jane Hocking was an investigator on an Australian Research Council (ARC) linkage grant led by the University of New South Wales (UNSW) using mathematical modeling techniques and analysis of existing cancer notification data to explore the potential impact of HPV vaccination on cancers, including cervical cancer, anal cancer and head and neck cancers. Dr Nickson was an investigator on an NHMRC project using mathematical modelling of HPV and cervical cancer to predict population outcomes in the context of vaccination and screening, with a group based at the Cancer Epidemiology Unit at the Cancer Council, New South Wales.

Sexual and reproductive health

This research theme explores the sexual and reproductive health of young people, sexually transmitted infections and their impact on the lives of young Australian women and men, with a particular focus on chlamydia and human papilloma virus infection, and the development and evaluation of health promotion programs for pregnancy and early parenthood.

Associate Professor Jane Hocking leads a large international and national team on a Commonwealth Department of Health and Ageing project – the Australian Chlamydia Control Effectiveness Pilot (ACCEPt). This world first controlled trial aimed to assess the feasibility, acceptability, effectiveness and cost-effectiveness of an organised program for chlamydia testing in general practice. GP clinics received a multifaceted intervention designed to facilitate increased chlamydia testing in general practice. ACCEPt received additional funding from the National Health and Medical Research Council (NHMRC) to fund an extension of the intervention period until the end of 2014. Recruitment was completed in December 2011. A total of 140 general practice clinics and seven Aboriginal Medical Services have been recruited in 54 rural towns in Victoria, New South Wales, Queensland and South Australia.

During 2011, ACCEPt employed a large research team based in Melbourne (Dr Simone Poznanski, Dr Dyani Lewis, Ms Chantal Maloney, Dr Jennifer Walker, Ms Eris Smyth, Ms Alaina Vaisey, Ms Anna Wood, Ms Michelle King, Mr Fabian Kong, Dr Danielle Newton, Ms Claire Denby), one research officer based in Wangaratta, Victoria (Ms Anne Shaw), and a further three research staff based at the University of New South Wales in Sydney (Ms Lisa Edwards, Ms Rebecca Lorch, Ms Belinda Ford). There are three PhD students working on components of ACCEPt for their research. The design of ACCEPt was presented at the International Society of Sexually Transmitted Disease Research Conference in Canada in July 2011 and preliminary results were presented at the Australasian Sexual Health Conference in Canberra in September 2011.

The Chlamydia Incidence and Re-infection Rates Study (CIRIS) was also headed by Associate Professor Jane Hocking in collaboration with Professor Christopher Fairley at the Sexual Health Unit, and other investigators from the Department of General Practice at the University of Melbourne, University of New South Wales and Australian National University. This prospective cohort study of young Australian women aged 16 to 25 years that aimed to

determine the incidence of chlamydia infection was completed in early 2010, with final laboratory analysis completed during 2011. Dr Jennifer Walker, a research fellow at CWGHS, worked on CIRIS as part of her PhD, which was conferred during late 2011. This study generated Australia's first community-based estimates of chlamydia incidence and chlamydia re-infection rates, and also provided the first evidence that chlamydia organism load is higher in prevalent than incident infection. This suggests that prevalent infections may be more important for ongoing chlamydia transmission than incident infections.

Associate Professor Hocking also led another research project during 2011 that explored the health and mental health impacts of a pelvic inflammatory disease diagnosis on a woman's life.

Dr Danielle Newton, a research fellow, coordinated this project and Associate Professor Jane Fisher, Dr Louise Keogh and Dr Chris Bayly were also investigators on this project.

Gender and health inequities

Centre staff conducted a range of research projects on the social determinants of health inequities. The research focuses on how housing, employment, place, disability and socio-economic position influence health, with a concentration on the ways in which gender and gender relations intersect with each of these determinants.

In 2011, Dr Rebecca Bentley launched a major report on housing and health in Australia entitled 'Precarious housing and health inequalities: what are the links?'. This was the culmination of a collaboration between the University of Melbourne, Hanover Welfare Services, Melbourne Citymission and the University of Adelaide that was funded by VicHealth.

Dr Bentley also published key articles in international journals on the relationship between housing affordability and mental health in Australia. Her work demonstrated that, for low to moderate income people, moving into unaffordable housing is associated with a worsening of mental health. In addition, Dr Bentley and her collaborators commenced work on the ARC-funded Linkage Grant that seeks to explore how housing and employment shape health inequalities in Australia.

Dr Bentley and her collaborators at the University of Adelaide, University of Essex and Cambridge University, London School of Economics and Political Science were successful in obtaining an ARC Discovery Grant entitled 'Pathways to Health and Wellbeing through Housing: A New Causal Understanding of Relationships, Processes and Interventions'. This will commence in 2012.

Dr Bentley was part of a research network on homelessness funded by the Department of Families, Housing, Community Services and Indigenous Affairs (FAHCSIA). As part of this, Dr Bentley undertook a research project with collaborators at the University of Adelaide, Hanover Welfare Services and Melbourne Citymission on disability and homelessness in Australia. This report will be made available at a later date.

Professor Kavanagh led a research program on the built environment and health. This included the launch of a VicHealth report on the

relationship between alcohol consumption and the density of alcohol outlets in areas and the price and availability of a range of beverages and consumption. This received considerable media attention and will directly influence policy in this field.

Professor Kavanagh and Ms Alison Barr continue their collaboration with researchers at the Baker and International Diabetes Institute and Deakin University in a program of work on the walkability of various environments and risk of cardiovascular disease and diabetes.

Professor Kavanagh headed a program of work on the importance of disability for health inequities which involved Ms Lauren Krnjacki and Dr Bentley at the Centre, as well as Associate Professor Tony LaMontagne from the McCaughey Centre and collaborators from Hanover Welfare Services, VicHealth and Women with Disabilities Victoria. This research described and explored the importance of socio-economic disadvantage and health for people with disabilities, with a focus on housing and employment. Analyses also described how these relationships might vary by gender. Professor Kavanagh and Ms Krnjacki are working closely with VicHealth to develop a research summary on disability and health inequities, which will be published in 2012.

Centre staff continued a program of research on employment and health. In 2011, Professor Kavanagh was awarded a NHMRC Partnership Grant on access to paid parental leave and the mental health of young mothers. This project included Dr Bentley and Dr Keogh from the Centre, Associate Professor LaMontagne from the McCaughey Centre as well as collaborators from the University of Queensland, VicHealth and the Royal Women's Hospital.

In conjunction with Associate Professor LaMontagne and researchers at Flinders University, Dr Bentley, Ms Krnjacki and Professor Kavanagh analysed data from the Household Income and Labour Dynamics Survey on employment arrangements and psychosocial working conditions and mental health. In 2011, research on the NHMRC-funded project on the relationship between access to paid leave and compliance to quarantine recommendations in the H1N1 epidemic was completed, with two papers published and another submitted.

COMMUNITIES ACTIVITIES

The Centre continued to have a strong focus on interactions with our key stakeholders. The following are a selection of examples.

In collaboration with Hanover Welfare Services, University of Adelaide, Melbourne Citymission and VicHealth, Dr Rebecca Bentley, Ms Kate Mason and Ms Lauren Krnjacki launched a major report on 'Precarious housing and health'.

Professor Kavanagh was a contributor in the production of an educational DVD for secondary school students entitled 'Health Inequities in Australia' for Video Education Australia/New Zealand Pty Ltd. The video, which features experts, practitioners and community members, examined the forces that shape health inequities between groups (for example, Indigenous and non-Indigenous Australians) and the strategies, directions and actions that Australia's health services employ to bridge these gaps.

In May, Dr Louise Keogh was interviewed by Kim Landers on ABC News 24 about teenage pregnancy.

Dr Jennifer Walker managed to make the Quebec news when presenting the findings of her research at the International Society for STD Research conference in Canada. If you can read French this can be found at <http://www.cyberpresse.ca/le-soleil/actualites/sante/201107/11/01-4417017-la-vaginite-mise-en-echec-par-des-bacteries.php>

In August, Dr Keogh was a member of the organising committee for the workshop 'Predicting cancer risks and mutation status: evidence to shape best practice', and also gave a presentation at the meeting, held on the Gold Coast. See <http://www.sph.unimelb.edu.au/predictingcancer>

Dr Keogh was also interviewed on the ABC Radio National *Life Matters* program for World Contraception Day on 26 September, and she also appeared along with others on Channel 9 focusing on a study that found that women with a strong family history of breast cancer but no genetic link are not using appropriate health services.

In September, Associate Professor Jane Hocking appeared on the *Medical Observer* website via a video presentation talking in depth about the chlamydia epidemic and her new study. The video is entitled 'High re-infection rate fuels chlamydia epidemic'. Later that month she appeared on ABC Rural New South Wales and was interviewed about chlamydia infection rates. On 22 November she also was interviewed for a news piece published in *Medical Observer* discussing the future of chlamydia screening in Australia. On 21 December Professor Anne Kavanagh and Ms Lauren Krnjacki launched a major report in conjunction with VicHealth on accessibility to alcohol outlets and alcohol consumption. The study was reported in the *Herald Sun* on 22 December 2011 and Professor Kavanagh also appeared on local radio.

The major event for the Centre in 2011, co-hosted with The Victorian Women's Trust, was the '50th Anniversary of the Pill – an incomplete revolution: having sex and managing fertility post Pill'. This was held on 23 November at the BMW Edge, Federation Square. Dr Keogh delivered a speech, which included the introduction of the Pill in 1961 marking 'a turning point in heterosexual relationships', allowing women the freedom to time their families, careers and relationships but that in reality today the burden and responsibility of contraception still resides with women. She argued that the pill has delivered less than had been promised in furthering women's equality. This event is featured elsewhere in this report.

Community Reports

Foster G, Gronda H, Mallett S, **Bentley R** (2011). Precarious housing and health: research synthesis, Australian Housing and Urban Research Institute, Hanover Welfare Services, University of Melbourne, University of Adelaide & Melbourne Citymission.

Kavanagh AM and Krnjacki LJ. 2011. Accessibility to alcohol outlets and alcohol consumption. Findings from VicLANES, Victorian Health Promotion Foundation, Melbourne. This community report was produced by Professor Anne Kavanagh and Ms Lauren

Krnjacki, using data from the Victorian Lifestyle and Neighbourhood Environments study, provided evidence that access to an increased availability of alcohol outlets in areas was associated with increased consumption of alcohol at harmful levels. There were no gender differences.

Mallett S, **Bentley R**, Baker E, **Mason K**, Keys D, Kolar V, **Krnjacki L** (2011). Precarious housing and health inequalities: what are the links? Summary Report. Hanover Welfare Services, University of Melbourne, University of Adelaide, Melbourne Citymission.

CONFERENCES AND PUBLIC PRESENTATIONS

Bentley R, Baker E, **Mason K**, Subramanian S. V. and **Kavanagh AM**. Understanding housing affordability as a determinant of health: isolating a mental health effect of a change in housing affordability. Oral presentation at the 2011 HILDA Survey Research Conference, Melbourne, 14 July.

Cooklin A. Myth 6: Australia's 'universal' unpaid maternity leave scheme. 4th World Congress on Women's Mental Health, Madrid, Spain, 16-19 March.

Fisher J, **Rowe H**, **Kirkman M**, Wynter K, McCallum S., Holton S, Cooklin A, McKay H. Challenging limited views of women's sexual and reproductive mental health (Symposium). 4th World Congress on Women's Mental Health, Madrid, Spain, 16-19 March.

Fisher J. Myth 1: Perinatal Mental Health Problems are a 'Culture Bound Syndrome'. 4th World Congress on Women's Mental Health, Madrid, Spain, 16 -19 March.

Frazer H, **Nickson C**, Cawson J. Dense breast tissue correlation with mammographic sensitivity and tumour size? External Conference presentation, 8th General Breast Imaging Meeting, Royal Australian and New Zealand College of Radiologists, Hobart, March.

Holton S. Myth 4: Women are able to *choose* when and if they have children, and how many they have. 4th World Congress on Women's Mental Health, Madrid, Spain, 16-19 March.

Kavanagh AM. Capitalising on pre-existing data to estimate long-term breast cancer risk and survival according to breast density. BreastScreen Australia Conference, Melbourne, October.

Kavanagh AM, Kelly M, **Krnjacki L**, Thornton L, Jolley D, Subramanian SV, Turrell G, **Bentley RJ**. Access to alcohol outlets and harmful alcohol consumption: a multilevel study in Melbourne, Australia (poster). World Congress of Epidemiology, Edinburgh, August.

Keogh LA. Insurance implications of genetic testing. Preventing Cancer Risks and Mutation Status: Evidence to Shape Best Practice, Kingscliff, NSW, 22 August.

Keogh LA, Fisher D, Schully S, Lowery J, Ahnen D, Maskiell J, Lindor N, Hopper J, Burnett T, Holter S, Sheinfeld Gorin S, Sinicrope P for the Colon Cancer Family Registry. Disclosing genetic research results: experiences of the colon cancer family registry. International Society for Gastrointestinal Hereditary Tumours (InSiGHT), San Antonio, Texas, USA, 31 March - 2 April.

Keogh LA. Updates from the Behavioral Science Literature. Collaborative Group of the Americas on Inherited Colorectal Cancer, invited presentation, Montreal, Canada, 10-11 October.

Keogh LA, McClaren B, Apicella C, Hopper J. A qualitative study of how women at high but unexplained familial risk of breast cancer perceive their risk. Australian and new Zealand Breast Cancer Trials Group Annual Meeting, invited presentation, Gold Coast, Queensland, 23 July.

Keogh LA. Research on the disclosure of genetic results in the Colon Cancer Family Registries: an Australian perspective, invited presentation, Mount Sinai Hospital, Department Of Psychiatry, Grand Rounds, 14 October.

Sheri Sheinfeld Gorin, Behavioural Working Group of the CGN, **Keogh LA**, Lowery J, Ahnen D, Graves K, Schully S. Genomics, acronyms, and understanding: translating genetics research from cancer family registries to behavioral medicine, 32nd Annual Meeting & Scientific Sessions of the Society of Behavioral Medicine (SBM), symposium Washington, DC, USA, April 27-30.

Hocking JS, Temple-Smith M, **Poznanski S**, **Vaisey A**, **Walker J**, Guy R, Low N, Donovan B, Gunn J, Law M, Kaldor J, Fairley CK. High chlamydia prevalence among young Australian men and women: results from the Australian Chlamydia Control Effectiveness Pilot, on behalf of the ACCEPt Consortium Australasian Sexual Health Conference, Canberra, September.

Hocking JS. Chlamydia screening in a general practice setting – The Australian Chlamydia Control Effectiveness Pilot (ACCEPt). Invited presentation, STI and BBV Quarterly Forum, Perth, February.

Horsley P. Attended the Death Down Under Conference for Death Studies and presented a talk – 'A warm swill – the emotional work of autopsies', University of Sydney, June.

LaMontagne AD, **Krnjacki L**, **Kavanagh AM**, and **Bentley RJ**. Time Trends in Psychosocial Working Conditions in a Representative Sample of Working Australians 2000-2008: Evidence of Narrowing Disparities? HILDA Survey Research Conference 2011, 14 and 15 July.

Mason KE, **Bentley RJ** and **Kavanagh AM**. Fruit and vegetable purchasing and the local food environment: a multilevel analysis of the VicLANES data. Oral presentation at the 2011 International Society for Behavioral Nutrition and Physical Activity (ISBNPA) conference, 18 June.

Mason KE, **Bentley RJ** and **Kavanagh AM**. Healthy food behaviours and the local food environment: the association between density of healthy and unhealthy food stores and fruit and vegetable purchasing. Oral presentation at the Australasian Epidemiological Association Annual Scientific Meeting, Perth, 21 September.

Mason K, Baker E and **Bentley RJ**. Is there a gendered, cumulative mental health effect of unaffordable housing? Poster presentation at the Australasian Epidemiological Association Annual Scientific Meeting, Perth, 21 September.

McCallum S. Myth 7: Postnatal Health Services are Over-Utilised by the Worried Well. 4th World Congress on Women's Mental Health, Madrid, Spain, 16-19 March.

McKay H. Myth 5: Permanently Childless Women Have Selfishly Chosen Careers Over Children. 4th World Congress on Women's Mental Health, Madrid, Spain, 16-19 March.

Nickson C, Arzhaeva Y, Elgindy T, Buckley M, Li M, English DR, **Kavanagh AM.** Automated breast density measurements: Prediction of tumour size and mode of detection (screen-detected versus interval cancers) in the AutoDensity Study evaluation of the Australian breast cancer screening program. External Conference poster presentation at the 5th International Workshop on Breast Densitometry and Breast Cancer Risk Assessment. San Francisco, USA, June.

Nickson C, Arzhaeva Y, Li M, Kotagiri R, Elgindy T, Buckley M, R Md. Hassan, **Aitken Z, Kavanagh AM,** English D. Automated measurement of breast density from screening mammograms, External Conference presentation, BreastScreen Australia Conference.

Nickson C. AutoDensity: Automated breast density measurement and its integration into breast cancer screening, BreastScreen Queensland, Queensland Health, Brisbane. April.

Nickson C. AutoDensity: Automated breast density measurement and its integration into breast cancer screening, Brain and Mind Research Institute, University of Sydney, Sydney, May.

Nickson C. Breast Density and Breast Cancer Screening. Departments of Medicine and Epidemiology/ Biostatistics, University of California, San Francisco, USA, June.

Nickson C. Hyzy M, Frazer H, Cawson J. Long Term Impact of Double Mammographic Reading in Population Screening for Breast Cancer. Royal Australia and New Zealand College of Radiologists 62nd Annual Scientific Meeting, Melbourne, October.

Nickson C, Li M, Hassan RM, **Kavanagh AM,** English DR, Kotagiri R. Classification of final screening outcomes using breast density information from screening mammograms: A data mining approach in the AutoDensity Study evaluation of the Australian breast cancer screening program. External Conference poster presentation at the 5th International Workshop on Breast Densitometry and Breast Cancer Risk Assessment. San Francisco, USA, June.

Nickson C, Kavanagh AM. BreastScreen Australia participation by women aged 70-74 years has varied by State and Territory and is associated with state-level breast cancer outcomes. Conference presentation – External, BreastScreen Australia Conference, October.

Nickson C, Mason K, English D, **Kavanagh AM.** The mortality benefit of breast cancer screening: addressing bias in the case-control design. Poster presentation at the Australasian Epidemiological Association Annual Scientific Meeting, Perth, 21 September.

Rowe H. Myth 2: Careless young women have unintended pregnancies and abortions. 4th World Congress on Women's Mental Health, Madrid, Spain, 16-19 March.

Vaughan C. Using visual methods in international research and development. Nossal Institute for Global Health, 1 December.

Walker J, Fairley CK, Bradshaw CS, Tabrizi SN, Chen MY, Twin J, Taylor N, Donovan B, Kaldor JK, **Hocking JS.** The Incidence of genital Chlamydia trachomatis in a Cohort of Young Australian Women. International Society for STD Research Conference, Quebec, Canada, July.

Wynter K. Myth 3: Pregnant adolescents aren't interested in their babies. 4th World Congress on Women's Mental Health, Madrid, Spain, 16-19 March.

GRANT FUNDING

Baker E, Beer A, **Bentley RJ,** Pevalin D, Whitehead C (2011-2013). Pathways to Health and Wellbeing through Housing: A new causal understanding of relationships, processes and interventions. Australian Research Council (ARC) Discovery Project. \$300,000 from ARC in total, \$48,600 to CWHGS.

Beer A, Buys L, Lewin G, **Bentley RJ,** Tinker A (2011-2013). Emerging from the Shadows: The evaluation of intervention strategies to reduce social isolation amongst the aged. ARC Linkage Project. \$348,151 from ARC in total, \$69,142 to be administered by CWHGS.

Bentley RJ, Baker E, Mallett S, LaMontagne AD, Beer A, **Kavanagh A,** Kolar V (2011-2013). New Directions in Health Inequalities Research: Understanding the intersection between housing, employment and health in Australia. ARC Linkage Project. \$182,394.

Campbell I, Hopper J, Pridmore V, **Kavanagh AM,** Mitchell G, Mann B and Fox S (2009-2013). Integration of breast screen with Epi molecular and translational research. National Breast Cancer Foundation and Cancer Australia, \$5,000,000

Bradshaw C, Tabrizi S, **Hocking JS** (2012-2014). Investigation of candidate aetiologic organisms of bacterial vaginosis in diverse and unique epidemiological and clinical studies. National Health and Medical Research Council (NHMRC), \$546,175.

English D, Pirkis J, **Kavanagh AM,** Hopper J, Dharmage S, Giles-Corti B, Sanci L, Studdert D, Scott T, Crofts N, Room R, Gunn J, Fairley C, Carlin J, Kelaheer M, **Hocking J,** LaMontagne T, **Keogh LA,** Patton G, Degenhardt L, Ames D, Lloyd B, White P. (2011-2013) Australian Longitudinal Study on Male Health. Department of Health and Ageing Grant, \$6,896,754.

Fisher JRW, Kirkman M, **Keogh LA,** Apicella C, Winship I, Hickey M (2011-2012). What matters to women diagnosed with breast cancer during their reproductive years? A qualitative investigation of fertility, reproductive health, heritability, and related psychosocial needs using a population-based sample. NHMRC, \$314,208.

Hocking JS, Chen M, Tabrizi S, Timms P, Huston W, Guy R. Chlamydia treatment failure in Australia: a major cause for concern (2012-2014). NHMRC, \$735,993.

Kavanagh AM, Bentley R, LaMontagne AD, Baker E, Beer A, Mallett S (2011-2014). The importance of gender and socio-economic disadvantage for the mental health of people living with disabilities. ARC Linkage Project, \$75,000 and \$281,992.

Kavanagh AM, Hewitt B, LaMontagne A, **Keogh LA**, Judd F, Gurrin L, **Bentley RJ** (2012-2017). Does access to paid parental leave improve young mother's social and economic participation and mental health? NHMRC, \$577,235.

Kavanagh AM, Warr D, **Rosenthal D**, Mallett S, James S (2009-2011). Healthier and sustainable futures for disadvantaged young people. ARC Linkage Project, \$295,000.

Keogh LA, Young MA, Heriot A, Lynch A, Parry S, Trainer A (2011-2012). A qualitative study of the experience of subtotal versus segmental colorectal cancer resection in individuals with a high metachronous CRC risk. Victorian Cancer Agency, \$78,285.

Jenkins M, Flander L, **Keogh LA**, Gaff C (2010-2012). What do people in mutation-carrying families understand about bowel cancer gene testing, personal risk and prevention behaviours? Victorian Cancer Agency, \$497,755.

Hopper J, Southey M, Phillips K, Fox S, Giles G, Apicella C, Dowty J, **Keogh LA**, Dite G, Park D, Byrnes G, Jenkins M, Milne R, MacInnis R, Winship I (2010-2012). Translational research to better use genetic testing to reduce the morbidity and mortality of breast cancer in Victoria. Victorian Breast Cancer Research Consortium, \$1,377,875.

Hopper J, Jass J, Jenkins M, Young J, Amor D, Antill Y, Buchanan D, Dite G, Dow C, English D, Giles G, Goldblatt J, Haydon A, Jaskowski L, **Keogh LA**, Kirk J, Leggett B, Lipton L, Macrae F, Maskiell J, Parry S, Southey M, Suthers G, Tucker K, Walsh M, Winship I, Young G (2009-2012). Colorectal Cancer Family Registry: Australasia. National Institutes of Health (NIH), USA, \$6,204,882

Liu B, Jorm L, Preen D, **Hocking JS**, Donovan B, Roberts C, Ward J, Mak D (administered by University of New South Wales). A population-based record linkage study of the impact of chlamydia infection on reproductive health in women. NHMRC, \$392,260 from 2012-2014

McVernon J, Pattison PE, Nolan TN, **Bentley RJ**, Warr DJ, Mouat CM, McCaw JM (2012-2014). Networks, neighbourhoods and newborns: defining household and local area influences on social connectedness, to understand pathways to health. ARC Linkage Project, \$154,000.

Richardson S, Baum F, **Kavanagh AM**, LaMontagne A, Ziersch A, Lowry D, Lester L, Bentley R (2007-2011). Changing patterns of employment and unemployment: impacts on physical and mental health and the mediating role of social capital. NHMRC Strategic Award, \$1,060,623.

Shaw J, Zimmet P, Atkins R, Chadban S, Dunstan D, Balkau B, **Kavanagh AM**. Australian Diabetes, Obesity and Lifestyle Study (AusDiab) – an 11-year follow-up (2010-2013). NHMRC Project Grant, 2010 \$1,157,020, 2011 \$1,832,400, 2012 \$286,526, 2013 \$161,525.

PUBLICATION HIGHLIGHTS

Keogh LA, McClaren B, Apicella C, Hopper J (2011) How do women at increased, but unexplained, familial risk of breast cancer perceive and manage their risk? A qualitative interview study. *Hereditary Cancer in Clinical Practice* **9**: 7.

This paper explored how women at an increased risk of breast cancer due to family history perceive and manage risk, based on in-depth interviews with 24 women in this category. We found five 'risk management styles' in this group, not previously reported in the literature: don't worry about cancer risk, but do screening; concerned about cancer risk, so do something; concerned about cancer risk, so why don't I do anything?; cancer inevitable; and cancer unlikely. The study also reported that women were often not aware of and rarely accessed the services available to assist in their risk management (breast specialists, Familial Cancer Clinics). Recommended prevention activities (risk-reducing surgery, risk-reducing medications) were not adopted by any of the women in this study, and screening adherence was variable and not related to risk perception. Further analysis on these data and the issues faced by this risk group is underway.

Hocking JS, Stein A, Conway L, Law M, Grulich A, Brotherton J. Head and neck cancer in Australia between 1982 and 2005 show increasing incidence of potentially HPV-associated oropharyngeal cancers. *Br J Cancer*. 2011 March 1;104(5):886-91.

This paper analysed Australia's head and neck cancer rates over the period from 1982 to 2005 and found that head and neck cancers associated with human papilloma virus (HPV) increased but those cancers associated with smoking decreased. This paper provides Australia's first evidence of increasing head and neck cancer rates and its possible link to HPV. These results were used to inform the 2011 submission to the Government to include males in the HPV vaccination schedule and in late 2011, the Pharmaceutical Benefits Advisory Committee (PBAC) recommended the Gardasil vaccine be given to Australian boys aged 12 to 13 in a school-based program.

Bentley R, Baker E, **Mason K**, Subramanian SV, **Kavanagh AM** (2011). Association Between Housing Affordability and Mental Health: A Longitudinal Analysis of a Nationally Representative Household Survey in Australia. *American Journal of Epidemiology*, 174 (7): 753-760

The evidence about the mental health consequences of unaffordable housing is limited. We investigated whether people whose housing costs were more than 30% of their household income experienced a deterioration in their mental health (using the Short Form 36 Mental Component Summary), over and above other forms of financial stress. We hypothesised that associations would be limited to lower income households as high housing costs would reduce their capacity to purchase other



essential non-housing needs (for example, food). Using fixed-effects longitudinal regression, we analysed 38,610 responses of 10,047 individuals aged 25–64 years who participated in the Household, Income, and Labour Dynamics in Australia (HILDA) Survey (2001–2007). For individuals living in low-to-moderate income households, entering unaffordable housing was associated with a small decrease in their mental health score independent of changes in equivalized household income or having moved house. We did not find evidence to support an association for higher income households. Entering unaffordable housing is detrimental to the mental health of individuals residing in low-to-moderate income households.

Smith MA, Lew JB, Brotherton JML, **Nickson C**, Canfell K, Walker RJ. The predicted impact of HPV vaccination on male

infections and male HPV-related cancers in Australia. *Vaccine* 2011 March 17.

This paper used population simulation modelling to estimate the impact of the current female-only national HPV vaccination program on males, and then to estimate the incremental benefits to males from being included in the program, modelling the short and long-term impact of female-only versus female-and-male vaccination programs. We found that the current program in females is predicted to result in a 68% reduction in male HPV 16 infections by 2050, leading to an estimated long-term reduction of 14% in rates of cancers of the head, neck and anogenital area. We predicted that female-only vaccination would achieve 53-78% of the maximum possible vaccine-conferred benefit to males from a female-and-male program.

McCAUGHEY CENTRE

VicHealth Centre for the Promotion of Mental Health and Community Wellbeing ANNUAL REPORT 2011



Director of the
McCaughey
Centre,
Professor Billie
Giles-Corti.

YEAR'S OVERVIEW

The McCaughey Centre was established in June 2006 with the support of the Victorian Health Promotion Foundation (VicHealth). Following the Centre's 2010 review and the appointment of its new Director, Professor Billie Giles-Corti in mid-2011, the Centre's Vision, Mission and Program Structure were refocused. Consistent with its origins as a Centre with a social justice lens, the Centre's mission is to undertake policy and practice-relevant research to improve the social, economic and environmental conditions for health, equity and community wellbeing. It undertakes research that is:

- Focused on social determinants of health equity and community wellbeing.
- Innovative, high quality and applied, and informed by critical enquiry.
- Involves collaborative, respectful partnerships with the community, NGOs, government and industry.
- Co-created and exchanged with policy-makers, practitioners and knowledge brokers using a variety of innovative, rigorous methods.
- Capacity building for students, staff and partners.

The Centre undertakes research, policy development, teaching, workforce development

and knowledge translation with a focus on major social determinants of health including:

- Creating the foundations for a healthy start to life.
- Reducing race-based discrimination.
- Increasing social inclusion.
- Enhancing health and community services.
- Promoting healthy and safe work.
- Increasing access to safe and supportive social and built environments.

It also has a focus on:

- Developing and using community wellbeing indicators.
- Improving understanding of knowledge translation and exchange.

The McCaughey Centre's work takes place in a range of settings and contexts, including in early years services and schools, workplaces, communities and neighbourhoods, and service delivery agencies. It hosts a number of major policy and knowledge exchange initiatives, including Community Indicators Victoria (CIV) and the Cochrane Collaboration Public Health Review Group. In addition, the Jack Brockhoff Foundation supports the Jack Brockhoff Child Health and Wellbeing Program.

HIGHLIGHTS

The Anti-racism and Diversity Studies (ARDS) program is led by Dr Yin Paradies. It went from strength to strength in 2011. Team members published two key reviews on teaching anti-prejudice and bystander anti-racism respectively, and completed a review on addressing racism in the workplace for VicHealth's Creating Health Workplaces series. The team continued field work for a number of its major studies, including a VicHealth innovation grant on racial socialisation in children, commenced work on the Australian Research Council (ARC) Linkage project estimating the economic cost of racism, and was awarded two ARC linkage grants that will commence in 2012.

VISION STATEMENT

To be recognised internationally as a centre of excellence for research that promotes equity, empowerment, harmony, health and community wellbeing.

NEW DIRECTOR'S WIDE-RANGING RESEARCH PASSION

When Professor Billie Giles-Corti scoped her PhD research on environments and health outcomes at The University of Western Australia, she weighed up two choices. "I was looking at diet or physical activity. Diet looked too hard. I thought I'd do something easy – I'll do physical activity." Twenty years later, the new Director of the McCaughey Centre at the Melbourne School of Population Health says her choice led to pioneering work that was exciting, challenging, complicated, forward looking – but never easy.

It ignited a lifetime's passion that inspires other researchers from diverse fields to apply their expertise to preventative health research. Geography, landscape architecture, planning and civil engineering are some of the sectors that now ask the question: how can our work create good health? This question drew Professor Giles-Corti's research focus out of the health sector right from the start. "If you want to change the environment, you have to step out of health to look at all the sectors where the policy environment and built environment that support people's health are created."

This has meant Professor Giles-Corti publishes across five fields. What links them? "Public health and sports science are about behaviour," she says. "And geography, landscape architecture and sustainability are more about the environment, so this research brings together people's behaviours and the environment in which they live."

One of the benefits of being an international pioneer in this field was having the luxury of making mistakes as part of the learning process. "Whereas now, the tools and technology we use are becoming incredibly sophisticated, and we can measure the impacts of the built environment," she says.

"For example, geography is providing lots of incredible tools, such as Geographic Information Systems, or GIS, which allows us to locate things spatially to develop measures of the built environment.

"This really exciting field has taken off, involving lots of work to free up datasets that allow us to predict people's behaviours. This includes the Australian Research Infrastructure Network – AURIN – a \$20 million Super

Science project funded by the Federal Government and led by Melbourne University. This project will try to make government datasets accessible to urban researchers."

Professor Giles-Corti was buoyed by the timing of her arrival in July 2011 to head the McCaughey Centre, which coincided with the State Government's inquiry into the impact of the built environment on public health. "It showed that people here in Victoria really understand why it's important – not every jurisdiction around the country thinks like that."

The inquiry also enabled her to quickly meet State Government department staff who could translate her research into policy and practice. "The inquiry also allowed me to foreshadow some of the work we'll be doing at the McCaughey Centre," she says.

Her introduction to Melbourne has been facilitated by a key partnership between the University and the Department of Health's north-west region. This area's rapid population growth is throwing up enormous health challenges that are recognised by the State Government, she says.

"This research brings together people's behaviours and the environment in which they live."

The partnership has produced five projects for the Place, Health and Liveability Program she has jointly established with Associate Professor Carolyn Whitzman, from the Faculty of Architecture, Building and Planning. One project she hopes will start in 2013 will involve a major survey of people in the north-west region about how to increase the livability of their environments to improve their health outcomes.

The project team for the Place, Health and Liveability Program involves researchers from the University of Melbourne's Faculty of Architecture, Building and Planning, the Melbourne School of Engineering and AURIN and much of the work will be facilitated by the Department of Health Victoria. In addition, four PhD students, a research fellow, Dr Hannah Badland, and a new GIS team will be harnessing and enhancing Community Indicators Victoria (CIV) as a tool for measuring the impacts of the built environment on health.

"The McCaughey VicHealth Centre is a great environment for my work – it offers an incredibly broad program covering major social determinants of health," she says. "We have a very important program of work underway here and our job is to ensure that we do research that can influence policy and practice."

McCAUGHEY CENTRE

In 2011, the Brockhoff Team led by Professor Elizabeth Waters had numerous major achievements across all of its streams. These included its Mental Health and Wellbeing stream led by Dr Elise Davis being awarded a University of Melbourne partnership grant with the Hunter Institute of Mental Health to explore the mental health of child care educators; its Community Partnerships & Health Equity Research stream led by Dr Lisa Gibbs commenced a major ARC Linkage project Beyond Bushfires: Community Resilience and Recovery, which will focus on social networks with the aim of providing new insights into the interplay between individual and community factors and their influence on recovery from natural disasters over time. Its Prevention Science & Intervention Research stream led by Associate Professor Andrea de Silva-Sanigorski attracted Department of Education and Early Childhood Development (DEECD) funding to extend the data collection of its VicGen project, a prospective birth cohort of 500 child-parent dyads originally funded by the National Health and Medical Research Council (NHMRC) and Dental Health Services Victoria (DHSV). Over 80% of the families already in VicGen have agreed to take part in the extended study. Also, the Public Health Evidence & Knowledge Transition stream led by Dr Rebecca Armstrong is updating a Cochrane Review on Interventions to prevent childhood obesity, attracting considerable international and local interest.

Another exciting new initiative in 2011 was the partnership between the Melbourne School of Population Health (MSPH) and the DEECD. The McCaughey Centre is home to the School's DEECD project, bringing new strengths and opportunities not only for the MSPH, but for key and new members of the McCaughey team. This program is also being led by Brockhoff stream leader, Associate Professor de Silva-Sanigorski.

The Social Inclusion Program is led by Dr Deborah Warr. A major achievement this year for this program was the completion of the 'Stories From HOME' pilot project, funded through a University Interdisciplinary Seed Funding grant. This innovative and participatory arts-research project involved residents living in the Bellbardia Estate in West Heidelberg and was conducted in collaboration with researchers from the Victorian College of the Arts and Music. Among other things, artwork generated through this project forms a permanent exhibition of photographic work on display at the Banyule Community Health Centre.

The Workplace Health Program led by Associate Professor Tony LaMontagne had a growth spurt this year with the commencement of new projects, including an integrated job stress and workplace mental health promotion project funded by the beyondblue Victorian Centre for Excellence, two projects on occupational skin disease led by Dr Tess Keegel, a new NHMRC Partnership grant led by Professor Anne Kavanagh (Centre for Women's Health, Gender and Society) on the new Commonwealth paid parental leave program; contributions to the MSPH's newly-funded national Longitudinal Study on Male Health and external collaborations in a VicHealth-funded job stress intervention with Deakin Graduate School of Business. Associate Professor LaMontagne was invited to co-author a white paper and plenary presentation for the Centre for Disease Control (CDC)/ National Institute for Occupational Safety and Health (NIOSH) First National Conference on Eliminating Health and Safety Disparities at Work in Chicago.

Following the formal partnership between the University of Melbourne and the Department of Health's North West Metropolitan Region, in 2011 the Health, Place and Liveability Program (led by Professor Billie Giles-Corti) was launched as a joint initiative of the McCaughey Centre and the Faculty of Architecture, Building and Planning (Associate Professor Carolyn Whitzman). The new program attracted significant grants to support its work from the Australian Urban Research Infrastructure Network, with Dr Hannah Badland leading a major new grant that will establish a major geographic information system data base from which the team will develop 'liveability indices'. This program will link closely with CIV, providing a research capability to complement CIV's capacity building and consultancy services.

LEARNING & TEACHING

In 2011, the Centre's involvement in teaching and workforce development has significantly expanded. Professor Elizabeth Waters and Associate Professor Tony LaMontagne contributed to teaching in the School's newly developed *Foundations of Public Health* subject, a core subject in the Master of Public Health (MPH) program. In semester two, Dr Deborah Warr coordinated a revamped Master's level subject, *Critical Debates in Population Health*, which was delivered simultaneously through face-to-face lectures at the Parkville campus and via the School's new video conferencing facilities to Indigenous students based at the Shepparton campus. Staff also contributed as guest lecturers for subjects and programs delivered across the University.

The Centre also has a growing program of short courses and workshops that draws on content and methodological expertise residing in the Centre. In 2011, Centre staff were responsible for developing and running short course on the following topics:

- *Population Health* (in partnership with the Department of Health in the North West Metropolitan Region).
- *Race, Culture, Indigeneity and the Politics of Public Health*.
- *An Introduction to Evidence-Informed Public Health* (in partnership with the Department of Health, Victoria, Victorian Health Promotion Foundation, the Collaboration of Obesity Prevention Sites, the World Health Organisation collaborating Centre for Obesity Prevention, University of Sydney and Deakin University).
- *Methods for Conducting Systematic Reviews of Health Promotion and Public Health Interventions*.

The CIV program delivered workshops designed to increase capacity in the use of community indicators. Participants were drawn from government and non-government sectors across Victoria, including Local Government Organisations, Sport and Recreation Victoria (Barwon and Grampians region), Best Start Projects and Community Renewal.

The Centre had 12 PhD students enrolled in 2011, with three successful completions.

Associate Professor LaMontagne assumed the Chair of the School's Higher Degree Research Committee in July of 2011, along with membership of the Faculty's Research Training Committee.

RESEARCH

In 2011, McCaughey Centre team members produced 86 peer reviewed and 19 non-peer reviewed publications, including a range of research and policy reports. Centre staff also successfully applied for several new research projects and contracts in 2011. Total income from research contracts and projects in 2011 was over \$4.5 million.

CONFERENCES & PUBLIC PRESENTATIONS

During 2011, McCaughey Centre team members delivered 57 presentations at conferences and seminars.

February

Gibbs L. Teeth Tales: Applying the Learnings. APHIRST National Seminar: Policy Practice Research partnerships to develop programs, build evidence and improve oral health, Melbourne (Invited speaker).

LaMontagne AD. Oral presentation on "Estimating the economic benefits of eliminating job strain as a risk factor for depression", LaMontagne AD, Sanderson K, and Cocker F at the 9th National OHS regulatory research colloquium, ANU, Canberra, 8-9 February.

May

Gibbs L. Disaster Response, Social Connectedness and Mental Health. Community Connections: Social Inclusion Conference, Regional Victoria (invited speaker).

Riggs E, Block K, Gibbs L, Warr D. Working Better Together: Evaluating Inter-agency Partnerships that Promote Social Inclusion. Australian Health Promotion Association, Melbourne, 30 May - 2 June.

Block K, Gibbs L, Townsend M, Staiger PK, Macfarlane S. Promoting inclusion for ethnically diverse families in primary schools. UNA Global Biennial Conference, Amsterdam, 12-14 May.

Armit C, **Waters E, Gibbs L, Riggs E,** Kearney S. Development of a culturally competent community based child oral health peer education program. Dental Health Services Victoria Research and Innovation Grants Showcase.

Moodie M, Herbert J, **Virgo-Milton, de Silva-Sanigorski A, Mavoa H, Waters E, Gibbs L,** Swinburn B. The cost-effectiveness, affordability and sustainability of the Be Active Eat Well community-based prevention project. European Congress of Obesity, Istanbul, 28 May.

June

De Silva-Sanigorski A, Waters E, Gibbs L, Ashbolt R, Bolton K. Essential elements for system-integrated community-based obesity prevention. Society of Prevention Research. Washington, 1 June.

Block K, Gibbs L, Riggs E, Warr D. Supporting social inclusion for refugee youth, New Migrations, New Challenges: Trinity Immigration Initiative International Conference, Dublin, 30 June - 3 July.

Block K, Gibbs L, Riggs E, Warr D. "Some people don't say hello" – Supporting social inclusion for newly-arrived youth with refugee backgrounds. UNSW 2011 Refugee Conference: Looking to the future, learning from the past, UNSW, 14-17 June.

Riggs E, Davis E, Block K. Supporting the parenting needs of families with young children from refugee backgrounds. UNSW 2011 Refugee Conference: Looking to the future, learning from the past, UNSW, 14-17 June.

July

Pettman T, Doyle J, Waters E. Australasian Cochrane Centre symposium, Melbourne, 1 July.

LaMontagne AD. Co-author on Oral presentation by L Krnjacki on "Time trends in psychosocial working conditions in a representative sample of working Australians 2000-2008: Evidence of narrowing disparities?" LaMontagne AD, Krnjacki L, Kavanagh AM, and Bentley R at the Hilda Survey "10th Anniversary" Research Conference, Melbourne, 14-15 July.

Giles-Corti B. (Invited) Healthy Cities. Hassell, Planning Healthy Cities 28 July.

August

Gibbs L, MacDougall C, Riggs E. Conveying the role of evidence in qualitative research. AQR/DPR Conference, Cairns.

Gibbs L, MacDougall C, Block K. Adding contextual and ethical reflexivity to qualitative research. AQR/DPR Conference, Cairns.

Riggs E, Block K, Warr D, Gibbs L. Evaluating complex inter-agency partnerships: A mixed method study. Australian Evaluation Society International Conference, 29 August - 2 September.

LaMontagne AD. SOS stop occupational stress workshop, invited keynote speaker on "Causes and consequences of workplace stress in Australia". Australian Nursing Federation, Melbourne, 9 August.

Giles-Corti B. (Invited) Submission into the inquiry into Environmental Design and Public Health. Victorian Parliamentary Inquiry, Parliament House, Melbourne.

Giles-Corti B and Ryan K. (Invited) Designing density for Australia: Maximising health through residential density. Planning Institute of Australia Breakfast, Perth Yacht Club, Perth, 11 August.

September

Gibbs L, de Silva-Sanigorski A, Waters E, Riggs E, Gold L, Johnson B, Morris M, Rodriguez P, Calache H, Armit C, Mathews C, Gondal I, Gussy M, Watt R, **Young D,** and Moore L. Teeth Tales – Promoting Oral Health for Refugee and Migrant Children. Australia Pacific Region-International Association for Dental Research.

Gibbs L. Teeth Tales, a case study of a community-based intervention trial, and a partnership approach to oral health research. Invited speaker, Australia Pacific Region-International Association for Dental Research.

LaMontagne AD, Co-author on invited Plenary presentation and conference white paper on "Work organisation, job insecurity and occupational health disparities," Landsbergis PA, Grzywacz JG, & LaMontagne AD. See <http://www.aocdata.org/conferences/healthdisparities/presentations/Work-Organization.pdf> and poster presentation on "Time trends in psychosocial working conditions

McCAUGHEY CENTRE SEMINAR SERIES

The McCaughey Centre's highly successful seminar series commenced in 2008, incorporating high calibre presenters from within the Centre, School, and broader University of Melbourne academic community, as well from a range of local, national and international organisations and academic institutions.

- **30 March**, 'Vancouver vs Melbourne: Seeing like a city in order to approach urban sustainability', Associate Professor Meg Holden, Urban Studies and Geography, Simon Fraser University.
- **19 April**, 'Stories from Home: A community-based arts and research approach to place-making and place-based stigma', James Oliver and Marnie Badham, McCaughey Centre.
- **31 May**, 'Creating Connections: Promoting inclusive policy and practice for refugees during resettlement', Elisha Riggs, McCaughey Centre, Georgina Cameron, Melbourne Graduate School of Education, University of Melbourne, Karen Block, McCaughey Centre, and Iris Dumenden, Faculty of Education, La Trobe University.
- **20 June**, 'Occupational violence in Quebec workplaces: Prevalence of bullying, sexual harassment and physical violence examined through a gender lens', Professor Katherine Lippel, University of Ottawa.
- **9 August**, 'A cluster randomised trial to assess the impact of a workplace osteoporosis prevention intervention on the eating and physical activity behaviours of working women', Ai May Tan, PhD Candidate, University of Melbourne.
- **16 August**, 'Working Conditions, mental health and quality of care in family day care', Lara Williamson, PhD candidate, University of Melbourne
- **6 September**, 'Housing, homelessness and Health inequities: what is the link?', Dr Shelley Mallett, Hanover Centre and Centre for Women's Health, Gender and Society, University of Melbourne.
- **20 September**, 'Future proofing cities, lessons to date from research on the impact of the built environment on health', Professor Billie Giles-Corti, Director, McCaughey Centre.
- **25 October**, 'Children's independent mobility as a right', Associate Professor Carolyn Whitzman, Architecture, Building & Planning, University of Melbourne.
- **17 November**, 'HABITAT: a multilevel longitudinal study of the determinants of neighbourhood, social and individual differences in physical activity in health', Professor Gavin Turrell, School of Public Health, Queensland University of Technology.
- **22 November**, 'Understanding and addressing racism in Australia, Dr Yin Paradies and Dr Naomi Priest, McCaughey Centre, University of Melbourne.

in a representative sample of working Australians 2000-2008: Evidence of narrowing disparities?" LaMontagne AD, Krnjacki L, Kavanagh AM and Bentley R at the US CDC/NIOSH First National Conference on Eliminating Health and Safety disparities at work, Chicago, USA, 14-15 September.

LaMontagne AD, Oral presenter on "Estimating the economic benefits of eliminating job strain as a risk factor for depression", LaMontagne AD, Sanderson K and Cocker F. Oral presenter on "Time trends in psychosocial working conditions in a representative sample of working Australians 2000-2008: Evidence of narrowing disparities?" LaMontagne AD, Krnjacki L, Kavanagh AM and Bentley R. Co-author on oral presentation by A Reid "Work-related accidents, injuries and illnesses in migrant workers in Australia and duration of residence", Reid A, LaMontagne AD, Lenguerrand E and Harding S. Co-chair of conference session on "Mental Health" at the 22nd International Conference on Epidemiology in Occupational Health, Oxford, UK, 7-9 September.

de Silva-Sanigorski A, Carpenter L, Ashbolt R, Hegde S, Prosser L, Burns C, **Waters E, Gibbs L**, Gussy M. Social and economic factors related to poor child oral health. IADR ANZ Division Meeting, Melbourne, 25-28 September.

Carpenter L, Waters L, Hedge S, Calache H, Gussy M, Dashper S, **O'Callaghan E, Heaney T**. Presentation on 'Risk factors for poor child oral health in CALD families' at the 51st IADR ANZ, Melbourne, 25-28 September.

Leong P, Gussy M, Barrow S, **de Silva-Sanigorski A, Waters E**. Poster presentation, Early Childhood Caries Susceptibility from 0-12 months: Systematic Review. 51st IADR ANZ, Melbourne, 25-28 September.

Keegel T and LaMontagne AD. Oral presentation by T Keegel on "Exposure to wet-work in working Australians", Keegel T, Nixon RL and LaMontagne AD at the Australasian Epidemiological Association (AEA) Annual Scientific meeting, Perth, 19-21 September.

Giles-Corti B. (Invited) Planning liveable and sustainable communities in urban growth corridors. Place, Health and Wellbeing Working Group. University of Melbourne.

Williams A. Australian Community Indicator, National via video link, joint coordinator, 16 September,



October

Gibbs L. Multi-level dimensions of resilience in post-bushfire communities. Invited speaker, Victorian Disaster Resilience Taskforce Meeting, 27 October.

Waters E and Gibbs L. Building social and community resilience: influences, understandings, considerations and big ideas. Invited speakers, IBM Research Colloquium on Societal Resilience, 13 October.

Pettman T. Australian and New Zealand Obesity Society Annual Scientific Meeting, Adelaide, 20-22 October.

Pettman T. CO-OPS National workshop, Brisbane, 13-14 October.

Armstrong R, Waters E, Hall B. Cochrane Colloquium, Madrid, Spain, 19-22 October.

LaMontagne AD. Co-author on oral presentation on "Work organisation, job insecurity and occupational health disparities", Landsbergis PA, Grzywacz JG and LaMontagne AD at the American Public Health Association (APHA) 139th annual meeting and exposition, Washington, DC, USA, 29 October - 2 November.

LaMontagne AD. Workplace health and wellbeing forum, WorkSafe Tasmania month. Invited keynote speaker on "Job stress interventions: best practice for practitioners and policy makers". Hobart, 28 October.

Williams A. Presentation, AGIC, Melbourne, 7 October.

Salvaris M (in lieu of **Williams A**). Presentation, Thriving Neighbourhoods, Melbourne, 26 October.

Giles-Corti B. (Invited plenary) Future proofing cities: a health perspective. MSSl Creating Healthy and Sustainable Societies Conference, Melbourne University, 15-16 October.

Giles-Corti B. (Invited) VicHealth's 'Risk, children and the public space masterclass': What role for the built environment? DPCD, Melbourne, 25 October.

Giles-Corti B. (Invited) The co-benefits of investing in active transportation – the case for joined-up policy. Urbanisation workshop, University of Sydney, 7 October.

November

Gibbs L, MacDougall C, Waters E, Block K. The importance of political reflexivity in disaster related research: a case study of bushfire related research. 7th APRU Research Symposium on Multi-Hazards around the Pacific Rim. Physical and Human Dimensions: From Research to Practice. Auckland, New Zealand.

Gibbs L, Gussy MG, Riggs E, Johnson B, Young D, Gold L, Armit C, Gondal I, de Silva-Sanigorski A, Waters E. Teeth Tales: Results from a Pilot Study with Culturally Diverse Families in Melbourne, Australia. 6th Asian Conference of Oral Health Promotion for School Children. Vietnam.

Nansen B, Gibbs L, Vetere, F, MacDougall C. 'You Do the Math': Mathletics and the Play of Online Learning. Knowledge/Culture/Social Change International Conference, University of Western Sydney.

Nansen B, Gibbs L, Chakroborty K, MacDougall C. You Do the Math: Mathletics and the Play of Online Learning. Ubiquitous Learning Conference, University of California, Berkeley.

Giles-Corti B, Badland H. State of Australian Cities 2011, Melbourne, 29 November - 2 December.

Williams A. Sport and Recreation Victoria – A Brave New World. Presentation and workshop, Creswick, Victoria, 10 November.

Williams A. LGA Corporate Planners Conference. CIV Promotion, Albert Park, Victoria, 11 November.

Williams A. Measuring Australia's Progress (MAP) Forum. Expert panel and knowledge contribution, Canberra, 18 November.

Giles-Corti B. (Invited) Towards a research agenda on social infrastructure. Planning for Healthier Growth workshop, University of Melbourne, 14 November.

Giles-Corti B. (Invited) Health and the city – improving public health through the built environment. Victorian Department of Health Seminar, Melbourne.

December

Block K, Pierson C. The Refugee Experience and Supporting Social Inclusion for Refugee Background Youth. Invited speaker, Victorian Department of Human Services Seminar Series, 5 December.

Gibbs L. Multi-level dimensions of resilience in post-bushfire communities. Invited speaker, Multinational Resilience Working Group, Melbourne.

Giles-Corti B, Badland H. NWMR Integrated Planning Conference, Melbourne, 5-7 December.

Williams A. OECD Measuring Wellbeing and the Progress of Societies. Invited guest: knowledge contribution and feedback, Tokyo, 5-6 December.

Giles-Corti B. (Invited plenary) Whole of government approach for planning for liveable and sustainable communities in urban growth corridors. Integrated Planning Conference: Celebrating and building on best practice in integrated local area planning across the North and West Metropolitan Region. Darebin Arts and Entertainment Centre, 7-8 December.

KEY ACHIEVEMENTS

Anti-racism and Diversity Studies (ARDS) program

In 2011, this program continued to evaluate the VicHealth Localities Embracing and Accepting Diversity (LEAD) program, including a particular focus on councils and schools. Fieldwork for our evaluation of the Intercultural Understanding Field Trial for DEECD was also completed and its ARC linkage project on estimating the economic costs of racism was commenced, including recruitment of a research fellow and PhD student. The Program was also awarded two other ARC linkage grants, which will commence in 2012.

Fieldwork was also largely completed for the team's VicHealth innovation grant on racial socialisation among children aged

8-12 years. Team members also published two key reviews on teaching anti-prejudice and bystander anti-racism respectively, and completed a review on addressing racism in the workplace for VicHealth's Creating Health Workplaces series.

Place, Health and Liveability Program (PHLP)

The Place, Health and Liveability Program (PHLP) was established in August 2011, as a joint initiative of the McCaughey Centre and the Faculty of Architecture, Building and Planning. The PHLP team is working with a multi-disciplinary group of academics across the University including Schools and Faculties of Architecture, Engineering and General Practice. With the support of the Department of Health and the Northwest Regional Management Forum (NWRMF), the Program has already established links the Departments of Planning and Community Development, Transport, and Justice; and attracted four PhD student scholarship (two Strategic Australian Postgraduate Award (APA) scholarships; one APA and one Melbourne International Scholarship); a Melbourne interdisciplinary seed grant (Chief Investigator (CIA) Associate Professor Carolyn Whitzman from Faculty of Architecture); and grants totalling nearly \$800,000 from the Australian Urban Research Infrastructure Network to support the development of a GIS-based walkability index (jointly with University of Western Australia Chief Investigator Professor Billie Giles-Corti) and the establishment of its Geographic Information System Data Base (in collaboration with University of Melbourne's School of Engineering and Chief Investigator Dr Hannah Badland). Team members (Giles-Corti) contributed to the School's newly funded Longitudinal Study on Male Health through involvement in measures on social determinants of health.

Social Inclusion

The Social Inclusion Program continues to conduct projects spanning evaluation work, exploratory social science research and developing methodological innovation for research involving disadvantaged populations. These projects explore associations between health, wellbeing and social inclusion across different populations and place-based settings.

Families participating in the Bellbardia 'Stories from HOME' project.



Several projects were completed in 2011. Round 3 Neighbourhood Renewal Community Surveys for East Reservoir and Heidelberg West, led by Dr Rosemary Mann, were conducted. These findings inform local community projects and contribute to developing improved understanding of associations between place-based disadvantage, health and wellbeing. Dr. Deborah Warr and Dr Mann continued their work on the ARC Linkage, Youth Insight Project (also involving Professor Anne Kavanagh from the Centre for Women's Health, Gender and Society) exploring pathways for young people in Melbourne's west to reengage with education and employment pathways. Early findings from this project were presented at conferences during 2011. Ongoing projects address issues of social inclusion for families with migrant and refugee backgrounds and social network structures among residents living in settings of place-based disadvantage.

A major achievement this year was the completion of the 'Stories From HOME' pilot project, which was funded through the University's Interdisciplinary Seed Funding grant. This innovative and participatory arts-research project involved residents living in the Bellbardia Estate in West Heidelberg and was conducted in collaboration with researchers from the Victorian College of the Arts and Music. The project aimed to draw on participatory arts-based practice and ethnographic methods to engage marginalised populations in research and to explore possibilities for reducing the risks of place-based stigma for communities involved in research. Findings from the project informed the development of a larger research proposal and, despite modest funding, generated a number of positive outcomes, including a repository of artworks, creative engagement and social connection. A knowledge exchange event was a light installation projected onto the walls of the estate using images collected through the project. The event was combined with a community barbecue. Artwork generated through the project also forms a permanent exhibition of photographic work on display at the Banyule Community Health Centre, an academic article and an 'art-research catalogue' providing visual and textual material explaining the issues that informed the project, the processes through which it was conducted and the outcomes that were generated.

Workplace Health

Workplace health program: It was a busy year for new projects, including an integrated job stress and workplace mental health promotion project funded by the beyondblue Victorian Centre for Excellence (led by Associate Professor Tony LaMontagne), two projects on occupational skin disease led by Dr Tess Keegel, and external collaborations in job stress intervention with the Deakin Graduate School of Business (VicHealth-funded) and a new NHMRC Partnership grant led by Professor Anne Kavanagh in the Centre for Women's Health, Gender and Society on the new Commonwealth paid parental leave program. The workplace program (LaMontagne) is also participating in the School's newly-funded national Longitudinal Study on Male Health. An international highlight is Associate Professor LaMontagne's invitation to co-author a white paper and plenary presentation for the CDC/NIOSH First National Conference on Eliminating Health and Safety Disparities at Work in Chicago, including publication of a full conference paper and an invited paper in a forthcoming special issue on the conference in the *American Journal of Industrial Medicine*. In terms of staff, Dr. Kathryn Page has joined the team as a part-time post-doctoral research fellow under an NHMRC Capacity Building Grant in workplace public health. In other highlights, Associate Professor LaMontagne became President of the Australasian Epidemiological Association (AEA) and will serve a three-year term.

DEECD – new partnership project

In 2011, the three schools/institutes from the University of Melbourne – the Melbourne Graduate School of Education (MGSE), the Melbourne Institute of Applied Economic and Social Research (MIAESR), and MSPH – formalised partnerships with the DEECD. The purpose of these research and evaluation partnerships is to build long term relationships between the Department and the different schools/institutes to achieve better health and education outcomes for children in Victoria. The partnership is initially for three years and has three primary areas of activity:

1. Data linkage and in-depth analysis of existing data.
2. Generating new evidence through innovative research.
3. Strengthening the use of evidence in decision and policy making.

The MSPH-DEECD partnership officially started in July 2011. It is being led for the School by Associate Professor Andrea de Silva-Sanigorski. Three priority projects with strong policy relevance have been identified:

1. Establishing an integrated data platform for monitoring and assessing child health, wellbeing, development and learning.
2. A detailed, prospective cohort study of early childhood factors and child outcomes.
3. Early childhood services which shape primary school educational outcomes.

The Jack Brockhoff Child Health and Wellbeing Program

The Brockhoff Program has a number of streams: Promoting Mental Health and Wellbeing, Prevention Science & Intervention Research, Public Health Evidence & Knowledge Transition; and Community

Partnerships & Health Equity Research. The sections which follow detail their major achievements for 2011.

Brockhoff's Promoting Mental Health & Wellbeing Stream

During 2011, the Promoting Mental Health and Wellbeing Stream, led by Dr Elise Davis, continued its focus on promoting the mental health of children attending child care. It was awarded a University of Melbourne partnership grant with the Hunter Institute of Mental Health to explore the mental health of child care educators. It also published its protocol and completed baseline data collection for a RCT for Thrive, the first program that builds the capacity of family day care educators to promote children's mental health.

Brockhoff's Community Partnerships & Health Equity Research Stream

Beyond Bushfires: Community Resilience and Recovery

The 2009 Victorian bushfires were catastrophic in terms of loss of life, property destruction, and community disturbance. In order to promote better health and strengthen the social elements of affected areas, an accurate understanding of the factors that contribute to recovery from natural disasters must be achieved. In 2011, the ARC-funded Beyond Bushfires: Community Resilience and Recovery study officially commenced. Led by Professor Elizabeth Waters and coordinated by Dr Lisa Gibbs, this project will survey affected and unaffected communities to map the predictors and outcomes of health and wellbeing over time.

This project is being undertaken in partnership with academic colleagues in the University of Melbourne, University of New South Wales, Flinders University and organisational partners Australian Red Cross, Australian Rotary Health, Victorian Department of Health, Centrelink, Australian Centre for Posttraumatic Mental Health, Primary Care Partnerships from bushfire affected regions: Outer East Health and Community Support Alliance; Bendigo Loddon Primary Care Partnership; Lower Hume Primary Care Partnership; Central West Gippsland Primary Care Partnership; Banyule Nillumbik Primary Care Alliance; Central Hume Primary Care Partnership, and a wide range of community organisations, local services and local government.

Beyond Bushfires will provide crucial information for shaping policy for disaster management in the years ahead. Conducting this research over five years and focusing on social networks will provide new insights into the interplay between individual and community factors and their influence on recovery from natural disasters over time, thereby expanding understanding of long-term disaster recovery needs for individuals and communities.

Teeth Tales: Making a Difference

Teeth Tales is a community-based child oral health intervention and evaluation study being led by the University of Melbourne and Merri Community Health Services, and conducted in partnership with Dental Health Services Victoria, Moreland City Council, Arabic Welfare, Victorian Arabic Social Services, Pakistan Australia Association Melbourne, the Centre for Culture Ethnicity and Health, North Richmond Community Health and the City of Yarra.

RESEARCH PARTNERSHIP MAY TRANSFORM LIVES OF VULNERABLE CHILDREN

This year, after a highly competitive process, the Melbourne School of Population Health (MSPH) was awarded one of three 'Research and Evaluation Partnerships' with the Department of Education and Early Childhood Development (DEECD).

The partnership is a unique collaboration between government policy makers and public health and education researchers that could transform the lives of many vulnerable Victorian children. The two other partnerships were also awarded to the University of Melbourne.

The partnership is a new way of doing business for the department and involves researchers and policy makers sharing their respective areas of expertise, with the aim of developing strong evidence-based policies – policies that could enable children to develop to their full potential.

Associate Professor Andrea de Silva-Sanigorski, of the McCaughey Centre at MSPH, says the close partnership between DEECD and three University of Melbourne entities is one of many innovative aspects of the program.

The program's combined efforts will develop a multi-dimensional picture of children's lives, she says, starting from very early childhood, through school years and entry into the workforce, examining a range of outcomes spanning health, well-being, development and learning.

MSPH is focusing on early childhood through three projects that will:

1. Link and analyse existing data.
2. Generate new evidence through innovative research.
3. Strengthen the use of evidence in making decisions and policy.

The ambitious, three-year program started in July 2011 and unites DEECD with the Melbourne Graduate School of Education, the Melbourne Institute of Applied Economic and Social Research, as well as MSPH.

Associate Professor de Silva-Sanigorski is partnership director and Professor Terry Nolan and Professor Elizabeth Waters lead the MSPH partnership. Dr Peter Kremer is also part of the project team.

Project 1, 'Establishing an integrated data platform for monitoring and assessing child health, wellbeing, development and learning', is the first of three projects in the first phase of the partnership. "A key aspect of Project 1 by MSPH is making better use of monitoring and surveillance data sets that the Government already collects through sources like the maternal child health service and schools, which are used for the reporting of top line measures that the Government requires," she says. "But these are rich data sources that could be better utilised for planning, resource allocation, and research, evaluation and population monitoring."

Project 2, 'A detailed, prospective cohort study of early childhood factors and child outcomes', will expand two existing early childhood research cohorts to investigate health and development issues. It will examine the contribution of early life risk and protective factors on outcomes throughout childhood.

Project 3, 'Early childhood services which shape primary school educational outcomes', will focus on the service sector. "It will investigate questions such as 'what impact does the quality of kindergarten teachers or child care staff have on learning outcomes as a child gets older?', as well as other services such as health and welfare," says Associate Professor de Silva-Sanigorski.

"Alongside this data work is a comprehensive program of activities to enhance research and evaluation capacity with government. Each of the research partners will provide training and support for policy makers on how to gather and interpret research evidence. The policy and decision makers in turn will guide researchers in relation to how policies are developed and in what format we need to provide the research evidence to them for it to be used in policy-making processes.

"We are laying the groundwork for improving the lives of children in the years ahead," she says. "That's our hope. That by creating an evidence base that can inform decision-making processes we will have better outcomes for children, families, settings, services and the wider community. Through this approach we can try to reduce developmental health inequalities that, once established, are hard to change and can have lifelong impacts on children's trajectories."

The project aims to improve the oral health of refugee and migrant children by addressing the social, cultural and environmental influences of child oral health. It involves reorientation of health services through organisational cultural competence reviews, and delivery of oral health education programs and introduction to community health services through cultural organisations and peer educators. The pilot study was successfully conducted in North Richmond in 2011, and while it demonstrated that the trial procedures were predominantly feasible, it also highlighted challenges in the community context of the pilot site, particularly aligning geographically based health services with extensive cultural networks. This informed modifications to the intervention and evaluation framework in time for the commencement of the larger trial in Moreland.

Supporting Social Inclusion and Successful Settlement for Refugee Background Children and Youth

For the last three years, the team has been working closely with the Victorian Foundation for the Survivors of Torture (Foundation House) to evaluate two of their innovative programs for supporting refugee background children and young people to make a successful start to their new lives in Australia. These evaluations were successfully completed in 2011.

The first involved an evaluation of *Ucan2*, a multi-agency project involving Foundation House, the Centre for Multicultural Youth (CMY) and Adult Multicultural Education Services (AMES). *Ucan2* is designed to provide additional levels of support through English language programs to enable young people from refugee backgrounds to negotiate resettlement challenges successfully. The three-year mixed method evaluation showed that the experiences of students, staff and volunteers of the *Ucan2* program were overwhelmingly positive. Disruption to family relationships brought about by the refugee experience has a profound impact on many participants. The provision of psychosocial support to students was recognised as an extremely valuable program component and the crucial role of social connections in promoting integration and inclusion was underscored by focus group and interview findings. Increased capacity to make links to other organisations providing support and advocacy was also valued as an outcome of participation in *Ucan2*. Increased confidence was also identified as an impact of the program, including confidence to communicate in English, to negotiate employment and education systems, to interact with the broader community and organisations and to seek additional support when required.

The second evaluation was of the *School Support Program*, a partnership between Foundation House and the Department of Early Childhood and Education Development. The program aims to raise awareness and understanding of the refugee experience and its effect on learning; support schools in their efforts to address the needs of refugee background students; and develop resources, promote good practice and provide specialist support. The program is delivered through a network strategy that provides intensive, concentrated support to up to 10 schools in each of five metropolitan and rural networks. Its one-year evaluation analysed

data from 38 schools to assess program associated changes. The majority of schools planned and were successful in implementing actions in all of the key identified areas for change. The partnership approach of the program was perceived as an effective strategy for building the capacity of participating schools and their communities to support refugee background students. Interviewees reported improvements in wellbeing and educational outcomes associated with the program for both refugee background and non-refugee background students, especially for those who have additional learning needs. This would suggest that the program has significant potential to promote equity within schools.

For more information about either of these projects, or to obtain copies of the evaluation reports, please contact Karen Block, Research fellow – Community Engagement and Social Health Research, keblock@unimelb.edu.au

School-based health promotion interventions for prevention of overweight and obesity

Fun 'n healthy in Moreland! was a five-year randomised controlled trial of a school based child health promotion and obesity prevention intervention study. The study, conducted in partnership with Merri Community Health Services, included a four-year intervention program involving 23 primary schools and a mixed method approach to evaluation. One of the driving philosophies was to understand what works for whom, why, in what circumstance and for what cost. The project addressed the issue of child overweight and obesity by working closely with school communities to develop multi-level interventions guided by the limited evidence available. The comprehensive and multi-level evaluation of the intervention demonstrated that sustainable strategies in the form of policies, curriculum, staffing changes, and school programs required between 2-4 years to become embedded in the school system and structures. This approach demonstrated, immediately post completion of the resourced intervention, significantly higher ratings in child reported health, and increased water, fruit and vegetable intake among children in intervention schools compared with those in control schools. However equivalent reductions in body mass index (BMI-z) were observed for both the intervention and control groups. The evaluation also generated individual school results to help to direct health promoting changes in each school. These individual school reports were launched in August 2011, generating positive debate about change processes in school communities, and an expressed interest in ongoing research partnerships.

Brockhoff's Prevention Science & Intervention Research

The stream is led by Associate Professor Andrea de Silva-Sanigorski, and the team comprises the following staff and students: Ms Lauren Carpenter, Ms Monica Virgo-Milton, Ms Pam Leong, Ms Elise O'Callaghan, Ms Tamara Heaney, Ms Alexandria Hoare, Dr Shalika Hegde, Dr Lauren Prosser, Ms Adina Heilbrunn, Ms Rhydwyn McGuire, Ms Rosie Ashbolt, Dr Ben Keith, Ms Rachel Boak, Dr Tan Nguyen, Dr Andrea Bradley and Dr Peter Kremer.

Through 2011, this research stream has continued to undertake two main areas of research: 1) collecting primary data on a broad

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range of factors related to child health, oral health and development during the very first years of life, and 2) the co-creation of knowledge with service providers and policy makers.

There have been many highlights this year:

VicGen-PROJECT EXTENDED

VicGen is a five-year prospective birth cohort of 500 child-parent dyads funded by the NHMRC and Dental Health Services Victoria (DHSV). Recruitment commenced in 2008 with participants recruited from north-western Victoria. Data is collected at child ages 1, 6, 12 and 18 months. A total of 466 participants were enrolled in the study and completed baseline data collection. 1500 study visits were completed, with data collected at child aged 4 weeks (baseline), 6 months, 12 months and 18 months. The project team have worked tirelessly to retain the cohort during this time and we have a very low attrition rate from the study. It has also received some funding from the DEECD to extend data collection until children reach school entry, and to expand the scope of the cohort to include child development and learning outcomes. Over 80% of the families already in VicGen have agreed to take part in the extended study.

Splash!

Splash! is a five-year ARC funded prospective birth cohort of 500 child-parent dyads, recruited from south-western Victoria, which commenced in December 2009. Data are collected annually for children aged 1-4 years. More than 400 participants have enrolled in the study, with over 1000 study visits conducted to date at baseline (antenatal), and child age 6 and 12 months. The team has also conducted about 40 in-depth interviews with participants to explore the specific factors that influence their choices and behaviours related to diet and oral health.

Australian Population Health Improvement Research Strategy (APHIRST)

The Australian Population Health Improvement Research Strategy for Oral Health (APHIRST-Oral Health) was established in 2010 through the collaborative efforts of Dental Health Services Victoria (DHSV) and The Jack Brockhoff Child Health and Wellbeing Program. This initiative builds on current activity and momentum in Australia to improve population oral health, undertaking research and translation research activities related to the underlying social, economic, environmental and political factors with relation to oral and general health. We utilise two main strategies to undertake this research: 1) embedding the research team within DHSV to co-develop research and enable formal and informal knowledge transfer and exchanges, and 2) the development and dissemination of high quality, relevant and timely knowledge and evidence translation resources and capacity building activities, engaging with a diverse group of stakeholders to promote evidence based decision-making and research in oral health promotion.

The APHIRST team is located both at DHSV and also the University. Now, 18 months since initiating this partnership, the APHIRST team at DHSV has grown from 1.7 EFT to 4.7 EFT through increased investment by DHSV and an increased utilisation of the APHIRST research and evaluation capabilities within the organisation. We

are undertaking a large number of activities related to capacity building, knowledge translation, intervention development and evaluation in partnership with DHSV. These activities also involve the wider public oral health sector, involving agencies spread across Victoria, and also working closely with the Department of Health. In September the project had an APHIRST network membership of 104, with membership comprising professionals from research, clinical practice, teaching faculties, community development, policy and health promotion. The activities of APHIRST include website, newsletters, evidence summaries and seminars for professional development.

The Brockhoff Program's Public Health Evidence & Knowledge Transition

In 2011, the Public Health Evidence & Knowledge Transition stream's main achievements were:

- Update of Cochrane Review; interventions to prevent childhood obesity completed. Led by Professor Elizabeth Waters with involvement by Associate Professor Andrea de Silva Sanigorski, Dr Belinda Hall and Dr Rebecca Armstrong.
- Knowledge translation for local government (KT4LG) study completed. KT4LG was a cluster randomised controlled trial set within Victorian local government to explore the effectiveness of a program of knowledge translation strategies. Analysis of outcomes underway.
- The Cochrane Public Health Group now has 50 reviews at various stages of the publication process.

STAFF HIGHLIGHTS

Dr Yin Paradies received the 2011 Victorian Young Poppy Science Award from the Australian Institute of Policy and Science. The prestigious award recognises the achievements of young scientific researchers and communicators throughout Australia. "Tall Poppies" are more than just high achieving post-doctoral researchers; they also mentor and encourage younger generation school children, in order to promote future careers and leadership in science.



Dr Yin Paradies presenting on his research at the award ceremony for his Tall Poppy Award.

Dr Andrea de Silva-Sanigorski was promoted to Associate Professor in recognition of research excellence, contribution to the evidence base and service to her profession.

Professor Billie Giles-Corti was the recipient of the inaugural Public Health Association of Australia Mentor of the Year Award for her "extraordinary dedication to the mentoring of students and early career professionals".

Dr Elisha Riggs was awarded a PhD for her research study, "Addressing child oral health inequalities in refugee and migrant communities".

Dr Bjorn Nansen was awarded a PhD for his research study, "Rhythm-aesthetics: Sense economies, technicity and the configuration of routine".

Dr Rebecca Armstrong was awarded a PhD for her research study, "Evidence-informed public health decision-making in local government".

PUBLICATION HIGHLIGHTS

Waters E, de Silva-Sanigorski A, Hall BJ, Brown T, Campbell KJ, Gao Y, **Armstrong R, Prosser L** and Summerbell CD. Interventions for preventing obesity in children. *The Cochrane Library* December 2011.

This is one of the most downloaded reviews on *The Cochrane Library*. The review found that overall, interventions had a positive impact. They reduced children's risk of developing obesity through policies and strategies to improve healthy eating and physical activity levels and reducing body mass index, relative to a comparison group. Since the release of the obesity review on 7 December, there have been more than 90 stories/media hits generated from the review in 19 different countries.

Davis E; Williamson L; Mackinnon A; Cook K; **Waters E;** Herrman H; Sims M; Mihalopoulos; Harrison L; Marshall B. (2011) Building the capacity of family day care educators to promote children's social and emotional wellbeing: An exploratory cluster randomised controlled trial. *BMC Public Health* 11:842.

Thrive is the first mental health capacity building program for family day care educators. We published the protocol paper in November 2011 and it had been accessed 912 times in four months (Davis et al., *BMC Public Health* 11:842).

Priest N, Paradies Y, Gunthorpe W, Cairney S, Sayers S. Racism as a determinant of social and emotional wellbeing for Aboriginal Australian youth. *Medical Journal of Australia*. 2011.

This study found that among young Aboriginal people aged 16–20 years living in the Top End of the Northern Territory, the experience of racism was associated with anxiety, depression, suicide risk and overall poor mental health after adjusting for confounders. To our knowledge, this is the first published Australian study to consider racism and health outcomes specifically for young Aboriginal people living in remote localities using an outcome measure developed and validated specifically for the young Aboriginal people.

Nansen B, Chakraborty K, Gibbs L, Vetere F, and **MacDougall C.** Children and Digital Wellbeing in Australia: Online Mediation, Conduct and Literacy. *Journal of Children and Media*. DOI:10.1080/17482798.2011.619548 (Available online 8 December 2011)

This article has shown that education and regulation largely attend to more overt, publicised or well-known online risks, while the research literature is disproportionately focused on older children's modes of use and their associated risks. This article reports that younger children are less likely to experience more dangerous kinds of risks based on their limited and more actively governed internet use. Instead, our research indicates that online risks to younger children's wellbeing are more ordinary, and more commonly relate to the uses of the internet within their existing interpersonal relationships, and to the kinds of commercial content they regularly come into contact with. By developing a concept of digital wellbeing, the article argues that rather than focus only on risk protection measures, it is important to equip children with the knowledge and skills to be active, ethical and critical participants online.

Block K, Gibbs L, Staiger P, Gold L, **Johnson B,** Macfarlane S, Long C, and Townsend M. Growing Community: the Impact of the Stephanie Alexander Kitchen Garden Program on the Social and Learning Environment in Primary Schools. *Health Education and Behaviour*. DOI:1090198111422937, (first published on 13 December 2011).

Celebrity-based food programs are increasingly generating public discourse in relation to healthy food. This is a positive development for public health but still requires careful evaluation to determine the impacts and outcomes of these programs. The Stephanie Alexander Kitchen Garden Program is a primary school based structured cooking and gardening program. It aims to increase children's appreciation and enjoyment of a wide range of fresh, seasonal foods and dishes while developing skills, knowledge, and confidence in the kitchen and garden. This paper focused on program impacts on the social and learning environment of the school. Results showed that some of the program attributes valued most highly by study participants included increased student engagement and confidence, opportunities for experiential and integrated learning, teamwork, building social skills, and connections and links between schools and their communities.

Giles-Corti B, Whitzman C. Commentary – Active Living Research: Partnerships that Count Health and Place (in press accepted 20 September 2011).

This invited editorial highlights the importance of researchers working in partnership with policy-makers and practitioners and, through example, seeks to provide active living researchers with ideas in how they can work to maximise opportunities for their research to be translated into research and practice. This manuscript is also the first published paper of the Place, Health and Liveability collaboration, and is co-authored with Associate Professor Carolyn Whitzman from the Faculty of Architecture, Building and Planning.

CENTRE FOR HEALTH POLICY, PROGRAMS AND ECONOMICS ANNUAL REPORT 2011



Director of the
Centre for Health
Policy, Programs
and Economics,
Professor Jane
Pirkis.

YEAR'S OVERVIEW

2011 was an important year for the Centre for Health Policy, Programs and Economics (CHPPE). We were one of two centres in the Melbourne School of Population Health (MSPH) that were reviewed during the year. A review panel was brought together and chaired by Professor Geoff McColl, Deputy Dean of the Faculty of Medicine, Dentistry and Health Sciences (MDHS). It included international and national representatives whose work has a similar focus to our own, namely Associate Professor Jackie Cumming (Director, Health Services Research Centre, School of Government, Victoria University of Wellington), Professor Philip Davies (Professor of Health Systems and Policy, School of Population Health, University of Queensland) and Professor Tony Harris (Deputy Director, Centre for Health Economics, Monash University). It also included Ms Leonie Young, the former CEO of beyondblue, who provided valuable input from the perspective of someone who has funded and used our work.

Preparing for the review was hard work, but it was an extremely useful exercise. It allowed us to reflect on what we have achieved over the past five years (2006-2010), and consider our directions for the next five years. Some of our key achievements are highlighted below. These have been updated from our review documentation to include information from 2011.

- Our staff numbers grew from 17.7 FTE in 2006 to 24.1 FTE in 2010, including an increase in the numbers of senior staff. This trend continued into 2011, where we had 24.5 FTE staff. In 2011, we successfully recruited a senior health economist. We look forward to Professor Philip Clarke taking up this role at the beginning of 2012.
- We attracted a total of \$28,463,178 during the review period. Sixty per cent of this (\$17,038,095) came to CHPPE directly; the remainder was shared with various collaborative partners. Our collaborative income grew from \$5,671,463 in 2006 to \$8,107,192 in 2010, and has continued to increase in 2011 (\$9,855,366). Our centre-specific income grew from \$2,359,795 to \$4,167,571 over the review period, and increased further to \$5,149,372 in 2011. We maintained our strong financial position because of our diverse sources of income, which includes both Category 1 grant funding sources (competitive grants from bodies like the National Health and Medical Research Council (NHMRC) and the Australian Research Council (ARC)) and Category 2 funding sources (e.g., contracts with state/territory and Commonwealth governments).
- Our staff authored 288 publications between 2006 and 2010, including 136 refereed journal articles. One third of these were in journals which were classified as A or A* in the 2010 Excellence in Research for Australia (ERA) exercise. In 2011, we added an additional 59 publications to our tally, including 43 refereed journal articles. The ERA classification no longer applies, but many of these articles appeared in journals of high standing.
- We had 31 PhD students enrolled with us during the review period, 10 of whom completed their PhDs within this period. Extending the period to 2011 brings these figures to 34 and 12, respectively. Enrolments increased from 15 in 2006 to 24 in 2010, and

The Centre for Health Policy, Programs and Economics (CHPPE) is a multidisciplinary organisation, the core business of which is health services and policy research and health economics. Its staff have expertise in program evaluation, health economics, economic evaluation, health law, epidemiology, social sciences and research methodology, and many have clinical backgrounds.

The mission of the CHPPE is to contribute to the health of the community through research, teaching and service relevant to health programs and policy. It aims to do this by advancing relevant knowledge and addressing relevant issues productively and flexibly. It also includes methodological development, exemplary practice and a varied program of teaching and training. It aims to achieve this mission by improving the community's ability to critically evaluate the performance and funding of health policy and health programs.



EVALUATION SHOWS VALUE FOR MONEY IN BETTER ACCESS PROGRAM

A rigorous evaluation of the Better Access program led by the Centre for Health Policy, Programs and Economic (CHPPE) has provided strong evidence that the program delivers good value for Australian taxpayers. Better Access provided Medicare-funded psychological care to more than two million Australians over a three-year period.

Australia's most comprehensive evaluation of a Medicare-based program, the Better Access research was conducted by CHPPE in collaboration with colleagues at the University of Queensland. CHPPE, part of the Melbourne School of Population Health at the University of Melbourne, injected much needed substance into the public debate about what had become a controversial program. The evaluation's results were cited by a Senate inquiry, reported in mainstream and academic media, were published in journals, and informed changes to the program itself.

The Commonwealth Government's Better Access initiative was introduced in late 2006 and enabled General Practitioners (GPs) to refer consumers to selected allied health professionals for a set number of sessions of psychological care. Critics had focused on the unanticipated level of funding required for the program, and had contended that it had only reached the "worried well," people from wealthy metropolitan areas, and those who were already "in the system."

CHPPE's Director, Professor Jane Pirkis, said the evaluation drew on the best available evidence to disprove some key objections to the program. "We found that uptake of Better Access services has been high in absolute terms, even among relatively disadvantaged groups," she said. Just over two million people received Better Access services during the three-year observation period. This significantly increased from 33.8 people in every 1000 in 2007 to 52.8 people in every 1000 in 2009.

"Uptake was highest for people in capital cities and in areas of high socio-economic advantage, but those in remote areas and areas of the lowest socio-economic advantage experienced the greatest growth in uptake over the three-year period," she said. "We also found that Better Access is reaching significant numbers who have not previously accessed mental health care. We found that more than 50 per cent of consumers seen by psychologists are 'new' to mental health care."

Professor Pirkis also said the program was treating

many people with severe symptoms and debilitating levels of distress, with more than 80 per cent of consumers seen by psychologists having been assessed as experiencing high or very high levels of psychological distress.

Preliminary analysis of self-reported outcomes and cost data for consumers seen by psychologists suggested that Better Access provides good value for money, she said. "We calculated that the average package of care provided by a psychologist, including the cost of the referral and review by the GP, was \$753. Others have estimated that optimal treatment for anxiety or depressive disorders would cost about \$1100."

"Better Access is reaching significant numbers who have not previously accessed mental health care."

The evaluation drew on 20 data sources, including analyses of Medicare and other administrative datasets, analyses of existing epidemiological and research datasets, and stakeholder interviews/surveys and consultations. "We don't know of any other evaluations of Medicare-based programs that have been as comprehensive as this," Professor Pirkis said. "Most have done little more than examine service utilisation and cost data."

"Our study also included studies of consumer outcomes, the largest of which we conducted ourselves. This examined outcomes of Better Access care for 883 consumers." Consumers had reported positive outcomes on standardised measures of psychological distress, depression, anxiety and stress, and expressed satisfaction with their care under Better Access.

CHPPE has published several journal articles from the empirical data and has others in production. "We're pleased with these academic achievements, but we're happier still that the evaluation has had an impact on the debate around Better Access," Professor Pirkis said. "This research has taken it from a level that was based purely on opinion and conjecture to one which has systematically drawn on the best available evidence."

then to 17 in 2011. Completions also rose, from one in 2006 to six in 2010, but dropped to two in 2011. The latter pattern can be explained by the fact that the majority of our students study part-time, at least for part of their candidature. This means that many of them are enrolled for around six years, so it is not uncommon for there to be year-on-year variations in completions.

- Our award courses and short courses have both attracted significant numbers of students. During the review period, our total enrolments in our Master of Public Health (MPH) subjects sat at around 225 each year. The cessation of the Consortium MPH and the commencement of the MSPH MPH has coincided with a recent dramatic increase in total enrolments in our courses (348 students in 2011).
- Our Quality of Teaching (QoT) scores have been consistently high, ranging from an annual average across subjects of 4.2 to 4.5 (out of 5.0) over the course of the review period. In 2011, subjects taught by CHPPE in the new MPH were assessed using the new Student Experience Survey, which does not provide comparable scores to the QoT of previous years. However, CHPPE-taught subjects were all positively reviewed by students.
- Through our research and teaching, we have consistently influenced health policy and practice.

The Review Panel was extremely positive about the many achievements of the Centre. It praised the performance of CHPPE's academic staff in research, teaching and knowledge exchange, and noted that the centre had continued to grow in strength despite having undergone a period of significant change during the review period.

The Review Panel made a number of helpful recommendations. Some of these were specific to CHPPE and others related to the MSPH; some were in areas of which we were already conscious, and others benefited from the panel looking at us from an external perspective and with 'fresh eyes'. Many of the recommendations involved actions that we are already beginning to take. For example, the panel recommended that we could take a more formal approach to some of our collaborations with other centres in the MSPH. This is happening in a number of ways, not least through the Australian Longitudinal Study on Male Health, which is a whole-of-School endeavour. Professor Dallas English, the Director of the Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology, and I successfully secured funding for this \$7 million study in 2011, and it has representation from all centres within the MSPH.

The Review Panel praised the calibre of our staff. Several individual staff members also received recognition from external bodies during the year. Most notably, Professor David Studdert was awarded a Laureate Fellowship by the ARC. These fellowships are extremely competitive, and we were all ecstatic about – though not surprised by – Professor Studdert's success. Through the Laureate Fellowship, he will undertake a program of work that aims to transform the role medico-legal institutions such as health complaints commissions and coroners play in advancing population health. Associate

Professor Margaret Kelaheer and Dr Lisa Brophy are also to be congratulated for their achievements during the year. Associate Professor Kelaheer and her team's abstract 'Evaluating the mental health impacts of an anti-racism intervention for children and young people' was chosen as one of the 10 best abstracts at the Society of Equity in Health 6th International Conference and published in the *International Journal of Equity and Health*. Dr Brophy received the Association of Mental Health Social Workers award for 'Recognition of Exceptional Practice'.

I would like to thank all CHPPE staff and students for their unwavering efforts during the year. The success of the review was entirely due to the individual and collective efforts of our talent group of researchers and teachers. If 2011 is anything to go by, our next review period will be even better than this one!

LEARNING AND TEACHING

CHPPE continues to be a significant provider of postgraduate teaching and learning in the Melbourne School of Population Health (MSPH). In 2011 CHPPE played major role in the implementation of the MSPH flagship Master of Public Health (MPH) program. Our teaching staff was actively involved in the development of the structure and content of the new MPH, with Professor David Dunt, Dr Arthur Hsueh and Ms Rosemary McKenzie sitting on the MPH Working Group to develop the program. Enrolments in the new MPH were high, and in the subjects offered by CHPPE a record number of students participated. The CHPPE short course on evaluation has continued to attract many health agencies and professionals from across Australia, and Founding Head of the Centre, Professor Dunt, contributed to curriculum development of the graduate medical degrees in the MDHS. Our teaching profile is high, based on growing demand for advanced training in policy, program evaluation and economic evaluation. CHPPE has an experienced and passionate teaching team who draw upon the research interests and expertise within the Centre to make learning materials relevant and applied. In doing so, CHPPE's teaching activities link research and learning, facilitating knowledge transfer and translation.

Master of Public Health

The MPH has been the principal teaching program for the Centre since 1996. Health economics, economic evaluation and health program evaluation have been the key teaching areas, with more recent additions in health policy, health systems, foundations of public health and public health leadership and management. CHPPE has significant responsibilities in delivering three of the six core subjects in the new MPH, coordinating Foundations of Public Health and Public Health Leadership and Management (shared with the Nossal Institute for Global Health (NIGH)), and the capstone subject Public Health in Practice, to commence in 2012. CHPPE offers the following electives in the MPH: Health Program Evaluation 1 and 2, Research Project in Health Program Evaluation, Health Economics 1 and 2, Economic Evaluation 1 and 2, Research Project in Economic Evaluation/Health Economics, Health Systems, and Health Policy, with contributions to the core subject Surveys and Qualitative methods by CHPPE tutoring and lecturing staff. Four elective subjects have been discontinued in the new MPH – Environmental Health Service Evaluation, Health Services Research 1; Methods in

TABLE 1: ENROLMENTS IN CHPPE SUBJECTS, 2011

SUBJECT	2011
Economic Evaluation 1	19
Economic Evaluation 2	12
Health Economics 1	25
Health Economics 2	13
Research Project in Health Economics	7
Health Program Evaluation 1	48
Health Program Evaluation 2	28
Research Project in Health Program Evaluation	15
Australian Health Systems/Health Systems	45
Foundations of Public Health ¹	100
Health and Public Policy/Health Policy	36
Total enrolments	348

(1) New subject in 2011 - enrolments consisted of 71 MPH and 29 Master of Speech Pathology students

Evaluating Health Services; and Using Evaluation in Program Design. In keeping with the overall growth in MSPH MPH enrolments, enrolments in core and elective subjects taught by CHPPE in 2011 were strong, as shown in Table 1.

Teaching team

Dr Hsueh once again led the health economics and economic evaluation stream in 2011 and assumed joint coordination of the core subject Public Health Leadership and Management with Dr Tim Moore, from the NIGH. Dr Hsueh is supported by Mr Steve Crowley and Mr Andrew Dalton in teaching the health economics and economic evaluation stream.

Ms McKenzie coordinated the health program evaluation stream, and became coordinator of the new core subject Foundations in Public Health in 2011. Professor Dunt, Dr Hsueh and Dr Helen Jordan contribute to teaching of Foundations of Public Health along with senior staff from across MSPH, making this a truly "whole of School" subject in which CHPPE has a leadership role.

Dr Jordan coordinated and delivered Health Systems and Health Policy, along with her management and delivery of the popular short course in health program evaluation.

CHPPE is committed to developing the teaching skills of research staff and recognises the valuable depth and currency that research staff interests bring to teaching content. In 2011 the following research staff contributed to teaching: Associate Professor Margaret Kelaheer, Dr Cathy Segar, Ms Theonie Tacticos, Ms Michelle Williamson, Mr Peter Feldman, Ms Kristen Moeller-Saxone (PhD candidate), Ms Angeline Ferdinand, Dr Bridget Bassilios, Ms Justine Fletcher, Dr Katherine Ong, Ms Catherine Keating, Ms Chiara Mariano and Ms Allison Yates (PhD candidate).

Teaching responsibilities 2011

- Economic Evaluation 1: Dr Arthur Hsueh/Mr Steve Crowley (Subject Coordinators)
- Economic Evaluation 2: Mr Steve Crowley (Subject Coordinator)
- Foundations of Public Health: Ms Rosemary McKenzie (Subject Coordinator)
- Health Economics 1 and 2: Dr Arthur Hsueh (Subject Coordinator)
- Health Policy: Dr Helen Jordan (Subject Coordinator)
- Health Program Evaluation 1 and 2: Ms Rosemary McKenzie (Subject Coordinator)
- Health Systems: Dr Helen Jordan (Subject Coordinator)
- Research Project in Health Economics: Dr Arthur Hsueh (Subject Coordinator)
- Research Project in Health Program Evaluation: Ms Rosemary McKenzie (Subject Coordinator)

Research projects in Economic Evaluation and Health Program Evaluation

The MPH research project streams in Health Economics/Economic Evaluation and Health Program Evaluation maintained high enrolments as in previous years, reflecting the vocational value students place on these skills in public health. Students undertook research projects with an applied focus across a broad range of topics of significance in public health. In 2011 six students completed a research project in economic evaluation and eleven completed a research project in program evaluation. Research

projects were of a high standard and contributed to health program improvement in Australia and overseas.

Partnerships with local public health agencies and service providers have generated excellent learning opportunities for research project students. In 2011 collaborative research projects were undertaken with the Women's Information and Referral Service at the Royal Women's Hospital, the Health and Well-being Service of the University of Melbourne, the Youth Support and Advocacy Service and Secondbite, a food rescue organisation. CHPPE greatly values these opportunities for collaboration, professional learning and knowledge exchange.

Students completed research projects on the following topics, with teaching and research staff providing supervision, supported by field supervisors in health organisations where appropriate:

Economic Evaluation Research Project Completions

Rory Atchison, supervisor Mr Andrew Dalton. The health economic drivers of geographical variations in hospital utilisation in an Australian Private Health Insurance population.

James Gaw, supervisor Mr Steve Crowley, co-supervisor Professor Fiona Newall. The methodological issues of identifying, measuring and valuing productivity costs associated with health care interventions – an applied approach.

Maja Nedeljkovic, supervisor Mr Steve Crowley. Protocol for Economic Evaluation of an Internet-based Psychological Treatment for Obsessive-Compulsive Disorder.

Arie Rahadi, supervisor Mr Steve Crowley. Economic evaluation of drug-related harm reduction interventions targeting prevention of blood-borne viral infections: Methodological issues and recommendations.

Kah Ling Sia, supervisor Mr Andrew Dalton. What are the economic impacts of diabetes incentive payment? [protocol].

Mingzhu Zhou, supervisor Mr Andrew Dalton. Economic evaluation of Acupuncture as an adjunctive treatment in stroke rehabilitation in Victoria: a protocol design.

Health Program Evaluation Research Project Completions

Sk Billah, supervisor Ms Rosemary McKenzie, co-supervisor Ms Rebecca Lindberg (Secondbite). An Evaluation of Secondbite Community Connect Program for rescue and redistribution of local fresh surplus food to people with high risk of food insecurity.

Kathryn Helen Hale, supervisor Dr Cathy Segan, co-supervisor Ms Jacinta Waters, Manager, Women's Health Information Centre and Well Women's Services, The Women's Hospital. An Evaluation of the Women's Health Information Centre (WHIC).

Christine Mary Hallinan, supervisor Professor David Dunt. Pap Nurses – where has all the screening gone? An evaluation of the general practice Pap nurse initiatives and their impact on cervical screening activity in the general practice arena.

Melanie Jeyasingham, supervisor Professor David Dunt.

Evaluation of the uptake and utilisation of eTG complete through the Practice Incentives Program (PIP) eHealth Incentive.

Fiona Lange, supervisor Ms Rosemary McKenzie, co-supervisor Professor Hugh Taylor. A Formative Evaluation of the Trachoma Story Kit in the Katherine West Health Board.

Diamay Raquel Menezes, supervisor Dr Bridget Bassilios, co-supervisor Dr Jonathan Norton (director, Health and Wellbeing Services, University of Melbourne). Evaluation of the Health University Website.

Renata Morello, supervisor Professor David Dunt. Strategies for improving patient safety culture in hospitals: A systematic review.

Peita Price, supervisor Ms Rosemary McKenzie. The HARP Chest Pain Pilot.

Rebecca Stanley, supervisor Dr Penny Mitchell, co-supervisor Ms Rosemary McKenzie. A formative evaluation of the reach of the Youth Support Service at the Youth Support and Advocacy Service (YSAS).

Rebecca Stewart, supervisor Ms Rosemary McKenzie. A realist evaluation of Waka Ama in New Zealand.

Xue Weng, supervisor Ms Rosemary McKenzie. A needs-based evaluation protocol for the Condom use HIV/STD Prevention Program for female rural-to-urban immigrants in China.

As in previous years, teaching coordinators are indebted to Ms Joy Yeadon, who provided comprehensive administrative support across all subjects and short courses. Ms Tracey Mayhew's management of teaching budgets and staffing is similarly much appreciated. Professional staff contributions are a vital part of teaching and learning in CHPPE.

Research Higher Degree Students

There were 18 PhD students enrolled in 2011. Dr Katherine Ong and Dr Michael Otim were awarded their PhD's during 2011 and Ms Pauline Van Dort was awarded her MPhil.

Dr Katherine Ong, supervisor Professor Robert Carter, co-supervisors Professor Ian Anderson and Associate Professor Margaret Kelaher. A method for incorporating vertical equity for disadvantaged groups into health economic evaluations: Cost based equity weights applied to the Australian Aboriginal and Torres Strait Islander population

Dr Michael Otim, supervisor Associate Professor Margaret Kelaher, co-supervisors Professor Ian Anderson, Professor Robert Carter and Associate Professor Chris Doran. Priority Setting in Health: Contextualising the Program Budgeting and Marginal Analysis (PBMA) in Indigenous Health.

Ms Pauline Van Dort, supervisor Professor David Dunt, co-supervisor Dr Susan Day. An Exploration of the Model of Reciprocal Determinism in an Aged Care Environment.

Short Courses

The short course in Health Program Evaluation: Scoping the Evaluation is coordinated and delivered by Dr Helen Jordan, a



lecturer at CHPPE and administered by Ms Joy Yeadon, Centre Administrator. The course typically runs for three days, but shorter courses (one and two days) were also offered and delivered in 2011 to government and non-government agencies across Australia. The three-day course was delivered at CHPPE in April, July and November of 2011. Dr Jordan also ran two two-day courses for the Discipline of General Practice, University of Sydney; a one-day course for the Department of Health, Melbourne; and a one-day course on program logic for the Southern Metropolitan Region in Dandenong. More are planned for 2012. Approximately 91 health professionals working in government, health services, health promotion and the university sector participated.

The courses provide an opportunity for practical, workplace oriented learning about health program evaluation, with a particular emphasis on program evaluation planning and program logic development. The courses also provide the opportunity for health practitioners who share an interest in health program evaluation to network and undertake group work on their own work-based programs.

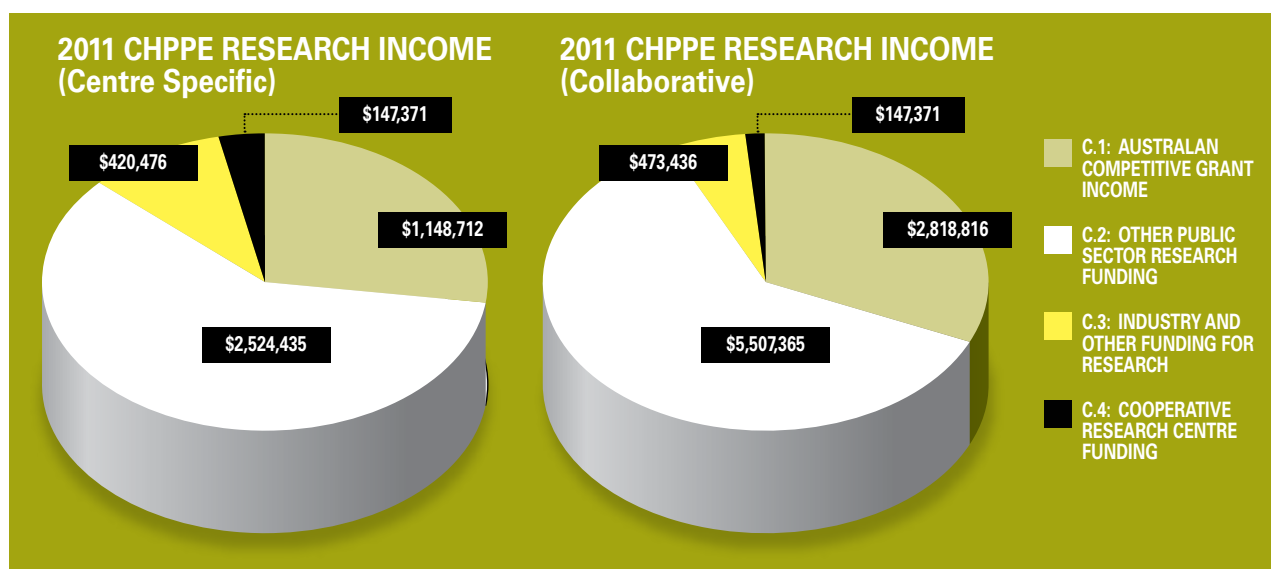
Other teaching activities

Professor Dunt has also been very closely involved in wider School teaching and learning activities in his role as the School's senior Teaching and Learning Coordinator. He is a member of the

School's Teaching and Learning Committee and Chair of both its Graduate Entry Professional Subcommittee and Graduate Programs Committee. He is also a member of its Professional Practice Unit Working Group.

In his role as senior Teaching and Learning Coordinator, Professor Dunt represents the MSPH in teaching and learning matters in the Faculty of Medicine, Dentistry and Health Sciences (FMDHS). He is a member of the Faculty's Academic Policy and Programs Committee (APPC) and was, until its cessation, a member of its Graduate Programs Committee (and its Interprofessional Working Group). He is also a member of three other Faculty working groups (e-learning, Graduate Access and the APPC group that is mounting Faculty response to the Faculty's Strategic and Planning Review by the University).

In his role on the Graduate Entry Professional Subcommittee, Professor Dunt has overseen the design and implementation of population health teaching in the integrated subject Foundations of Biomedical Sciences, which constitutes 82.5% of all first year teaching within the new graduate-entry Doctor of Medicine (MD) course to the 335 medical students. This involved membership of the Phase 1 Working Party in 2009-10. Professor Dunt's role has also involved his oversight of the development of the intercalated MD/ MPH by MSPH and the Melbourne Medical School within MDHS.



RESEARCH

CHPPE undertakes evaluations of health programs and policies at international, national, state and local levels. Since its establishment, CHPPE has attracted over \$67 million in funding from key granting bodies such as the National Health and Medical Research Council (NHMRC), Australian Research Council (ARC) and from organisations such as Commonwealth and state/territory health departments that fund contract research. Over half of this funding has come

directly to CHPPE and the remaining funding has been shared with collaborating agencies.

During 2011, \$8.9 million in collaborative research funding was received with almost half directly by CHPPE.

Since 2007, CHPPE has focused its research around four work streams: Health Economics, Law and Public Health, Mental Health and Primary Care.

Details of new and existing research activities are set out here under the four work streams, including major grants awarded.

HEALTH ECONOMICS

The Health Economics Work Stream includes health economics in general and economic evaluation in particular. In 2011, the research focused on economic evaluation.

The following new projects commenced in 2011.

A telehealth mediated nursing – Patient Remote Intervention and Symptom Management System (PRISMS) – to enable patient monitoring and self-care in haematological cancer patients: a randomised controlled trial.

Funding body: National Health and Medical Research Council (NHMRC).

Chief Investigators: Professor Sanchia Aranda, Associate Professor Penelope Schofield, Professor Nora Kearney, Dr Sibilah Breen, Associate David Ritchie, Professor Nick Santamaria.

Associate Investigator: Dr Arthur Hsueh.

Description: This funded study employs a randomised controlled trial to test a novel telehealth-mediated nurse led intervention – Patient Remote Intervention and Symptom Management System (PRISMS) – to enable real-time monitoring and better management of chemotherapy (CTx) side-effects in haematological cancer patients. This study also collects related cost data to enable modelling of the cost-effectiveness of this system.

Funding: \$896,437 (\$15,000 to CHPPE).

Measuring the cost of human morbidity and mortality in consequence assessment of zoonotic infections in biosecurity.

Funding Body: Australian Centre of Excellence for Risk Analysis.

Chief Investigators: Professor David Dunt, Dr Helen Jordan.

Description: This project involved researching, reporting and developing recommendations for the Australian Government Department of Agriculture, Fisheries and Forestry on the methods available for measuring the monetary and non-monetary cost of human morbidity and mortality for use in consequence assessment of zoonotic infections.

Funding: \$36,000.

Other existing research activities carried over from previous years included:

- The impact of Chlamydia on the health and health care system of Victorians – an analysis of available data.
- Spinal cord injury and physical activity (SCIPA) – a nation-wide random controlled trial across Australia and New Zealand.
- Closing the gap of vision loss between Indigenous and non-Indigenous Australians – studies on barriers of eye health care utilisation and setting cost-effective strategies.

LAW & PUBLIC HEALTH

In 2011, the Law and Public Health group (LPH) continued work on projects addressing the following topics at the intersection of the health and legal systems:

- The health effects of compensation systems.
- Complaint prone doctors.
- Disciplinary actions against doctors.
- Public health recommendations by Australian coroners.
- The epidemiology of inquests.
- Disputes over informed consent.
- Taxonomies for health care complaints.
- Litigation against nursing homes.
- Novel methods for measuring pain-and-suffering in personal injury litigation.
- Health care fraud.
- “Evergreening” of pharmaceutical patents.

The LPH group continued to provide advisory services to several key agencies, including Australia’s eight state and territory health service commissioners, the Australian Health Practitioner Regulation Agency and the Coroners Court of Victoria.

Professor David Studdert was successful in winning an ARC Laureate Fellowship. The Fellowship will be used to continued to support and grow the work of the LPH group over the next five years.

The Law and Public Health group launched two new externally-funded projects, detailed below:

Health Effects of Compensation (HECs) Study.

Funding Body: Institute for Safety, Compensation and Recovery Research (ISCRR) via Monash University.

Chief Investigator: Professor David Studdert. Other Investigators: Ms Genevieve Grant, Associate Professor Meaghan O'Donnell (Australian Centre for Posttraumatic Mental Health), Dr Matthew Spittal.

Description: This project will examine the relationship between the personal experiences of claimants to injury compensation schemes and their injury recovery trajectory. It will do this by extending an existing NHMRC-funded project, the Injury Vulnerability Study (IVS).

Funding: \$483,039

Clinical governance and quality of care.

Funding Body: Victorian Managed Insurance Authority (VMIA) and The Victorian Healthcare Association (VHA).

Chief Investigators: Professor David Studdert, Dr Marie Bismark.

Description: Good hospital governance is an important part of delivering safe, high quality health services. This project aims to describe the activities and attitudes of Victorian public hospital boards in relation to the governance of quality, safety and clinical risk management issues and to analyse the association with hospital performance.

Funding: \$241,000

Other existing research projects carried over from previous years are:

- Learning from Preventable Deaths: A prospective evaluation of reforms to Coroners' recommendation powers in Victoria.
- Rehabilitation and Compensation for Injured Workers: A Review of the Australian Schemes.

MENTAL HEALTH

The Mental Health Work Stream continues to conduct internationally-recognised projects in the area of mental health and suicide prevention, under the leadership of Professor Jane Pirkis.

In 2010 the MIND Australia Board decided that the organisation's commitment to research and evaluation should be initiated through a partnership with the University of Melbourne, through CHPPE. This enabled the three-year appointment of a Director of Research, Dr Lisa Brophy, who is employed by the University of Melbourne as a senior research fellow. Dr Brophy commenced her position with CHPPE and MIND on 31 January 2011 and has worked to place research at centre stage within MIND. A Research Reference Group has been established, made up of a combination of MIND staff, Board members, other service providers and academics with a range of relevant expertise. The group has assisted in the development of the MIND Research and Evaluation Framework. The framework provides an overview of MIND's research and evaluation priorities over the next three years. It establishes a planned approach to research and evaluation. To celebrate the achievements in research and the partnership with the University of Melbourne, the Hon Mary Wooldridge, MP, Minister for Mental Health, Women's Affairs and Community Services, launched the MIND Research and Evaluation Framework at a function on 30 November 2011.

Several projects were completed in 2011. Professor Pirkis, Dr Maria Ftanou, and Ms Shelby Williamson conducted an evaluation of the Better Access initiative, collaborating with Ms Meredith Harris (from the University of Queensland) and seeking expert assistance from Dr Anna Machlin and Ms Jo Christo. The evaluation involved a study of outcomes for consumers who were seen by Better Access providers (GPs, psychologists, social workers and occupational therapists), and an examination of Medicare and other relevant data. The success of this project led to Professor Pirkis and Dr Ftanou (along with Ms Harris and Professor Wayne Hall from the University of Queensland) being awarded a second contract to bring together data from these and other components of the evaluation into a summative report. Professor Pirkis, Ms Anne Lockley and Ms Williamson (along with Ms Jo Robinson from Orygen Youth Health Research Centre) developed two evidence-based suicide prevention resources, one on suicide hotspots and the other on suicide clusters.

A number of previously-funded projects continued throughout the year. Professor Pirkis continued to conduct a program of work concerned with suicide prevention through her NHMRC Senior Research Fellowship, and maintained her involvement with the Australian Mental Health Outcomes and Classification Network. Ms Justine Fletcher, Dr Bridget Bassilios, Dr Kylie King, Mr Lennart Reifels and Professor Pirkis continued to work on the ongoing evaluation of the Better Outcomes in Mental Health Care program, attracting additional funding for the evaluation of some recent modifications to the program. Professor Pirkis and Dr Anna Machlin

continued to collaborate with colleagues from Sydney (Professor Simon Chapman) and Canberra (Professor Warwick Blood) to develop the Australian Health News Research Collaboration.

Several new projects began in 2011. Professor Pirkis, Dr Matt Spittal and Professor David Studdert received an NHMRC grant for a record linkage study investigating suicide method substitution for individuals over time. Professor Pirkis, Dr Ftanou and Dr Bridget Bassilios won a contract to evaluate the Support for Day-to-Day Living in the Community program. Professor Pirkis, Mr Lennart Reifels, Dr Lucio Naccarella (Australian Health Workforce Institute) and Associate Professor Grant Blashki (Nossal Institute for Global Health) received funding from the Natural Disaster Resilience Grants Scheme to conduct the Victorian Disaster Mental Health Workforce Capacity Survey. Professor Pirkis, Ms Anne Lockley and Ms Williamson (along with Ms Jo Robinson from Orygen Youth Health Research Centre) received funding from Woollahra Council to develop a case study on the Gap Park Self-Harm Minimisation Masterplan. These new projects are described in more detail below:

An individual-level study of suicide method substitution over time.

Funding Body: National Health and Medical Research Council (NHMRC).

Chief Investigators: Professor Jane Pirkis, Dr Matthew Spittal, Professor David Studdert, Associate Professor Lyle Gurrin, Associate Professor Matthew Miller.

Description: This study is investigating patterns in the methods used in suicidal acts (attempts and completions) in Western Australia, New South Wales and Victoria, with a view to advancing understanding about the potential for restrictions on access to means to prevent suicide. In particular, it is seeking to identify factors associated with the choice of method. It is doing this by first calculating the extent to which individuals switch from one method to another ('substitute') over successive suicide acts, and where those switches suggest substitution, examining the characteristics that predict the methods used on each occasion.

Funding: \$156,000

Evaluation of the Support for Day-to-Day Living in the Community (D2DL) program.

Funding Body: Department of Health and Ageing.

Chief Investigators: Professor Jane Pirkis, Dr Maria Ftanou, Dr Bridget Bassilios.

Description: The Support for Day to Day Living in the Community (D2DL) program targets people with a severe and persistent mental illness who experience social isolation and difficulties living in the community due to a lack of support, and who have a level of disability that restricts their capacity to gain employment. Its aim is to improve social and health outcomes for these individuals through structured and social activity based programs. The current project will involve: (1) provision of a comprehensive evaluation plan for conducting the evaluation of the D2DL program; (2) analysis of options and development of a web based data platform for data collection for the D2DL program; (3) conduct of a comprehensive analysis of mental health outcome measurement tools for the D2DL program; and (4) analysis of the current data collection for the D2DL program and development of a comprehensive list of data requirements for this program.

Funding: \$219,120

The Victorian Disaster Mental Health Workforce Capacity Survey.

Funding Body: Natural Disaster Resilience Grants Scheme – Australian Government Attorney-General's Department and Victorian Office of the Emergency Services Commissioner.

Chief Investigators: Professor Jane Pirkis, Mr Lennart Reifels, Dr Lucio Naccarella (Australian Health Workforce Institute), Associate Professor Grant Blashki (Melbourne Sustainable Society Institute).

Description: As the first systematic state-level study of its kind, The Victorian Disaster Mental Health Workforce Capacity Survey is designed to map and assess the current state (nature, scope, profile and capacity) of the disaster mental health workforce in Victoria. Systematic data and a better understanding of Victoria's disaster mental health workforce capacity will enable a more proactive and strategic approach to disaster response and workforce planning.

Funding: \$75,219

Case study on the Gap Park Self-Harm Minimisation Masterplan.

Funding Body: Woollahra Council.

Chief Investigators: Professor Jane Pirkis, Ms Jo Robinson, Ms Anne Lockley, Ms Shelby Williamson.

Description: The Gap Park Self-Harm Minimisation Masterplan was implemented in response to community, local council, police and mental health and suicide prevention agencies' concern over the number of self-harm incidents at Sydney's Gap Park. This case study will describe the development and implementation of the Masterplan, with a view to providing a practical example of multi-stakeholder collaboration that may assist local authorities in other locations to respond to similar situations.

Funding: \$54,500

Development of a Research and Evaluation Program.

Funding Body: MIND.

Chief Investigators: Professor Jane Pirkis, Dr Lisa Brophy.

Description: This partnership between CHPPE and MIND will develop a research and evaluation program to inform sustained improvement in the circumstances of people facing serious mental health related challenges.

Funding: \$450,000

Existing research activities carried over from previous years:

- Summative Evaluation of the Better Access to Psychiatrists, Psychologists and GPs through the Medicare Benefits Schedule Initiative.
- Development of guidelines on managing and preventing suicides at suicide hotspots, and development of a community plan for the prevention and containment of suicide clusters.
- Independent evaluation of the Mental Health Professionals Network.
- Evaluation of the Better Access initiative (Components A, A.2 and B).
- Evaluation of the Access to Allied Psychological Services component of the Better Outcomes in Mental Health Care program.
- Australian Mental Health Outcomes and Classification Network.
- Health risk screening of adolescents in primary care: A cluster randomised controlled trial.
- The Australian Health News Research Collaboration.

PRIMARY CARE

The Primary Care Work Stream includes evaluations of projects run in general practice and other primary care settings. These projects are frequently aimed at increasing the health and wellbeing of particular consumer groups (e.g., older people, people with diabetes, people with dementia) and/or projects that have a health education focus.

2010 saw major developments in CHPPE's involvement in evaluating and improving Aboriginal and Torres Strait Islander peoples' health. This has continued and grown in 2011. Its focus has also expanded with a number of new studies aimed at increasing acceptance of population diversity and at reducing discrimination in other disadvantaged groups such as Culturally and Linguistically Diverse groups. In 2011 the Primary Care Work Stream was successful in attracting approximately \$3.1 million in research funding in conjunction with other colleagues. Highlights for the Primary Care stream have included:

- Associate Professor Margaret Kelaher has been involved in a large number of Indigenous health studies and reducing discrimination with other colleagues (see below).
- Professor David Dunt, often in collaboration with Dr Colleen Doyle, was involved in mental health studies in a diverse range of groups, e.g. people with dementia and post-traumatic stress disorder (PTSD), with chronic obstructive pulmonary disease (COPD) and in adolescents and young adults with cancer.

The Primary Care work stream attracted funding for the following new projects that commenced in 2011:

Fulfilling the vision of youth-friendly cancer care: How well are we meeting the psychosocial needs of AYA patients?

Funding Body: beyondblue, CanTeen and Cancer Australia.

Chief Investigators: Professor Susan Sawyer, Professor David Dunt, Associate Professor David Thomas and Dr Sarah Drew.

Description: This project will investigate the psychosocial needs of adolescents and young adults with cancer as a basis for developing a program logic for a proposed new development of relevant services in Australia.

Funding: \$449,390

Cost-effectiveness study of cognitive-behavioural therapy for people with chronic obstructive pulmonary disease and depression.

Funding Body: beyondblue.

Chief Investigators: Dr Colleen Doyle, Professor David Dunt, Professor David Ames, Dr Sunil Bahr, Professor Kay Wilhelm.

Description: This project will investigate the effectiveness and cost-effectiveness of cognitive-behavioural therapy for people with chronic obstructive pulmonary disease (COPD) who are depressed and/or anxious. It is significant since COPD is one of the major contributors to the burden of disease in Australia and almost half of people with COPD are depressed or anxious.

Funding: \$220,000

Planning, Implementation and Effectiveness (PIE) in Aboriginal and Torres Strait Islander Health Policy Reform.

Funding body: The Lowitja Institute, Incorporating the Cooperative Research Centre for Aboriginal and Torres Strait Islander Health.

Chief Investigator: Associate Professor Margaret Kelaheer.

Description: This project builds on work we have conducted examining the planning processes underlying the implementation of the first part of the Indigenous Health National Partnership Agreements (IHNPA). This work focussed on understanding the structure of and relationships between forums/committees involved in implementing the IHNPA.

Funding: \$249,485

Strengthening health literacy among Indigenous people living with cardiovascular disease (CVD), their families, and health care providers.

Funding Body: International Collaborative Indigenous Health Research grant-NHMRC.

Chief Investigators: Professor Ian Anderson, Dr Matire Harwood (Tāmaki Healthcare), Dr Jennie Harré Hindmarsh (Ngati Porou Hauora), Ms Susan Reid, (The NZ Centre for Workforce Literacy), Dr Marcia Anderson (University of Manitoba), Ms Nancy Cooper (Indigenous literacy consultant), Associate Professor Margaret Kelaheer, Ms Joanne Hedges (Victorian Aboriginal Health Service), Mr Chester Langille (De dwa da dehs nyes Aboriginal Health Centre), Dr Sanjeev Sridharan (Centre for Research on Inner City Health, Toronto).

Description: Cardiovascular disease such as heart attacks and strokes are important causes of illness and death among Indigenous people in Australia, Canada and New Zealand. Patients and families play a major role in managing heart disease and stroke. To do this well people must be able to access, understand and act on information for health. The project will work with Indigenous primary care services to develop and implement a program with patients and families that will increase knowledge of medications, increase confidence and ability to self-manage CVD, and increase empowerment in interactions with health workers.

Funding: \$2,003,679

The Development of an Evaluation Framework for the Centre of Research Excellence in Translational Neuroscience.

Funding body: The NMHRC Centre of Research Excellence (CRE) in Translational Neuroscience

Chief Investigators: Professor David Dunt, Dr Susan Day.

Description: This project will develop an evaluation framework for the CRE in Translational Neuroscience that will primarily assess the impact and outcomes of the CRE. It will particularly consider the electronic platforms and biobanking resources of the CRE alongside the development of best practice guidelines, new translational clinical programs among general practitioners as well as economic modelling of the impacts of new clinical programs.

Funding: \$42,623

Provision of Research and Evaluation Framework for *healthdirect* After Hours GP Helpline.

Funding body: National Health Call Centre Network.

Chief Investigators: Professor David Dunt, Ms Rosemary McKenzie

Description: This project will develop an evaluation framework for the *healthdirect* After Hours GP Helpline. The GP helpline can be accessed through ringing the general *healthdirect* nurse triage and advice telephone. Depending upon the complexity of the call, the duty nurse may elect to refer the caller to the GP Helpline. It is an important new service development that extends the options available to potential patients seeking after hours primary medical care.

Funding: \$49,848

Study of the work activities and goals of case managers involved in the care of the frail aged in the community.

Funding body: Faculty of Medicine Dentistry and Health Sciences, University of Melbourne.

Chief Investigators: Ms Emily You, Professor David Dunt, Dr Colleen Doyle, Dr Arthur Hsueh.

Description: This project will conduct a survey of case managers about their work activities. A secondary analysis of the EACH-D dataset conducted as part of the Evaluation of the National Dementia Initiative will be conducted to identify factors associated with higher use of case managers as well as aged care health services more generally. Focus groups of case managers will also be conducted to better understand their goals in providing services as well as the barriers that impede the full achievement of these.

Funding: \$71,184

Existing research activities carried over from previous years included:

- Behavioural and psychological symptoms of dementia in veterans research: Exploring the influence of post-traumatic stress disorder and wartime experiences.
- Indigenous Chronic Disease Program: Sentinel Sites.
- The role of planning processes in implementing national Partnership Agreements in Indigenous health: Understanding process and evaluating effectiveness.
- Evaluation of the Bilingual Staff at the Women's Project.
- Evaluation of the National Dementia Initiative.
- LEAD (Localities Embracing & Accepting Diversity) Evaluation Support.
- VicHealth Research Practice Leader Grant – Ethnic and Race Based Discrimination.
- A study of a family-centred smoking control program to reduce respiratory illness in Indigenous infants.
- Culturally appropriate diabetes care in mainstream general practice for urban Aboriginal and Torres Strait Islander people.
- Evaluation of the Community Arts Development Scheme.
- Evaluation of surveillance programs for nosocomial infection in long-term aged care facilities.
- Study of the work activities and goals of case managers involved in the care of the frail aged in the community.
- Evaluation of beyondblue, the national depression initiative.
- Randomised controlled trial of narrative therapy as a self-management modality in the management of Type 2 diabetes.

OTHER RESEARCH

Professor Jane Pirkis co-led a successful tender to conduct the Australian Longitudinal Study on Male Health with Professor Dallas English from the Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology.

Australian Longitudinal Study on Male Health.

Funding Body: Department of Health and Ageing.

Chief Investigators: Professor Dallas English, Professor Jane Pirkis.

Description: The Australian Longitudinal Study on Male Health (Ten to Men) will provide an up-to-date epidemiological picture of male health and males' use of health (and other) services and its longitudinal design will allow various risk and protective factors to be identified and studied. Ten to Men will recruit a cohort of 58,000 males aged 10-55 years (oversampling rural males and males aged 10-17), using a combination of three potential sampling approaches (sampling through Medicare Australia, schools and/or the electoral roll). Separate survey instruments will be developed for Wave 1 – one for males aged 10-15, one for males aged 16-17 and one for males aged 18-55. The content of all three Wave 1 instruments will elicit information about health status, risk and protective factors that may influence health, health (and other) service use and health literacy. Wave 1 will be conducted as a face-to-face interview for males aged 10-15, and as a postal survey with the option of an online version for males aged 16-17 and 18-55.

Funding: \$6,888,120

COMMUNITY ACTIVITIES

During 2011 CHPPE staff continued to be active in the wider community as members of important advisory committees, reviewers of potential articles for a variety of refereed journals and assessors of grant applications.

Further details of community activities are below:

Committee Memberships

Dr Bridget Bassilios

- Member, Access to Allied Psychological Services Australian Government Department of Health and Ageing Expert Advisory Committee.

Dr Lisa Brophy

- Community Member, Mental Health Review Board of Victoria (Ministerial appointment).
- Member, Expert Advisory Group for the review of The Mental Health Act, 1986 (Ministerial appointment).
- Member, Australian Association of Social Workers Ethics Pool.

Professor David Dunt

- Member, Australian Defence Forces Health Advisory Committee.
- Member, ADF Mental Health and Well-being Prevalence Standing Advisory Committee.
- Member, Australian Defence Forces Mental Health Advisory Group Meeting.

Ms Genevieve Grant

- Community Member, Forensic Leave Panel.

Associate Professor Margaret Kelaher

- Executive of Health Services Research Association of Australia.
- Member, Australian Psychological Society.
- Member, International Epidemiology Association.

Professor Jane Pirkis

- Member, Scientific Committee, 16th International Association for Suicide Prevention World Congress.

Dr Matthew Spittal

- Member, Queensland Health Suicide Prevention Roundtable. Queensland, September.

Professor David Studdert

- Member, Scientific Advisory Committee, Institute for Safety, Recovery and Compensation.
- Member, Victorian Data Linkages Steering Committee, Department of Health, Victoria.

Member of Editorial Boards, Referee and Assessor Services for Journals and Grant Applications

Grant Bodies

Professor David Dunt

- Member, National Health and Medical Research Council Grant Review Panel.

Professor Jane Pirkis

- Member, National Health and Medical Research Council Grant Review Panel.

Professor David Studdert

- Reviewer, Australian Research Council (ARC).

Journals

Mr Andrew Dalton

- Reviewer, Medical Journal of Australia.
- Reviewer, Value in Health.

Professor David Dunt

- Associate Editor, Family Practice.
- Reviewer, Family Practice.
- Reviewer, Australian and New Zealand Journal of Public Health.
- Reviewer, BMC Family Practice.



- Reviewer, BMC Health Services Research.
- Reviewer, Health Promotion International.
- Reviewer, European Journal of General Practice.
- Reviewer, Asia-Pacific Journal of Public Health.

Associate Professor Margaret Kelaher

- Member, Editorial Board BMC Health Services.

Professor Jane Pirkis

- Member, Editorial Board, Crisis.
- Member, Editorial Board, International Journal of Mental Health Systems.
- Reviewer, American Foundation for Suicide Prevention.
- Reviewer, Telematics Trust.
- Reviewer, Australian and New Zealand Journal of Psychiatry.
- Reviewer, Journal of Affective Disorders.
- Reviewer, Health Policy and Planning.
- Reviewer, Crisis.
- Reviewer, Social Psychiatry and Psychiatric Epidemiology.

Dr Catherine Segan

- Reviewer, Addiction.

Dr Matthew Spittal

- Reviewer, Tobacco Control, Addiction, Environment and Behaviour.

Professor David Studdert

- Reviewer, The Lancet.
- Reviewer, Science.
- Reviewer, New England Journal of Medicine.
- Reviewer, Journal of the American Medical Association, (JAMA).
- Reviewer, Medical Journal of Australia.
- Reviewer, British Medical Journal.
- Reviewer, Health Affairs.

Other

Associate Professor Margaret Kelaher

The study 'Post Separation Parenting Arrangements and Developmental Outcomes for Infant's and Children', funded by the Attorney-General's Department, has informed a number of media articles.

- Fehlberg, B. (2010). Shared care laws damaging many children. *Sydney Morning Herald*. <http://www.smh.com.au/opinion/politics/shared-care-laws-damaging-many-children-20100826-13tqm.html#ixzz1nFSKMcpY>
- Jackman, C. (2010). Divided lives. *The Australian*. <http://www.theaustralian.com.au/news/features/divided-lives/story-e6frg8h6-1225960157922>
- Griffin, M. (2011). Welfare group recommends daddy day care only. *The Age*. <http://www.theage.com.au/national/welfare-group-recommends-daddy-day-care-only-20111214-1ov0e.html#ixzz1nFcKNAGf>

Ms Kristen Moeller-Saxone

- Collaboration with Western Region Health Centre on 'A Burning Issue: Tobacco and Mental Health' project.

Professor David Studdert

- Provision of ongoing advice to key agencies: the Australian health services commissioners, the Coroners Court of Victoria, and the Australian Health Practitioner Regulation Agency.

Professor Jane Pirkis

- Various media contributions concerning the Better Access initiative (e.g., interviewed by Norman Swan for the *Health Report*, 24 March).

Dr Catherine Segan

- Provided advice regarding smoking and pregnancy to the National Tobacco Campaign's media strategy group.

CONFERENCE AND PUBLIC PRESENTATIONS

International conferences

Brophy, L. (2011). *Community Treatment Orders and Law Reform in Victoria, Australia*. 32nd Congress of the International Academy of Law and Mental Health, Berlin, 17–23 July.

Brophy, L. (2011). *Revocation of Community Treatment Orders*. 32nd Congress of the International Academy of Law and Mental Health, Berlin, 17–23 July.

Ferdinand, A. (2011). *Evaluating the mental health impacts of an anti-racism intervention for children and young people*. International Society for Equity in Health Conference, Cartagena, Colombia, 26-28 September.

Kelaher, M. (2011). *Evaluating the mental health impacts of an anti-racism intervention for children and young people*. International Society of Equity in Health 6th International Conference, Cartagena, Colombia, 26-28 September.

Kelaher, M. (2011). *Evaluating participation in health policy and planning*. International Society of Equity in Health 6th International Conference, Cartagena, Colombia, 26-28 September.

Kelaher, M. (2011). *Examining the role of governance structures in the planning of health reform*. International Society of Equity in Health 6th International Conference, Cartagena, Colombia, 26-28 September.

Kelaher, M. (2011). *Improving the collection of data on race/ethnicity in general practice*. International Epidemiology Association 19th World Congress on Epidemiology, Edinburgh, 7-11 August.

Kelaher, M. (2011). *Parenting arrangements post-separation patterns and developmental outcomes*. International Epidemiology Association 19th World Congress on Epidemiology, Edinburgh, 7-11 August.

Moeller-Saxone, K. (2011). *Understanding smoking cessation models and their relationship to people with mental illness in Australia*. European Health Psychology Conference, Crete, 20-24 September.

SEMINAR PROGRAM

Once again, the Centre's lunchtime Seminar Series, which is open to all colleagues and the general public, proved to be extremely successful. The seminar topics are chosen to highlight current and key aspects of the Centre's Research Program.

DATE	PRESENTER	TOPIC
1 April	Ms Cathy Mihalopoulos	PhD Completion Seminar: the Cost-Effectiveness of Preventive Interventions for Mental Disorders.
27 May	Ms Genevieve Grant	Valuing Injury, measuring lives: Judicial evaluations of the life impacts of injury.
15 June	Dr Cathy Segan	Tailoring Victoria's Quitline service for smokers with depression.
29 July	Ms Christine Campbell	A randomised controlled trial evaluating the effect of patient narrative on self-efficacy and self-care behaviour in people with type 2 diabetes – stage 1 findings.
26 August	Ms Theonie Tacticos	Bringing together top-down and bottom-up: a locality focus to reducing disadvantage.
30 September	Dr Colleen Doyle	The Impact of War Experiences on Dementia in Veterans.
4 November	Mr Lennart Reifels	The Victorian Disaster Mental Health Workforce Capacity Survey: Examining the State of Victoria's Disaster Preparedness (Project Overview).

Pirkis, J. (2011). *Media reporting in the aftermath of a suicide.*

Invited plenary paper 26th International Association for Suicide Prevention World Congress, Beijing, China, 15 September.

Pirkis, J. (2011). *Which suicides are reported in the media?* 26th International Association for Suicide Prevention World Congress, Beijing, China, 15 September.

Spittal, M. (2011). *Trends in suicide attempts and completions in Western Australia, 1980-2007: An individual-level study.* 26th International Association for Suicide Prevention World Congress, Beijing, China, 15 September.

Studdert, D. (2011). *Barriers to Open Disclosure in Australia.* Invited presentation to Physician Insurers' Association of America International Conference. Melbourne, 8 October.

Studdert, D. (2011). *Should Lawyers be Involved in Dispute Resolution?* Invited Plenary Address, 1st Australasian Compensation Health Research Forum, (ISCRR), Melbourne, 13 October.

Studdert, D. (2011). *An Epidemiological Approach to Understanding Coroners' Recommendations.* Invited Plenary Address, Asia-Pacific Coroners Society Annual Conference, Noosa, Queensland, 9 November.

International Seminar Presentations

Pirkis, J. (2011). *Developing a resource for communities affected by a suicide cluster: The Australian experience.* Presentation to UK Suicide Clusters Workshop, Edinburgh, 3 June.

National Conferences

Bassilios, B., Pirkis, J., Fletcher, J., Sanderson, K., Spittal, M., King, K., Kohn, F., Blashki, G., Burgess, P. (2011). *Clinical improvement after treatment provided through ATAPS: Do some patients fare better than others?* Primary Health Care Research Conference, Brisbane, 15 July.

Bassilios, B., King, K., Fletcher, J., Reifels, L., Blashki, G., Burgess, P., **Pirkis, J.** (2011). *Overview of the achievements of Tier 1 and Tier 2 ATAPS.* 7th Health Services & Policy Research Conference, Adelaide, 6 December.

Brophy, L. (2011). *Principles of good practice with people on CTOs.* Keynote Address, Association of Mental Health Social Workers Conference: Dignity, Hope and Recovery, Melbourne, 6-7 October.

Campbell, T. (2011). *A randomised controlled trial evaluating the effect of patient narratives on self-efficacy and self-care behaviours in people with type 2 diabetes – stage 1 findings.* Australian Disease Management Association 7th Annual Conference

'Partnerships for Chronic Care – Patients, Services, Policy', Canberra, 25-26 August.

Ferdinand, A. (2011). *Organisational sustainability of pro-diversity interventions for young people*. Federation of Ethnic Communities of Australia Conference, Adelaide, South Australia, 17-18 November.

King, K., Reifels, L., Bassilios, B., Fletcher, J., Pirkis, J., Blashki, G., Burgess, P. (2011). *The evaluation of a new and innovative component of the ATAPS projects: The Specialist Services for Consumers at Risk of Suicide*. 7th Health Services & Policy Research Conference, Adelaide, 6 December.

Workshop Presentations

Grant, G. (2011). *Injury brokers: A medico-legal professional community in profile. Law and its Accidents*. Melbourne Law School, University of Melbourne, 15 December.

Poster Presentations

Grant, G. (2011). *Judging injury: Findings from the Evaluating Serious Injury study*. First Australasian Compensation Health Forum, Melbourne, 13 October.

King, K., Bassilios, B., Reifels, L., Fletcher, J., Blashki, G., Burgess, P., Pirkis, J. (2011). *Improving access and outcomes for patients of the Specialist Services for Consumers at Risk of Suicide component of the ATAPS projects*. Primary Health Care Research Conference, Brisbane, 13-15 July.

Seminar Presentations

Brophy, L. (2011). *Principles of good practice with people on Community Treatment Orders – Colloquium*. Barwon Health, Department of Psychiatry, 15 March.

Kelaher, M. (2011). *Strategies to improve the identification of Aboriginal and Torres Strait Islander patients in general practice*. Queensland Close the Gap Workshop. Maroochydore, 5-6 November.

Moeller-Saxone, K. (2011). *Understanding smoking cessation from the perspective of people with mental illness: the role of dynamic versus stage-based theories*. Melbourne School of Population Health, 26 July.

Moeller-Saxone, K. (2011). *Smoking and mental illness: a qualitative study*. Quit Victoria, 15 October.

Moeller-Saxone, K. (2011). *Helping people with mental illness quit smoking*. Southern Health, 4 November.

Pirkis, J. (2011). *Evaluation of the Better Access initiative*. Presentation to Health Services Research Association of Australia and New Zealand Mental Health Forum, Melbourne, 15 August.

Segan, C. (2011). *Quitline mental health policy changes*. Quitline Counsellor Inservice, The Cancer Council Victoria, 6 December.

Segan, C. (2011). *Strategies for smokers with depression*. Victorian Quit Educators Inservice, Law School, University of Melbourne, 1-2 December.

Spittal, M. (2011). *The Complaints Apgar Score: a tool for predicting health professionals' risk of complaints*. Melbourne Law School, 18 April.

Spittal, M. (2011). *Complaint prone doctors in Australia*. Presentation to HQCC staff, Brisbane, 3 August.

Spittal, M. (2011). *Complaint prone doctors in Australia*. Presentation to HaDSCO staff, Perth, 4 October.

Studdert, D. (2011). *Relationship Between Negligence Litigation and Quality of Care in Nursing Homes*. Faculty Seminar, Stanford Law School, Palo Alto, California, USA, 6 July.

Studdert, D. (2011). *Empirical legal research*. Melbourne Law School, 11 May.

Studdert, D. (2011). *Problem doctors*. Melbourne Law School, 18 April.

You, C. (2011). *Case management practice, goals and outcomes in community aged care: perspectives of case managers in Australia*. CACP-EACH-ACAS Forum-Northern and Western Metro Regions, Hospital Education Centre (HEC), RMH Royal Park Campus, 1 December.

Other Presentations

Pirkis, J. (2011). *Suicide in traditional and newer media: The Australian experience*. Presentation to UK All Party Parliamentary Committee on Suicide and Self-harm, London, 7 June.

Pirkis, J. (2011). *Evaluation of the Better Access initiative*. Presentation to General Practice Mental Health Standards Collaboration, Melbourne, 4 July.

PUBLICATION HIGHLIGHTS

The Centre for Health Policy, Programs and Economics published 59 journal articles, book chapters, major reference works, and reports including 43 peer reviewed journal articles in 2011. A selection of 2011 peer reviewed journal articles are provided below. For details of all 2011 CHPPE publications please refer to the full school Publications Report.

Bismark, M., Spittal, M., Studdert, D. 2011. Prevalence and characteristics of complaint-prone doctors in private practice in Victoria. *Medical Journal of Australia*. **195** (1) : 25-28.

Objective: To identify characteristics of doctors who are repeated subjects of complaints by patients.

Design and setting: Case-control study of doctors about whom patients had complained to the Victorian Health Services Commissioner between 1 January 2000 and 31 December 2009.

Participants: 384 doctors in private practice; cases comprised 96 doctors who were the subject of four or more separate complaints; and the control group comprised 288 doctors who were the subject of a single complaint over the study period.

Results: Among doctors in private practice in Victoria, 20.5% (95% CI, 19.7%-21.3%) experienced at least one complaint over the decade. Among doctors who were the subject of a complaint, 4.5%

(95% CI, 3.6%-5.4%) had four or more complaints, and this group accounted for 17.6% (95% CI, 16.3%-19.0%) of all complaints to the Victorian Health Services Commissioner. Multivariate analyses showed that surgeons (odds ratio [OR], 8.90; 95% CI, 3.69-21.50) and psychiatrists (OR, 4.59; 95% CI, 1.46-14.43) had higher odds of being in the complaint-prone group than general practitioners. Doctors trained overseas had lower odds of being complaint-prone than those trained in Australia (OR, 0.31; 95% CI, 0.13-0.72).

Conclusions: A small group of doctors in private practice in Victoria account for nearly 18% of complaints. Interventions to improve patient satisfaction and public confidence in health services should target complaint-prone subgroups of practitioners.

Dunt, D., Hage, B., Kelaher, M. 2011. The impact of social and cultural capital variables on parental rating of child health in Australia. *Health Promotion International*. **26** (3) : 290-301.

Abstract: The aim of this paper is to study the effects of factors broadly captured under the rubric of parental social and cultural capital on child health. The setting was 11 disadvantaged communities in Victoria during the conduct and evaluation of Best Start, an early childhood initiative of the Victorian State Government. Questionnaires were sent to parents of three-year-old children in 2004 and 2006. The principal dependent variable was parental global rating of their child's health. Social capital variables focused, for example, on community support for parent's child rearing practices. Cultural capital variables focused, for example, on parent's reading to their child. Socio-economic status and other potential confounding variables were also measured. Stepwise multivariable logistic regression was used. There were consistent independent effects for the cultural capital variables – 'Age started reading to the child' and 'Confident being a good parent', and only one of a number of social capital variables – 'Community support for childrearing' as well as for some other variables particularly that 'Child had a chronic health/medical condition'. Dichotomizing parent's global ratings of their child's health differently had some effects on results. Cultural capital and, to a lesser extent, social capital variables were associated with parent's rating of the child's health. It is now timely to conduct and evaluate programs aimed at improving parents' cultural capital. Better measures or inventories of parent's cultural capital will be essential for this.

Pirkis, J., Ftanou, M., Williamson, M., Machlin, A., Spittal, M., Bassilios, B., Harris, M. 2011. Australia's Better Access initiative: an evaluation. *Australian and New Zealand Journal of Psychiatry*. **45** : 726-739.

Background: Australia's Better Access to Psychiatrists, Psychologists and General Practitioners through the Medicare Benefits Schedule (Better Access) initiative involves a series of Medicare Benefits Schedule (MBS) item numbers that offer a rebate for selected services delivered by eligible clinicians. There has been considerable debate about the appropriateness and effectiveness of Better Access, much of which has been based on limited evidence. The current paper contributes to this debate by

presenting the findings of a study which profiled the clinical and treatment characteristics of Better Access patients and examined the outcomes of their care.

Method: We approached a stratified random sample of providers who had billed for at least 100 occasions of service under the Better Access item numbers in 2008 (509 clinical psychologists, 640 registered psychologists, 1280 GPs) and invited them to participate. Those who agreed were asked to recruit 5-10 Better Access patients according to a specific protocol. We collected data that enabled us to profile providers, patients and sessions. We also collected pre- and post-treatment patient outcome data, using the Kessler-10 (K-10) and the Depression Anxiety Stress Scales (DASS-21).

Results: In total, 883 patients were recruited into the study (289 by 41 clinical psychologists, 317 by 49 registered psychologists and 277 by 39 GPs). More than 90% of participating patients had diagnoses of depression and/or anxiety (compared with 13% of the general population). More than 80% were experiencing high or very high levels of psychological distress (compared with 10% of the general population). Around half of all participating patients had no previous history of mental health care. Patients experienced statistically significant improvements in average K-10 and DASS-21 scores from pre- to post-treatment.

Conclusions: The findings suggest that Better Access is playing an important part in meeting the community's previously unmet need for mental health care.

Segan, C.J., Borland, R., Wilhelm, K., Bhar, S., Hannan, A., Dunt, D., Ferretter, I. 2011. Helping smokers with depression to quit smoking: collaborative care with Quitline. *Medical Journal of Australia*. **195** (3) : S7-S11.

Objectives: To report smokers' evaluations and uptake of Quitline-doctor comanagement of smoking cessation and depression, a key component of the Victorian Quitline's tailored call-back service for smokers with a history of depression and to explore its relationship to quitting success.

Design, participants and setting: Prospective study followed Quitline clients disclosing doctor-diagnosed depression (n = 227). Measures were taken at baseline (following initial Quitline call), post-treatment (two months) and six months from recruitment (77% and 70% response rates, respectively).

Main outcome measures: Uptake of comanagement (initiated by fax-referral to Quitline), making a quit attempt (quit for 24 hours), sustained cessation (> 4 months at 6-month follow-up).

Results: At two-month follow-up, 83% thought it was a good idea to involve their doctor in their quit attempt, 74% had discussed quitting with their doctor, and 43% had received comanagement. In all, 72% made a quit attempt, 37% and 33% were abstinent post-treatment and at six months, respectively, and 20% achieved sustained cessation. Among participants who discussed quitting with their doctor, those receiving comanagement were more likely to make a quit attempt than those who did not receive comanagement (78% v 63%). Participants with comanagement



also received more Quitline calls (mean 4.6 v 3.1) – a predictor of sustained cessation. Exacerbation of depression between baseline and six months was reported by 18% of participants but was not related to cessation outcome.

Conclusion: Quitline-doctor comanagement of smoking cessation and depression is workable, is valued by smokers, and increases the probability of quit attempts. Smoking cessation did not increase the risk of exacerbation of depression.

Studdert, D., Spittal, M., Mello, M., O'Malley, A., Stevenson, D. 2011. Relationship between Quality of Care and Negligence Litigation in Nursing Homes. *New England Journal of Medicine*. **364** (13): 1243-1250

Background: It is unclear whether high-quality health care institutions are less likely to be sued for negligence than their low-performing counterparts.

Methods: We linked information on tort claims brought against 1465 nursing homes between 1998 and 2006 to 10 indicators of nursing home quality drawn from two US national data sets: the Online Survey, Certification, and Reporting system and the Minimum Data Set Quality Measure/Indicator Report. We tested for associations between the incidence of claims and the quality measures at the facility calendar-quarter level, correcting for facility clustering and adjusting for case mix, ownership, occupancy, year, and state. Odds ratios were calculated for the effect of a change of 1 SD in each quality measure on the odds of one or more claims in each facility calendar-quarter.

Results: Nursing homes with more deficiencies (odds ratio, 1.09; 95% confidence interval [CI], 1.05 to 1.13) and those with more serious deficiencies (odds ratio, 1.04; 95% CI, 1.00 to 1.08) had higher odds of being sued; this was also true for nursing homes

that had more residents with weight loss (odds ratio, 1.05; 95% CI, 1.01 to 1.10) and with pressure ulcers (odds ratio, 1.09; 95% CI, 1.05 to 1.14). The odds of being sued were lower in nursing homes with more nurse's aide-hours per resident-day (odds ratio, 0.95; 95% CI, 0.91 to 0.99). However, all these effects were relatively small. For example, nursing homes with the best deficiency records (10th percentile) had a 40% annual risk of being sued, as compared with a 47% risk among nursing homes with the worst deficiency records (90th percentile).

Conclusions: The best-performing nursing homes are sued only marginally less than the worst-performing ones. Such weak discrimination may subvert the capacity of litigation to provide incentives to deliver safer care.

STAFF

CHPPE comprises 35 full time and part time staff, consisting of 32 Academic and three Professional staff. The Centre also has 13 honorary staff members.

Two new staff joined the centre in 2011.

Dr Lisa Brophy. Dr Brophy commenced with the Centre in January as a Senior Research Fellow and Director of Research, MIND. This appointment is a result of a partnership between the Centre and MIND to develop research and evaluation program that will inform sustained improvement in the circumstances of people facing serious mental health related challenges.

Ms Genevieve Grant. Ms Grant joined the Law and Public Health group as a research fellow on the *Health Effects of Compensation (HECs) Study*. This project will examine the relationship between the personal experiences of claimants to injury compensation schemes and their injury recovery trajectory.

Please refer to the School Summary Report for a full list of staff.

CENTRE FOR INTERNATIONAL MENTAL HEALTH

WHO Collaborating Centre for Research and Training in Mental Health and Substance Abuse

ANNUAL REPORT 2011



Director of
the Centre for
International
Mental Health,
Associate
Professor
Harry Minas.

YEAR'S OVERVIEW

The Centre for International Mental Health (CIMH) continues to focus its work on projects and programs that will benefit people with mental disorders who live in circumstances where mental health systems are unable to meet adequately their needs for treatment, rehabilitation and social support. Internationally this involves work in low- and middle-income countries, particularly those additionally

affected by civil conflict and natural disaster. The areas in which CIMH staff have worked in research, education and development projects in 2011 include India, Indonesia, Vietnam, Sri Lanka, the Palestinian Occupied Territories and Nigeria (and with colleagues from Liberia, Sierra Leone, Ghana and The Gambia).

In Australia the work of CIMH and the Victorian Transcultural Psychiatry Unit (VTPU) has focused on the mental health service needs of immigrant and refugee communities. The invitation from the Victorian Mental Health Minister's Mental Health Reform Council to establish and lead the Migrant Health Taskforce resulted, at the end of 2011, in a recommendation to the Minister to establish a new research, education and service development network, Mental Health in Multicultural Victoria. It is anticipated that this network of Victorian agencies will constitute a new and more powerful voice for development of a Victorian mental health system that is more capable of responding to the very diverse mental health service needs of the Victorian population. At the national level, CIMH, in partnership with the VTPU, the

CENTRE'S VISION STATEMENT

The Centre for International Mental Health (CIMH) is dedicated to research, teaching and mental health system development in Australia and internationally. The Centre is committed to the development of effective leadership for mental health, evidence-informed mental health promotion, service design and delivery, strengthening of human resources for mental health and protection of the human rights of people with mental disorders. In its Australian program, the Centre, in collaboration with the Victorian Transcultural Psychiatry Unit (VTPU), focuses on the development of effective mental health services for a culturally and linguistically diverse society. Internationally, the Centre's focus is on building capacity for mental health system development in low and middle-income countries and in post-disaster and post-conflict settings.



Associate Professor Harry Minas, Dr Ritz Kakuma, Andrew Binns (World Vision Australia) and Dr John Mahoney in Sri Lanka to evaluate the Health for the South project.

Queensland Transcultural Mental Health Centre and the University of South Australia, was the successful tenderer for the three-year Commonwealth Department of Health and Ageing program Mental Health in Multicultural Australia.

The Centre's international standing in the field of global mental health has been further confirmed by several developments during 2011.

- CIMH was selected from an international field of candidate institutions to host the Secretariat of the Movement for Global Mental Health in a vote by the Movement's Advisory Group. The 43 members of this prestigious group come from Africa, East and South Asia, Europe, North and South America and Australia and New Zealand.
- Associate Professor Minas was appointed for a second four-year term as a member of the WHO Director-General's Expert Advisory Panel on Mental Health.
- In an exciting regional development the Association of South East Asian Nations (ASEAN) has acknowledge the need to focus on mental health (as part of the ambitious program to establish the ASEAN Community by 2015) and has now established the inter-governmental ASEAN Mental Health Taskforce. In a meeting in Thailand in mid-2011 the terms of reference of the Taskforce and a Taskforce work plan were developed. The ASEAN secretariat has identified two core "development partners" in this process, the World Health Organisation and CIMH.

The Centre's standing as the key organisation (with VTPU) in Australia working in the field of multicultural mental health is indicated by:

- The establishment by the Victorian government in 2011 of the Migrant Mental Health Taskforce (chaired by Associate Professor Harry Minas) and the Department of Health support for the recommendation to establish the collaborative network Mental Health in Multicultural Victoria.
- The successful tender by CIMH, VTPU, the University of South Australia and the Queensland Transcultural Mental Health Centre for the national program (funded by the Department of Health and Ageing) Mental Health in Multicultural Australia (MHiMA). The Executive of MHiMA is chaired by Associate Professor Harry Minas.

These developments, which impose additional global, regional and local responsibilities on CIMH, are an indicator of the growing attention to mental health as a critically important part of public health and of social and economic development, and an acknowledgement of CIMH's contribution to global and multicultural mental health.

ADVISORY BOARD

Membership of the Centre's Advisory Board includes:

Mr Paris Aristotle. Director, Victorian Foundation for Survivors of Torture.

The Rev Tim Costello. Chief Executive Officer, World Vision Australia.

Professor Helen Herrman. Professor of Psychiatry, Orygen Youth Health Research Centre, University of Melbourne.

Dr John Mahoney, UK National Counterpart to WHO Headquarters, Geneva.

Professor Vin Massaro. Professorial Fellow in the Centre for the Study of Higher Education and Professorial Fellow, LH Martin Institute for Higher Education, Leadership and Management, University of Melbourne.

Dr Gerry Naughtin (Chair). CEO, MIND Australia.

Professor Hugh Taylor. Professor of Indigenous Eye Health, Melbourne School of Population Health, University of Melbourne.

LEARNING AND TEACHING

The approach of CIMH in pursuing its vision is encapsulated in the phrase "research and education for mental health system development", and is described in some detail in an invited paper (The CIMH Approach to Mental Health System Development) published in the *Harvard Review of Psychiatry*. The goal of our learning and teaching and research programs is to build capacity and provide evidence for design, delivery and evaluation of mental health service programs that are effective, accessible and equitable, and that protect the rights of people with mental disorders. A central component of this approach is to develop and nurture leadership for mental health system development, internationally (particularly in resource-constrained settings) and in Australia (in relation to immigrant and international communities).

International Mental Health

The International Mental Health Leadership Program (iMHLP) 2011

The iMHLP was established, in collaboration with the Department of Social Medicine, Harvard Medical School, in 2001. The program aims to strengthen leadership for mental health system development. 2011 marked the 10th anniversary of this flagship program. In its first 10 years, program achievements include the following:

- There are now 158 iMHLP alumni working in 19 countries and territories, mostly in Asia and the Pacific. Many of these alumni are our key collaborators in continuing and new research, education and development projects in the countries in which CIMH works, and many have moved into key leadership positions in Ministries of Health, university departments, mental health service organisations, NGOs and international organisations such as WHO Geneva and Country offices. Members of this group are established and emerging leaders of mental health in Asia.
- iMHLP has been paid the compliment of emulation. There are now several leadership programs internationally (in India, Indonesia and Nigeria) that been developed jointly with CIMH staff (and in which CIMH staff continue to teach) and at least two Masters' level award programs (in Lisbon and Pune) that have adopted the model developed for CIMH's Master of International Mental Health, which was developed out of iMHLP and which has now been discontinued.



Above: The iMHLP 2011 class. Right: the iMHLP 2011 faculty and Fellows.

- iMHLP has continued to evolve. The most substantial change is that the program is tightly linked with research and development projects that are being led by CIMH, so that the participants in the program are those who are also participating in the in-country projects. In September 2011, this four-week program brought together a total of 30 iMHLP Fellows from Sri Lanka and Vietnam to study mental health system development in the two countries, focusing on contributing to continuing CIMH projects in Sri Lanka and Vietnam.
- Five program Fellows delivered public lectures at the Melbourne School of Population Health (MSPH) to highlight their work in the two countries. The lecturers and topics were:

Dr To Xuan Lan, National Psychiatric Hospital No.1, Vietnam. An overview of Vietnam Mental Health System.

Dr Prasantha De Silva, Ministry of Health, Sri Lanka. A review of implementation and progress of the Sri Lankan National Mental Health Policy.

Mrs Thi Thu Thao Nguyen, Vietnamese Veterans of America Foundation. Vietnam Veterans of America Foundation and the expanding role of NGOs in Vietnam.

Dr Thangamuthu Sathiyamoorthy, Vavuniya, General Hospital, Sri Lanka, and Leadership: InterAction Humanitarian Award Recipient 2010. Mental health and the final phases of the war in the north and east of Sri Lanka.

Professor Daya Somasundaram, University of Adelaide and University of Jaffna. Psychosocial Rehabilitation in Post-Conflict Reconstruction.

Mental health leadership programs in Goa, Jakarta and Ibadan

These two-week courses, based on the Centre's iMHLP, have been designed and developed with colleagues in India, Indonesia and Nigeria and are designed to equip participants with the methods to develop and scale up interventions for people with mental disorders in communities, based on a population model. Delivery of each program draws on the extensive experience of the team members who deliver the iMHLP in Melbourne. Participants are from a



wide variety of professional backgrounds, including mental health professionals, general physicians, policymakers, representatives of funding agencies, humanitarian agency workers, NGO staff, epidemiologists, anthropologists and mental health consumers. There are 25-30 participants in each program annually.

Multicultural Mental Health

The Australian Mental Health Leadership program

The Australian Mental Health Leadership program was not offered in 2011 and is being re-designed to focus on Leadership for Multicultural Mental Health.

Leadership and Management Training Workshop for RANZCP Advanced Psychiatry Trainees

This two-day intensive training workshop with senior psychiatry trainees, now in its third year, was held in September 2011. The training program is organised around the key reform priorities of *Because Mental Health Matters: Victorian Mental Health Reform Strategy 2009-2019*. The program enables senior trainees to fulfill college requirements for the leadership and management component of their training, and is accredited by the relevant college training committees. In 2011, nine trainees participated in the workshop.

University Breadth Subject: Human Rights and Global Justice

CIMH contributes to teaching in the Breadth Subject *Human Rights and Global Justice (HR&GJ)*. In 2011, there were nearly 400 student enrolments in the subject, which commenced in 2010. *HR&GJ* introduces undergraduate students from a range of faculties to conceptual debates around human rights that are foundational to liberalism and liberal internationalism, including the history, theory, goals and practice of international human rights. It explores the way in which various disciplines intersect and contribute to an understanding of the extent to which human rights can contribute to global justice.

Transcultural Psychiatry Selective

CIMH developed and, in collaboration with VTPU, jointly teaches the subject *Transcultural Psychiatry* in the University of Melbourne Master of Psychiatry and Monash University Master of Psychological Medicine program. The subject introduces students to the role of culture in the development and treatment of mental illness, including the education of mental health professionals, and the construction and operations of health systems. Students develop knowledge and skills in cultural assessment, cross-cultural diagnosis and treatment, and skills in the integration of cultural competence into psychiatric management. It is the only award subject in transcultural psychiatry for psychiatrist trainees in the country.

RESEARCH

Active projects in 2011 included the following:

International Mental Health

The National Taskforce for Community Mental Health System Development in Vietnam.

Funding body: Atlantic Philanthropies.

Chief Investigator: Harry Minas.

Description: Modelled on the CIMH's successful work in Indonesia, the Taskforce is being led by the Vietnam Ministry of Health and aims to become the main impetus for mental health system reform and development in Vietnam. The primary goal of the Taskforce is to assist the Ministry of Health, in cooperation with key stakeholders, including other relevant ministries (such as the Ministry of Labour, Invalids and Social Affairs (MoLISA), and Ministries of Finance and Education), to plan, design, and deliver effective, accessible and affordable community mental health and social protection services to the population of Vietnam.

In 2011 CIMH staff were instrumental in working with a wide range of stakeholders, including the Ministry of Health, to develop a comprehensive Mental Health National Action Plan 2011-2015. Since this work, both Associate Professor Minas and Dr John Mahoney have been appointed as technical advisors to the advisory board of the National Psychiatric Hospital Number 1 in Vietnam. The technical board is responsible for informing the Ministry of Health on mental health strategy.



Vietnam Ministry of Health meeting in Da Nang on community mental health workforce development.

The project includes significant research components in the areas of workforce development and other aspects of mental health systems research, including the development and implementation of monitoring and evaluation strategies.

We expect this project to have a substantial positive impact by contributing to improved accessibility and quality of treatment and care for the people with mental illness in Vietnam.

Funding: \$2 million (2010-2013).

Impact of a community mental health system strengthening program in Aceh, Indonesia

Funding body: AusAID Australian Development Research Awards.

Chief Investigators: Harry Minas, Suryo Dharmono, Albert Maramis, Hervita Diatri.

Description: This project is investigating the impact of a community mental health system strengthening program in Bireuen District, Aceh, Indonesia, with particular attention to human resources for health and demand side factors, and the relationship between mental illness, disability and poverty.

Funding: \$276,916 (2009-2011).

Evaluation of the Aceh Free from Pasung project in the province of Aceh Indonesia

Chief Investigators: Harry Minas, Ibrahim Puteh, Mathoenis.

Description: The Centre has worked with colleagues in the Department of Psychiatry, Syah Kuala University, Banda Aceh, and in the Provincial Health Office to develop and implement an evaluation strategy for the Aceh Free from Pasung project.

Multicultural Mental Health

Mental health research and policy for young people of refugee background

Funding body: William Buckland Foundation and Sidney Myer Fund.

Chief Investigators: Harry Minas, Jo Szwarc, Carmel Guerra, Georgia Paxton.

Description: This interdisciplinary research project is a collaboration between CIMH, the Victorian Foundation for Survivors of Torture (Foundation House), the Centre for Multicultural Youth and the Royal Children's Hospital. In addition to a systematic review of the literature, the project consisted of three components: application of expert consensus methods to develop a mental health of refugee research agenda for Australia (<http://www.focushealth.com.au/events/Speakers/harryminas>); a study of experienced practitioners' views about what works and does not work in providing effective mental health services to young people from refugee background (http://www.foundationhouse.org.au/resources/publications_and_resources.htm); and roundtable discussions between young people of refugee background and service providers, representatives of relevant Victorian Government departments and academics. The project will inform the further development of Victorian refugee health policy.

Two reports have been prepared, titled:

- A Mental Health Research Agenda for People of Refugee Background in Australia: a consensus study; and
- Barriers to and facilitators of utilisation of mental health services by young people of refugee background.

Funding: \$65,300 (2009-2010).

Culturally determined barriers, the prevalence and nature of domestic violence within the Australian Indian Community

Funding body: Legal Service Board of Victoria.

Chief Investigators: Manjula O'Connor, Field, Erminia Colucci, Xris Reardon, Harry Minas, Reima Pryor.

Description: This was a participatory action research project, based on forum theatre and other interactive theatre techniques, aimed at an understanding of issues surrounding domestic/family violence among Indian immigrant women and barriers to accessing services. This community project consisted of three stages: information/focus group sessions; theatre workshops; and community theatre performances.

The project was a collaboration between CIMH, the Australia India Society of Victoria, Drummond St Relationships and Third Way Theatre, and was supported by a grant from the Legal Service Board of Victoria and the Australia India Society of Victoria. The project was completed in 2011 and findings have been submitted for publication.

Funding: \$76,000 (2010-2011).

Consensus study on the role of Cultural Portfolio Holders

Funding body: St Vincent's Health Melbourne.

Chief Investigators: Harry Minas, Erminia Colucci, Prem Chopra.

Description: This project was a collaboration between CIMH and the Victorian Transcultural Psychiatry Unit, and is funded by St Vincent's Health, Melbourne. The objective was to investigate the roles that Cultural Portfolio Holders can play to bring about mental health system improvement for immigrant and refugee communities, and what is needed to support such roles. The study was based on focus group discussion and the Delphi consensus method based on online survey. Data collection was completed in 2011 and the findings have been submitted for publication to the International Journal of Culture and Mental Health.

Funding: \$10,000

KNOWLEDGE TRANSLATION AND EXCHANGE IN THE COMMUNITY: MENTAL HEALTH SYSTEM DEVELOPMENT

Implementation of Prime Ministerial decision on the national Project on Community-Based Social Assistance and Functional Rehabilitation for Mentally Ill People: 2011-2020

Based on a mutual commitment to the development of integrated and comprehensive treatment, rehabilitation, care, and social support services for the people of Vietnam with a mental



The ASEAN Strategic Planning Workshop, Nonthaburi Thialand, where the ASEAN Mental Health taskforce was established. Four of the 20 participants are iMHLP alumni. The two “development partners” invited by ASEAN to provide technical assistance are the World Health Organisation and CIMH.

disorder, CIMH has been invited by MoLISA to provide technical support for the effective implementation of this important and very large-scale national reform program. In providing such technical support CIMH is collaborating closely with relevant offices of MoLISA to assist in the achievement of the objectives set out in the document: The Project on Community-Based Social Assistance and Functional Rehabilitation for Mentally Ill People: 2011-2020 (Hanoi, February 2011). A major goal of this process is to encourage and enable coordinated and collaborative efforts by MoLISA and the Ministry of Health in the development of an integrated and comprehensive mental health system for Vietnam.

ASEAN Mental Health Taskforce

The ASEAN Strategic Framework for Health Development (2010-2015) was endorsed in 2010. An ASEAN meeting held in Bangkok in June 2011 (in which Associate Professor Harry Minas participated by invitation as a technical advisor) established the ASEAN Mental Health Taskforce and developed a work plan, allocating responsibility to individual Member States for different elements of the work plan. The goal of the Taskforce is to ensure access to adequate and affordable mental health treatment and care and psychosocial services, and to promote healthy lifestyles for the people of ASEAN Member States. The World Health Organisation (WHO) and CIMH are identified by the ASEAN Secretariat as the

“key development partners”. The Taskforce provides a unique policy-relevant and policy-led opportunity to engage actively and share experiences to develop and evaluate current programs, develop strategies to integrate mental health into general health care, and to strengthen capacity of researchers and decision makers at individual and organisational levels.

Leadership Training for Community Mental Health System Development in Vietnam.

Funding body: AusAID Vietnam Program.

Chief Investigator: Harry Minas.

Description: This project is continuing to support the development of effective leadership for mental health system development in Vietnam.

Funding: \$485,000 (2010-2013).

Japanese response to 2011 tsunami and earthquake events.

Dr John Mahoney was invited in an advisory role to the Japanese Government and academic institutions on appropriate mental health and psychosocial responses following the 2011 tsunami and earthquake.

Domestic violence in Australia's Indian Communities

In response to increasing reports of domestic violence in Indian and other immigrant communities in Melbourne, the AISV Taskforce Against Domestic Violence (DV) in Indian and Ethnic communities

Right: Forum theatre workshop with Melbourne's Indian community.



(Chair, Dr Manjula O'Connor) was established in November 2009. The Taskforce is a project of the Australia India Society of Victoria (AISV), with support from CIMH. The Taskforce works to raise public awareness on domestic violence (including what behaviours constitute DV, when and where to go for help, and research on the social causes of DV) and to create public education campaigns and prevention strategies that will assist people experiencing DV. On 26 May 2011, this work was recognised by Andrea Coote MP, Parliamentary Secretary to the Premier of Victoria, in the Legislative Council of the Victorian Parliament as a significant contribution towards raising awareness in the Indian community of Australia.

White Ribbon day, 13 November 2011: *How Can Men Help Break the Silence on Domestic Violence*. Partners in this day were CIMH, the AISV and the Indian community. The keynote speaker was Ms Heidi Victoria, Parliamentary Secretary to the Premier. Speakers included Professor Amitabh Mattoo, Director, Australia India Institute, University of Melbourne, and the Consul-General of India, Dr Subhakanta Behara.

In December 2011 CIMH and the AISV organised the seminar *Family Abuse, Gender and Cultural Issues*, held at the Sidney Myer Asia Centre. The seminar was convened in collaboration with the Center for Social Research, New Delhi. The aim was to inform understandings of issues related to domestic violence and gender oppression in the Indian culture, its history, and the role of Indian women in their homes, the community, and religion. Keynote speakers were Dr Ranjana Kumari (Director of the Centre for Social Research, New Delhi), Dr Manjula O'Connor (AISV and CIMH), and Magistrate Ms Noreen Toohey.

Australian culture awareness training for international students

Funding body: Victorian Multicultural Commission.

Chief Investigators: Manjula O'Connor, Erminia Colucci.

Description: In the wake of concerns over violence experienced by international students, particularly among students from India, this training program was developed and delivered, together with Victoria Police, in 2011. The program received widespread positive media attention.

Funding: \$20,000.

EDITING AND REVIEWING

Harry Minas

International Journal of Mental Health Systems (IJMHS)

IJMHS has continued to establish a reputation as a high quality peer-reviewed journal with a unique focus on mental health system development. Authors of papers published in IJMHS come from 29 countries, with a substantial and increasing number from low and middle-income countries. IJMHS has been accepted by Thomson-Reuters for tracking for an impact factor. Associate Professor Harry Minas is founder and Editor-in-Chief of IJMHS.

Section Editor

(Australia and New Zealand) for International Journal of Culture and Mental Health.

Editorial Board Member

Harry Minas

Anthropology and Medicine.

Esculapio: Journal of the Services Institute of Medical Sciences, Lahore, Pakistan.

International Journal of Culture and Mental Health.

Psychiatry Investigation: Journal of the Korean Neuropsychiatric Association.

Transcultural Psychiatry.

Erminia Colucci

Journal of Psychology.

Suicidology Online.

Reviewer for the following peer-reviewed journals

Harry Minas

American Journal of Psychiatry.

Anthropology and Medicine.

Australasian Psychiatry (Minas).

Australia and New Zealand Health Policy.

Australian and New Zealand Journal of Psychiatry.

BMC International Human Rights.

Bulletin of the World Health Organisation.

Clinical Infectious Diseases.

Health Policy.

CHOICE AS HOST A VOTE OF CONFIDENCE IN CENTRE

The Centre for International Mental Health (CIMH) has been chosen to set up and host the secretariat for the Movement for Global Mental Health for 2011 to 2013.

CIMH, at the Melbourne School of Population Health, has been an international leader in drawing world attention to the urgent need for more support for mental health research, training and services in developing countries. The Centre's Director, Associate Professor Harry Minas, says the selection of CIMH after a competitive international process "was a vote of confidence in CIMH and our capacity to do this work." CIMH's track record includes significant successes in helping to achieve mental health reforms in Aceh, Indonesia, Vietnam and Sri Lanka.

The Movement for Global Mental Health is a coalition of 95 institutions and more than 1700 individuals from more than 100 countries, which was established three years ago. Its key mission is to advocate for better conditions for people afflicted by mental illness, particularly in low to middle income countries. This organic, social movement grew out of a "call to action" by *The Lancet* several years ago when it highlighted the "the global health crisis due to an astonishingly large treatment gap: up to nine of 10 people with a mental health problem do not receive even basic care in some countries".

The secretariat will address the Movement's need for governance and boost international efforts to generate more support for mental health resources in developing countries, says Associate Professor Minas. "Our aim is that it will leverage greater capacity to lobby international agencies and governments," he says. "There are models for driving reforms on health issues on a global scale, such as the successful campaign by AIDS activists to get cheaper anti-retroviral AIDS drugs to African and other poor countries."



Early priorities for the new secretariat include its new website, which is already up, and improving communications with and between the Movement's members. The secretariat is also organising the Movement's third Global Mental Health Summit and, in the longer term, has a more ambitious goal: persuading the United Nations to hold a General Assembly special session on mental health. "That is a pretty big task. It requires global collaboration, funding, organisation and strong administration support," he says. "The Movement and its partners and the secretariat will be working hard on this."

Funding to run the secretariat itself is another early priority – but lack of money is not holding back Associate Professor Minas's plans. His focus is on the bigger picture of how to get funding organisations to better allocate resources to this sector. "Increasingly money is available to low and middle income countries but the capacity to do high quality research, policy or other essential work is largely to be found in countries like Australia, the United Kingdom and the United States," he says. "We need to develop capacity at both ends – in the countries needing to develop skills and programs and in the organisations like ours that are providing technical and other forms of assistance."

"Funding organisations need to understand that it is vital to adequately support low and middle income countries and the organisations that provide essential technical assistance," he says. "There is a need for better and more sustained technical support and better evidence – which means high quality research, and evaluation of outcomes of funding programs."

International Journal of Law and Psychiatry.
Journal of Affective Disorders.
Journal of Ethnicity and Health.
Medical Journal of Australia.
Monash Bioethics Review.
Social Psychiatry and Psychiatric Epidemiology.
Social Science and Medicine.
Transcultural Psychiatry.
The Lancet.

Erminia Colucci

Australian Journal of Psychology.
Crisis: Journal of Crisis Intervention and Suicide Prevention.
Journal of Psychology (Colucci).
Mental Health, Religion and Culture.
Suicide and Life-Threatening Behaviour.
Suicidology Online.
The International Journal of Interdisciplinary Social Sciences.

Ritsuko Kakuma

Canadian Journal of Psychiatry.
Canadian Medical Association Journal.
Health Research Policy and Systems.
International Journal of Mental Health Systems.
Revista Brasileira de Psiquiatria.

Grants Reviewer

Harry Minas

Grand Challenges Canada.

Committee Memberships

Harry Minas

Detention Health Advisory Group, advising the Secretary of the Department of Immigration and Citizenship.
Section of Social and Cultural Psychiatry, Royal Australian and New Zealand College of Psychiatrists.
World Association for Cultural Psychiatry (Member of the Executive).
World Association for Psychosocial Rehabilitation (Member of the Executive).
Faculty Advisory Committee.
International Initiative on Mental Health Leadership Cincinnati Group.
Ministerial Council on Immigration Services and Status Resolution.
MSPH Executive.

Erminia Colucci

SIG "Suicide and culture", International Association for Suicide Prevention (Chair).
SIG "Arts and Psychiatry", World Association of Cultural Psychiatry (Co-Chair).
Multicultural Women in Arts (Chair).
World Suicidology Net (National Representative for Italy).
International Association for Suicide Prevention conference 2011 (Scientific Committee).

Ritsuko Kakuma

Canadian Academy of Psychiatric Epidemiology.
Canadian Association for Health Services and Policy Research.
Canadian Coalition for Global Health Research.
Canadian Evaluation Society.
Canadian Society of Epidemiology and Biostatistics.
Movement for Global Mental Health.

Media interest and other community activities

Ritsuko Kakuma. *The serious shortfall of mental health workers at all levels.* Public release date: 16 October 2011 http://www.eurekalert.org/pub_releases/2011-10/I-tss101111.php

Erminia Colucci. Photographic exhibition, 'Japan: between ritualistic traditions and modernity', January-February 2011, Brunswick Street Gallery, Melbourne.

Erminia Colucci. Windows on a new world: Australia from the eyes of international students (photo-voice project), screened July 2011 <http://throughothereyes.wordpress.com/>

Photo/film-documentary series, 'Open for (more than) Business. Immigration Museum (Melbourne), August 2011 to May 2012.

E Miles. Participatory documentary film, 'Understanding suicide through the arts. (in collaboration with Erminia Colucci).

Erminia Colucci. Publication of 'The lens of cultural understanding', The Voice, Volume 7, Number 12, December 2011, <http://voice.unimelb.edu.au/volume-7/number-12/lens-cultural-understanding>

Erminia Colucci. Radio interview discussing domestic violence and Women's International Day, SBS Radio in March 2011.

Erminia Colucci. Radio interview discussing Multicultural Women in the Arts, 3RRR in September 2011.

Manjula O'Connor. Publication of 12 articles on domestic violence in newspapers and AISV Newsletters.

Manjula O'Connor. Participation in nine interviews on ethnic radio stations and SBS Radio discussing domestic violence in the Indian Community.

Manjula O'Connor. Profile, <http://volunteeringvictoria.org.au/volunteer/volunteering-stories/a-matter-of-the-heart>

Manjula O'Connor. Submission to the Knight Review, 'Strategic Review of the Student Visa Program 2011' on the The Australian Culture Awareness Course – Cultural Preparation for Australian Education (published August 2011, <http://www.immi.gov.au/students/knight/>)

CONFERENCES AND PUBLIC PRESENTATIONS, 2011

Colucci E, Co-facilitator workshop 'Imagination Inspiration Improvisation: A Visual Arts Enquiry into Understanding Suicide'. IASP (International Association for Suicide Prevention), Beijing (China).



Colucci E, Chair Symposium 'Suicide and human/women rights'. *IASP (International Association for Suicide Prevention), Beijing (China).*

Colucci E & O'Connor M, Domestic/family violence among Indian immigrant women and suicide. *IASP (International Association for Suicide Prevention), Beijing (China).*

Colucci E, Minas H, et al., Suicide First Aid Guidelines for the Philippines. *IASP (International Association for Suicide Prevention), Beijing (China).*

Eales M & **Colucci E**. What does being suicidal feel like? A co-researcher/bricolage approach to understanding suicide. *IASP (International Association for Suicide Prevention), Beijing (China).*

Fernandes A & **Colucci E**. The Effectiveness of Suicide Intervention Programs for South Asian Youth. *IASP (International Association for Suicide Prevention), Beijing (China).*

Kakuma R, Minas H, Van Ginneken N, Dal Poz RM, Desiraj K, Morris EJ, Saxena S, Scheffler R. Human Resource for Mental Health Care: Current Situation and Strategies for Action. Launch of the Second Lancet Series on Global Mental Health. *Second Summit of the Movement for Global Mental Health*. 17 October. Cape Town, South Africa.

Kakuma R. Capacity Development for Global Mental Health. Summer Program in Social and Cultural Psychiatry, *17th Annual Summer Program, Global Mental Health*, Division of Social & Transcultural Psychiatry, McGill University, 31 May – 3 June, Montreal Canada.

Kakuma R. Evaluation of health research capacity building. *Building Institutions through Equitable Partnerships in Global Health*, Royal College of Physicians. The Academy of Medical Sciences, Bill & Melinda Gates Foundation, Wellcome Trust and Universities UK. London UK, 14-15 April.

Kakuma R. Stigma and Mental Health: What is the impact of stigma? Summer Program in Social and Cultural Psychiatry, *17th Annual Summer Program, Global Mental Health*, Division of Social & Transcultural Psychiatry, McGill University, 31 May – 3 June, Montreal Canada.

Kakuma R. The Movement for Global Mental Health: Launch of the new website. *Second Summit of the Movement for Global Mental Health*. 17 October. Cape Town, South Africa.

Minas H, Kakuma R. New Secretariat for the Movement for Global Mental Health. *Second Summit of the Movement for Global Mental Health*. 17 October. Cape Town, South Africa.

O'Connor M, Colucci E, Minas H, et al., Modified forum theatre: a novel means of prevention and early recognition of family abuse and domestic violence in an Australian Indian community.

† **Minas H**. A tale of two Pacific Solutions: The decade-long turning circle of asylum seeker policy in Australia, Australian and New Zealand Association of Psychiatry, Psychology and Law Conference, Ballarat, 20 August.

* **Minas H**. Essentials of contemporary mental health law, 2nd Asia-Pacific Conference on Psychosocial Rehabilitation, Manila, 28 July.

* **Minas H**. Global mental health: Initiatives and prospects, 2nd Asia-Pacific Conference on Psychosocial Rehabilitation, Manila, 29 July.

* **Minas H**. Globalisation and mental health, Mental health policy reform and development, Ministry of Public Health, Taiwan, Taipei, 29 March.

† **Minas H**. IOMHS: A research, education and system development network on mental health, XIII International Congress of the International Federation of Psychiatric Epidemiology, Kaohsiung, Taiwan, 30 March – 2 April.

* **Minas H**. Leadership for Mental Health Program Development, 1st National Seminar on Mental Health Policy, Jakarta, 8 October.

* **Minas H**. Leadership Training and Mental Health System Capacity Building, NIMH 'Building Research Capacity and Collaboration in Global Mental Health', Bethesda, 24-25 March.

* **Minas H**. Lessons learned from mental health system development in Sri Lanka, 2nd National Seminar on Community Psychiatry, Jakarta, 7 October.

* **Minas H**. Mental health system development for Vietnam, Atlantic Philanthropies Conference of Grantees, Hue, Vietnam, 20-21 November.

* **Minas H**. Migration mental health: Leadership matters, Mental Health Community Coalition ACT Conference, Canberra, 17-18 February.

* **Minas H**. The Mental Health in Multicultural Victoria Network, Department of Health Roundtable on mental health in multicultural Victoria, Melbourne, 2 December.

* **Minas H**. The Movement for Global Mental Health, ASEAN Strategic Workshop on Mental Health, Bangkok, 29 June – 1 July.

* **Minas H**. What would be the effective models for management and treatment of depressive patients in the Vietnamese community? Leadership for Mental Health Program Development, Hanoi, 22-23 October.

* **Minas H**. Working with men and boys in high risk settings: Mental health of refugees, Out of the Shed: Men and Boys' Mental Health, Caloundra, 21-22 July.

* Invited presentation

CENTRE HIGHLIGHTS

Mental Health in Multicultural Australia (MHMA) and Mental Health in Multicultural Victoria (MHMV)

The establishment of these multicultural mental health programs (the first established in 2011 and the second anticipated in 2012) is a significant milestone in the development of multicultural mental health policy and services in Australia.

MGMH Secretariat

The selection of CIMH as the Secretariat for the Movement for Global Mental Health confers on the Centre a key international role

in the development of global mental health programs in low and middle-income countries.

8.6 ASEAN Mental Health Taskforce

The identification by the ASEAN Secretariat of the Centre (together with the World Health Organisation) as a key development partner for the ASEAN Mental Health Taskforce is high-level endorsement of the Centre's technical capacity and commitment to development of mental health systems in the countries of South East Asia.

PUBLICATION HIGHLIGHTS

Kakuma R, Minas H, van Ginneken N, Dal Poz MR, Desiraju K, Morris JE, Saxena S, Scheffler RM. Human resources for mental health care: current situation and strategies for action. *The Lancet* 2011, 378:1654-1663.

A challenge faced by many countries is to provide adequate human resources for delivery of essential mental health interventions. The overwhelming worldwide shortage of human resources for mental health, particularly in low-income and middle-income countries, is well established. Here, we review the current state of human resources for mental health, needs, and strategies for action. At present, human resources for mental health in countries of low and middle income show a serious shortfall that is likely to grow unless effective steps are taken. Evidence suggests that mental health care can be delivered effectively in primary health-care settings, through community-based programs and task-shifting approaches. Non-specialist health professionals, lay workers, affected individuals and caregivers with brief training and appropriate supervision by mental health specialists are able to detect, diagnose, treat and monitor individuals with mental disorders and reduce caregiver burden. We also discuss scale-up costs, human resources management, and leadership for mental health, particularly within the context of low-income and middle-income countries.

Lenzi M, Colucci E, Minas H. Suicide, culture and society from a cross-national perspective. *Cross-Cultural Research* 2011, 46:50-71.

In this article, the authors explored the associations between suicide rates and a large number of sociocultural indexes, within the sociological framework provided by Durkheim and taking into account recent sociological theories. The analyses were performed on a sample of 87 nations and a subsample of post-traditional societies. The authors found strong positive (linear) correlations between suicide rates and measures of secularisation, and curvilinear relationships between measures of individualisation and suicide rates. Negative associations were

found between suicide rates and measures of individualisation in a subsample of post-traditional countries. Following the post-modernisation and reflexive modernisation theories, the authors argue that a new form of individualisation is in place in secular-rational societies. This form of individualisation exercises a negative effect on suicide rates through its positive influence on social integration and regulation.

Puteh I, Marthoenis M, **Minas H.** Aceh Free Pasung: Releasing the mentally ill from physical restraint. *International Journal of Mental Health Systems* 2011, 5:10.

Background: Physical restraint and confinement of the mentally ill (called pasung in Indonesia) is common in Aceh. In early 2010, the local government initiated a program called Aceh Free Pasung 2010. The main goal of the program is to release the mentally ill in the province from restraint and to provide appropriate medical treatment and care. The aim of the paper is to report the findings of a preliminary investigation of the demographic and clinical characteristics of patients who have been admitted to the Banda Aceh Mental Hospital as part of the Aceh Free Pasung program.

Methods: This is a cross-sectional descriptive study conducted at the Banda Aceh Mental Hospital, where people who had been restrained or confined in the community are being admitted for psychiatric treatment and, where necessary, physical rehabilitation, as part of the Aceh Free Pasung program.

Results: Fifty-nine of former ex-pasung patients were examined. The majority (88.1%) of the patients were male, aged 18 to 68 years. The duration of pasung varied from a few days to 20 years, with a mean duration of 4.0 years. The reasons for applying pasung are many, with concerns about dangerousness being most common. The great majority (89.8%) had a diagnosis of schizophrenia.

Discussion: The development of a community mental health system and the introduction of a health insurance system in Aceh (together with the national health insurance scheme for the poor) has enabled access to free hospital treatment for people with severe mental disorders, including those who have been in pasung. The demographic and clinical characteristics of this group of ex-pasung patients are broadly similar to those reported in previous studies.

Conclusions: The Aceh Free Pasung program is an important mental health and human rights initiative that can serve to inform similar efforts in other parts of Indonesia and other low and middle-income countries where restraint and confinement of the mentally ill is receiving insufficient attention.

SEXUAL HEALTH UNIT ANNUAL REPORT 2011



Director of the
Sexual Health
Unit, Professor
Christopher
Fairley.

YEAR'S OVERVIEW

The Melbourne Sexual Health Centre (MSHC) has been in operation since 1917 as a specialised unit for the diagnosis and treatment of sexually transmissible infections and the human immunodeficiency virus (STIs/HIV). It is the only centre that provides full-time, free sexual health services to the people of Victoria. The services provided by MSHC include general clinics for the management of STIs and a variety of specialist clinics. In 2001, the first Director was appointed with a dual role at both the Melbourne School of Population Health (MSPH) and the Centre. In 2003, the Centre became part of Alfred Health.

The Centre has provided high quality care to 24,126 individual clients who registered in 2011, with a total of 37,696 consultations. One of its key roles is to promote sexual health and disseminate information and education materials to the general public and health care providers (e.g. General Practitioners (GPs) in diagnosing and treating STIs. MSHC provides wide reaching support to GPs through various means such as an extensive web page and 1800 telephone number directly to a sexual health physician. The MSHC website www.mshc.org.au comprises of information divided into three major sections:

- General Public.
- Health Professionals.
- Research and Education.

There are also interactive online services provided:

For the general public:

- www.checkyourrisk.org.au (Check your Risk) to check risk of exposure to an STI.
- www.healthmap.org.au (Health Map) for HIV positive people to find out what tests are needed and also what issues should be on the agenda at the next visit to the doctor or clinic. Health Map asks questions about health and provides a personal report, based on expert advice. This report directs users to chosen websites for particular needs, and provides some facts and a "to do" list for medical care.
- www.letthemknow.org.au (Let Them Know) for assisting people diagnosed with STI infections about informing their partners about their possible risk of infection. The site has numerous tools, including examples of conversations, emails, SMS and letters to communicate the information as well as fact sheets, and a phone number (03 9341 6242) to listen to a short recorded message about chlamydia
- www.testme.org.au (TESTme) provides STI testing through telephone consultations for young people under 25, men who have sex with men and Indigenous people living more than 150km from Melbourne augmented by self-collected specimens and postal treatment.

For general practitioners:

- www.mshc.org.au/GPassist (GP Assist) provides a mechanism to improve partner notification through providing the www.mshc.org.au/GPassist web address on laboratory reports of positive results of common STIs. Accessible information about treatment of the more common STIs and simple tools such as partner letters and fact sheets for GPs to use in discussing partner notification are also available at this site.

The University of Melbourne's Sexual Health Unit (SHU) is situated in the Melbourne Sexual Health Centre (MSHC), which is also a division of the Alfred Health Network. The vision of the MSHC is to be a leader in the management and prevention of Sexually Transmitted Infections (STIs) and its mission is to maximise sexual health through innovation and excellence in public health, education, clinical care and research.



SERVICES AND CONSULTATIONS

The numbers of consultations by type of service provided onsite are shown in the table below. A further 389 outreach consultations were carried out offsite at various venues for men-who-have-sex-with-men (MSM) and street sex workers (SSW).

Clinic Type	Total	Male	Female	Transgender
General Clinic	33,437	19,995	13,349	93
HIV Clinic	3170	2852	302	16
Counselling	1089	844	244	1
Total	37,696	23,691	13,895	110
Individuals	24,126	15,292	8775	59

Online training and education resources for health care professionals:

- Educational videos and audios for management of common sexual health issues such as treating genital warts and diagnosing Pelvic inflammatory disease (PID), taking a Papanicolaou smear, symptoms of acute HIV, and examples of partner notification explanations to clients are at www.mshc.org.au/Home/tabid/179/Default.aspx
- Treatment guidelines are at www.mshc.org.au/Guidelines/tabid/257/Default.aspx
- Making a diagnosis information and clinical photographs are at www.mshc.org.au/MakingaDiagnosis/tabid/254/Default.aspx
- Case studies with photographs are at www.mshc.org.au/OnlineEducation/CaseStudies/tabid/376/Default.aspx
- Fact sheets for their clients are at www.mshc.org.au/FactSheets/tabid/253/Default.aspx

LEARNING AND TEACHING

In collaboration with the Melbourne School of Population Health (MSPH), the Centre offers a number of postgraduate courses, postgraduate subjects and short courses in sexual health. These have been well attended and provide the Victorian community with a highly trained workforce that improves the quality of sexual health services outside the Centre. Many of the research projects of higher degree candidates enrolled through the MSPH are aimed at enhancing the services and promotion of sexual health offered at MSHC.

Master of Public Health

Many students undertaking the Master of Public Health (MPH) select sexual health subjects as part of their masters degree. These subjects have become increasingly popular and as a result of this, there is now a formal Sexual Health Specialisation within the MPH. This enables students to pursue research projects in Sexual Health as part of their MPH program. The research project in sexual health is part of the MPH and continues to be popular with students. Many students who complete a research project in sexual health also succeed in getting a paper published in a peer-reviewed journal from their project.

Postgraduate Certificate of Public Health (Sexual Health)

This course continues to attract students from a variety of professional backgrounds. This Postgraduate Certificate has become a valued qualification for nurses, doctors and other health professionals and public health practitioners wanting to specialise in sexual health. Many of the subjects can be taken by distance education and so enable rural practitioners and practitioners from interstate to take the qualifications.

- Semester 1 – Adolescent Sexuality and Sexual Health: taught in classroom mode only in a block in February each year (runs collaboratively with the Centre for Adolescent Health, Department of Paediatrics, University of Melbourne).
- Semester 1 – Sexual and Reproductive Health (run jointly with the Centre for Womens Health, Gender and Society) offered by distance and in classroom.
- Semester 1 – Clinical Sexual and Reproductive Health (run only in classroom mode). This subject is also accredited by the Royal College of Nursing as a Pap smear provider course. It is becoming increasingly popular and is over-subscribed with a waiting list. It is unique in enabling nurses to pursue postgraduate qualifications as well as professional development accreditation at the same time in the field of sexual health. Often nurses who are doing the subject as a professional development course are introduced to postgraduate education and public health for the first time and many decide to pursue further qualifications in this area.
- Semester 2 – Sexually Transmissible Infections (run in classroom mode and by distance).

Short course series in Sexual Health

Many different aspects relating to STIs are covered by a variety of short courses at the MSHC, both in classroom education and on-line accessible from a distance. In addition, clinical attachments at MSHC are also offered with many health professionals attending from within Victoria, from interstate and also from overseas to gain relevant sexual health experience.

Two lectures are given to the postgraduate medical students in the Doctor of Medicine (MD) course:

Phase 1 (Year 1) Doctor of Medicine (MD) students:

SEXUAL HEALTH UNIT

Title: Aetiology and Risk Factors – STIs.

Title: Global Burden of Disease 3 – Public Health Responses to STI and HIV.

Undergraduate and postgraduate training is also provided at MSHC for medical students from the University of Melbourne, GP registrars, infectious diseases trainees and doctors and nurses undertaking coursework in family planning.

The research projects of higher degree candidates enrolled through the MSPH are aimed at enhancing the services and promotion of sexual health offered at MSHC.

RESEARCH

The Centre has continued to maintain strong research and education activities through the MSPH. An MPH with a sexual health research project often stimulates an interest in doing further research with a PhD or to work as a research assistant at the Centre.

Completed:

Chlamydia incidence and re-infection rates (CIRIS): a longitudinal study of young Australian women, **Jennifer Walker**, PhD, University of Melbourne.

The epidemiology of bacterial vaginosis in Australian women, **Kath Fethers**, PhD, University of Melbourne.

Evaluation of enhancing STI control of homosexually active men in primary care (ESTIHM), **Anthony Snow**, MPH, University of Melbourne.

The prevalence of sexually transmitted infections among the female migrant sex workers in Melbourne. **Haiping Tang**, MPH, University of Melbourne.

Sexual health of Australian adolescents who do not attend mainstream schools: a pilot study, **Sue Barker**, MPH, University of Melbourne.

Knowledge of oral health practitioners around oral squamous cell carcinoma and oropharyngeal squamous cell carcinomas in the context of Human papilloma virus (HPV), **Roisin McGrath**, MPH, University of Melbourne.

Knowledge of HPV amongst University of Melbourne students, **Kathryn Saxby**, MPH, University of Melbourne.

The impact of cultural transition on young women's attitudes to contraception: a case study of young women from the Horn of Africa, living in Victoria, Australia. **Anisa Assifi**, MPH, University of Melbourne.

In progress:

Virtual visits: Investigating the acceptability of webcam consultations for young adults' sexual health, **Cameryn Garrett**, PhD, University of Melbourne.

*Use of oral garlic (*Allium sativum*) in recurrent thrush (vulvovaginal candidiasis)*, **Cathy Watson**, PhD, University of Melbourne.

Sexually transmitted viruses in men having sex with men, **Tim Read**, PhD, University of Melbourne.

DIAGNOSES

The numbers of the most frequently made diagnoses in consultations are shown in the table below.

Diagnoses	Total
<i>Chlamydia trachomatis</i>	1303
<i>Neisseria gonorrhoea</i>	422
NGU	1193
Herpes	748
Syphilis	101
Bacterial vaginosis	611
Warts	1507
HIV + (new)	52
PID	168
Mycoplasma genitalium	101
HIV PEP	264
PCI	49
Gonorrhoea in women	30
Trichomoniasis in women	16

Human papilloma virus in men who have sex with men, **Huachun Zou**, PhD, University of Melbourne.

The acceptability and feasibility of increased chlamydia testing in general practice, **Anna Yeung**, PhD, University of Melbourne.

The aetiology of rectal infections in men who have sex with men, **Melanie Bissessor**, PhD, University of Melbourne.

"Choices Women Make" – Contraception and sexual health practices in women of reproductive age in the primary care setting in Victoria, Australia, **Jason Ong**, MPH, University of Melbourne.

International Postdoctoral Research Fellows

Dr Ajith Weerakoon, Postgraduate Institute of Medicine, University of Colombo, Sri Lanka.

COMMUNITY

Indigenous young person's sexual and reproductive health project

MSHC has proudly supported the development of the Wulumperi Aboriginal and Torres Strait Islander Sexual Health Unit within its services in 2010. The Woi-wurrung people have kindly given MSHC permission to use Wulumperi (meaning good health) to name the unit and for this we acknowledge their people and thank them. It is envisaged that MSHC will increase its profile to

HPV VACCINATION PROGRAM BRINGS DRAMATIC TURNAROUND

Genital warts have all but disappeared in young heterosexual Australians as the result of the national HPV (human papilloma virus) vaccination program, according to research based on surveillance data from the Melbourne Sexual Health Centre.

This dramatic turnaround within just four years points to the strong likelihood that HPV-related cancers will in future also become much rarer, according to the Melbourne School of Population Health's Professor Christopher Fairley. Professor Fairley is Director of both the Centre and School's Sexual Health Unit, which is situated within the Centre.

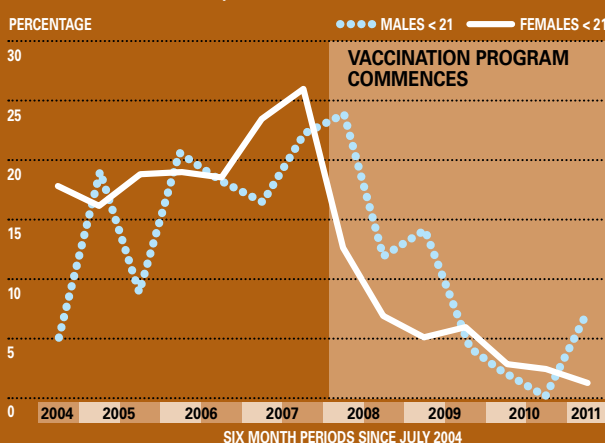
"It is unprecedented for a sexually transmitted infection that is as common as genital warts to disappear so quickly," Professor Fairley said. "The HPV vaccine program is pioneering for Australia and internationally – and no country in the world has seen a reduction in warts as dramatic as this."

In a world first for a preventative health program targeting sexually transmitted infections (STIs), in April 2007 Australia began vaccinating young females aged 12 to 27 against HPV genotypes 6, 11, 16 and 18, using Gardasil. In a paper published in the British journal, *Sexually Transmitted Infections*, the study's researchers reported that only four cases of genital warts occurred in women aged under 21 years from 1 July 2010 to 30 June 2011, compared with up to 66 cases per year before July 2007, the year the vaccination program started.

Comparing two 12-month periods of 2007-2008 and 2010-2011, the percentage of patients seen at the Melbourne Sexual Health Centre with genital warts declined in women aged under 21 from 18.6 per cent to 1.9 per cent. In heterosexual men aged under 21, genital warts declined from 22.9 per cent to 2.9 per cent.

Factors that contributed to the study's results included access to very good surveillance data gathered by the centre, which saw 52,454 new patients between July 2004 and June 2011, Professor Fairley said. Australia also introduced the vaccine before other countries and achieved high vaccine coverage compared to other countries. "Some other countries introduced the vaccine for school age children but Australia was different in having a catch-up program up to age 26 in women. This meant a whole population of women between school age and 26 were offered the vaccine free of charge."

PRESENTATIONS WITH WARTS IN MEN AND WOMEN < 21 YEARS, JULY 2004 TO END JUNE 2011



Why was the vaccination program so effective? "It was well funded, well designed, well coordinated and it had broad public appeal," he said. Its outstanding success had a range of significant health benefits. "Firstly, genital warts are already becoming a rare infection in young people. Genital warts are an unpleasant condition associated with significant morbidity. That result is terrific for young Australians," he said.

"Because the vaccine has other strains in it, young women will no longer get nearly as many cervical abnormalities and so many fewer women will need treatment for abnormal pap smears. We've already seen a dramatic decline in women under 18 with high-grade abnormalities.

"Even more importantly but in the longer term, these results suggest the cancer-causing strains of HPV – that is 16 and 18 – will be rare in these young people. That means HPV-related cancers, including cervical cancer, vulval cancer, anal cancer, throat cancer and penile cancer, will become much less common over the next 20 to 30 years."

Professor Fairley hopes to see the vaccine program extended to young men as well, with the aim of protecting gay men from the HPV-related cancers that affect them: anal cancer and throat cancer.

There was no chance that the vaccine's success would dent business at the Melbourne Sexual Health Centre. "We have many more people coming here than we can deal with but it does mean the clinic is freed up to treat many others in need," he said. "It's a tremendous efficiency gain for sexual health services around the country."

SEXUAL HEALTH UNIT

Indigenous Victorians as an alternative point of care for people to access sexual and reproductive health services. The Victorian 'Indigenous young person's sexual and reproductive health project' is funded by the Victorian Department of Health. Work for the young person's project has been focused on the Indigenous communities in a number of Victorian Health regions. A partnership is also in place in the Hume region of Victoria with the Centre for Excellence in Rural Sexual Health (CERSH), University of Melbourne, in Shepparton.

The primary aim of the project is to target all of Victoria's Indigenous people within its health regions across the state over the next four years with a focus on encouraging young Indigenous people to access local services for sexual and reproductive health care. Training opportunities for the staff of the regional services are being developed and delivered to increase their knowledge and confidence in dealing with sexual and reproductive health issues.

KEY ACHIEVEMENTS

- Introduction of fully electronic medical records.
- MSHC staff members had 10 oral presentations at the ISSTD Meeting in Quebec in July 2011, which is the premier STI research meeting and is held only every two years.
- Sixteen abstracts accepted (11 oral and six posters) for presentation at the Sexual Health Conference, Canberra, 2011.
- Professor Christopher Fairley received the 2011 Outstanding Contribution to Research in Sexual Health Medicine Award from The Royal Australasian College of Physicians, Australasian Chapter of Sexual Health Medicine.
- Associate Professor Marcus Chen received the Sexual Health Award for significant contribution to sexual health medicine by a Fellow of less than 10 years standing, 2011, from The Royal Australasian College of Physicians, Australasian Chapter of Sexual Health Medicine.
- Silver winner Victorian Public Health Awards 2011 in the category of excellence in enhanced quality healthcare through e-health and communications technology for the Let Them Know website.
- Partnership Award 2011 for providing long-standing support to Inner South Community Health Service and Resourcing Health and Education service (Rhed) as well as Victorian sex workers.
- Dr Catriona Bradshaw received an NHMRC Project Grant on the subject 'Investigation of candidate aetiological organisms of bacterial vaginosis in diverse and unique epidemiological and clinical studies'.
- Ms Melanie Bissessor secured an NHMRC Postgraduate Scholarship commencing in 2012

2011 CONFERENCES AND PUBLIC PRESENTATIONS

- Management of MDR gonorrhoea. Antimicrobials Annual Scientific Meeting, Australian Society for Antimicrobials, Melbourne, February.
- The incidence and re-infection rates of genital Chlamydia trachomatis in a cohort of young Australian women. Department of Health (WA) STI BBV Quarterly Forum, Perth, February.
- Melbourne Sexual Health Centre 10 Years On. Alfred Hospital, Monash Infectious Diseases Society Meeting (MIDS) Melbourne, May
- Vaccinating Against STIs – Lessons from Abroad, BASHH Spring Meeting, Newcastle, United Kingdom, May.
- Double-blind randomised placebo controlled trial of oral metronidazole in combination with either vaginal clindamycin or an oestrogen-containing vaginal probiotic for the treatment of bacterial vaginosis. 19th International Society for STD Research (ISSTD), Quebec, Canada, July.
- The epidemiological associations of BV candidate bacteria in sexually experienced and inexperienced women with BV and normal vaginal flora. ISSTD, Quebec, Canada, July.
- Behavioural factors associated with bacterial vaginosis (BV) in women who have sex with women (WSW) ISSTD, Quebec, Canada, July.
- Evidence of circulating macrolide resistance in Mycoplasma genitalium infections and development of a rapid assay to detect resistance. ISSTD, Quebec, Canada, July.
- The incidence of genital Chlamydia trachomatis in a cohort of young Australian women. ISSTD, Quebec, Canada, July.
- Computer assisted self-interviewing in a sexual health clinic as part of routine clinical care: impact on service and patient and clinician views. ISSTD, Quebec, Canada, July.
- Continued decline in genital warts three years after introduction of a quadrivalent HPV vaccination programme. ISSTD, Quebec, Canada, July.
- Innovation in sexual health services, Australasian Sexual Health Conference, Canberra, September.
- Recent insights into genital herpes infections: HSV shedding, treatment and interactions with HIV. Australasian Sexual Health Conference, Canberra, September.
- Human papilloma virus (HPV) in young men who have sex with men: preliminary findings from the hyper study. Australasian Sexual Health Conference, Canberra, September.
- Rapid HIV testing in homosexual men: early lessons from the SMARTest study. Australasian Sexual Health Conference, Canberra, September.

PUBLICATION HIGHLIGHTS

Study: Incidence of Hepatitis-C among HIV infected men who have sex with men (MSM) attending a sexual health service: a cohort study. Gamage DG, **Read RTH, Bradshaw CS**, Hocking JS, Howley H, **Chen MY, Fairley CK**. *BMC Infectious Diseases* 2011; 11:39

Summary: The incidence of Hepatitis C (HCV) infection was determined among HIV-infected men who have sex with men (MSM) attending a Sexual Health Centre. The study was carried out among HIV-infected MSM seen at least once between February 2002 and March 2010. The analysis was restricted to MSM who had a negative HCV antibody test for at least six months after their diagnosis of HIV. During the study period 1065 HIV-infected MSM attended the clinic. Of these, 869 (82%) were tested for HCV at any time after HIV diagnosis and 69% (620) tested HCV negative at least six months after their HIV diagnosis. There were 40 cases of HCV identified, of which 16 were among injecting drug users (IDU) and 24 in non-IDU. Our study is one of the larger cohort studies performed to date and the first cohort study in Australia, to report presumed sexual transmission of HCV among HIV-infected MSM who do not inject drugs. Our study suggests that HIV positive MSM who have never used injected drugs have a low but significant risk of HCV infection of about half a percent per year. The most common reason for HCV testing among HCV positive individuals in our study was the development of abnormal liver function tests.

Study: Low Incidence of bacterial vaginosis in cohort of young Australian women. **Fethers KA, Fairley CK**, Morton A, Hocking JS, Fehler G, Kennedy LJ, **Bradshaw CS**. *Sexually Transmitted Diseases* 2011; 38(2): 124-126

Summary: The study was conducted in women aged between 17 and 21 years attending the University of Melbourne. This population has a low prevalence of bacterial vaginosis (BV) of 4.7%. Women with no previous history of BV could participate in the 12-month cohort study. A questionnaire and study kit to self-collect vaginal samples was posted to participants every three months for 12 months. Women who developed incident BV during the 12-month study period were no longer included in the cohort. The study showed that incident BV was uncommon in young women from a low prevalence population who had low numbers of sexual partners, and importantly, was absent in women reporting no sexual activity. These data should provoke further interest in the association between BV and sexual activity and inform the debate about possible sexual transmission of BV.

Study: The difference in determinants of *Chlamydia trachomatis* and *Mycoplasma genitalium* in a sample of young Australian women. **Walker J, Fairley CK, Bradshaw CS**, Tabrizi SN, **Chen MY**, Twin J, Taylor N, Donovan B, Kaldor JK, McNamee K, **Urban E, Walker S**, Currie M, Birden H, Bowden F, Gunn J, Pirotta M,

Gurrin L, Harindra V, Garland S and Hocking JS. *BMC Infectious Diseases*; 2011: 11:35

Summary: A cohort of 16 to 25-year-old Australian women were recruited from primary health care clinics to determine chlamydia and *Mycoplasma genitalium* (MG) prevalence and incidence using vaginal swabs collected at recruitment. Among 1116 participants, chlamydia prevalence was 4.9% and MG prevalence was 2.4%. Younger women were more likely to have a chlamydia infection, and younger age was not associated with MG infection. MG was associated with vaginal discharge, but chlamydia showed no associations with any reported symptoms. Having two or more partners in the last 12 months was more strongly associated with chlamydia than MG. Unprotected sex with three or more partners was less strongly associated with chlamydia than MG. These results demonstrate significant chlamydia and MG prevalence in Australian women. The differences in strengths of association between numbers of sexual partners and unprotected sex for infection with chlamydia and MG may be due to differences in the transmission dynamics between these infections.

Study: Evaluation of Health Map: a patient centred web based service for supporting HIV infected patients. Gamage DG, Sidat M, **Read T**, Cummings R, **Bradshaw CS**, Howley K, Fehler GF, **Chen MY** and **Fairley CK**. *Sexual Health* 2011; 8: 194 - 198

Summary: Our aim was to describe the use of and responses to a self-management website, 'Health Map', established to address the key chronic health issues of HIV-positive people. 'Health Map' assessed health issues against current commendations for: treatment adherence, monitoring CD4 counts and viral load, psychological health and physical activity, vaccination, cholesterol, fasting blood sugar, blood pressure, alcohol consumption, smoking, body mass index, and cervical screening for women and sexually transmissible infection (STI) screening for men who have sex with men (MSM). A total of 552 people, with a mean age of 37 years, completed the full 'Health Map' program, of whom 536 (97%) were Australian, 425 (77%) were male, including 268 (63%) MSM. Online responses to several health indices were of concern: 49% missed at least one dose of antiretroviral therapy per month and only 41% had had an HIV viral load test in the four months prior. Only 43% reported regular physical activity, and 49% and 61% reported vaccination for hepatitis A and B. The proportion tested within the recommended periods for fasting cholesterol (40%), fasting blood sugar (35%) and cervical screening (43%) in women or STI screening for MSM (53%) were low. A substantial proportion of individuals completing the online survey reported information that would suggest their HIV and more general health care is suboptimal. These data are consistent with community surveys and indicate the need for improvement in the chronic management of HIV.

VACCINE AND IMMUNISATION RESEARCH GROUP ANNUAL REPORT 2011



Group leader,
Professor
Terry Nolan.

YEAR'S OVERVIEW

The Vaccine and Immunisation Research Group (VIRGo) conducts vaccine and immunisation research in three complementary programs: clinical trials, mathematical modelling and epidemiology. Our work in these programs provides policy support regarding best use of vaccines in national schedules, in pandemic influenza preparedness and counter-measures, and in vaccine safety. We have an extensive network of collaborators in multiple discipline areas including immunology, virology and bacteriology, mathematics, biostatistics and psychology.

Vaccine clinical trials: exploring effectiveness, antibody responses, and safety of new vaccines in standard or novel schedules.

Mathematical modelling: studying the transmission dynamics and consequences of vaccine-preventable disease. Projects range from within-host studies to population-level simulations of transmission.

Population epidemiology and virus discovery: assessing the incidence and population susceptibility of potentially vaccine preventable diseases, along with social and environmental factors underpinning the spread of infection in the population, and in partnership with molecular virologists searching for as yet undescribed viruses that cause common respiratory illnesses.

RESEARCH

Influenza

Influenza continued to be a major theme of VIRGo's research this year. We contributed to sponsored clinical trials of an MF59-adjuvanted seasonal trivalent inactivated influenza vaccine in children, and completed recruitment for a 'bird flu' AS03-adjuvanted H5N1 phase II vaccine clinical trial. The modelling group's Dr James McCaw, working with colleagues at Melbourne's WHO Collaborating Centre for Reference and Research on Influenza, led the development of models to characterise the growth of influenza viruses in ferrets, and the relative ease with which they spread between animals, to improve characterisation of emerging flu strains. Associate Professor Jodie McVernon contributed population health-informed insights to Nobel Laureate Professor Peter Doherty's National Health and Medical Research Council (NHMRC) funded influenza research program, which aims to understand and harness T-cell immune responses in the quest for a 'universal' flu vaccine. With Dr Katherine Kedzierska, an immunology team member on the program, the modelling group leads an NHMRC project seeking evidence of the protective efficacy of human T-cell responses, combining epidemiologic observations with new data on influenza viruses collected and stored over the last century.

Meningococcal Disease

There is a great deal of late-stage clinical development of a promising new meningococcal B vaccine, and new meningococcal combination vaccines targeted at younger children (against meningococcal serogroups A, C, Y and W135). With our collaborators elsewhere in Australia and overseas, we conducted a clinical trial in adolescents of a candidate 4-component meningococcal B vaccine, and in infants of a conjugated meningococcal ACYW vaccine. We also continued an ongoing clinical trial of a Hib-meningococcal C combination vaccine. Led by Associate Professor Jodie McVernon, and in collaboration with Associate

The Vaccine and Immunisation Research Group (VIRGo) is a long-standing collaborative program between the University of Melbourne and the Murdoch Childrens Research Institute (MCRI), based in the Melbourne School of Population Health.





RESEARCH AIMS TO EXTEND PERTUSSIS IMMUNITY TO VERY YOUNG BABIES

Pioneering research led by VIRGo aims to extend pertussis immunity to very young babies. This world-first study is part of a multi-pronged response to a national epidemic of pertussis (also known as whooping cough), a highly infectious, potentially fatal respiratory disease.

VIRGo, the Vaccine and Immunisation Research Group, is part of the Melbourne School of Population Health at the University of Melbourne and a joint unit within the Murdoch Childrens Research Institute. With colleagues from the Universities of Sydney, Adelaide and Western Australia, Professor Terry Nolan, who heads both VIRGo and the School, is a principal investigator on the world's first full-scale trial to measure the effectiveness of immunising babies against pertussis soon after birth. 'Whooping cough' is named for the sound sufferers emit as they gasp for oxygen after a sustained coughing fit caused by the disease.

Funded by the National Health and Medical Research Council (NHMRC), this collaboration involves three other research centres around Australia. A two-year successful recruitment of 440 mothers and babies was recently completed. Babies' antibody levels will be measured until they are eight months of age, to ensure that their immunity is not subsequently lowered in response to this very early immunisation. The results are expected to be available in early 2013.

VIRGo is also planning research that would stretch protection from pertussis even further – before birth – by immunising pregnant mothers with a pertussis vaccine in their final trimester. "This is in the hope that the antibodies the mother generates will both protect her and will be passed through the placenta to her baby, giving the baby adequate levels of antibody to protect them before they start their regular course of pertussis vaccination after birth," Professor Nolan says.

Complementary research, using mathematical modelling that explores the dynamics of population immunity, will be a crucial tool in assessing the success of the current vaccination schedule, he says. Australia's national immunisation program over the past 20 years using new, improved vaccines had effectively controlled pertussis, achieving coverage rates of 90 per cent-plus across the population, he says. "Then about two years ago an epidemic started around the country with levels of whooping cough notifications which we haven't seen for 30 to 40 years." A three-fold increase in overall

notifications above the average annual rate occurred in 2009, with almost a five-fold increase in children aged under 10. A few deaths among babies aged under four months and a rise in pertussis-related hospitalisations focused media attention on the epidemic.

The factors behind the alarming rise in pertussis notifications included improved diagnostic testing and the limited duration of immunity that the vaccines afforded, Professor Nolan says. The latter was already being countered by a range of immunisation strategies, including a program that started in 2003 targeted at adolescents. However, more recently, it was discovered that young children were getting pertussis because the immunity afforded by their vaccinations had worn off before their pre-school boosters and close family members were potentially exposing them to the disease. This prompted state governments to fund a strategy dubbed "cocooning". The cocoon strategy immunises close family members in order to protect young babies, whose full immunity after a vaccination course does not take effect until six months of age.

"About two years ago an epidemic started around the country with levels of whooping cough notifications which we haven't seen for 30 to 40 years."

"Mathematical modelling to explore the dynamics of population immunity is a key aspect of our group's research," Professor Nolan says. "We're trying to understand how immunising one age group within the population can produce vulnerability in another age group, and the extent to which booster vaccinations or the timing of those boosters are likely to produce optimal control." Led by Associate Professor Jodie McVernon, the modelling study is being done in collaboration with the National Centre for Immunisation Research and Surveillance at the University of Sydney.

The potential intervention to protect very small babies in the womb by immunising their mothers in the last trimester of pregnancy is hoped to start in 2013.

Professor Peter Richmond at the University of Western Australia, we are conducting a population-based serosurvey of meningococcal antibodies in 240 11-16 year olds to evaluate the possible need for booster vaccination of children previously vaccinated in early childhood with meningococcal C vaccine.

Modelling infection transmission

Our modelling group's focus on the importance of social and demographic influences on the spread of disease received support from the Australian Research Council (ARC) this year, through Discovery and Linkage Project grant schemes. This funding enabled Dr Nicholas Geard, a postdoctoral computer scientist with expertise in agent-based modelling, to collaborate with Dr Kathryn Glass from the Australian National University. They are evaluating the importance of changes in Australian households over the last century to patterns of infection and immunity in the population. This work will mesh with the Linkage Project's focus on social networks in advantaged and disadvantaged neighbourhoods, enabling rich data-driven characterisation of diverse subgroups in the population. Funding partners on that project include VicHealth, Victorian Government Department of Health, City of Boroondara and Broadmeadows and Sunshine Uniting Care, with collaborators from the Melbourne School of Psychological Sciences, the McCaughey Centre, and Faculty of Architecture, Building and Planning.

Pertussis (whooping cough)

See article, previous page.

CONFERENCES AND PUBLIC PRESENTATIONS, 2011

McVernon J, Nolan T, Owen R, Laurie K, Barr I, Kelso A, Hyland C, Faddy H, Capper H, Irving D. Changing seroprevalence to pandemic H1N1 influenza (pH1N1) over the 2010 Australian winter. Communicable Disease Control Conference, Canberra, April.

Campbell P*, McVernon J, Quinn H, Hueston L, McIntyre P, Gilbert L. Comparison of the three Australian cross-sectional pertussis serosurveys: 1997/8, 2002, 2007. Communicable Disease Control Conference, Hotel Realm, Canberra, April (*presenting author).

Howard P*, McVernon J, Nolan T, Richmond P, Nissen M, Sloots T, Lai M, Greenberg M, Lambert S. Influenza-like illness in healthy Australian adults: epidemiological and virological perspectives. Communicable Disease Control Conference, Canberra, April (*presenting author).

Booy R*, Richmond P, **Nolan T, McVernon J, Marshall H, Nissen M, Reynolds G, Ziegler JB, Heron L, Lambert S, Mesaros N, Peddiraju K, Miller JM.** Prolonged immunogenicity and safety of the HibMenC-TT conjugate vaccine in Hib-primed toddlers. Communicable Disease Control Conference, Canberra, April (*presenting author).

Verikios G*, **McCaw J, McVernon J, Harris A.** H1N1 influenza in Australia and its macroeconomic effects. Western Economic Association International 86th Annual Conference, San Diego, June (*presenting author).

Verikios G*, **McCaw J, McVernon J, Harris A.** H1N1 and the Australian Macroeconomy. 40th Australian Conference of Economists. The Australian National University, Canberra, July (*presenting author).

Laurie KL, **McVernon J, Carolan LA, Nolan T, Owen R, Irving D, Capper H, Hyland C, Faddy H, Barr IG, Kelso A.** Investigations of the seroprevalence status of Australians against pandemic and seasonal influenza from 2008-11. The Fourth ESWI Influenza Conference, Malta, September.

Petrie SM, Hurt AC, McVernon J, McCaw JM. Measuring total and infectious viral load in order to more accurately estimate within-host model parameters. The Fourth ESWI Influenza Conference, Malta, September.

Pearce D, Skull S, McCaw J, McVernon J, Mathews J. Can the SCCS method estimate influenza vaccination effectiveness in the elderly? 7th Australian Influenza Symposium, Melbourne, October.

Bolton K, Forbes K, Pattison P, Robins G, McVernon J, McCaw J. Influence of contact definitions in assessment of the relative importance of social settings in disease transmission risk. Epidemics³ – Third International Conference on infectious disease dynamics, Boston, November.

Dafilis MP, Moss RG, McCaw JM, McVernon J. Assessing the risk of antiviral drug resistance for pandemic influenza control: influence of drug delivery constraints in the health sector. Epidemics³ – Third International Conference on infectious disease dynamics, Boston, November.

Petrie SM, Hurt AC, McVernon J, McCaw JM. Estimation of the relative replication fitness of a drug-resistant H1N1 influenza mutant compared to a drug-sensitive wild-type *in vivo*. Epidemics³ – Third International Conference on infectious disease dynamics, Boston, November.

McVernon J, McCaw J, Howard P, Richmond P, Nissen M, Sloots T, Lambert S, Greenberg M, Nolan T. The role of children in facilitating respiratory virus transmission in Australian households during the 2008 influenza season. 7th World Congress of the World Society for Pediatric Infectious Diseases, Melbourne, November.

Booy R, Richmond P, **Nolan T, McVernon J, Marshall H, Nissen M, Reynolds G, Ziegler JB, Heron L, Lambert S, Mesaros N, Peddiraju K, Miller JM.** Immunogenicity and safety of the HibMenC-TT conjugate vaccine in Hib-primed Toddlers: 3 year follow-up. 7th World Congress of the World Society for Pediatric Infectious Diseases, Melbourne, November.

INVITED SPEAKER PRESENTATIONS, 2011

McVernon J, McCaw J. Planes, trains and ponies: How H1N1 spread in Mongolia, and implications for future pandemic prevention strategies. RMIT School of Maths and Geospatial Sciences Seminar Series, 19 August.

McVernon J. Pertussis vaccine schedules: what can serosurveillance and modeling tell us? National Centre for Immunisation Research & Surveillance national pertussis workshop

– ‘Strategies to prevent severe pertussis in the next decade’.
Sydney, 25-26 August.

McVernon J. Non-pharmaceutical interventions to reduce influenza transmission: lessons from the two most sparsely populated countries on Earth. 7th Australian Influenza Symposium. Melbourne, 6-7 October.

McVernon J. Recent trends in pertussis – Australia: overview and likely implications for mother-infant targeted immunisation. Global Pertussis Initiative Roundtable Meeting. Melbourne, 15 November.

McVernon J. Modelling and Economics. National Centre for Immunisation Research and Surveillance Progress towards control of Meningococcal Disease Workshop. Melbourne, 15 November.

McVernon J. Broadening protection: the role of MenACWY conjugate vaccine in the prevention of meningococcal disease. Novartis Satellite Symposium: Recent advances towards comprehensive prevention of meningococcal disease. Melbourne, 17 November.

Nolan T. The Kerr White Legacy – Public health in the mainstream, a perspective on population health in Australia. School of Population Health 10 Anniversary Symposium. Brisbane, 23 September.

STAFF HIGHLIGHTS

James McCaw was promoted to Senior Research Fellow, and was awarded an ARC Future Fellowship. Dr Jodie McVernon was promoted to Associate Professor.

PUBLICATION HIGHLIGHTS

Nolan T, Richmond P, Marshall H, **McVernon J**, Alexander K, Mesaros N, Aris E, Miller J, Poolman J, Boutriau D. Immunogenicity and safety of an investigational combined *Haemophilus influenzae* Type B-*Neisseria meningitidis* Serogroups C and Y-Tetanus Toxoid Conjugate Vaccine (HibMenCY-TT). *Pediatr Infect Dis J* 2011;**30**(3):190-6.

This was the first study to assess the immunogenicity of the tetanus toxoid-conjugated HibMenCY combination vaccine after two doses in infancy in over 1100 infants. These results raise the possibility that a two-dose schedule of HibMenCY-TT in infancy with a booster at 12 months of age may provide adequate protection against Hib and meningococcal C and Y disease.

Lyndal B, **Nolan T**. Making sense of perceptions of risk of diseases and vaccinations: a qualitative study combining models of health beliefs, decision-making and risk perception. *BMC Public health* 2011;**11**:943.

This study found that health messages about the risks of disease which are communicated as though there is equal risk in the population may be unproductive as the messages are perceived as unbelievable or irrelevant. Our findings have implications beyond the issue of childhood vaccinations as we grapple with communicating risks of new epidemics, and may usefully contribute to the current debate about how these theories of risk and decision-making can be used to ‘nudge’ other health behaviours.

Glass K, **McCaw JM**, **McVernon J**. Incorporating population dynamics into household models of infectious disease transmission. *Epidemics* 3:152-158 (2011).

This paper was the ‘proof of concept’ of the importance of developing more realistic models to characterise demographic transitions between households (births, deaths, marriages etc.) to study transmission of infections, and the likely effectiveness of vaccination programs, over the medium to long term. These issues must be considered when evaluating long term disease trends in developing countries, where fertility has declined dramatically over recent decades. In consequence, both the average size of households and the proportion of adults who live with children have declined, with implications for spread of disease and natural boosting of immunity.

McCaw JM, Arinaminpathy N, Hurt AC, **McVernon J**, McLean AR. A mathematical framework for estimating pathogen transmission fitness and inoculum size using data from a competitive mixtures animal model, (Supplementary material). *PLoS Comput Biol* 7(4): e1002026 (2011).

When novel influenza viruses appear in the population, their relative ability to transmit to other hosts compared to already circulating viruses contributes to how successful they may be. This paper introduced a novel mathematical framework, coupled with an innovative animal-experimental system, that enabled, for the first time, a quantitative measurement of the relative transmissibility of one strain compared to another to be made. Working with colleagues at the WHO Collaborating Centre for Reference and Research on Influenza, these methods are now being used to assess the potential for recently emerged drug resistant influenza viruses to spread more widely in the human population.

INDIGENOUS EYE HEALTH UNIT ANNUAL REPORT 2011



Director of the
Indigenous Eye
Health Unit,
Professor Hugh
R Taylor AC.

YEAR'S OVERVIEW

The Indigenous Eye Health Unit (IEHU) was founded in January 2008. The Unit's goal is to "Close the Gap" for vision, and to do this a five-year program has been embarked upon to address the gross disparities in eye health between Indigenous Australians and the mainstream population.

This program is reliant on the development of a well-reasoned, evidence-based blueprint for new policy to deliver sustainable quality eye care to Indigenous Australians.

The key expected outcomes of the Unit's research are:

- A comprehensive assessment of the state of eye health across the Indigenous population of Australia and a clear prioritisation of appropriate and specific intervention strategies.
- Accessible, affordable, appropriate and sustainable solutions developed and implemented to overcome the current eye health inequalities.
- The elimination of trachoma in Australia.
- A major reduction in the prevalence of vision loss in Indigenous Australians.
- A body of research work to lead changes in Australia's health policy, bringing improved eye health and vision to Indigenous Australians.

To date, we have undertaken a three step process to develop the evidence to inform policy. This comprises:

- A national survey of Indigenous eye health to define the size of the problem.
- Health services research to establish currently available eye services, barriers to eye care and best practice.
- Development of costed, evidence-based policy recommendations.

In 2011, good progress was made in all these areas and the findings of this work have laid the foundation for our ongoing activities.

KEY ACHIEVEMENTS

The IEHU has recently completed a major project investigating the 'barriers to the provision and utilisation of eye health services for Indigenous Australians' and the plan is to get this launched in 2012.

'The Roadmap to Close the Gap for Vision' report presents the findings of research consultations with over 370 participants in 21 locations across Australia, covering remote, regional and urban populations.

The consultations were conducted with clients and staff of Aboriginal Health Services, hospitals, eye health practitioners, government departments and non-government organisations in all states and territories. Key stakeholders were involved in a series of workshops and meetings to develop and test solutions to address the barriers that limit access to eye care services.

The Roadmap outlines 42 interlocking recommendations to eliminate unnecessary vision loss for Indigenous Australians and has been presented to Australian Governments as a comprehensive framework requiring full and immediate implementation. Sector support was achieved during the conduct of the project and endorsement of the recommendations. All jurisdictional health departments were consulted and we received support from the Optometrists

The Indigenous Eye Health Unit undertakes high quality research and policy development in Indigenous eye health to provide an evidence base to assess the needs in Indigenous eye health and prioritise specific intervention strategies.

MASCOT SPREADS 'CLEAN FACES, STRONG EYES' MESSAGE

Towering over young children, Milpa the cheery-eyed, bright green and orange trachoma goanna needs a minder to manage his many fans when he lumbers into remote Indigenous communities. The official mascot of the Northern Territory Trachoma Elimination Campaign was launched in July 2011 and is spreading the 'clean faces, strong eyes' message. Milpa is part of the social marketing campaign against trachoma that was initiated by the Indigenous Eye Health Unit, in the Melbourne School of Population Health and headed by Professor Hugh Taylor AC.

Milpa's name means 'eye' in Walpiri language. The goanna character was developed by artist Lily McDonald and her many graphics feature in The Trachoma Story Kits, which were developed in 2010 by the unit in partnership with Katherine West Health Board and the Northern Territory Government's Centre for Disease Control.

More than 680 Trachoma Story Kits have now been distributed across three states. Unit project officer Josie Atkinson worked on the unit's social marketing campaign in 2011, creating 'clean faces, strong eyes' messages for TV and radio advertisements featuring Indigenous footy stars Aaron Davey and Liam Jurrah from Melbourne Football Club (which supports the trachoma campaign), web-based educational resources, and promotional products.

Fiona Lange, the unit's health promotions officer, made several trips to NT Indigenous communities this year coordinating the campaign, which aims to motivate, model, resource, remind and reinforce clean faces and other hygiene practices. The falling trachoma rates in some Northern Territory Indigenous communities (yet to be officially released) show that their efforts are working.

The unit has been working with Indigenous communities to emphasise the importance of clean faces in stopping



*Yamba
the Honey
Ant with
Milpa the
Trachoma
Goanna.*

the spread of trachoma, the bacterial disease that is a leading cause of blindness in Indigenous communities. The unit's work supports one of the four pillars of the World Health Organisation's SAFE strategy – Surgery, Antibiotics, Face cleanliness and Environmental improvement – to eliminate trachoma, Fiona said.

But achieving behavioural change is challenging, she said. Fiona cited the insights from a knowledge, attitudes and practice survey done to assess the barriers and enablers to people adopting the SAFE strategy. "Three things stood out," she said. "One in five staff in clinics and one in three staff in schools were unaware that they lived and worked in a trachoma-endemic area. They can't help to eliminate it if they don't know about it."

She said half of these staff considered that it was "normal" for children to have dirty faces. "It might feel awkward for non-Indigenous staff to encourage children to wipe their noses but this attitude of tolerance is a health risk factor." However, on the enabling side, 86 per cent of participants felt comfortable talking about hygiene issues with others, she said.

A key aim of the social marketing was to remind people that the resources were there and how to use them – kits were sometimes left sitting on shelves, she said, because of the high staff turnover in schools and clinics.

While a full-scale evaluation of the Trachoma Story Kits campaign was beyond the resources of the program, evaluation might be done in collaboration with other hygiene programs. "The ultimate measure of the kits' effectiveness is seeing the numbers of clean faces going up and trachoma numbers going down," she said.

INDIGENOUS EYE HEALTH UNIT

Association of Australia, Royal Australian and New Zealand College of Ophthalmologists, Vision 2020 Australia and the National Aboriginal Community Controlled Health Organisation.

SPECIFIC DISEASE PROGRAMS

Trachoma

The IEHU has continued to support trachoma elimination programs in the Katherine West Health Board region and the wider Northern Territory and in other states, and it is very heartening to see the prevalence of trachoma reducing in the Northern Territory as the SAFE (surgery, antibiotics, facial cleanliness, environmental change) strategy is fully implemented.

The Trachoma Story Kits designed to help spread the “clean faces, strong eyes” message to help improve hygiene and eliminate trachoma have been adapted by various communities, which is also pleasing to see. Style guidelines have been created to enable others to adapt resources to suit their local needs. Other adaptations and uses of the resources include: Fred Hollows Foundation has made “Clean Faces = Strong Eyes” wristbands, Halls Creek Shire in WA has worked with the IEHU and Lily McDonald to design huge A2 flipcharts to increase engagement with elders in their communities and the Jimmy Little Foundation’s *Thumbs Up* website has embedded trachoma content into its nutrition and lifestyle education web based resources for remote teachers.

2011 RESEARCH PRESENTATIONS – PROFESSOR HUGH R. TAYLOR AC

Title	Conference/Lecture	Location	Date
Management of Diabetic Retinopathy – Screening Procedures and Global Strategies for Detection of Diabetic Retinopathy	26th Asia Pacific Academy of Ophthalmology Congress: Academia Ophthalmologica Internationalis Symposium	Sydney	20-24 March
The Burden and the Solution – Screening for Diabetic Retinopathy	Co-chair: Diabetic Retinopathy in Asia Pacific Region	Sydney	20-24 March
Global Health – Putting Evidence into Action	Australasian Society for Infectious Diseases Annual Scientific Meeting	Lorne	30 March – 2 April
Keynote Address: The WHO’s Vision 2020 Initiative – Priority, Conditions and Progress Towards the Elimination of Preventable Blindness	Wine, Wolbachia and World Eye Health 11 Guest Lecturer	Casey Eye Institute, Portland, Oregon, USA	29-30 July
Trachoma: Closing the Book on the Number One Infectious Cause of Blindness	Wine, Wolbachia and World Eye Health 11 Guest Lecturer	Casey Eye Institute, Portland, Oregon, USA	29-30 July
VISION 2020 and Diabetes	LV Prasad Eye Institute 25th Foundation Day	Hyderabad, India	17 October
The Roadmap to Close the Gap for Indigenous Australians	Aboriginal and Torres Strait Islander Research Symposium	University of Melbourne	3 November
The Impact of Vision Loss	Eye Institute Scientific Conference	Auckland, New Zealand	6 November
Vision Loss in Indigenous Australians	Eye Institute Scientific Conference	Auckland, New Zealand	6 November
Diabetic Retinopathy	Eye Institute Scientific Conference	Auckland, New Zealand	6 November
Indigenous Eye Health Unit Update	Royal Australian and New Zealand College of Ophthalmologists 43rd Annual Scientific Congress	Canberra	19-22 November
The Elimination of Trachoma	Trachoma Planning Day, Centre for Disease Control	Alice Springs	29 November

2011 RESEARCH PRESENTATIONS – MS ANDREA BOUDVILLE

Title	Conference/ Lecture	Location	Date
Becoming a Regional Eye Health Champion	2011 Regional Eye Health Coordinator Workshop Vision2020 Australia	Melbourne	30 June
WHO Building Blocks for Health Systems	Melbourne School of Population Health/ Centre for Health Policy, Programs & Economics (CHPPE) Health Systems lecture	University of Melbourne	25 August
Indigenous Health from Data to Practice	Master of Public Health intensive course	University of Melbourne	14 October

2011 RESEARCH PRESENTATIONS – MR MITCHELL ANJOU

All About Eyes and Diabetes	Patients of the Diabetes Club and VAHS staff	Victorian Aboriginal Health Service	22 July
Indigenous Health: From Data to Practice	Master of Public Health Intensive with Andrea Boudville and Josie Atkinson	University of Melbourne	14 October
Occupational Optometry, Visual Standards, Public Health Optometry –Local and Global Eye Health Programs	Department of Optometry and Vision Sciences, Undergraduate Optometry course lecture	University of Melbourne	20 October
Occupational Optometry, Visual Standards, Public Health Optometry – Working with Specific Populations	Department of Optometry and Vision Sciences, Undergraduate Optometry course lecture	University of Melbourne	27 October

2011 RESEARCH PRESENTATIONS – MS FIONA LANGE

Trachoma Updates on CAAMA Radio Women's Business	Central Australian Aboriginal Media Association (CAAMA) Radio	Alice Springs	25 May and 1 December
Trachoma Elimination Health Promotion and Social Marketing	Regional Eye Health Coordinators Workshop	Melbourne	30 June
Clean Faces, Strong Eyes – Eliminating Trachoma with Behaviour Change	8th Aboriginal and Torres Strait Islander Environmental Health Conference	Darwin	28 September
Barriers and Enablers in Knowledge, Attitudes and Practice in Uptake of the Trachoma Elimination	Program in the Katherine West Health Board Region	Katherine	14 October
Barriers and Enablers to Trachoma Elimination	Inaugural Indigenous Research Symposium	University of Melbourne	3 November
Launch of the Rural Health Education Foundation's 'See Strong – A Focus on Indigenous Eye Health'	Australian General Practitioner's Network Conference	Melbourne	18 November
Trachoma Knowledge, Attitudes and Practice in the NT – Informing Health Promotion and Social Marketing Strategies	Centre for Disease Control Workshop	Alice Springs	28 November

2011 RESEARCH PRESENTATIONS – MS JOSIE ATKINSON

Launch of the Rural Health Education Foundation's 'See Strong – A Focus on Indigenous Eye Health'	Australian General Practitioner's Network Conference	Melbourne	18 November
Trachoma Knowledge, Attitudes and Practice in the NT – Informing Health Promotion and Social Marketing Strategies	Centre for Disease Control Workshop	Alice Springs	28 November

STAFF HIGHLIGHTS

Awards and Honours

- Professor Hugh R Taylor AC, Harold Mitchell Chair of Indigenous Eye Health, has been appointed a Melbourne Laureate Professor for his work in the field of Ophthalmology.
- Josie Atkinson won the Gunung-Willam-Balluk Elder Uncle Norm Hunter Award.

PUBLICATION HIGHLIGHTS

History of Indigenous Eye Health Policy

Jones J, Henderson G, Poroch N, **Anderson I, Taylor H.** *A Critical History of Indigenous Eye Health Policy-Making: Towards Effective System Reform.* Indigenous Eye Health Unit, Melbourne.

On 27 May, the Hon Warren Snowdon, Minister for Indigenous, Rural and Regional Health, launched *A Critical History of Indigenous Eye Health Policy* at the Victorian Aboriginal Health Service (VAHS). Over the past 30 years, there have been at least seven reviews of eye care and only partial adoption of the series of recommendations. *A Critical History of Indigenous Health Policy-Making: Towards Effective System Reform* looked at the implementation of eye health policy over this time, which showed only partial implementation of previous recommendations. The critical history was prepared to help inform what has driven and facilitated the development of eye health policy over time and outlines the key barriers to implementation of past recommendations. The preparation of the report involved a literature review and interviews with key people who have been involved in the sector over a number of years.

Projected needs for eye care services for Indigenous Australians

Taylor HR, Dunt D, Hsueh YS, Brando A. *Projected needs for eye care services for Indigenous Australians.* Indigenous Eye Health Unit.

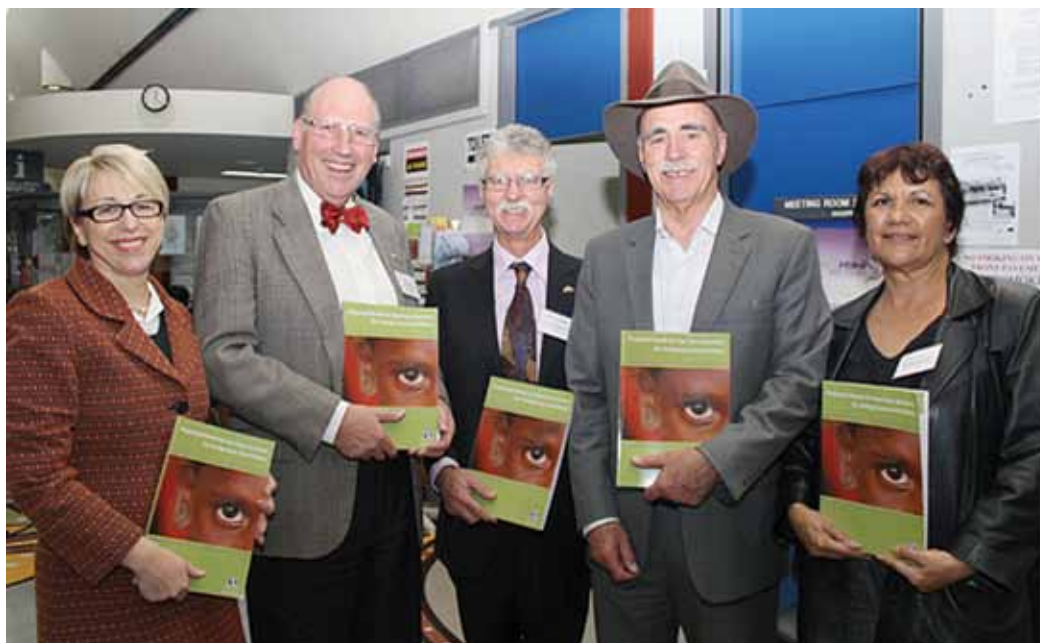
This report was also launched on 27 May at VAHS by Mr Snowdon. The projected needs are illustrated in a series of maps that estimate the needs for eye care services among Indigenous Australians in different geographic areas across Australia. The needs for eye care services of each area were estimated using the size of the Indigenous population in that area and the national prevalence rates of eye conditions. The maps provide targets of the unmet needs for the provision of eye care services to facilitate the planning of services.

The Roadmap to Close the Gap for Vision - Summary Report

Taylor HR, Boudville A, Anjou M, McNeil R. *The Roadmap to Close the Gap for Vision.* Indigenous Eye Health Unit.

The need to support the coordination of patient care and assist patients to successfully navigate the referral pathways in eye care are two of the key recommendations in *The Roadmap to Close the Gap for Vision*. The Roadmap outlines 42 interlocking recommendations to eliminate unnecessary vision loss for Indigenous Australians. The recommendations in the Roadmap are designed as a comprehensive and inclusive package which emphasises the need for accountability and oversight. The Roadmap has been presented to Australian Governments with a view to implementing the recommendations as soon as possible.

Indigenous adults have six times more blindness than mainstream Australia, and 94% of this vision loss is preventable or treatable through glasses, cataract surgery, timely diabetic retinopathy treatment and the elimination of trachoma. Vision loss is currently the equal third leading cause of the gap for health in Indigenous Australians with trauma. It follows heart disease and diabetes, but is ahead of stroke and alcoholism. It is clear that the adequate provision of good quality eye services is a fundamental part of improving the health of Aboriginal and Torres Strait Islander peoples.



Ms Ann Clark, Royal Victorian Eye and Ear Hospital CEO, Professor Taylor, Mr Rod Jackson, Victorian Aboriginal Health Service CEO, the Hon Warren Snowdon MP, the Minister for Indigenous Health, and Ms Glenda Thorpe, a Board member at VAHS, at the launch of the report *Projected Needs for Eye Care Services for Indigenous Australians*, held at VAHS.

The Roadmap to Close the Gap for Vision – Outline of Recommendations

Primary Eye Care as part of Comprehensive Primary Health Care

To improve identification and referral for eye care from primary health care.

Initiatives include: education programs for clinic staff; changes in Medicare health assessment items; Medicare funding for retinal photography; update practice software.

Indigenous Access to Eye Health Services

To enhance access to Aboriginal and mainstream eye care services.

Initiatives include: coordination with Aboriginal Health Services (AHS); cultural competence in mainstream services; improved subsidised spectacle scheme; increased cataract surgery; annual eye exam for patients with diabetes.

Coordination

To improve coordination of eye care services and the successful navigation of referral pathway.

Initiatives include: establish local coordination mechanisms; service directories and referral protocols; adequate staffing; introduce case management; encourage local partnerships.

Eye Health Workforce

To increase availability and improve distribution of eye health workforce.

Initiatives include: population-based service planning funds; improved visiting specialist services; including Visiting Optometrists Scheme (VOS) in urban areas; bulk billing for Medical Specialist Outreach Assistance Program (MSOAP) services; training in Indigenous health setting.

Elimination of Trachoma

To eliminate blinding Trachoma from Australia.

Initiatives include: complete mapping of trachoma; implement the SAFE (surgery, antibiotics, facial cleanliness, environmental change) strategy fully; monitor and evaluate.

Monitoring and Evaluation

To capture and report information about progress and improvement of services and outcomes in Indigenous eye health.

Initiatives include: manage local, state and national performance; collate existing data sources; create national benchmarks; develop and apply measures of service quality and self-audit tools; ensure program evaluation.

Governance

To ensure that there is national delivery of 'Close the Gap for Vision'.

Initiatives include: ensure local community engagement; links with Medicare Locals, Local Hospital Networks; AHS, local, state and national oversight to ensure comprehensive program delivery.

Health Promotion and Awareness

To improve awareness and knowledge of eye health in communities to support utilisation of eye care services and self-empowerment to seek care for vision/ eye problems.

Initiatives include: ensure eye health promotion and social marketing of services for eye care.

Health Financing

To ensure adequate funding is allocated to 'Close the Gap for Vision'.

Initiatives include: continue trachoma funding; \$68.5 million over five years of capped funding; program phased in over four years.

Key findings in the Roadmap

Community involvement and strong links between the patient, primary health care and the eye care providers are essential to provide the best eye care for patients.

The Roadmap to Close the Gap for Vision identifies the importance of local control of primary health care in the management of eye care presentations and the need to strengthen and support this. Specialist eye care, through optometry and ophthalmology, must be readily and locally accessible. This includes regular and predictable services, the cost certain supply of spectacles and consultations and regionally available public cataract surgery.

There are key tasks that need to be provided to improve the coordination of eye care services and case manage patients successfully along the eye treatment pathway. Follow-up and support for patients along the pathway of care is critical as too often people drop out of the system. Where there is community involvement and strong links with the patients and the health system, then there is less chance of this occurring.

One of the key issues is the provision of adequate resources to be able to meet local, population-based needs. The report also recommends an accountability framework for monitoring and evaluation and a structure for national, jurisdictional and regional governance.

Building on current and past successes

In many areas and regions of Australia, successful eye care programs have been developed that provide high quality eye care for Indigenous Australians. The Roadmap project has been informed by these successes and aims to build on and enhance these existing services and use their successful solutions to frame recommendations that can be used by other services in other areas. The policy recommendations are designed to support local and regional control of services within a jurisdictional and national framework. The Roadmap recommendations, when implemented, should provide additional support to existing programs and enable the establishment or strengthening of other services to achieve the successful delivery of eye care to all Indigenous Australians.

The Cost to Close the Gap for Vision

Hsueh YS, Brando A, Dunt D, Anjou M, Taylor H. *The Cost to Close the Gap for Vision.* Indigenous Eye Health Unit.

The Roadmap is supported by the associated costing report, which outlines the costs involved to 'Close the Gap for Vision'.

The costing study employed a comprehensive model that captures all direct medical and non-medical costs (such as support for travel and accommodation to the patients and support for coordination of the workforce within the eye health care system) to provide eye care services to all Indigenous Australians, focusing on three major eye health problems, namely cataract, refractive error and diabetic retinopathy.

Support

Work on the Roadmap was also supported by Mr Jeremy Curtin and Mr Garang Dut. Jeremy has been working part-time reviewing the current education material available for Primary Care staff about the management of eye conditions.

Garang worked over the summer to compare the provision of eye care to Indigenous people in a number of other countries.

Consultation

The IEHU acknowledges the wide range of community members, colleagues and stakeholders who contributed to the development of the Roadmap. The consultation included three workshops, extensive field consultations and semi-structured interviews at 24 sites across five states and the Northern Territory.

Advocacy

For full implementation of the Roadmap recommendations, support from all governments is needed to fund an additional \$68.25 million over the next five years. The Roadmap concludes that with only this doubling of funding for Indigenous eye health, cataract surgery can increase seven times, diabetic examinations can increase five times and the use of glasses can increase 2.5 times. Having presented the Roadmap to government, we continue with advocacy and technical support to have these recommendations adopted and implemented. We have the evidence, strategy and capacity to eliminate unnecessary vision loss for Indigenous Australians – it is now time to 'Close the Gap for Vision'.



Professor Hugh Taylor screening for trachoma, assisted by Melbourne football player Liam Jurrah.

ADVISORY BOARD/COMMITTEE

Professor Terry Nolan (Chair)

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Professor Michael Wooldridge

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The Aspen Foundation

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Mr Peter Anastasiou

Mr Rob Bowen

Dr Vera Bowen

Mr Noel Andresen

Dr Mark & Alla Medownick



Above: Melbourne Football Club players Brent Maloney, Liam Jurrah and Colin Garland at the Trachoma Elimination Footy Clinic fun day held at the Katherine racetrack in July.

Left: The Melbourne Football Club mascot with some of the local children at the Katherine football clinic.

Right: Community members, Victorian Aboriginal Health Service staff and IEHU researchers after a Focus Group meeting.



Katherine West Health Board team members with IEHU supporters. L-R: Mathew Moylan, Rob Bowen, David Lines, Emma Baunach, Reece O'Brien and David Middleton.



Above: Participants discuss issues in one of three stakeholder workshops held in June to support the Barriers project.

Left: On the set of 'Yambas Playtime': Professor Hugh Taylor, Yamba, Harold Mitchell and Jacinta Castle.

MELBOURNE SCHOOL OF POPULATION HEALTH PUBLICATIONS REPORT 2011

A5 - TEXTBOOKS

Russell DB, Bradford D & **Fairley CK**. 2011. *Sexual Health Medicine*. Hawthorn East, Australia: IP Communications.

B1 - RESEARCH BOOK CHAPTERS

Davern MT, **West SA**, Bodenham S & **Wiseman JR**. 2011. Community Indicators in Action: Using Indicators as a Tool for Planning and Evaluating the Health and Wellbeing of a Community. In Sirgy MJ, Phillips R & Rahtz D (eds), *Community Quality-of-Life Indicators: Best Cases V*. New York, United States: Springer, pp. 319-338.

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Room RG. 2011. Addiction and personal responsibility as solutions to the contradictions of neoliberal consumerism. In Bell K, McNaughton D & Salmon A (eds), *Alcohol, Tobacco and Obesity: Morality, mortality and the new public health*. New York, United States: Routledge, pp. 47-58.

Sylvester D & **Bowman DM**. 2011. Navigating the Patent Landscapes for Nanotechnology: English Gardens or Tangled Grounds? In Hurst S (ed), *Biomedical Nanotechnology: Methods and Protocols*. United States: Humana Press, pp. 359-378.

Waters E, **Armstrong RL**, **Doyle JL**, **Pettman T**, **Hall BJ**, **Priest NC** & **De Silva - Sanigorski AM**. 2011. Evidence in Public Health. In Keleher H & Macdougall C (eds), *Understanding Health*. South Melbourne, Australia: Oxford University Press, pp. 95-104.

B2 - BOOK CHAPTERS OTHER

Berzins K, Welsh B, **Fairley CK** & Cook K. 2011. Genital Pain in Women. *Sexual Health Medicine*. Hawthorn East, Australia: IP Communications, pp. 270-285.

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Bradshaw CS. 2011. Vaginal Symptoms. *Sexual Health Medicine*. Hawthorn East, Australia: IP Communications, pp. 88-106.

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Landsbergis PA, Sinclair RR, Dobson M, Hammer LB, Jauregui M, **LaMontagne AD**, Olson R, Schnall PL, Stelman J & Warren N. 2011. Occupational health psychology. In Anna DH (ed), *The Occupational Environment: Its Evaluation, Control, and Management*. United States: AIHA Press, pp. 1086-1130.

Read T. 2011. Clinical Relevant Anatomy and Physiology. *Sexual Health Medicine*. Hawthorn East, Australia: IP Communications, pp. 31-41.

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Russell DB. 2011. Transgender Sexual Health. *Sexual Health Medicine*. Hawthorn East, Australia: IP Communications, pp. 357-366.



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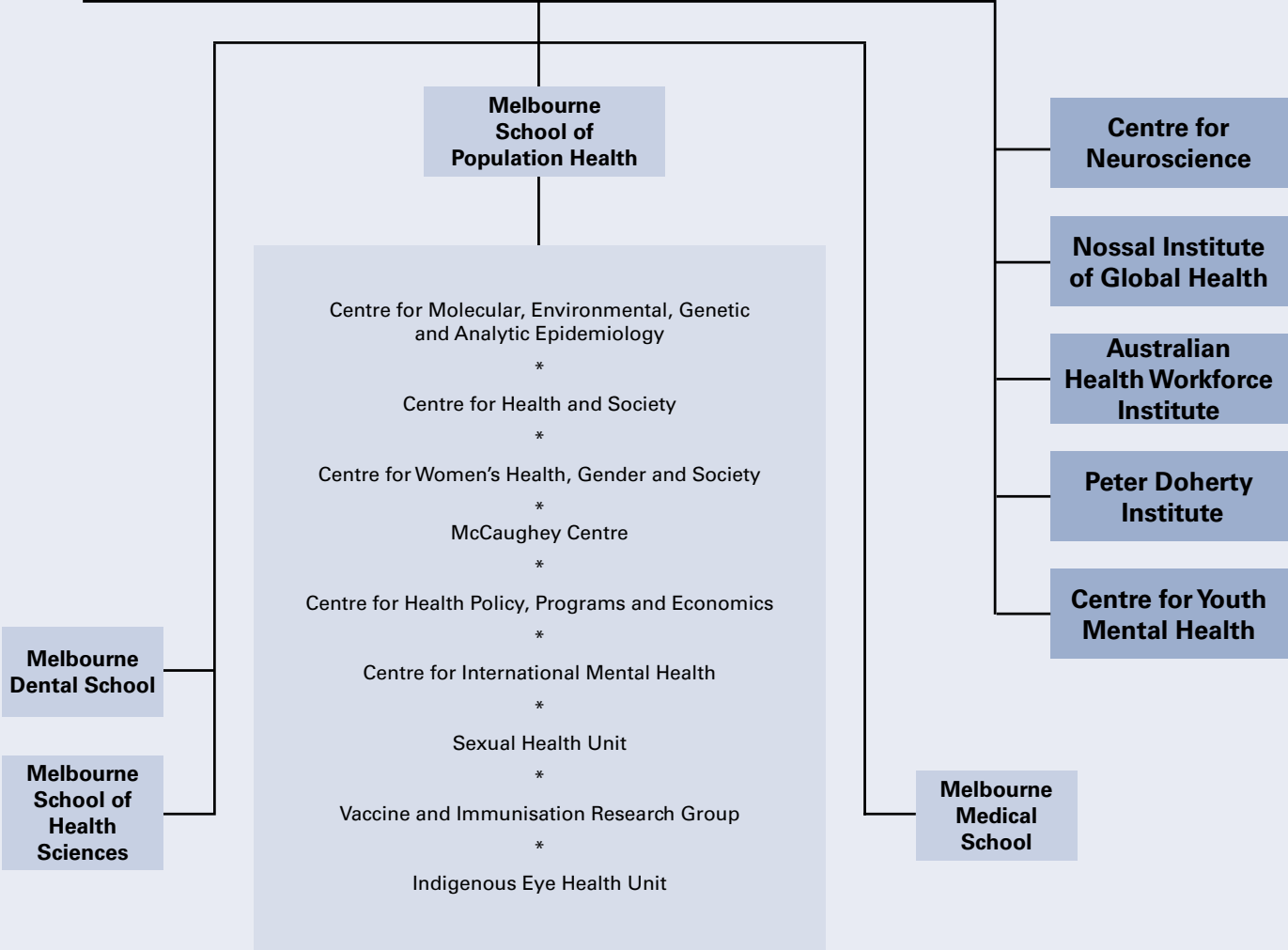
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