THE UNIVERSITY OF
MELBOURNE

MELBOURNE SCHOOL
OF
POPULATION HEALTH
ANNUAL REPORT
2010

FACULTY OF MEDICINE,
DENTISTRY AND HEALTH SCIENCES

CENTRE FOR MEGA EPIDEMIOLOGY
CENTRE FOR HEALTH POLICY, PROGRAMS & ECONOMICS
CENTRE FOR HEALTH & 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
# Melbourne School of Population Health

**Annual Report 2010**

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*Faculty of Medicine, Dentistry and Health Sciences*
MESSAGE FROM THE HEAD OF SCHOOL

Over this past year, the pressures on universities to deliver more with fewer resources have intensified. Yet while competition for research funding has never been fiercer, the Melbourne School of Population Health (MSPh) has continued to substantially increase its research income, both from prestigious Australian Research Council (ARC) and National Health and Medical Research Council (NHMRC) grants and public sector sources within Australia and overseas.

This unexpected growth in our research funding is not a one-off spike but a trend. Between 2004 and 2010, our total research income almost trebled, increasing from $9 million to $25.8 million. In 2010, $12.7 million (49%) of this total was procured from government and other public sector agencies. Most of their grants supported research into policy questions of urgent public health interest. To have agencies of the calibre of the National Institutes of Health in the United States and the Victorian Cancer Agency look to our School for answers validates the relevance and excellence of our work.

Independent reviews of three of our centres in 2010 further confirmed our strong contribution to preventative health. The five-yearly reviews of the Centre for Molecular, Environmental, Genetic and Analytic (MEGA) Epidemiology, the McCaughey Centre and the Centre for Women’s Health, Gender and Society (CWHGS) (detailed in each centre’s overview) were extremely complimentary. Among other aspects, the reviewers noted their overall success in grant procurement, research output and policy relevance.

We also did our own review within the School, prompted by the restructuring of Master of Public Health (MPH) and Master of Health Social Sciences (MHSS). Our dynamic, flexible, up-to-date programs respond to the needs of both students and their current and future employers and commence enrolments in 2011. The withdrawal of federal government funding from the consortium in which we had previously delivered a collaborative MPH led to the restructure. Our collaboration with other universities had produced a strong MPH program. However, this fresh start enables us to tailor both programs to maximise our School’s resources, including our most powerful asset – our talented staff. Early indications are that our students are very excited by the new programs and enrolments are on track to set a record high.

The departure and arrival of leaders within our School allows me to look back and to look ahead: to appreciate the contributions of senior staff leaving and anticipate the fresh perspectives of those arriving. I would like to pay tribute to Professor Ian Anderson, the former Director of the Centre for Health in Society (CHS) and Onemda. His appointment as founding head of Murrup Barak is the culmination of his pioneering work in establishing academic indigenous health within the University of Melbourne through Onemda. Professor Anderson’s respected standing as a scholar and leader in academia, his valuable contributions to knowledge transfer, and his nationally recognised role as an advisor to governments are just some of his many achievements. He is profiled in the CHS report.

Also on indigenous health, I congratulate Mr Shaun Ewen on being appointed the inaugural Associate Dean (Indigenous Development) within the Faculty of Medicine, Dentistry and Health Sciences (MDHS). It is a testament to his very important role in promoting
the development of indigenous students and his achievements within Onemda, the School and the Faculty.

New research territory will open with the arrival in 2011 of Professor Billie Giles-Corti, the new head of the McCaughey Centre. Her groundbreaking work at the University of Western Australia (UWA) on the impact of the built environment on health behaviours has made her a national leader on these issues. We anticipate that she will inform state government planning in areas such as transportation and urban design. I also appreciate the important contribution of Professor John Wiseman, the inaugural Director of the McCaughey Centre, who has been appointed a Professorial Fellow of the University’s new Melbourne Sustainable Society Institute. A profile of Professor Wiseman is featured in the McCaughey Centre’s report.

Thank you to all of our staff for their outstanding efforts this year, and thanks also to our many collaborating partners for their support.

**HIGHLIGHTS**

**Population Health relocation from 723 Swanston St**
Works have commenced on Level 3 and Level B1 of 207 Bouverie St (Building 379) which will see the CWhGS, the Centre for MEGA Epidemiology and South of Grattan Street IT (SGSIT) Cluster moving to these spaces. Works are scheduled to be completed by 4 March 2011 and staff will be relocated by April 2011.

**Centre Reviews**
- **The McCaughey Centre: VicHealth Centre for the Promotion of Mental Health and Community Wellbeing**: was reviewed by VicHealth with University of Melbourne participation (Professor Glenn Bowes (Associate Dean (External Affairs)), and was rated an outstanding success since its establishment. Major funding secured for the next six years from VicHealth ($3.15m) with significant central University contribution ($212,500). Following founding Director Professor John Wiseman’s retirement in November 2010, Professor Billie Giles-Corti (University of Western Australia) has been appointed as his successor from July 2011, with Associate Professor Tony LaMontagne acting as Director in the interim.
- **The Centre for MEGA Epidemiology** underwent its planned quinquennial review in November, with the review panel chaired by Professor James Best (Head, Melbourne Medical School), and including Professor Annette Dobson (University of Queensland), Professor David Roder (Cancer Council of South Australia and University of Adelaide), and Professor Peter Vishler (Queensland Institute of Medical Research). Review findings and feedback from the Panel was highly favorable.
- **The Centre for Women’s Health, Gender and Society** also underwent its planned quinquennial review in November, with the review panel chaired by Professor Ruth Fincher (Melbourne School of Land and Environment), and including Professor Dorothy Broom (Australian National University), Professor Martha Hickey (Royal Women’s Hospital and Dept of Obstetrics and Gynaecology), Professor Robert Power (Burnet Institute) and Professor Glenn Bowes (Associate Dean (External Affairs)). Review findings and recommendations are awaited, but preliminary feedback from the Panel was highly favorable.

**Staff Achievements and Awards**
- **Professor Terry Nolan**: Was awarded the 2010 Biennial National Immunisation Achievement Award from the Public Health Association of Australia, which honours and recognises outstanding service in the field of immunisation through research or practice.
- **Onemda Team, CHS**: Won the 2010 Norman Curry Award and has also been selected as the University’s nominee for the national Australian Learning and Teaching Council award for teaching excellence (Indigenous Education Category).
- **Mr Shaun Ewen, CHS**: Appointed as inaugural Associate Dean (Indigenous Development) within MDHS to ‘focus on reviewing pathways for Indigenous students to study health sciences and on implementing an indigenous staff employment strategy for the Faculty’.

The Head of the Melbourne School of Population Health, Professor Terry Nolan, with Professor Doe Mayer, Professor and Mary Pickford Chair of Film & Television Production, School of Cinematic Arts & Annenberg School for Communication, University of Southern California, and Professor John Wiseman, of the McCaughey Centre. Professor Mayer presented a seminar in June on ‘Is Hollywood good for your health? Entertainment education and prime time television’.
Professor Warwick Anderson, CHS Honorary Professorial Fellow: Won the 2009 New South Wales Premier’s General History Prize, the 2010 William H. Welch Medal and the 2010 Ludwik Fleck Award for “The Collectors of Lost Souls: Turning Kuru Scientists into White Men (Johns Hopkins University Press 2008)”. Professor Anderson commenced writing ‘Lost Souls’ while Director of CHS, and part of the book concerns Professor John Mathews (Professorial Fellow of MSPh).

Staff Promotions
- Dr Jane Hocking – Associate Professor, CWHGS.
- Dr Jodie McVernon – Associate Professor, Vaccine and Immunisation Research Group (ViRGo).
- Dr Therese Riley – Senior Lecturer, CHS.

Senior Staff Appointments
Professor Ian Anderson will be taking up a full-time role in Murup Barak the Melbourne Institute for Indigenous Development from February 2011 after 10 years within MSPh. Professor Anderson will continue to be involved in research projects based at Onemda and MSPh and will have an adjunct appointment to the MSPh. He will also continue to be connected to the Lowitja Institute and the Cooperative Research Centre (CRC) for Aboriginal Health Research.

Professor Billie Giles-Corti PhD, the Foundation Director of the Centre for the Built Environment and Health at UWA, 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 about $8 million.

Ms Rebecca Bond took up the position of School Manager in February 2010. Ms Bond joins us with a variety of work experiences. She has worked in the tertiary education sector in the research and student services areas as the Research Manager for the Faculty of Pharmacy (Monash University), Melbourne Graduate School of Education and Melbourne School of Engineering (MSE); and has worked as the Manager, Engineering Student Centre for the past three years. She has managed a graphic design business and in change and communications for Themis Research Project at the University of Melbourne. Ms Bond has a Master of Information Management and Systems by Research and is currently undertaking a Master of Management degree. At a time of substantial change within the University, we are very pleased to have someone with her expertise and University experience join our team. Ms Bond comes with the highest accolades from her former Dean and senior colleagues in MSE.

TEACHING AND LEARNING
- 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 the Nossal Institute for Global Health.
- The MHSocSc and Master of Science (Epidemiology) (MSc (Epi)) was first offered in 2010.

RESEARCH
The Excellence in Research (ERA) Initiative of the Government, managed by ARC, is being implemented with the first two clusters (Humanities and Creative Arts, and Physical, Chemical and Earth Sciences) being treated as trials with a more realistic timeline. Associate Professor Jane Pirkis is the ERA Cluster leader for Public Health and Health Services.

Highlights in research include:
- Launch of the Department of Human Services, Department of Health (North & West Metropolitan Region) and University of Melbourne Partnership.
- Department of Education and Early Childhood Development (DEECD) Research and Evaluation Partnership: DEECD has offered three Research and Evaluation Partnerships, all to the University of Melbourne. Other University partners are the Melbourne Graduate School of Education and Melbourne Institute of Applied and Social Economic Research. With approximately $3 million over three years and involving staff from across the School, the Research and Evaluation Partnerships will assist the DEECD deliver outcomes for early childhood, schooling and post-schooling transitions in children’s learning, development, health, safety and wellbeing and build capacity both within MSPh and DEECD.

2010 SCHOOL OF POPULATION HEALTH AWARDS FOR EXCELLENCE
Award for Research Excellence
Awards Criteria
- Impact of research on health outcomes.
- Impact of research on health policy or professional practice.
- Impact of research on knowledge (paradigm shift, opening up of a new approach, major discovery).
- Excellence in conceptualisation, development, execution and/or application of innovative and high quality methods.
- Impact on the field as judged by publication record and citation impact.
- Any other relevant external testament or recognition of significance.

Judges: Professor Hugh Taylor, Professor Jane Pirkis, Professor David Studdert and Professor David Dunt.
Award for Excellence in Doctoral Research
Dr John Burgess (Centre for MEGA Epidemiology)
Dr John Burgess is an exceptionally strong candidate for this award. His PhD examined the relationship between early life factors and asthma in middle-age, using data from the Tasmanian Longitudinal Health Study. He has already published six journal articles related to his PhD (five as first author), has had a seventh provisionally accepted and has an eighth under review. Most are in very high ranking journals in his field, and several are starting to be quite widely cited. Dr Burgess’s thesis received a very positive response from his examiners; one recommended that his PhD be awarded without further examination or amendment and the other asked for minor corrections only. Dr Burgess is exactly the kind of PhD candidate that MSPh is trying to attract, and his achievements should act as an encouragement to others. Dr Burgess well meets the criteria for this award. He has published extensively since the start of his PhD including in high impact journals for asthma and allergy. This has included an invited review in the Journal of Asthma. Both his articles and reviews have been well cited. His review is included in the 20 most read article in the Journal of Asthma. These are impressive achievements that contribute to the profile of MSPh.

Career Development/New Researcher
Dr Lisa Gibbs (McCaughey Centre)
Dr Lisa Gibbs readily meets all of the criteria for this award. Since completing her PhD in 2004, she has become recognised as a stellar performer who is integral to MSPh’s research profile. She has a passion for her research area – child public health – and has had a key role in a number of projects which have made a substantial difference at a community level and have contributed to the international evidence base in the area. Often these projects have involved the evaluation of complex interventions that involve a number of stakeholders, and Dr Gibbs has managed to apply rigorous methods in a consultative fashion. Dr Gibbs has an exceptionally strong track record and is clearly poised to develop a very strong national and international reputation. She sets a great example for those who work with her. Her recent input into the School’s DEECD tender was an important contributor to its success. Dr Gibbs easily meets the criteria for this award. Her research has involved health promotion programs and their evaluation in local settings that is likely to have an impact on health outcomes as well as contributing to the development of health policy and professional practice (including internationally). Her methods appear innovative. She has quickly achieved a good track record for publications, conference presentations including by invitation. She has been successful in attracting a large number of competitive research grants. During the last year, she has successfully led a large research team during of Professor Liz Water’s absence. These are all impressive achievements that contribute to the profile of MSPh.

Research Higher Degree (RHD) Supervision

**Awards Criteria**
- The extent and range of supervision activities.
- The outcomes for students.
- Support for the development of students as individuals.
- Support for students’ career development.

**MANAGEMENT AND GOVERNANCE**
The MSPH committee structure and composition was significantly altered in 2010 (see new committee structure graphic, right).

**School Advisory Committee**, membership is currently being finalised.

**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.

**EHS 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.
Melbourne School of Population Health Committee Structure
(Agreed by School Executive Committee 14/07/2010)

**ADVISORY & INFORMATION**

The following Committees provide advice and information to the Head of School:

- Staff & Student Liaison Committee
- Convocation
- School Advisory Committee
- Centre & Unit Advisory Committees
  - Centre for Health and Society
  - Centre for Health Policy, Programs and Economics
  - Centre for International Mental Health
  - Centre for MEGAEpidemiology
  - Indigenous Eye Health Unit
  - Centre for Women’s Health, Gender and Society
  - McCaughey Centre
- South of Grattan Street IT Cluster Committee

**GOVERNANCE**

**EXECUTIVE COMMITTEE**

* Incorporates strategy and resources

**MARKETING, ADVANCEMENT & KNOWLEDGE EXCHANGE COMMITTEE**

**RESEARCH COMMITTEE**

**TEACHING & LEARNING COMMITTEE**

**CAREER DEVELOPMENT COMMITTEE**

**ENVIRONMENTAL HEALTH & SAFETY COMMITTEE**

**FINANCE COMMITTEE**

**HIGH DEGREE BY RESEARCH COMMITTEE**

**NEW GENERATION UNDERGRADUATE DEGREES COMMITTEE**

**SCHOOL GRADUATE PROGRAMS COMMITTEE**

**GRADUATE HEALTH PROFESSIONAL DEGREES COMMITTEE**
A contribution to the development of excellent supervision practices within the MSPH, the MDHS or the wider University of Melbourne.

Judges: Professor Nick Crofts, Professor John Mathews, Professor David Studdert and Professor David Dunt.

Award for Excellence in Research Higher Degree (RHD) Supervision

Associate Professor Marilys Guillemin (CHS)

Associate Professor Marilys Guillemin has shown evidence of supervision practices of the highest quality and a sustained record of outstanding supervision. She is to be particularly commended for her leadership of research in CHS, and for the academic and personal support she has provided for the graduate students who have benefitted from her supervision and mentoring. Associate Professor Guillemin’s extent and range of her supervision activities is exemplary with eight currently enrolled and 12 completed PhD students. Her approach is interdisciplinary in focus. The outcomes for students have been excellent in terms of examiners’ comments on their theses and later in terms of their publication of academic papers as well as take-up of academic careers. She has shown support for the development of her students as individuals, as judged by student testimonials as well as support for their later career development. Her contribution to the development of excellent supervision practices within the MSPH, MDHS and the wider University is best appreciated from her leadership role within CHS and its large number of RHD students. Associate Professor Guillemin has brought intense commitment and passion to her role as teacher, mentor and supervisor of postgraduate students, and has clearly communicated this to her numerous students, whose achievements she is rightly proud of.

Award for Excellence in Research Higher Degree Supervision

Associate Professor Jane Fisher (Centre for Women’s Health, Gender and Society)

Associate Professor Jane Fisher has shown evidence of supervision practices of the highest quality and a sustained record of outstanding supervision. As coordinator of international programs in the CWHGS, she is to be commended most particularly for her mentorship and supervision of postgraduate students from developing countries, whose field-work has often had to be completed under very difficult social circumstances. Associate Professor Fisher similarly has clearly fulfilled all criteria for this award. She has a wide experience of supervising RHD students, including international students for whom English is not their first language. Almost all her students have attracted postgraduate research scholarships. Her students have published and attended international conferences. She initiated a women’s mental health peer review group which meets weekly and is attended by both staff and students at CWHGS. Her students have gone on to take up academic careers. She has played a very important role within MSPH as Chair of its RHD Committee, which has introduced a number of new and valuable procedures relating to RHD students. Associate Professor Fisher has clearly made a profound difference to the careers and lives of her numerous postgraduate students, with whom she has clearly forged long-term and ongoing relationships. Highly useful and relevant research topics, carried through to outstanding conclusions.

Award for Knowledge Transfer

Awards Criteria

• Impact of knowledge transfer on health outcomes.
• Impact of knowledge transfer on health policy or professional practice.
• Impact of knowledge transfer on knowledge base (paradigm shift, opening up of a new approach, major discovery).
• Excellence in conceptualisation, development, execution and/or application of innovative and high quality knowledge transfer methods.
• Any other relevant external testament or recognition of significance.

Judges: Mr Jerry De La Harpe, Associate Professor Tony LaMontagne, Professor David Studdert and Professor David Dunt.

Award for Excellence in Knowledge Transfer Achievement

Professor Ian Anderson, Mr Shaun Ewen, Ms Odette Mazel, Ms Erin Nicholls, Ms Caitlin Ryan, Ms Laura Thompson and the Leaders in Indigenous Education (LIME) Network (CHS)

The work of the LIME Network and its associated initiatives has been clearly delineated and described in this application, as have the significant and measurable impacts on both health outcomes and health policy, in improving the efficacy of teaching and learning of Indigenous health in Australian medical education. The breadth and thrust of the activities of the LIME Network, the implementation of the Indigenous Health Curriculum Framework (IHCF) and the opportunities offered by the Critical Reflection Tool, seem to have had an integrated and growing impact on improving Indigenous health outcomes. Indeed, this seems to be best illustrated by the exponential growth in the LIME Network membership from 35 to 400 members over a two-year period. The LIME Network is engaging with a wide array of key professional groups and stakeholders and, in doing so, making a real difference to health policy and practices that affect the Indigenous population. The translational methodologies used are both convincing and effective. It has had demonstrable national and international impacts on policy and practice in the present, and has the potential to deliver on health impacts in the future – in particular in narrowing the disparities in health status between Indigenous and non-Indigenous Australians (i.e., closing the gap). The impact of the LIME Network is well recognised and really speaks for itself. It has made a very important contribution to tertiary Indigenous health education in Australia. Its impacts cover all relevant criteria (health outcomes, health policy and professional practice, knowledge base and so on). The LIME Project team has made a wonderful contribution to improving the quality of teaching and learning of Indigenous health in Australasia.

Award for Excellence in Knowledge Transfer Achievement

Professor Elizabeth Waters, Dr Rebecca Armstrong, Ms Jodie Doyle, Ms Belinda Hall and Ms Rachel Clark (McCaughey Centre)
They have demonstrated genuine translational capabilities with the conduct of the “KT4LG (Knowledge Translation for Local Government) trial” and evidenced strong and abiding international links through which they have delivered a range of new health initiatives. Collectively, this is an impressive range of structured international relationships, where the applicants seem to be making a difference to health policy in both America and Europe. This is further evidenced by the invitation from the World Health Organisation (WHO) to lead its “Mainstreaming Health Promotion” project. Overall, the application highlights a number of local and international relationships that, prima facie, have strong translational relevance to health policy and outcomes. Moreover, they appear to be making a difference to the methodology and approaches adopted in health reviews and the presentation of public health evidence. Again the contribution of this Cochrane Collaboration Public Health Group is extremely well recognised both in terms of published reviews, published protocols as well as protocols currently registered. Media monitoring of the Flexible Working Conditions review in the first month after it publication showed there were 200 stories both in Australia and internationally. The publication record is impressive. The extension of Cochrane methodology to public health is a major achievement. Professor Liz Waters and team have made a compelling case for the impacts of their knowledge transfer efforts in a number of related areas. The Cochrane Collaboration’s Public Health Review group is leading the field in terms of the integration of health equity perspectives into the systematic review process. Finally, the request from WHO to conduct a project on mainstreaming health promotion constitutes further evidence of their impact on policy and practice internationally.

**Award for Excellence in Academic Administration**

**Awards Criteria**
- Excellence in conceptualisation, development, execution and application of innovative and high quality methods.
- A record of excellent professional performance within the School.
- Demonstrated potential for further career development.
- Demonstrated leadership potential.
- The ability to be a good ambassador for the School.
- Any other relevant external testament or recognition of significance.

**Judges:** Ms Rebecca Bond, Dr Richard Frampton, Professor David Studdert and Professor David Dunt.

**Award for Excellence in Academic Administration**

**Ms Nancy Palamara (School Executive)**
Ms Nancy Palamara demonstrates the use of high quality methods as part of her work for the School as well as great potential for future leadership. There are clear examples and testaments to her abilities in being an excellent ambassador for the school and her leadership potential is obvious. Ms Palamara is a quite remarkable School Finance Manager. Ms Palamara fitted in immediately, got her head around our finances and quickly gained the trust of all. MSPH’s finances are very complicated to say the least. The job requires close attention to detail, including follow-up in order to address errors arising from a number of sources (often external).

**Award for Excellence in Academic Administration**

**Mr Brad Morgan (McCaughey Centre)**
Mr Brad Morgan’s enthusiasm and dedication comes through, as does his commitment to his work and the McCaughey Centre. Mr Morgan has had three important roles within MSPH as a Centre Manager. His recent role in developing the MSPH's use of the Travel Portal is notable. Mr Morgan has contributed to the efficient running of both the McCaughey Centre and the School as a whole. With the recent VicHealth review of the McCaughey Centre, Mr Morgan has worked over and above what would be expected to model the future financial arrangements for the Centre. In relation to the School, Mr Morgan has worked collaboratively with the School Managers Group and his work on Electronic Document Management and the Travel Portal in particular has had both School, MDHS and University wide impact (the new ability for staff to attach files to purchasing card systems records is a result of the School's work in raising issues which Mr Morgan has been an integral part of). In relation to the Travel Portal, Mr Morgan is running School wide training sessions for staff and has been helping individual staff (not just within the Centre or MSPH) with managing this new process, has been responsible for raising issues with the Travel Portal team and his attention to detail has been invaluable in formulating new processes for the School to ensure our compliance for this area. Mr Morgan has demonstrated his leadership skills at many levels.

**Award for Excellence in Academic Administration**

**Ms Odette Mazel (CHS)**
Ms Odette Mazel has a role in a critical program and has demonstrated clearly a high level of innovation in her work and a very professional approach in a demanding area. Ms Mazel certainly meets the criteria in her conceptualisation, development, execution and application of innovative and high quality methods; the outcomes for the discipline area and work of LIME within Onemda demonstrate this. Ms Mazel clearly demonstrates potential for career development and is actively pursuing these options already. She is a woman who seems to know where she wants to head and how she can get there. Ms Mazel is seeking out leadership development and manages project teams that have had successful outcomes. Ms Mazel is great ambassador for MSPH. She has made an undoubtedly important contribution, which is recognised with this award.
**LEARNING AND TEACHING ENROLMENTS 2005 – 2010**

For 2010 there were 239 continuing students within the MSPH postgraduate coursework programs and 67 research higher degree students.

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**PGDIP**

| G Dip SocHlth   | 12   | 10   | 8    | 7    | 1.74 | 7    | 2.74 | 5    | 1.7  | 2    | 0.7  |
| PG Dip Bio      | 17   | 25   | 23   | 25   | 6.5  | 22   | 7.37 | 15   | 4    | 14   | 3.4  |
| *PG Dip WH*     | 6    | 3    | 3    | 1    | .25  | 3    | 1.74 | 1    | 0.5  | -    | -    |

**PGCERT**

| PG Cert Bio     | 7    | 8    | 6    | 6    | 1    | 3    | 1    | 2    | 0.3  | 1    | 0.1  |
| PG Cert PubHlth(SexHlth) | 22   | 26   | 14   | 9    | 2.25 | 17   | 4.5  | 16   | 3.9  | 13   | 3.6  |

**RESEARCH AND RESEARCH TRAINING**

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*Discontinued*
## SUMMARY REPORT

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## PHD COMPLETIONS

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<th>Name</th>
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<tbody>
<tr>
<td>Garimella, Surekha</td>
<td>Bennett E, Manderson L, Bandyopadhyay M, Hocking J</td>
<td>Agency and contingency: working women in New Delhi</td>
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<tr>
<td>Harris, Anna</td>
<td>Guillemain M, Baer H, Elliot S, Wenzel J</td>
<td>Overseas doctors in Australian hospitals: An ethnographic study of how degrees of difference are negotiated in medical practice</td>
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<td>Tay-Teo, Kiusiang</td>
<td>Pirkis J, Carter R, Doran C, Hall W</td>
<td>Cannabis prevention in Australia: Evidence from economic evaluations of three preventive interventions</td>
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<td>McDougall, Rosalind Janet</td>
<td>Gillam L, Alexandra A</td>
<td>The ethical challenges associated with medical internship and residency</td>
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<td>Cooklin, Amanda Ruth</td>
<td>Fisher J, Rowe H</td>
<td>Women’s employment in pregnancy and following birth: effect on psychological well-being</td>
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<tr>
<td>Hood, Sonja Gail</td>
<td>Dunt D, Pirkis J, Phillips S</td>
<td>From evidence to practice: improving the pharmacological management of heart failure</td>
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<td>Bennett, Noleen Joy</td>
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<td>The development and evaluation of the Victorian Hospital Acquired Infection Surveillance Program (VICTNISS) for “smaller” public acute care hospitals.</td>
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<td>Bruce, Eunice Adjoa Kwansmah</td>
<td>Fairley C, Keogh L</td>
<td>Studies of female sex workers in Port Moresby, Papua New Guinea</td>
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<td>Kandane-Rathnayake, Rangi Kaushalya</td>
<td>Matheson M, Dharmage S, Walters E, Tang M</td>
<td>The association between serum cytokines and allergic diseases</td>
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<td>Bilardi, Jade</td>
<td>Fairley C, Chen M, Hocking J, Sanci L</td>
<td>The screening and control of Chlamydia</td>
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<td>Holton, Sara Nicole</td>
<td>Fisher J, Rowe H</td>
<td>To have or not to have? A study of Australian women’s childbearing decisions</td>
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## MPH (RES)

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<td>Rasekaba, Tshepo Mokuedi</td>
<td>Hsu-Hage B, Dunt D, Greco M</td>
<td>Chronic Disease Service Patients in the Northern Alliance Hospital Admission Risk Program - Chronic Disease Management</td>
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### RESEARCH INCOME

Research Income: 2010 Higher Education Research Data Collection (HERDC)

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**Total CRC** $323,869

**Total Contracts (Australian and International)** $6,557,217

**Total Australian Competitive Grants** $6,215,720

**Total Australian Government Grants** $12,649,551

**Total** $25,746,357
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<th>Responsible CI</th>
<th>Description</th>
<th>Grants Income</th>
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<tbody>
<tr>
<td><strong>ARC Linkage Grants</strong></td>
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<tr>
<td>Partners: Family Day Care Australia, Victorian Health Promotion Foundation, Windermere Child &amp; Family Services</td>
<td>Dr Elise Davis, Professor Elizabeth Waters, Helen Herman, Cathrine Mihalopoulos &amp; others</td>
<td>An exploratory cluster trial of a sustainable capacity building intervention to promote positive child mental health in Family Day Care.</td>
<td>$157,014 over 3 years</td>
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<td>Partners: Arabic Welfare, Dental Health Services Victoria 205, Moreland City Council, Moreland Community Health Service Inc, Pakistan Australia Association, Melbourne Inc, Victorian Arabic Social Services</td>
<td>Dr Lisa Gibbs, Professor Elizabeth Waters &amp; others</td>
<td>Teeth tales: A culturally competent community intervention for child oral health in low SES area of urban Melbourne.</td>
<td>$491,000 over 4 years</td>
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<td>Partners: Hume City Council, Municipal Association of Victoria, VicHealth, Victorian Department of Human Services, Yarra City Council</td>
<td>Professor Robin Room &amp; others</td>
<td>Understanding and reducing alcohol related harm among young adults in urban settings: Opportunities for intervention.</td>
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<td>Partners: Department of Justice, Office of the State Coroner</td>
<td>Professor David Studdert, Professor Jane Pirkis &amp; others</td>
<td>Learning from Preventable Deaths: A prospective evaluation of reforms to Coroners’ recommendation powers in Victoria.</td>
<td>$269,000 over 3 years</td>
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<td>Partners: Office of Indigenous Policy Coordination, Department of Families, Housing, Community Services and Indigenous Affairs, Woodside Energy Ltd, Rio Tinto Ltd, Santos Ltd, Marrnda Mia Central Negotiating Committee Pty Ltd</td>
<td>Professor Marcia Langton &amp; others</td>
<td>Poverty in the Midst of Plenty: Economic Empowerment, Wealth Creation and Institutional Reform for Sustainable Indigenous and Local Communities.</td>
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<td><strong>ARC Discovery Grant</strong></td>
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<td>Associate Professor Mariyls Guillemim, Ms Lynn Gillam, Professor Doreen Rosenthal, Dr Paul Stewart</td>
<td>Trust me – I’m a researcher: The role of trust in the human research enterprise.</td>
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<td>Associate Professor Margaret Kelaher</td>
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<td>Agreements as a mechanism for community participation in health policy: Understanding process and evaluating effectiveness.</td>
<td>$788,800 over 5 years</td>
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<td>Dr Rebecca Kippen</td>
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<td>Epidemics, mortality and longevity in Tasmania, 1838-1930.</td>
<td>$686,400 over 5 years</td>
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<td>Professor Tony Scott, Melbourne Institute (Adjunct Professor to MSPh)</td>
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<td>Incentives and performance in the health care system.</td>
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## NHMRC Strategic Awards, Urgent Research - H1N1 Influenza 09

<table>
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<th>Project Title</th>
<th>Funding Amount</th>
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<tr>
<td>Professor Anne Kavanagh, Associate Professor Tony LaMontagne, Dr Rebecca Bentley and others</td>
<td>H1N1-related Victorian school closures: quarantine compliance and impact of parents’ precarious employment.</td>
<td>$276,974</td>
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<td>Dr James McCav, Associate Professor Jodie McVernon &amp; others</td>
<td>Determining optimal strategies for use of antiviral agents in the 2009/10 A(H1N1) swi influenza epidemic in Australia.</td>
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<td>Professor John Mathews</td>
<td>Models for influenza virulence to explain changes over time &amp; place, including the differences between 1918-19 and 2009.</td>
<td>$80,250</td>
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<td>Professor Terry Nolan, Associate Professor Jodie McVernon &amp; others</td>
<td>Immunity to novel H1N1 influenza prior to and after immunisation with seasonal TIV in children aged 6 months to 9 years.</td>
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## NHMRC Program Grant

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<td>Professor Kit Fairley &amp; others</td>
<td>Sexually transmitted infections: Causes, consequences and intervention.</td>
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## NHMRC Enabling Grant

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<tr>
<td>Professor John Hopper</td>
<td>Australian Twin Registry.</td>
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## 2010 UoM Early Career Researcher Grant

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<td>Dr Jennifer Stone</td>
<td>Making mammographic density a clinically-useful predictor of breast cancer risk.</td>
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## Other grants

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<tr>
<td>Dr Adrian Lowe</td>
<td>A randomised trial to prevent the development of eczema and asthma in children.</td>
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<tr>
<td>Financial Markets Foundation for Children Research Grant.</td>
<td>Dr Adrian Lowe</td>
<td>A randomised trial to prevent the development of eczema and asthma in children.</td>
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<tr>
<td>AIATSIS Research Grants.</td>
<td>Dr Kyllie Cripps</td>
<td>Building and supporting community led partnerships initiatives responding to family violence in Indigenous communities in Victoria.</td>
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<tr>
<td>Sponsor</td>
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<td>Description</td>
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</tr>
<tr>
<td><strong>ARC Linkage Grants</strong></td>
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</tr>
<tr>
<td>Partners: Melbourne Citymission, VicHealth, Victorian Women with Disabilities Network</td>
<td>Professor Anne Kavanagh, Dr Rebecca Bentley, Associate Professor Tony LaMontagne, Dr Emma Baker, Dr Shelley Mallett and others</td>
<td>The importance of gender and socio-economic disadvantage for the mental health of people living with disabilities.</td>
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<tr>
<td>Partners: Hanover Welfare Services, Melbourne Citymission, VicHealth</td>
<td>Dr Rebecca Bentley, Dr Emma Baker, Dr Shelley Mallett, Associate Professor Tony LaMontagne, Professor Anne Kavanagh, Dr Deb Keys and others</td>
<td>New directions in health inequalities research: understanding the intersection between housing, employment and health in Australia.</td>
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<tr>
<td>Partners: Family Planning Victoria Inc, Melbourne, IVF Pty Ltd, Royal Women's Hospital, Victorian Department of Health</td>
<td>Associate Professor Jane Fisher, Dr Heather Rowe, Ms Sara Holton and others</td>
<td>Understanding fertility management in contemporary Australia.</td>
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<td>Partners: Australian Human Rights Commission, VicHealth</td>
<td>Dr Yin Paradies, Associate Professor Margaret Kelaher, Associate Professor Tony LaMontagne, Dr Marion Freer and others</td>
<td>Addressing race-based discrimination in Australia: A cost-benefit analysis.</td>
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<td>Partners: Australian Red Cross, Australian Rotary Health, Bayule 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</td>
<td>Professor Elizabeth Waters, Dr Lisa Gibbs and others</td>
<td>Bushfires, social connectedness and mental health.</td>
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<tr>
<td><strong>ARC Discovery Projects</strong></td>
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<tr>
<td>Professor John Hopper, Associate Professor Mark Jenkins, Dr Enes Makalic, Dr Daniel Schmidt</td>
<td>Information theoretic approaches to optimise genome wide association studies with application to continuous and discrete traits.</td>
<td>$345,000 over 3 years</td>
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<td>Dr Rebecca Kippen, Associate Professor Hamish Maxwell-Stewart, Dr Damminda Alahakoon, Dr James Bradley, Associate Professor Shyamali Dharmage, Mr Kris Inwood, Professor John Mathews, Mr Michael Shields</td>
<td>Convicts and Diggers: a demography of life courses, families and generations.</td>
<td>$443,000 over 3 years</td>
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<td>Professor Janet McCalman</td>
<td>Land and life: Aborigines, convicts and immigrants in Victoria, 1835-1985: an interdisciplinary history.</td>
<td>$510,000 over 3 years</td>
</tr>
<tr>
<td>Dr Jodie McVernon, Dr Kevin Korb, Ms Kathryn Glass, Dr James McCaw, Dr Emma McBryde</td>
<td>Development of an ‘ageing household’ model for assessing medium to long-term vaccine impact in populations.</td>
<td>$364,771 over 3 years</td>
</tr>
<tr>
<td>Professor Kevin Dunn, Heather MacDonald, Dr Yin Paradies, Dr Rae Dufty (administered by University of Western Sydney)</td>
<td>Ethnic discrimination in the private rental housing market.</td>
<td>$442,000 over 3 years</td>
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<tr>
<td><strong>NHMRC Capacity Building Grant</strong></td>
<td><strong>Associate Professor Tony LaMontagne</strong></td>
<td>Linking research, policy and health services to build a better evidence base for workplace public health.</td>
</tr>
<tr>
<td><strong>NHMRC Program Grant</strong></td>
<td>Professor Kerin O’Dea, Dr Kevin Rowley and others (administered by the University of South Australia)</td>
<td>Improving chronic disease outcomes for Indigenous Australians: Causes, Interventions, System Change.</td>
</tr>
<tr>
<td><strong>NHMRC International Collaborative Indigenous Health Research Partnership (Grant on Resilience)</strong></td>
<td>Mr Shaun Ewen and others (administered by the University of Western Australia)</td>
<td>Educating for equity: Exploring how health professional education can reduce disparities in chronic disease care and improve outcomes for Indigenous populations.</td>
</tr>
<tr>
<td></td>
<td>Professor Ian Anderson</td>
<td>Strengthening health literacy among Indigenous people living with cardiovascular disease, their families, and health care providers.</td>
</tr>
<tr>
<td><strong>NHMRC Training Fellowship</strong></td>
<td>Dr Naomi Priest</td>
<td>Reducing inequalities in Indigenous child health by combating racism and social exclusion.</td>
</tr>
<tr>
<td><strong>NHMRC Project Grant</strong></td>
<td>Dr Melanie Matheson, Professor John Hopper, Associate Professor Shyamali Dharmage, Dr James Dowty, Dr Adrian Lowe</td>
<td>A population-based family study of filagrin mutations and allergic disease risk in Australia.</td>
</tr>
<tr>
<td></td>
<td>Associate Professor Lyle Gurrin and others</td>
<td>Environmental risk factors for iron overload-related disease in a cohort study of hereditary haemochromatosis.</td>
</tr>
<tr>
<td></td>
<td>Associate Professor Jane Fisher, Dr Tuan Tran &amp; others</td>
<td>Does weekly iron supplementation increase iron uptake in pregnant women and improve maternal and infant health?</td>
</tr>
<tr>
<td></td>
<td>Associate Professor Mark Jenkins, Professor John Hopper, Dr James Dowty and others</td>
<td>New high-risk variants for colorectal cancer: the post-GWAS era.</td>
</tr>
<tr>
<td></td>
<td>Associate Professor Jane Fisher and others (administered by Murdoch Childrens Research Institute)</td>
<td>Comparison of health and development of young adults born with and without assisted conception.</td>
</tr>
<tr>
<td><strong>NHMRC Capacity Building Grant</strong></td>
<td><strong>Associate Professor Tony LaMontagne</strong></td>
<td>Linking research, policy and health services to build a better evidence base for workplace public health.</td>
</tr>
</tbody>
</table>
### Other Grants

<table>
<thead>
<tr>
<th>Grant</th>
<th>Principal Investigator(s)</th>
<th>Project Description</th>
<th>Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victorian Cancer Agency Translational Cancer Research Grant</td>
<td><strong>Associate Professor Mark Jenkins</strong></td>
<td>What do people in mutation-carrying families understand about bowel cancer gene testing, personal risk and prevention behaviors?</td>
<td>$452,505 over 3 years</td>
</tr>
<tr>
<td>Two VicHealth Innovation Grants</td>
<td><strong>Dr Naomi Priest</strong> and <strong>Dr Lisa Gibbs</strong></td>
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<tr>
<td>Victorian Cancer Agency Early Career Seed Funding</td>
<td><strong>Dr Jennifer Stone</strong></td>
<td>The genetic and environmental determinants of mammographic density, a potential clinical tool to predict breast cancer risk.</td>
<td>$110,000</td>
</tr>
<tr>
<td>Helen MacPherson Smith Trust Research Grant</td>
<td><strong>Professor John Wiseman</strong></td>
<td>Development of the CiV capacity building program</td>
<td>$50,000</td>
</tr>
<tr>
<td>beyondblue National Depression Initiative grant</td>
<td><strong>Associate Professor Jane Fisher</strong></td>
<td>New parent’s views about the prevention of postnatal depression and anxiety with a new internet resource.</td>
<td>$50,000</td>
</tr>
<tr>
<td>Dental Health Services Victoria Research and innovation Grant</td>
<td><strong>Dr Andrea Sanigorski</strong></td>
<td>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.</td>
<td>$32,500 over 2 years</td>
</tr>
<tr>
<td>Australian Research Alliance for Children and Youth Seed Funding</td>
<td><strong>Dr Lisa Gibbs</strong></td>
<td>Bushfire recovery – hearing children’s voices.</td>
<td>$15,000</td>
</tr>
<tr>
<td>VicHealth Research Project Grant</td>
<td><strong>Professor Anne Kavanagh</strong></td>
<td>Accessibility and price of Alcohol beverages and consumption – findings from VicLanes.</td>
<td>$13,506</td>
</tr>
<tr>
<td>Academy of Social Sciences Joint-Action Bilateral Research Program Grant</td>
<td><strong>Dr Richard Chenhall</strong></td>
<td>Support systems for alcohol related problems in Japan: Self-help groups and the medicalisation of alcoholism.</td>
<td>$7500</td>
</tr>
<tr>
<td>Faculty of Medicine, Dentistry and Health Sciences (MDHS) Equipment Grant</td>
<td><strong>Professor John Hopper</strong></td>
<td>Hitachi data systems storage and backup infrastructure.</td>
<td>$40,000</td>
</tr>
<tr>
<td>University of Melbourne Early Career Researcher Grant</td>
<td><strong>Dr Richard Chenhall</strong></td>
<td>Developing a response: Indigenous youth with co-occurring mental health and volatile solvent abuse problems.</td>
<td>$40,000</td>
</tr>
<tr>
<td>University of Melbourne Sustainable Research Excellence (SRE) Implementation Project Funding</td>
<td><strong>Professor Terry Nolan, Ms Rebecca Bond, Dr David Cookson and Dr Simon Kerr</strong></td>
<td>School executive: Fully funded research? Macro and micro funding cultures.</td>
<td>$100,000</td>
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</tbody>
</table>
## SCHOOL OF POPULATION HEALTH SEMINAR SERIES 2010

The School seminar series was well received throughout 2010. It provided opportunities for staff and visitors to showcase their research.

<table>
<thead>
<tr>
<th>Date</th>
<th>Speaker</th>
<th>Presentation</th>
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<tbody>
<tr>
<td>17 February</td>
<td><strong>Professor Hugh Taylor AC</strong>, Harold Mitchell Chair of Indigenous Eye Health, Melbourne School of Population Health, University of Melbourne</td>
<td>Indigenous eye health: Closing the gap for vision</td>
</tr>
<tr>
<td>3 March</td>
<td><strong>Dr Phyllis Lau</strong>, Research Fellow, NHMRC Centre for Clinical Research Excellence in Clinical Science in Diabetes, Department of Medicine, St Vincent’s Hospital &amp; Department of General Practice, University of Melbourne. Joint seminar with the CCRE in Clinical Science. in Diabetes</td>
<td>Culturally appropriate chronic disease care for urban indigenous Australians</td>
</tr>
<tr>
<td>17 March</td>
<td><strong>Dr Jeffrey Craig</strong>, RD Wright Research Fellow, Joint Group Leader, Developmental Epigenetics, Early Development and Disease, Murdoch Childrens Research Institute</td>
<td>The Perinatal/Postnatal Epigenetic Twins Study</td>
</tr>
<tr>
<td>31 March</td>
<td><strong>Professor Leon Flicker</strong>, Professor of Geriatric Medicine, Director, Western Australian Centre for Health &amp; Ageing (WACHA), University of Western Australia</td>
<td>Determinants of health in ageing</td>
</tr>
<tr>
<td>14 April</td>
<td><strong>Associate Professor Katie Allen</strong>, Group Leader – Gut and Liver Research Group, Infection, Immunity &amp; Environment, Murdoch Childrens Research Institute</td>
<td>To eat or not to eat: Food allergy and infant feeding guidelines</td>
</tr>
<tr>
<td>28 April</td>
<td><strong>Associate Professor Jane Freemantle</strong>, Principal Research Fellow, Centre for Health and Social Medicine, School of Population Health, University of Melbourne</td>
<td>Indigenous child health in Australia within an international context</td>
</tr>
<tr>
<td>12 May</td>
<td><strong>Professor Michael Abramson</strong>, Professor of Clinical Epidemiology &amp; Deputy Head Department of Epidemiology &amp; Preventive Medicine, Monash University</td>
<td>Spirometry and regular follow-up are not associated with improved health outcomes in General Practice patients</td>
</tr>
<tr>
<td>26 May</td>
<td><strong>Associate Professor Michael Coory</strong>, Clinical Epidemiologist, Cancer Council Victoria</td>
<td>Confounding and health services research: similarities and differences between Bristol Cancer Centre study in the UK and the public-private obstetrics study in Australia</td>
</tr>
<tr>
<td>9 June</td>
<td><strong>Professor Doe Mayor</strong>, Professor and Mary Pickford Chair of Film &amp; Television Production, School of Cinematic Arts &amp; Annenberg School for Communication, University of Southern California</td>
<td>Is Hollywood good for your health? Entertainment education and prime time television</td>
</tr>
<tr>
<td>23 June</td>
<td><strong>Professor Richard Steckel</strong>, SBS Distinguished Professor of Economics, Anthropology and History, Ohio State University, Columbus, Ohio</td>
<td>The contribution of cradle-to-grave datasets and historical studies for understanding population health</td>
</tr>
<tr>
<td>30 June</td>
<td><strong>Professor Ron Paterson</strong>, Professor of Health Law &amp; Policy, University of Auckland</td>
<td>The Good Doctor – how do we promote professional values?</td>
</tr>
<tr>
<td>14 July</td>
<td><strong>Associate Professor Jane Tommay</strong>, Director, Centre for Excellence in Rural Sexual Health (CERSH), School of Rural Health, University of Melbourne</td>
<td>Improving sexual health … by a country mile!</td>
</tr>
<tr>
<td>11 August</td>
<td><strong>Professor Jonathan Sterne</strong>, Professor of Medical Statistics, Department of Social Medicine, University of Bristol</td>
<td>The limits of causal inference — when should HIV-infected patients start antiretroviral therapy?</td>
</tr>
<tr>
<td>18 August</td>
<td><strong>Associate Professor Marcus Chen</strong>, Clinical Associate Professor, Melbourne School of Population Health, and Senior Specialist in Sexual Health and Medical Services Manager, Melbourne Sexual Health Centre</td>
<td>Clinical responses to sexually transmitted infections among men who have sex with men in Victoria</td>
</tr>
<tr>
<td>1 September</td>
<td><strong>Dr Michelle Kermode</strong>, Senior Research Fellow and Technical Director Northeast India Projects, Nossal Institute for Global Health, University of Melbourne. Joint seminar with the Nossal Institute for Global Health</td>
<td>Diverse pathways to sex work in Nagaland, India: implications for HIV prevention</td>
</tr>
<tr>
<td>15 September</td>
<td><strong>Professor Marcia Langton, Professor Robin Room, Dr Richard Chenhall</strong>, Centre for Health and Society, Melbourne School of Population Health</td>
<td>Alcohol control: drinkers and sellers in Indigenous and non-Indigenous Australia</td>
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<tr>
<td>Date</td>
<td>Event</td>
<td>Speaker/Title</td>
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<tr>
<td>6 October</td>
<td>Dr Nilakshi Waidyatillake, MBBS – Faculty of Medical Sciences, University of Sri Jayawardenepura, MSc in Community Medicine – Postgraduate Institute of Medicine, University of Colombo, MD in Community Medicine – University of Colombo</td>
<td>Nutritional status and other risk factors for learning outcomes in a group of year one school children in the district of Colombo</td>
</tr>
<tr>
<td>13 October</td>
<td>Associate Professor Tony LaMontagne, Principal Research Fellow, McCaughy Centre, and Dr Rebecca Bentley, Research Fellow, Centre for Women’s Health, Gender and Society, Melbourne School of Population Health</td>
<td>Psychosocial work environment and mental health</td>
</tr>
<tr>
<td>20 October</td>
<td>Associate Professor Philip Clarke, School of Population Health, University of Sydney</td>
<td>Why do rich people live longer? Findings from a longitudinal study in Sweden</td>
</tr>
<tr>
<td>27 October</td>
<td>Dr John Wright, Research Fellow, Department of Public Health and Policy, London School of Hygiene and Tropical Medicine</td>
<td>Melbourne School of Population Health Annual Awards Presentation &amp; Staff Convocation</td>
</tr>
<tr>
<td>3 November</td>
<td>Dr John Wright, Research Fellow, Department of Public Health and Policy, London School of Hygiene and Tropical Medicine</td>
<td>Decentralising provision or fragmenting delivery: Elevation to Foundation Trust status in the UK Labour Government’s re-regulation of the English National Health Service (NHS)</td>
</tr>
<tr>
<td>24 November</td>
<td>Professor Alan Zaslavsky, Professor of Health Care Policy (Statistics), Harvard Medical School</td>
<td>Geographic and institutional variation in consumer assessments of health care</td>
</tr>
<tr>
<td>15 December</td>
<td>Christmas Quiz</td>
<td></td>
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</tbody>
</table>
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-Clark 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, Professor of Health Services Research and 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, Department of Health and Ageing. Mr Booth’s current responsibilities include: Medicare Locals; GP SuperClinics; After Hours Services; divisions of General Practice and Rural Health. His 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 Mr Booth 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. He 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 Deebie, Emeritus Fellow of the Australian National University. With Dr Dick Scotton, Mr Deebie 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 Deebie 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, MSPH.

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.

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 (from Oct 2011) 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 Wendy’s 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.

Previous Chair (2008-2011), 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 Mary Bereux, Office of Women’s Policy, Manager, Policy Development, Department of Human Services.

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

**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 role 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**, Family Planning Victoria.

**Professor Anne Kavanagh**, Director of the CWHGS at the MSPH. Anne is an epidemiologist with expertise in social and cancer epidemiology. Professor Kavanagh 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**, Director, Mental Health & Wellbeing Unit, VicHealth.

**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. Monica’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 (EFP 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, Policy Coordination and Projects, Strategy and Policy Division, Department of Health.

**CENTRE FOR INTERNATIONAL MENTAL HEALTH**

**Dr Gerry Naughtin**, CEO, MIND Australia.

**Dr John Mahoney (Chair)**, UK National Counterpart to WHO Headquarters, Geneva.

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


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

**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 Helen Szoke**, CEO, Victorian Equal Opportunity and Human Rights Commission.

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

**Ms Lyn Walker**, Director, Mental Health and Wellbeing Unit, Victorian Health Promotion Foundation.

**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.

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 Pattisson, 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, Oennda VicHealth Koori Health Unit, MSPh, University of Melbourne.

Professor Glenn Bowes.

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 Nappaljarri 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 Mpaat Arts and Board member of the Australian Centre for the Contemporary Arts.

Professor Hugh R Taylor AC, Professor 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 WAust. PhD McG. FRACP FAFPHM

Deputy Head of School, Professor and Federation Fellow
David Michael Studdert, BA Melb LLB Melb MPH Harv. ScD Harv.

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Senior Finance Officer
Chantelle Medenilla

South of Grattan Street IT Cluster Manager
Graham Sadler

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Glynn Matthews
Dylan McCullogh
Danielle Pullin, BA Melb

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Academic Programs Officers
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Personal Assistant to Head of School
Nora L, Dip Exec Sec Studies HK Polytechnic

PUBLIC HEALTH
Head of Department and Professor
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Deputy Head of Department, Professor and Federation Fellow
David Michael Studdert, BA Melb LLB Melb MPH Harv. ScD Harv.

Honorary Appointments
Professorial Fellows
Warwick Hugh Anderson, MBBS BMedSc MA MD Melb. PhD Penn.
Ross Bailie, MBCHB MPhil MD(CommHlt) CapeTown MRNZCP FCCH(ISA) FAFPHM
Stephen Bird, BSc PhD Lec. PGCE Edu Sussex FIOB FBASES
Ron Borland, BSc Monash MSc PhD Melb. MAPS
John Nicholas Crofts, MBBS Melb. MPH Monash FAFPHM
Graham Giles, BSc MSc Mich. PhD Tas.
Lenore Hilda Manderson, BA(AisanSt) ANU PhD ANU FASSA
John Mathews, AM, BSc MBBS MD PhD Melb. Hon DSC NT FRACP FRCPA FAFPHM
Mark Petticrew, BA Queen’s (Belfast) PhD Queen’s (Belfast)
Robert Power, BSc Lond. Lond. PGCE Lond.
Doreen Anne Rosenthal AO, BA PhD Melb. FASSA
Haydn Walters, BA BM BCh MA Oxf. MRCP Lond. DM Oxf. FRCP Lond. FRACP FCCP

Principal Fellows with the title Associate Professor
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Stephanie Brown, BA Melb. PhD Monash
Donald Alexander Campbell, MBBS Monash MMedSciClin Epi
Newcastle MD Monash FRACP
Christopher John Clements, MBBS Lond. MSc Manchester DipChildHth RCP Lond. DipObst Auck. FAFPHM MFPH MCCM LRCP MRCS
Alex Cohen, BA NY MA NY PhD UCLA
Joan Cunningham, BA MLiLab Arts PhD Harv.
Dorota Gertig, MBBS Monash MHSicClinEpi UBC ScD(Epi) Harv. FAFPHM
William Hart, MBBS Monash MBScPrelin GDipCH La Trobe
Fumi Horiguchi, BMed TokyoWilMed-College PhD Keio
Damien John Jolley, BSc Melb. MSc Lond. MSc La Trobe DipEd SCVic.
Heath Kelly, BSc MBBS MPH WAust. FAFPHM
Collin MacDougal, BA Flinders MA Flinders PhD Adel.
Laurence Moore, BSc Bristol MSc LSHTM Lond. PhD Bristol
Jan Nicholson, BSc Otago BSc VU Wellington MSc Canterbury NZ PhD Otd.
Jong-ik Park, MD Seoul MPsy Seoul DR Seoul Vikram Patel, MBBS Born. MSc Oxf. MRCpsych RCP (UK) Lond.
Kelly-Anne Phillips, MBBS Monash MD Monash FRACP
Priscilla Pyett, BA Monash PhD Deakin
Yolanda Wadsworth, BA Monash PhD Monash

Clinical Associate Professors
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Prem Kumar Chopra, MBBS Melb. MSc Wellongong MPsy Melb. MD Melb. MRACMA FRANZCP
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Wendy Holmes, MBBS MSc Lond.
Krishna Philip Hort, MBBS Syd. DRCOG Lond.DTCH Liverpool MCH NSW FAFPHM
Raju Lakshmana, MBBS JIPMER MD.Psy NIMHANS FRANZCP FRANZCP
Rosemary Ann Lester, MBBS Melb. MPH Monash MS(Epid) UCLA FAFPHM
CENTRE FOR HEALTH POLICY, PROGRAMS AND ECONOMICS

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Founding Director and Professor
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Professor and Federation Fellow
David Studdert, BA Melb. LLB Melb. MPH Han. ScD Hanv.

Associate Professor
Margaret Kalaher, BSc(Psych) NSW PhD NSWSenior

Senior Lecturers
*Steven Crowley, BAppSc Curtin MSc York MBA Monash GDipDietit Deakin
*Ya-seng (Arthur) Hsueh, BPM Taiwan MHSA Michigan MAE Michigan PhD Michigan

Lecturer
*Helen Jordan, BSc Melb. GDipEd Melb. GDipEpi&Bio Melb, PhD Uni Tasmania.

Senior Research Fellows
*Mari Bismark, MBchB Otago LLB Vic MBHL Otago
Diana Bovman, BSc Monash LLB Monash PhD Monash
*Andrew Dalton, BSc Monash MSc Monash DipEd Monash GDipHEcEval Monash
*Colleen Doyle, BA, Adel. PhD Adel. Matthew Spittal, BSc VUWPhD VUW

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*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 Flescher, BPsych VU/MPsych (Clin) RMIT
*Maria Rtanou, BAppSc Deakin DClinPsych Deakin
*Tenaha Greco, BHSc Hons Deakin
*Kylie King, BSc Melb. PGradDipPsych Melb. DPsych (Health) Deakin
Natascha Klocker, BA NSW BEnvSci NSWPhD NSW
*Fay Kohn, MA Deakin DED Melb. DipPT GDipTESOL Deakin
*Anna Machlin DPsych Melb. PGDipPsych Monash, BA UWA
*Amy Parry, BA USyd GradDip Public Health UQ
*Reem Ramadan, BSc Cardiff Uni DClinPsy Cardiff Uni
Lennart Reifels, DipPsych Free Uni Berlin, Germany
*Rosemary McKenzie, BA Monash MPH Curtin PGDiplHlthProm Curtin
*Hana Sabanovic, BSc Melb MIP Melb
*Theonie Tacticos, BBus Monash GDipCommDev RMIT
*Pauline Van Dort, BA Psych Swinburne
*Michele Williamson, BHlthSc La Trobe

NHMRC Postdoctoral Research Fellow
Cathy Segan, BA Melb. PhD La Trobe

Honorary Appointments
Adjunct Professor
Anthony Scott, BA Northumbria MSc York PhD Aberd.

Senior Fellows
Richard Clark, BSc ANU DHSc Deakin
Michelle Haby de Sosa, BAppSc S.Aust MApEpi ScyPhD Syd
Penelope Mitchell, BSc Psych NSW/MPH Syd, PhD Melb.

Fellows
Lyndal Bugeja, BArts Melb.
Alan Headay, BA OId DPsych Melb.
Sonja Hood, BA Melb. MSc Penn
Naiing Naing, MBBS Yangon Inst of Medicine, (Burma) DTM&H Mahidol Uni (Thailand), MPH Emory Uni (USA) DrPH Melb

Professional Staff
Centre Manager
*Tracey Mayhew

Executive Assistant & Centre Administrator
Joy Yeadon

Finance & Administrative Officer
*Min (Melody) Liu (until March) Professional Member of ACCA UK, BSc(Hons) in Applied Accounting, Oxford Brookes University, UK
*Angela Ye (until June)
*Amy Uhlhorn (from June)

CENTRE FOR WOMEN’S HEALTH, GENDER AND SOCIETY

Director of Centre and Chair of Women’s Health
Anne Kavanagh, MBBS Fiinders, PhD, ANU FAAPFHM

Deputy Director
Jane R W Fisher, BSc OId, PhD Melb. (to Feb 2011)
Jane Hocking, BappSc(MLS) RMIT MPH Melb. MHSc(PHP) LA Trobe

Lecturer and Coordinator Teaching & Learning
Louise Keogh, BSc W/Aust, MA Monash, PhD La Trobe

Lecturers
Heather Rowe, Bsc (hons) LaTrobe, PhD Melb.
Lisa Amir, MB BS Monash MMed Melb. PhD La Trobe IBCLC

Research Fellows
Rebecca Bentley, BBSc La Trobe PhD Melb.
Maggie Kirkman, BA Melb. PhD La Trobe
Lauren Knjacki, BA OId, MPH OId
Rosemary H Mann, PhD Melb. MDevStud Deakin, BLetters(Hnrs) Deakin
Sonia McCallum, BSc Adelaide, PhD Adelaide
Danielle Newton, BA Monash, PhD Deakin
Research Officers
Dyani Lewis, BAppSci RMIT, PhD Melb. MComn Deakin
Chantal Maloney
Kate Mason, BSc/BA Melb. MPH Melb.
Alaina Vaisey, BScPH George Washington University, MPH Melb.

Project Officers
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Eris Smyth, BA Dip Ed
Anna Wood

Research Assistants
Turi Berg, MPH
Min Li, B Elect & Inf Eng China, M Inf Tech Melb.

Administrative Staff
Centre Cluster Manager
Sandra Bell

Human Resources Officer
Sandra Heelan

PA to Director and Centre Administrator
Jennifer Kendall

Finance and Resources Officer
Vicki King

Administration Assistant
Claire Denby, ACEP Project

SEXUAL HEALTH UNIT

Director and Professor of Sexual Health
Christopher Kincaid Fairley, MB BS Melb. PhD Monash FRACP FAFPHM FACSHM

Senior Lecturer
Henrietta Williams, MB BS Lond. MPH Monash DRCOGUK DCH MRCGP
MFFP DipGUM FRACGP

Research Assistants
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Eve Urban, BAppSc La Trobe Nsg Med Monash
Jenny Walker, BAppSc RMIT/MPH Melb.
Sandra Walker, DPsych (Ithh Psych) Swinburne
Deborah de Guingand, RN RM BAppSc
Lenka Vodstrcil, BBiomedSc Melb. PhD Melb.

Honorary Appointments
Clinical Associate Professor
Marcus Chen, MB BS Melb MRCGP FACSHM PhD Syd
Darren Russell, MB BS DipVen Monash FRACP FACHSHM

Fellows
Catriona Bradshaw, MB BS Monash PhD DipVen Monash FACHSHM

SUMMARY REPORT

Carolyne Nickson, BA La Trobe GdipEpiBio Melb. PhD Melb.
Simone Poznanski, BSc (Hons) Melb. MPH Melb. PhD Melb.
Karen Wynter, BSc Stellenbosch MphilEducation Cambridge, PhD Cambridge

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Kate Mason, BSc/BA Melb. MPH Melb.
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Eris Smyth, BA Dip Ed
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Clinical Associate Professor
Marcus Chen, MB BS Melb MRCGP FACSHM PhD Syd
Darren Russell, MB BS DipVen Monash FRACP FACHSHM

Fellows
Catriona Bradshaw, MB BS Monash PhD DipVen Monash FACHSHM

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

Administration
Suzanne Amisano

CENTRE FOR INTERNATIONAL MENTAL HEALTH

Head and Associate Professor
Harry Minas, MBBS BMEdSc Melb. DPM Melb. FRANZCP

Lecturer
Amsterdam

Principal Fellow with the title Associate Professor
Alex Cohen, BA NY MA NY PhD UCLA
Jong-ik Park, MD Seoul MPsy Seoul DR Seoul

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Manjula O’Connor, MBBS Delhi MMEd Melb. DipEd Melb.

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Erminia Colucci, DipEd Martina F. BPsycSc Padua PhD Cuts Psy Old.
GDipDataAnalysis Florence
Stephen Minas, BA Melb. LLB Melb. MSc LSE
Tania Nadalina Miletic, BA PGAndPsych Melb. MCertInterstudies ICU
Tokyo MPubAdmin ICU Tokyo

Administration
Michael Warner
Melanie Rygl

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Elise Davis, BAppSc (Hons) Melb. PhD Deakin
Lisa Gibbs, BSc Melb. PhD Deakin
Andrea Sanigorski, BSc Melb. MA (Human Nut) Deakin, PhD Deakin

Research Fellows
Rosemary Ashbolt, BSc. Tas, DipEd Melb. MPH Monash
Karen Block, BVetSc (Hon) Melb. BA Melb. MPH Melb.
Loga Chandrakumar, BCom (Hon) Melb. BA (Hon) Melb. MA DevlStud Melb.
Rachel Clarke, MSc (Physical Activity, Nutrition and Public Health)  
Bristol, BSc (Hons) Plymouth

Rebecca Conning, BAppSc (Nutrition and Health Promotion)  
BSc (Hons) Deakin, PhD Deakin

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

Jodie Doyle, DipNurs Deakin, BNurs Deakin, GradDipHealthProm La Trobe, MPH La Trobe, MHHSc La Trobe

Taegen Edwards, BABCP, (Hons) Melb.

Tessa Keegel, BA (Hons) Monash, MA Monash, GradDipBiostats Melb.

Rosemary Mann, DipAppSc Deakin, CertDiet Alfred, MA Devel Deakin, BL (Hons) Deakin, PhD Melb.

Johanna Mithen, BA (Hons) Monash, GradDipEd Melb.

Yin Paradies, BSc MMEdStats MPH PhD

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Tammy Rendina

Elisha Rigg, BAppSc (Hons) Deakin

Belinda Robson, BA (Hons) Melb. MA Monash, PhD Melb.

Deborah Warr, BA Deakin, MA PhD Melb.

Sue West, BA Philip IT MA RMIT

Lisa Willenberg, BHHSc Adelaide, BHHSc (Hons) Deakin

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Brad Morgan

Centre Administrative Staff

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Amy McKeran, BA Melb.

Erin Munro

Patricia Van Kempen

Anna Vassiliadis

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Principal Fellows with the title Associate Professor

Colin MacDougall

Laurence Moore, BSc (Hons) Bristol, PhD Bristol, MS MedStats

London School of Hyg & Trach Med

Jan Nicholson, BSc Otago, BSc (Hons) Victoria University Wellington NZ, MSc Canterbury NZ, PhD Old

Yolanda Wadsworth, BA Monash, MA (Prelim) Monash, PhD Monash

Fellows

Shelley Bowen, PhD UNSW


Ana Neumann, DocDentalSurgery Mato Grosso Brazil, MPH Texas, PhD Texas

Lauren Prosser, BAppSc (Health Prom) (Hons) Deakin, PhD Deakin

Rosie Rowe, BNatSc (Hons) New England, MBA Deakin

Gai Wilson, BA Adelaide, MSocSc (Policy & Management) RMIT

CENTRE FOR HEALTH AND SOCIETY

Professors

Ian Philip Anderson, MBBS Melb. MA PhD La Trobe FAFPHM (Chair of Indigenous Health)

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)

Associate Professor & Centre Director


Associate Professor

Lynn Gillam, BA Melb. MA Oxf. PhD Monash

Associate Professor and Principal Research Fellow


Senior Lecturers

*Hans Baer, PhD Utah

Viki Briggs, BA S.Aust. MA Deakin GDip Syd.

Angela Clarke, BA VUT MPH Deakin


Lecturers

James Bradley, MA PhD Edin.

Richard Chenhall, BA (Hons) Melb, PhD, LSE

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Kevin Rowley, BAppSci RMIT PhD GDipEpidMelb.

Rebecca Kippen BBus La Trobe GDipDemography ANU PhD ANU

Yin Paradies, BSc NT MMEdStats Newcastle MPH Berkeley PhD Melb.

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Judy Longbottom HNDip Wales MA Lond

Sarah MacLean BA (Hons) Melb. MA La Trobe PhD Melb.

Meg Parsons, BScSc Waikato PhD Syd.

Naomi Claire Priest, BAppSc S.Aust. PhD Melb.

Rachel Reilly, BA Adel. DipPsyCh Melb.

Paul Stewart, GDipIndigSt. Syd. MPH Deakin

Anke Van der Stoffen, BA Penn. MA ANU MPH Monash

Research Assistants

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Bree Heffeman, BA Deakin PGDip Melb.

Debra Knoche, BA Melb. MPPM Melb.

Joanne Loke, BSc Melb. MPH Deakin

Research Officer

Hannah Walker, BA (Hons) Otago

Project Officer

Shawana Andrews, BA Monash BSW Melb. MPH Deakin
Gai Wilson, BA Adel. MSoSc RAMT  
Godfrey Woelk, BSc(Soc) Rhodesia MCommH Liverpool PhD Wash.

Fellows  
Laura Baglietto, BSc Canada CMC Math PhD Birm.  
Emily Bailey, BNurs QUT  
Michelle Boglis, RN  
Shelley Bowen, BAppSc Canb. College MPH WSyd. PhD NSW  
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CertGeneralNurs RoyalMelb. CertMidwifery Monash  
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GDipDataAnalysis Florence  
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Joyce Doyle  
Fram Edmonds Bed Melb, GDip Melb. MA Deakin, PhD Melb.  
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Bircan Erbas, BSc MSc PhD Melb.  
Ashley Fletcher, BSc Monash MEng GDipEpiBio Melb.  
Susan Foxman-Feldman, BA La Trobe MA  
Craig Lindsay Matthew Fry, BSc Monash  
Joyce Goh, BSc Lincoln Inst  
Sandra Hall, MSc Melb. PhD Melb. GDipSc Melb.  
Vanessa Hamilton, BAppSc Nsg La Trobe GDip Mgmt VU AdvSexualHealthNurs.  
Karim Hammarsberg, BSc Sweden MWH Melb. PhD Melb. RN  
Todd Harper, BEcon TSa. PGDiPHealthProm Curtin PGDiPHealth Econ Curtin  
Alan Headey, BA Qld D.Psych Melb.  
Alice Holloway, Melb. BSc. Melb.  
Sonja Hood, BA Melb. MSc Penn.  
Lana Horng, MBBS Melb. DipPaed NSW  
Cecily Hunter, BA Monash MSc PhD Melb.  
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Elizabeth Ruth Lawrence, Cert(GenNurs) Queen Vic Med Ctr  
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Francis Massey, St George’s Hospital, London  
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Roger Milne, BA BSW BComm Melb. GDipClinEpi Monash  
Stephen Minas, BA Melb LLB Melb. MSc LSE  
Timothy Moore, BSc James Cook BA James Cook  
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Christopher John Morgan, MBBS Syd. DTCH Liverpool FRACP  
Naing Naing, MBBS Yangon Inst of Medicine, (Burma) DTM&Mahidol Uni (Thailand), MPH Emory Uni (USA) DrPH Melb  
Ana Neumann, DrDS S.MattoGrasso MPH Texas PhD Texas  
Jacinta Maree O’Keefe, BSc Melb.  
Nicholas Osborne, BSc Adel. BSc Finders MagSc Qld. PhD Qld.  
Alex Ostrye, BSc UBC MS UBC MA Simon Fraser PhD UBC  
Shirley Pandolfo, RCert ALUA  
Mainead Phelan, BPsys ACU  
Greigory Phillips, BA MMed Sc Qld.  
Lauren Prosser, BAppSc Deakin PhD Deakin  
Mary Rollstone, BA MHS DipThenSt Otago  
Rosie Rowe, BNatResMgt New England MBA Deakin  
Alice Rumbold, BSc Adel. PhD Adel. GDipPubHlth Adel.  
Jane Rynie, RN  
Deborah Saunders, RN  
Gianluca Severi, BSc Genoa MSc Milan PhD Birm.  
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Richard John Sloman, BSc Monash GIDipEpid Melb.  
Jacinta Sonego, BAppSc La Trobe RN  
Merle Spriggs, BA Monash MBEth Monash PhD Melan  
Yvonne Stolk, BA MResPsych MAClinical Psych PhD Melb.  
Anthony Stratford  
David Thomas, MBBS Syd. MSc NSW PhD NT  
Kirsty Maree Thompson, BAppSc[OT] Syd.  
Danielle Thornton, BA Melb. PhD Melb.  
Lucar Thornton, BSc(Sc) [Env] RMF ENV Melb. PGDip (Env) Melb.  
Diane Roslyn Tibbits, BSc PhD Monash GDip La Trobe  
Ly Walker, BSW PhillipIT MSWI(HumanSvCmgt) LA Trobe  
Marie West, RN  
Elizabeth Williamson, BA Cambridge MSc Leicester PhD London  

Adjunct Staff  
Professor  
Anthony Scott, BA Northumbria MSc York PhD Aberd.
SUMMARY REPORT

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Director and Professor of Epidemiology and Biostatistics
Dallas English, BSc. Melb. MS PhD Wash.

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

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

Associate Professor
Mark Jenkins, BSc Monash PhD Melb.

Associate Professors and Principal Research Fellows
Shyamali Dharmage, MB BS MSc MDColombo PhD Monash

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

Lecturers

Senior Research Fellows
Carmel Apicella, BSc. Monash MSc PhD GDipEpiBio Melb.
Louisa Flander, BA MA G.Wash. MA RMIT PhD Colorado
Miroslaw Kapuscinski, BSc ANU PhD ANU
Melanie Matheson, BSc Monash MAppSc RMIT PhD Monash.

Research Fellows
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Adrian Bickerstaffe (System Analyst), BCompSci (Hons) Monash. PHD Monash.
Quang Minh Bui, BSc La Trobe PhD La Trobe.
Anne Cust, BSc Old BA Old MPH Syd. PhD Syd.
Gillian Dite, BSc. PhD GDipEpiBioMelb.
James Dowty, BSc PhD Melb.
Kris Jamsen, BSc Mich.Sta MBIostat Melb. PGDip Melb.
*Adam Lowe, BBSc La Trobe MPH Melb. PhD Melb.
Robert MacInnis, BSc Monash PhD Melb. GDipEpiBio Melb.
Enes Makalic, BCompSci (Hons) Monash PhD Monash.
Melanie Matheson, BSc Monash MAppSc RMIT PhD Monash.
Katherine Morley, BA Old BSc Old PhD Old GCert(H econ) Old.
Daniel Schmidt, BDipSys (Hons) Monash PhD Monash.
Jennifer Stone, BSc Guelph MSc Guelph PhD Melb.
Sophie Zalounis (Biostatistician), BSc (Hons) Melb.

Research Officer
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Melanie Reeves, BAppSci Deakin

Study Coordinators
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Govri Selvaraj, BSc Melb. MPH Melb.
Carlie Dunford

Project Coordinator MATCH, Australian Twin Registry
Supriya Raj, BDS Rajiv Gandhi University MPH Deakin

Epidemiologist
Aung Ko Win, MBBS University of Medicine 2 MPH Melb.

Honorary Appointments
Professorial Fellows
Graham Giles, BSc MSc Mich. PhD Tas.
John Mathews, AM, BSc MB BS MD PhD Melb. Hon DSc NT FRACP FRCPA FAFPHM

Principal Fellows with the title of Associate Professor
Catherine Bennett, BSc(Hons), La Trobe. PhD, La Trobe. M.App.Epi, ANU
Michael Cooniy, BAppSc (Statistics), AStat, MBBS, PhD, FAFPHM
Dorota Gertig, MB BS Monash MHS(cClinEpi) 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.

Senior Fellows
Julia Brotherton, B Med (Hons), MPH (Hons), Grad Dip App Epi, FAFPHM
Graham Byrnes, BSc Syd/PhD Syd. PGDip(AppStats) Melb.
Susan Treloar, BSc/PhD. MSc Lond. MSW NSW PhD Qld.
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Marie West

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Centre Manager
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Informatics Coordinator
Kelly Aujard, BlrinfoSys Swinburne

Data Manager, Technical, Research and Laboratory Support
Maggie Angelakos, BSc. Monash.

Research/Data Management Support Officer
Jaymes Charlesworth, AdvCert (Photography) Hawthorn
## Data Clerk
Briony Tupper, BHealthSci Deakin.

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Jennifer Boadle
Kate Murphy, BSc Massey New Zealand

## Senior Projects Officer, Australian Twin Registry
Emily England

## Project Support Officer, Australian Twin Registry
Shaie O’Brien, MA Monash.

## Research Support
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Michelle Dedda
Kevin Nguyen, BArch HoChiMinh City BMm Swinbourne
Amanda Terosidis, BSc Monash

## Personal Assistant
Kellie Vizard

## Admin Assistant/Personal Assistant
Karen O’Brien

## Finance and Resources Officer
Vicki King

## Research Assistant
Sandu Heelan

## Vaccine and Immunisation Research Group

**Head**
Terence Michael Nolan, BMedSc MB BS W/Aust. PhD McGill. FRACP FAFPHM

**Prof Research Fellow**
John Mathews, AM, BSc, Melb. MB BS, Melb. MD, Melb. PhD, Melb. Hon DSc, NT FRACP FRCPA FAFPHM

**Senior Research Fellows**
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Maryanne Skejilj, BSc, Monash PhD, Melb. GOpEd&BioStat, Melb.
Karyn Alexander, MBChB Leicester MPH Monash

**Research Fellows**
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Peter Howard, MBBS London University M.Sc(Hon) London University MRCP FAFPHM
James McCaw, BSc, PhD, Melb.
Robert Moss, BSc, Melb. BE, Melb. PhD, Melb.
Mathew Dafilis, BAppSci (Hons) PhD
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Stephen Petrie

**Study Coordinator**
Marita Kefford, DipAppSc PhillipITRN

**Assistant Study Coordinators**
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Sharon Trevorrow, BAppSc La Trobe RN

## Research Assistants
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Clare Teresa Brophy, RN
Jane Ryrrie, RN
Jacinta Sonego, BAppSc La Trobe RN
Ann Marie McEvoy, BSc. Caledonian Cert (GenNurs) Law Hospital School of Nursing RN
Marie West, RN
Jacinta Maree O’Keefe, BSc Melb.
Mairead Phelan, BPsych ACU
Alice Holloway, BSc(Hon) Melb.
Paula Nathan, ADipMedLabSc. RMIT
Tamie Samyue, BBioMedSc Monash B NursSci Melb, RN
Mikaela Harris, BA Latrobe BSc (Hon) Latrobe B NursSc Melb, RN

## Phlebotomists
Deborah Saunders, RN Div 2
Judith Spotswood, RN Div 2
Charan Sandhu, Dip. Frontline Mgt. Swinburne RN Div 2
Bernadette McCudden
Barbra Sherry

## Study Doctors
Jennifer Davey, MBBS Melb. FRACGP
Lana Horm, MBBS Melb. DPaed NSW FRACP Dip.Hinfo Monash
Nicole Rose, MBBS Melb.
Kerryn Moreira, MBBS Monash
Evelyn Reich MBBS(Hons) Monash
Sylvie Li Yim 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 Melb, FRANZCO, FRACS, FAAO, FACS, FAICO

## Senior Research Fellows
Mitchell Anjou, BScOptom Melb, MScOptom Melb.

## Research Fellows
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Robyn McNeil, BScHons La Trobe, MPH Monash
Emma Stanford, BA Monash MSci Monash Grad Dip Environmental Science Monash

## Professional Staff
**Research Administrator**
Judith Carrigan, BScHons PhD Monash, BA Melb.

## Indigenous Health Promotion Officer
Colin Garlett, BAppSci Curtin, BHlthSci Syd

## Health Promotion Project Officer
Fiona D Lange, DipNat SA, BHlthSci New England

## Administrative Assistant
Rachael Ferguson, Certificate IV Photoimaging Vocation Photography, DipArts (Applied Photography) NMIT
In November 2010, the Centre underwent its first five-year review in accordance with University requirements. Professor James Best, Head of the Melbourne Medical School, chaired the review panel. The other members of the panel were Professor Annette Dobson, Professor David Roder and Professor Peter Visscher. The Centre thanks the members for their helpful and thoughtful contributions. The panel concluded that the Centre’s contribution to research and teaching from 2005 to 2009 were outstanding, while making a number of recommendations that the Centre is addressing.

As part of the review, the Centre developed a strategic plan for the period 2011-15 that has sections on teaching and learning, research training, research, engagement and organisation. A key component is a plan to improve performance in research training.

We constituted a Centre Advisory Committee during 2010. Members of the committee are Professor Alistair Woodward (University of Auckland), Dr Rosemary Lester (Department of Health, Victoria), Professor John Lynch (University of Adelaide), Professor Julian Peto (London School of Hygiene and Tropical Medicine), and Professor Terry Nolan (Head of School). The Advisory Committee initially met by teleconference and provided valuable input into the development of the Centre’s strategic plan.

In 2010, the Centre continued to make major contributions to the teaching of the Melbourne School of Population Health (MSPH), through delivery of subjects, coordination of four Masters degree programs, including the Master of Public Health (MPH), and by playing a leading role in the redevelopment of the MPH following the closure of the Victorian Consortium for Public Health.

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 United States of America’s Government’s 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 Child Health 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 2010, staff of the Centre (including honorary staff) published 115 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.

**LEARNING AND TEACHING**

This year has been another successful year in teaching and learning. Our subjects have continued to attract a large number of postgraduate students and continued to obtain consistently high Quality of Teaching (QoT) scores. The number of students choosing an Epidemiology/Biostatistics stream and subjects within the MPH increased from 2009 to 2010. QoT results also improved in a number of Epidemiology and Biostatistics subjects.

The focus for many of the Teaching and Learning staff in MEGA Epidemiology was the planning for the teaching of Epidemiology and Biostatistics for the revised MPH, commencing in 2011. Plans...
A new study confirming the temporal links between childhood eczema and rhinitis and adult-onset atopic asthma is highlighting the need to rigorously treat childhood allergies.

Associate Professor Shyamali Dharmage says this is one of the key implications of new research from MEGA Epidemiology, within the Melbourne School of Population Health. This paper focused on childhood eczema and rhinitis as predictors of atopic (or allergy-triggered) and non-atopic adult asthma.

It draws on the valuable resource of the Tasmanian Longitudinal Health Study (TAHS), which started in 1968 and profiled the asthma risk of almost all Tasmanian children born in 1961. Associate Professor Dharmage is the lead investigator of TAHS, which continues to generate important insights into the complex causal links between childhood allergies and asthma.

The lead author of this paper is Ms Pamela Martin, a PhD student based at the Murdoch Childrens Research Institute (MCRI) and jointly supervised between MCRI and MEGA Epidemiology. This paper is soon to be published in the influential Journal of Allergy and Clinical Immunology, the highest-ranking allergy journal. It advances international knowledge in this field with a series of notable ‘firsts’. It is the first study to show a strong link between eczema and rhinitis measured in childhood, and atopic (allergy-triggered) current asthma at age 44. It is also the first to examine at the population level the relative contributions of combined eczema and rhinitis, with respect to persistent childhood asthma and new-onset asthma later in life. Importantly, it is the first to distinguish between atopic and non-atopic asthma and their occurrence after childhood eczema and rhinitis, as part of the sequence dubbed the ‘atopic march’.

Among the new study’s very significant results was that having both eczema and rhinitis in childhood (before age seven) led to a nine-fold increased risk of current atopic adult asthma. The researchers estimate that up to 30% of current atopic asthma within the larger population sample could be attributed to a history of childhood eczema and rhinitis.

The implications of this study are that prevention and rigorous treatment of childhood eczema and rhinitis may prevent adult asthma. Associate Professor Dharmage is concerned that there is less awareness of the importance treatment and prevention of eczema and hay fever, which may prevent potentially debilitating – or even fatal – health implications that lie ahead in adulthood. “While adult asthma itself is a serious health issue it should also be noted that asthma itself is an established risk factor for emphysema and chronic bronchitis,” she says. “These chronic respiratory diseases lead to obstruction of lung function affecting quality of life and productivity as you age.” To prevent this sequence of events, interventions that can halt the march from childhood allergies to asthma need to be identified.

A MEGA research team has completed a pilot study in 2010 to trial strategies for halting the atopic march. This was led by Research Fellow Dr Adrian Lowe and he will lead a larger trial in 2011. The aim of this work is to establish whether a ceramide-based cream can prevent babies developing eczema and improve their skin barrier function in early life, and thereby prevent subsequent development of asthma.

If successful strategies to arrest the atopic march are identified, this could ultimately save lives and health care costs related to asthma management and treatment. In 2000, 454 deaths were attributed to asthma and the total health system cost of asthma was estimated to be $438 million.
were developed so the teaching of the core biostatistics and epidemiology material could be taught across the MPH, Master of Epidemiology and Master of Science (Epidemiology). The core subject Biostatistics (formerly a Victorian Consortium for Public Health subject called Statistics) was revised to integrate the direct teaching of STATA in computer-based laboratories to the large cohort of students enrolled in the relevant courses. Hands on computer-based teaching had not been attempted on such a large scale in the MSPH previously. Ahe core subject Epidemiology, which was previously taught by Monash University, is also newly developed for delivery in 2011. As part of this change the subjects of Epidemiology and Analytic Methods 1 and 2 were taught for the final time in 2010.

In 2010 we welcomed two new teaching staff members: Dr Hazel Clothier, who is the subject coordinator for Infectious Disease Epidemiology, and Dr Melissa Russell, who taught Study Design in Epidemiology in 2010 and is the new MPH Course Coordinator.

Three commencing PhD students were awarded scholarships and Dr John Burgess won the MSPH PhD award for excellence for his PhD, which was completed in 2009.

RESEARCH

Genetic Epidemiology
We received two grants (ARC and NHMRC) to develop new mathematical techniques, using sophisticated computer programming techniques, to study the role of genes on cancer risk and how to predict breast cancer from a mammogram. This research success highlights a new direction for the Centre in epidemiological research using bioinformatics.

We received translation funding from the Victorian Cancer Association to conduct research to determine why men and women, when offered genetic testing for bowel cancer susceptibility, decline to do so, even though it may save their life. This research is critical to identify reasons preventing testing so access can be improved.

Statistical Methods
Inference on Causation from Elimination of Familial CON founding (ICE FALCON)
This year, headed by Professor John Hopper, we have applied the statistical methods developed in the ICE FALCON project to binary data; parent 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. All three traits had substantial familial associations, and were strongly associated with one another, and the sample size was sufficient for some conclusions to be made from applying the ICE FALCON method. The data were most consistent with eczema in infancy causing a proportion of hay fever with, and perhaps without, asthma in childhood. The association of infantile eczema with childhood asthma without hay fever does not appear to be causal or familial.

We have also applied the ICE FALCON method to longitudinal twin data on continuously distributed variables, such as mammographic density, measured 10 years apart by the Australian Twins and Sisters Mammographic Density Study. This showed that the data are most consistent with there being genetic factors that cause variation in age-adjusted mammographic density prior to the first measurement, which occurred after the age of 40 years. The data are also consistent with the second value of mammographic density for age, which is an established risk factor for breast cancer, being ‘caused’ by the first value. That is, there is high tracking (correlation in repeated measures in excess of 0.8). There was no evidence for familial factors causing any of the variation in changes in this risk factor between the two measures. These analyses suggest that the aspect of woman’s breast cancer related to mammographic density is established early in life, and other data suggest this is possibly at the time of puberty.

Genetic variants and cancer risk
We have developed and used 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 specialise in methods that account for the relatedness of family members and use this lack of genetic independence to enhance statistical power. We have also extended these methods to give novel statistical tests for parent-of-origin effects and other non-classical genetic phenomena. We published a number of papers using these methods in 2010, including papers that investigated: a parent-of-origin effect in Lynch syndrome; tumour morphology for breast cancer cases with BRCA1 promoter methylation; a novel high risk mutation in the breast cancer-associated gene PALB2; cancer risks for monoallelic MUTYH mutation carriers; gene by environment interactions in endometrial cancer risks; and cancer risks for MSH6 mutation carriers.

Improving analysis of Genome-Wide Association Studies (GWAS) data
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 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.

Model Selection and Parameter Estimation
This year Dr Enes Makalic and Dr Daniel Schmidt developed a new Bayesian analysis method for data sets comprising short sequences of correlated measurements from multiple participants, which is useful in certain longitudinal studies. We have also studied the use of Akaiake’s Information Criterion (AIC) to test whether multiple exposures are associated with an outcome. This work has discovered an important flaw with the usual application of
AIC in this setting and was awarded the best paper award at an international machine learning and data-mining symposium. Further, we have examined modern regression techniques with application to logistic models as well as autoregressive time series models.

**Data mining and mammographic density**

In 2010 we began developing a prototype for automatic measurement of mammographic density called CiRRUS for the MATLAB numerical computing platform. CiRRUS extracts a large number of features from raw mammograms and uses modern machine learning techniques to build predictive models for breast cancer risk. In case/control experiments based on several sets of real mammograms, CiRRUS was shown to be competitive with the current state-of-the-art semi-automated mammographic density measurement methods.

**Population pharmacokinetic-pharmacodynamic modelling of antimalarial drugs**

This year, headed by Dr Julie Simpson, we have developed a prototype for optimal sampling designs for population pharmacokinetic studies of the antimalarial drug, mefloquine, in adults, children and pregnant women. We have also been validating pharmacokinetic studies of mefloquine in a prototype for optimal sampling designs for population pharmacokinetic-pharmacodynamic modelling of antimalarial drugs.

**Population pharmacokinetic-pharmacodynamic modelling of antimalarial drugs**

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**STAFF HIGHLIGHTS**

Dr Melissa Russell commenced as the MPH coordinator in February 2010. The position was previously held by Associate Professor Catherine Bennett, who left the University in 2009.

**PUBLICATION HIGHLIGHTS**


We led an international study of carriers of high-risk mutations in a DNA repair gene called MSH6—the largest study in the world. Our study provided definitive cancer risks for several cancer types, for men and for women, and by country of residence. This study, which has been reported as one of the year’s most important publications in bowel cancer genetics, has immediate usefulness for clinicians and genetic clinics, who previously had to rely on small studies that provided imprecise estimates.


We led an analysis of an international study that demonstrated that relatives of women diagnosed with breast cancer at a very early age were at increased risk of cancers of the prostate, lung, brain and urinary tract. These cancer risks were not due to any known genetic factors, suggesting the possibility that there are potentially new genetic syndromes that exist which are yet to be discovered, and therefore opening up a new line of cancer research.


Approximately 20% of Australian children are affected by asthma. The prevalence of asthma has increased over the last 40-50 years, and the causes for it are largely unknown. Recently some groups have argued that treating young children with paracetamol has causes asthma. We believe that this association is probably due to confounding by indication – respiratory tract infections are often treated with paracetamol, early life respiratory tract infections are a strong risk factors for childhood asthma.

Using data from the Melbourne Atopy Cohort study, a prospective birth cohort of 620 children with a family history of allergic disease, we observed that increasing paracetamol exposure in early life was associated with an increased risk of asthma in childhood. However, this association disappeared when we adjusted for the frequency of infections. Furthermore, paracetamol given for non-respiratory illnesses was not associated with increased risk of childhood asthma. In conclusion, paracetamol in early life is unlikely to increase the risk of asthma.


Egg allergy is the most common food allergy in infants and toddlers, affecting around 8% of infants in Victoria. Until recently, international guidelines recommended that infants with a family history of allergy delay introducing foods such as egg, peanut and nuts until up to 2-3 years of age.

Using data from the HealthNuts study, a population-based study involving more than 2500 Victorian infants, we found that infants introduced to cooked egg between 4-6 months of age were five times less likely to have egg allergy than those introduced to cooked egg after 10 months, irrespective of whether they had a family history of allergy.

This research adds to a growing body of evidence suggesting that delaying the introduction of allergenic foods is unlikely to prevent food allergy and may even increase the risk. These findings were published in the top international allergy journal, the *Journal of Allergy and Clinical Immunology*. 

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YEAR’S OVERVIEW

The Centre for Health and Society (CHS) saw a change of leadership in 2010. Professor Ian Anderson commenced in the position of inaugural Director of the University of Melbourne’s Murrup Barak Institute for Indigenous Development. Associate Professor Marily Guillemin was appointed as Director, CHS, and Mr Shaun Ewen was appointed Deputy Director, CHS, and Acting Director, Onemda VicHealth Koori Health Unit. Following a rapid growth and development phase since the Centre’s establishment in 1997, we are looking forward to a consolidation phase. During this phase, our aim is to shift emphasis from new growth towards capacity-building, maximising both our productivity and quality, and supporting our partnerships, while nurturing our staff and students to ensure they reach their full potential.

To enable us to do this we were delighted to welcome a number of new staff who will contribute to the Centre’s core business in teaching and learning, research and knowledge engagement. Dr Richard Chenhall joined CHS in February 2010. Dr Chenhall moved to CHS from the Menzies School of Health Research in Darwin, where he was working on a National Health and Medical Research Council (NHMRC) fellowship entitled Best practice guidelines for evaluating Indigenous residential alcohol and drug programs. Dr Chenhall is also an international collaborator for a Japan Society for the Promotion of Science Grant in Aid for Scientific Research on alcohol self-help groups in Japan with Sophia University. Dr Meg Parsons also joined CHS in 2010 as a Postdoctoral Fellow in Australian Indigenous Studies. Her current research project, in conjunction with Professor Marcia Langton, explores the social dimensions of climate change for Australian Aboriginal communities. Dr Parsons formerly worked at the Waitangi Tribunal undertaking research into Maori treaty claims. Dr Sarah Maclean joined CHS as a post-doctoral Research Fellow in conjunction with Turning Point Drug and Alcohol Centre. Dr MacLean is a sociologist with sustained interest in analysing and contributing to the development of health and welfare policy, particularly as it affects marginalised and young people and users of alcohol and other drugs. We look forward to growing the research initiatives being undertaken by these three leading researchers, and enabling their individual and collective contributions.

We are fortunate to have a number of talented administrative, teaching and research support staff. In 2010, we were pleased to welcome the following staff in these roles:

- Ms Jessica Cotton and Ms Judy Longbottom are working in collaboration with Professor Marcia Langton on the Australian Research Council (ARC) Linkage Project, Poverty in the Midst of Plenty: Economic Empowerment, Wealth Creation and Industrial Reform for Sustainable Indigenous and Local Communities and the Agreements, Treaties and Negotiated Settlements (ATNS) project.
- Ms Shawana Andrews commenced in the position of Indigenous Health Project Officer with the Crescent project. Ms Andrews is working with Mr Shaun Ewen and the Crescent team to develop the Koori component of a community-based clinical education curriculum for medical and allied health students.

The key focus of the Centre for Health and Society 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.
We took this opportunity to launch a significant community report in Onemda’s history: An Onemda Decade – Ten Years of Progress in Koori Health. The community report traces the beginnings of Koori health research at the University of Melbourne. It describes the collaborations that brought about the establishment of the Unit, and highlights major developments and projects in research, teaching and community development, since 1999. Copies are available in PDF format from our website at http://www.onemda.unimelb.edu.au/publications/reports.html or in hard copy from onemda-info@unimelb.edu.au

Learning and Teaching

Professor Janet McCalman and Dr James Bradley have continued to make substantial contributions to the teaching and development of the breadth subjects in the University’s New Generation undergraduate degrees. These subjects continue to attract a large number of students interested in health from a multidisciplinary perspective. With the commencement of the new four-year Doctor of Medicine program, CHS staff have been actively involved in curriculum development, particularly in the areas of ethics, social sciences, and Indigenous health. This is occurring in parallel to the teaching out of the current medical program in which CHS staff have been keen contributors.

At a School level, we have been involved in the development and teaching of the Master of Health Social Sciences (MHSS), which commenced in 2010. Dr James Bradley is the inaugural course coordinator for the MHSS, and has led the recruitment and commencement of the first cohort of enthusiastic graduate students. In addition, CHS staff have been active contributors to the development of the new Master of Public Health (MPH) degree, and collaborating with our School colleagues to develop a new flagship degree.

PhD completions

We are pleased to acknowledge and celebrate our strong record of attracting high quality PhD students. In 2010 we had a number of new students commence their PhD studies at the Centre. Importantly, our completion rate for PhD students also remains high, with two PhD students successfully completing in 2010. This brings the total number of successfully completed PhD students at CHS to 40 since the Centre’s establishment of its PhD program in 1999. Dr Anna Harris, whose PhD thesis was titled International medical graduates in the urban Australian hospital: An ethnographic study, completed in 2010. She has also been nominated for the Chancellor’s Prize for Excellence. Dr Harris is currently undertaking a postdoctoral fellowship at Maastricht University in the Netherlands. Dr Ros MacDougall also completed in 2010 and her thesis was titled The ethical issues associated with medical internship and residency. Dr MacDougall is currently applying for postdoctoral fellowships to pursue her research. We congratulate Dr Harris and Dr MacDougall and their supervisors on the successful completion and award of their PhD degrees.

Our postgraduate student group continues with its significant contributions to the collegial life of the Centre. Ms Jenni Livingston, Ms Kristen Moeller Saxone and Mr Michael Livingston were active and enthusiastic postgraduate representatives for 2010, while undertaking their PhD studies. The group organised many successful activities and events; these included a monthly reading group, led by CHS academic staff members; a peer writing group designed to encourage students to write and provide feedback to each other on thesis chapters; a publishing workshop for students and staff led by Dr Hans Baer; a training session on using Word for large documents; a seminar with CHS PhD alumni Dr Philomena Horsley and Dr Nicky Welch on Is there life after the PhD?, as well as the annual Conversazione, where postgraduate students present their research work in an informal setting. These activities, together with the wonderful efforts of the postgraduate representatives, help to enrich the student experiences of postgraduates at the Centre.
ONEMDA ANNIVERSARY

Top left: Aunty Joy Murphy Wandin delivering the Welcome to Country at the Onemda VicHealth Koori Health 10th anniversary event.

Above: Professor Glenn Bowes addresses the event, which was attended by 150 community and university guests.

Left: The Koori Youth Will Shake Spears during their performance.

From left: Dr Ros MacDougall, Dr Anna Harris and their PhD supervisors, Associate Professor Marilys Guillemin and Associate Professor Lynn Gillam, on the occasion of their PhD graduation.
RESEARCH

In keeping with our strategic aim to consolidate our efforts and maximise our research productivity, we were pleased with our success in building the Centre’s competitive research grants and publication record. Highlights of this are as follows:

International Collaborative Indigenous Health Research Partnership Grants

These grants are a collaboration of the Health Research Council of New Zealand (HRC), the Canadian Institutes of Health Research (CIHR) and the NHMRC to support research in the area of indigenous peoples’ health. The following CHS staff were grant recipients:

- **Educating for equity: Exploring how health professional education can reduce disparities in chronic disease care and improve outcomes for Indigenous populations**, led by **Shaun Ewen** (and Professor Helen Milroy, University of Western Australia).

- **Strengthening health literacy among Indigenous people living with cardiovascular disease, their families, and health care providers**, led by **Professor Ian Anderson**.

ARC research grants

CHS staff were recipients of a number of ARC Discovery Project grants, including:

- **Convicts and Diggers: a demography of life courses, families and generations**, led by **Dr Rebecca Kippen, Dr James Bradley, Associate Professor Shyamali Dharmage, Professor John Mathews**, and colleagues. Based on convict records, birth, death and marriage registrations, World War One service records, and other historical data, this project explores long-term demographic outcomes of individuals, families and lineages. The project draws on the expertise of family historians to trace individuals and their descendants for ‘Australia’s biggest family history’.

- **Aborigines, convicts and immigrants in Victoria, 1835-1985: an interdisciplinary history**, led by **Professor Janet Mccalman**. This project is an interdisciplinary investigation of dispossessing and colonisation of southeast Australia. It uses longitudinal cohort studies to produce new findings on the impact of stress, dislocation and economic change on individuals and families across five generations.

Commonwealth Department of Education, Employment and Workplace Relations (DEEWR) awards

Ms Angela Clarke was awarded a DEEWR Indigenous PhD scholarship to complete her PhD on Indigenous knowledge of community development.

Drug and alcohol research program

This significant and growing research program is led by Professor Robin Room, Professor Marcia Langton, Dr Richard Chenhall and Dr Sarah MacLean. Their work includes research and training on policy relevant questions including: reviewing and building the evidence base for alcohol, tobacco and other drug (ATOD) policy initiatives; to provide leadership and build capacity to assess, analyse and inform communities on ATOD impacts and policies; and enhancing Australia’s profile in international ATOD policy research. Current activities involve research projects working with alcohol, tobacco and other drug issues with various communities, including Indigenous and non-Indigenous Australia, as well as South-East Asia and Europe. These studies involve a broad range of issues and methodological approaches with a focus on the ATOD policy impact research, studies of ATOD problems in general, as well as specific populations and ATOD policy and impact research in a global perspective.

As part of this research program, Professor Robin Room, Professor Marcia Langton and Dr Richard Chenhall presented at a well-attended seminar in September 2010. The topic of the seminar was **Alcohol control: drinkers and sellers in Indigenous and non-Indigenous Australia**. Australians, both Indigenous and others, have been concerned about Indigenous drinking since soon after Prohibition ended for Indigenous Australians half a century ago. Many remote Indigenous communities have done their best to organise against the flood of alcohol, and governments have joined in, particularly since the Howard Government’s Northern Territory Intervention. Meanwhile, there has been rising concern about drinking, particularly youthful intoxication, in the rest of Australia, turning public attention back to issues of control of sellers as well as drinkers.

KNOWLEDGE ENGAGEMENT

The Centre for Excellence in Indigenous Tobacco Control (CEITC) was pleased to secure another three years of funding ($4.8 million) from the Commonwealth Department of Health and Ageing, until June 2013. CEITC, which has been in operation since 2004, works to build national capacity for effective tobacco control to reduce the health, social and financial burden associated with tobacco use in Aboriginal and Torres Strait Islander communities. CEITC’s primary focus, achieved through a range of different projects and activities, is in research, policy development and advocacy, with a particular emphasis on knowledge sharing.

Going forward, CEITC’s attention has shifted towards developing and delivering training modules for an increased workforce of Tobacco Action Workers, who are being employed as part of the Council of Australian Governments $100 million agreement to tackle Indigenous smoking. In December 2010 CEITC delivered the first three-day Induction training session in Canberra to 25 new Tobacco Action Workers and Coordinators.

Between 2010 and 2013, CEITC will work on the Indigenous arm of the International Tobacco Control (ITC) Policy Evaluation Project, along with the Menzies School of Health Research and Professor Ron Borland from the Cancer Council Australia. The ITC project is an international study to measure the impact that key tobacco control policies, which are part of an international agreement called the Framework Convention of Tobacco Control, have on adult smokers.
In October 2010 the Leaders in Indigenous Medical Education (LIME) Project was awarded the MSPH Award for Excellence in Knowledge Transfer. The award recognised the LIME Network’s “impacts on both health outcomes and health policy, in improving the efficacy of teaching and learning of Indigenous health in Australasian medical education”. The judging panel commended the project’s “demonstrable national and international impacts on policy and practice in the present, and potential to deliver on health impacts in the future – in particular in narrowing the disparities in health status between Indigenous and non-Indigenous Australians”.

Left: Professor Terry Nolan, Ms Odette Mazel and Ms Caitlin Ryan, accepting the Melbourne School of Population Health Award for Excellence in Knowledge Transfer on behalf of the Leaders in Indigenous Medical Education (LIME) Project.

Below: Mr Paul Stewart, second from left, receiving the Norman Curry Award for teaching and learning innovation on behalf of the Onemda team. Pictured are recipients of awards at the Melbourne Teaching Showcase 2010, with the University’s Chancellor and Provost (L to R): Kate Darian-Smith, Paul Stewart, Cliff Ogleby, Chancellor, Pip Pattison, Robert Westerink, John Tobin, Provost. (Photo courtesy CSHE).

In 2010, Onemda was a recipient of the University’s prestigious Norman Curry Award for teaching and learning innovation. The award acknowledges Onemda’s program of Indigenous health curriculum reform, teaching and learning innovation, its role at the forefront of Aboriginal health teaching and learning initiatives within the University of Melbourne, and its leading role nationally and internationally. The award also acknowledges Onemda’s substantial and extensive research and development of the Aboriginal health curriculum as a strategic commitment to Aboriginal health workforce capacity development.
A research project exploring the issue of trust in research will face a slightly ironic challenge from the outset – how to convince other researchers to trust the ‘trust research’ investigators.

This Catch 22 situation hints at the complexities ahead for the investigating team behind ‘Trust me – I’m a researcher: The role of trust in human research enterprise’. The three-year project by the Centre for Health and Society got underway in 2010, funded by an ARC Discovery Project grant of $250,000.

The topic’s multi-linked layers and many potential avenues of exploration might partly explain why such an important area has been so under researched, both within Australia and overseas, says one of its co-investigators, Associate Professor Lynn Gillam. She believes the project could be a world first and have significant potential impacts on the practice and policies of research, nationally and internationally.

In analysing trust and trustworthiness in human research, the project will particularly focus on the meaning and role of trust between researchers and research participants. The Centre’s Director, Associate Professor Marilys Guillemin, Professor Doreen Rosenthal and Mr Paul Stewart are co-investigators.

Unlike informed consent, a core component in ethics research that has been well defined, trust is much less tangible, Associate Professor Gillam says. It varies according to the perspective of the researcher or research participant concerned, and may change according to the context and over time. “On some understandings of trust, it’s really an emotion rather than a considered judgement,” she says, “and that emotion might be really difficult to shift. Even though people may have had bad experiences they may continue to trust.”

The relationship between trust and informed consent illustrates one of the many potential benefits of the project. In a previous ARC-funded study into human ethics research, the investigators had discovered it was fairly common for a research participant to decline the full information that was offered by the researcher in the process of obtaining a participant’s informed consent; the participant preferred to trust the researcher.

From an ethical standpoint, this made researchers uncomfortable, Associate Professor Gillam says. “The researchers feel it puts all the responsibility back in their hands and the participants are saying ‘yes’ without really knowing what they are getting into. “One of the specific things that could come out of this is a set of guidelines about how to manage that particular situation,” she says. “We could improve our understanding of what informed consent is about and how to do it well if we recognise that it’s happening within this context of trust. At the moment it’s pretty context free – that’s one of the difficulties.”

The importance of context in understanding trust will be highlighted by case studies drawn from two areas: Indigenous research and research involving vulnerable participants, such as young or elderly people.

But the investigators first must overcome that initial hurdle. “We have to find researchers who are willing to trust us and make themselves a bit vulnerable because we’re going to speak to their research participants . . . There will be lots of negotiation ahead.”
CENTRE FOR HEALTH & SOCIETY

STAFF HIGHLIGHTS

In 2010 Ms Ngarra Murray was honoured as an Emerging Leader in the Fellowship for Indigenous Leadership program. This program assists those with a unique vision for improving the social, economic and emotional well-being of Indigenous communities in Victoria. The Emerging Leadership program aims to support exceptional people develop their leadership potential and to turn their vision for their community into reality. Recognising her great grandparents Pastor Sir Doug and Lady Gladys Nicholls with a memorial led Ms Murray to discover other stories from the community about their family leaders and role models. Ms Murray is currently in the process of developing a publication of past Victorian Aboriginal leaders from Victoria and a multi-media website with historical information, images and film. For Ms Murray, this project is about recognising and acknowledging family groups, traditional owners and community past leaders. She hopes that this will be a tool for young people to access information and learn about their family and leaders in their community. At the Long Walk Women’s Luncheon in October 2010, attended by the Governor General, Ms Quentin Bryce AC, Ms Murray spoke about leadership and inspirational Aboriginal women.

Mr Shaun Ewen was appointed the inaugural MDHS Associate Dean (Indigenous Development); this is the first appointment of its kind nationally. The position is a reflection of the Faculty’s commitment in relation to Indigenous development (students, staff, research, teaching and learning, partnerships, symbols and cultural recognition), and is an acknowledgement of Mr Ewen’s leadership in this area.

We were delighted to celebrate with Dr Therese Riley on her well-deserved promotion to Senior Lecturer.

Associate Professor Jane Freemantle was awarded a 2010 Faculty of Medicine, Dentistry and Health Sciences Annual Excellence Award for Contribution to Equity and Staff Development. The award was presented by the Dean, MDHS, Professor James Angus, at the 2010 MDHS Equity and Staff Development (E&SD) Forum. This award was in recognition of Associate Professor Freemantle’s academic and personal leadership in the CHS and at Ormond College in her role as Coordinator of the Ormond College Indigenous Program.

Ms Odette Mazel was awarded the 2010 MSPH award for academic administration. This award is in recognition of her outstanding leadership in the academic administration of both the ATNS and LIME projects since she has been at the Centre.

These are important awards that recognise and acknowledge the significant efforts of our colleagues.

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.

INTERNATIONAL VISITORS

We were pleased to host the following international visitors at CHS during 2010:

- September to December, 2010: Professor Kristin Heggen, Department of Health Sciences, Institute of Health and Society, Faculty of Medicine, University of Oslo, Norway, working with Associate Professor Marlys Guillemine in the areas of research ethics and methodologies.
- June 2010 to May 2011: Dr. Nilakshi Waidyatillake, postgraduate training for Community Medicine of the Post Graduate Institute of Medicine, Sri Lanka, working with Associate Professor Jane Freemantle on developing a data base that will include all births in Victoria between 1988 and 2008 with a more accurate and complete identification of Aboriginal births.

Above: Ms Ngarra Murray and the Governor General, Ms Quentin Bryce AC, at the Long Walk Women’s Luncheon.
Right: Associate Professor Jane Freemantle receiving her 2010 MDHS Annual Excellence Award for Contribution to Equity and Staff Development from Professor James Angus.
A simple ‘before and after’ comparison charts the impact of Onemda over its first decade. This milestone was achieved in 2010 as its inaugural Director, Professor Ian Anderson, moved on to fresh challenges.

Before Onemda VicHealth Koori Health Unit started in 1999, the six-year program for University of Melbourne medical students included just one two-hour lecture on Aboriginal health. Ten years later, Indigenous health is embedded in teaching and academic health agendas, within the University and nationally, thanks largely to Onemda’s efforts. Its achievements have been recognised in 2010 with the Norman Curry Award for Innovation and Excellence in Teaching and Learning.

Professor Anderson, who headed both Onemda and the Centre for Health and Society within the Melbourne School of Population Health, stepped down as Director of the Centre to become Director of the University’s Murrup Barak Melbourne Institute for Indigenous Development in November 2009.

In leaving Onemda, he reflected on its early priorities and pioneering leadership of Indigenous health education and research. “When Onemda was established there was no prior focus within the Faculty around Aboriginal health. It was really important to build the relationships to make this happen within the Aboriginal community and the community agencies,” he said. “The second thing was to develop a focus around teaching and learning.”

He likened the integration of Aboriginal health into teaching and learning across the curriculum to “a narrative thread” that students could follow through the various programs, and cited the appointment of Shaun Ewen as the University’s first senior lecturer in Aboriginal health as a significant milestone.

At a national level he pointed to Onemda’s influential role in brokering agreements covering Indigenous health content in medical training. By working with the peak body, Medical Deans Australia and New Zealand, Onemda drove the development of a national curriculum framework for Aboriginal health and medical education.

This led to the evolution of the LIME (Leaders in Indigenous Medical Education) network, a project he cites as being “particularly challenging” but the most rewarding. LIME now operates within all the medical schools, providing a forum to meet and exchange best practice.

Onemda has also built a research profile with a particular focus on work in the child health, chronic diseases and workforce space, he said. This has involved national collaborations through the Cooperative Research Centre for Aboriginal Health.

At a personal level, he found it deeply rewarding to have Onemda provide a mentoring role for the growing number of Aboriginal students. “And we’ve had a small number of Aboriginal students who were PhD students within Onemda and that has been great to see them move on and become successful.”

His role at Murrup Barak “broadens the canvas”, he said. “One major achievement in 2010 was to have the University agree to a draft reconciliation action plan – that’s a fantastic place to start.”

“We now have the University making a broad commitment to Indigenous development that aligns with the core business of the University and all faculties have a role to play.”

Professor Anderson paid tribute to Onemda staff in building collaborative relationships with diverse communities, from Aboriginal to academic and research interests. “The capabilities that exist within Onemda have been profoundly important.”

“I wish all my colleagues at Onemda the very best and it has been an enormous privilege to have worked with them.”
2010 was another highly successful year for the Centre in teaching, research and knowledge exchange.

In November 2010 we underwent our quinquennial review. The review panel included Professor Ruth Fincher (Chair), Professor Glenn Bowes, Professor Dorothy Broom, Professor Martha Hickey and Professor Robert Power. The review committee’s report was very complimentary, noting in particular the strength of our multi-disciplinary research and our incorporation of gender-focused studies as well as women’s health. The report recommended the continuation of the Centre for a further five years before it is reviewed again, a recommendation that was unanimously endorsed by the Faculty Executive Committee of the Faculty of Medicine, Dentistry and Health Sciences. As part of the review process, we developed a five-year strategic plan in the areas of research, teaching and learning, knowledge exchange and governance, which we are now implementing.

Last year we were re-designated as a World Health Organisation (WHO) Collaborating Centre in Women’s Health and have developed a workplan with them in the fields of disability, violence and women’s health, research capacity building in the region, teaching, and technical advice. This is a fine achievement for the Centre and, in part, reflects the leadership that Associate Professor Jane Fisher has provided in our international work over the past two years.

We continue to have a strong record of success in competitive grant funding. Some highlights include the awarding of three Australian Research Council (ARC) Linkage projects led by Dr Rebecca Bentley (Housing, Employment and Health), Associate Professor Jane Fisher (Fertility Management in Australia) and Professor Anne Kavanagh (Gender, Socio-Economic Disadvantage, Mental Health & Disabilities). Associate Professor Jane Hocking and Associate Professor Jane Fisher are lead investigators on two new National Health and Medical Research Council (NHMRC) grants, Evaluation of the effectiveness of chlamydia testing in general practice and Matters to women diagnosed with breast cancer during their reproductive years. We have been awarded many other grants and consultancies in collaboration with staff at the Melbourne School of Population Health (MSPH), the University and externally. More details of our research achievements are described below in our four theme areas: Cancer and Preventative Health; Gender and health inequities; Mental health and Wellbeing; and Sexual and Reproductive Health.

As part of the Centre review process, the review committee assessed the teaching and learning offerings of the Centre between 2005 and 2009. The Centre was found to have high student satisfaction with content of courses, subjects taught and quality of teaching. In addition, staff were commended for showing initiative in proposing and preparing new subjects. However, the Master of Women’s Health (Japanese) that has been delivered in Japanese in both Japan and Australia since 1992 was found not to be viable in the long term, and it was recommended that the Centre consider its future role in this course.

We also had the opportunity as part of the review process to devise a five-year strategic plan for teaching and learning, which will guide out activities over the coming years. As well as...
The Centre for Women’s Health, Gender and Society is using an Australian Research Council (ARC) Linkage Grant to reveal an untold story. According to Professor Anne Kavanagh, the Centre’s Director, there has been little Australian research on the mental health of people with disabilities. The Centre’s new research project adds a deeper dimension by examining the importance of gender and socio-economic disadvantage for the mental health of people with disabilities.

“If we can tell a coherent story we can use this as a real way of advocating for change, by providing evidence to support policy and service sector reform,” she says. “People in the disability sector have been crying out for this kind of information. They have been telling these stories for a long time and to have some empirical evidence can only help in their endeavours.” Collaborating partners in the project are Melbourne Citymission, VicHealth and the Victorian Women With Disabilities Network.

The project also aims to use the ARC’s four-year $200,000 grant to build research capacity in disability-related research and improve the monitoring of disability-related health inequities. “Disabilities have been a forgotten driver of inequality,” Professor Kavanagh says. “Mostly we think of disabilities as the medical condition, a kind of outcome, but I would argue that, for lots of reasons, disabilities are also a cause of poor health.”

People with disabilities are more likely to live in poverty because they have less access to the labour market, are more likely to live in poor quality housing and be unable to use transport, she says. “There’s something about the way society is organised that disadvantages these people in ways that then have important effects on their health.”

Professor Kavanagh says it is very important to maintain a gendered understanding of disability and ill health; the project will explore these links. “We know that women are more likely to have mobility impairments than men, partly because they live longer and are therefore more likely to develop impairments such as osteoporosis, arthritis and vision problems,” she says. “In the general population, we know women are more likely than men to live in poverty, to experience insecure employment and poorer quality housing.”

“The fact that they are more likely to experience both disability and disadvantage is a double whammy for women and likely to be important in describing women’s health.”

The project will mostly draw on existing data sources, including Australian Bureau of Statistics surveys and the longitudinal study of Household Income and Labour Dynamics of Australia (HILDA) Survey. Researchers will also interview people with disabilities.

Professor Kavanagh expects the research results to be “really profound”. “Preliminary analysis suggests that is the case.” She hopes the project will help drive reforms in this area. “There is emerging stronger advocacy for the disability sector and we certainly are getting a lot more advocacy and media attention around mental health. So I think the time is right to push this kind of agenda.”
continuing to offer a high quality teaching and learning experience for our students, we aim to provide more staff with the opportunity to gain and practice skills in teaching, and to continue to take advantage of opportunities to collaborate on MSPH or Faculty teaching initiatives.

Coursework Teaching
We played an active role in the redesign of the Masters of Public Health (MPh) and will be an integral part of the teaching staff in the Masters of Health Social Sciences to be introduced for the first time in 2011.

The Centre will be responsible for the delivery of the core subject, Surveys and Qualitative Methods.

Subjects taught in 2010 in either the MPh, or the MHSS were: 505-991 Gender and Health; 505-988 Social Determinants of Health; 505-533 Sexual and Reproductive Health; 505-525 Women and Global Health; 505-984 Behaviour Society and Health; and 505-986 Social Analysis in Health 1. We also had four students undertaking 505-947 Research Project in Women’s Health. Their topics included the experiences of female sex workers living with AIDS in Semarang, Indonesia, the treatment and prevention of malaria in pregnancy among Indigenous women of the Chittagong Hill Tracts, Bangladesh, and an analysis of gender in evidence on the health needs of asylum seekers and refugees. A further two students completed their Advanced Medical Science year at the Centre (Public Health Perspectives in Women’s Health), including a supervised research project and coursework.

Japanese Masters Program
In 2010, Women and Ageing and Women’s Health in Asia and the Pacific were both delivered to students enrolled in the Master of Women’s Health (Japanese).

RESEARCH
Cancer and Preventative Health
Centre staff conduct 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 2010, Dr Louise Keogh in collaboration with Associate Professor Mark Jenkins, Dr Louisa Flander and Dr Clara Gaff received funding from the Victorian Cancer Agency to conduct qualitative research into what people in mutation-carrying families understand about bowel cancer gene testing, personal risk and prevention behaviours. Dr Keogh presented pilot data on this topic at both the Collaborative Groups of the Americas in Dallas, Texas, in October, and the Familial Cancer, Research and Practice meeting in New South Wales (NSW) in August. Dr Keogh was invited to speak about genetic testing and insurance at the Clinical Oncological Society of Australia’s (COSA) Annual Scientific Meeting, “Cancer and Beyond”, in November.

Dr Keogh also led international collaboration looking at the disclosure of genetic research results in the Colon Cancer Family Registry (Colon CFR), through her role as the Chair of the Translational Working group of the Colon CFR. Results of this research were presented at the meeting of Collaborative Group of the Americas on Inherited Colorectal Cancer in October in Dallas.

Professor Anne Kavanagh, Dr Carolyn Nickson and Ms Kate Mason continued a program of epidemiological work on the efficacy of the BreastScreen Australia program, in collaboration with Professor Dallas English, from the Centre for MEGA Epidemiology, and Dr Graham Byrnes, from the International Agency for Research on Cancer. Professor Kavanagh continued her involvement as Chief Investigator (CI) on the National Breast Cancer Foundation Lifepool project, which started to recruit BreastScreen Victoria participants into a longitudinal study of breast cancer risk. This research is in collaboration with investigators from the Peter McCallum Cancer Centre, BreastScreen Victoria, the Royal Women’s Hospital and the Melbourne School of Population Health’s Centre for MEGA Epidemiology. Professor Kavanagh leads the stream in this study that is 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 continued to lead a research program in collaboration with the Department of Computer Science Software Engineering and the Commonwealth Scientific and Industrial Research Organisation’s (CSIRO’s) Australian e-Health Research Centre and Centre for Informatics, Mathematics and Statistics to devise and test image processing methods to automatically characterise breast density from mammograms. This work was funded by the Victorian Breast Cancer Research Consortium with in-kind contributions from the CSIRO. Dr Nickson also began new collaborations with BreastScreen Victoria and the Medical Imaging & Radiation Sciences Faculty Research Group at the University of Sydney to examine how breast radiologists perceive and are affected by dense breast tissue. She presented methods and findings at a range of forums, including CSIRO agencies, the Cancer Council NSW and the international meeting ‘Why Study Mammographic Density? A Plan for Future Research and Action’, for which she was a member of the Scientific Committee.

The Centre also contributed to studies of HPV and cancer. Associate Professor Jane Hocking was an investigator on an ARC linkage grant led by 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 worked on mathematical modelling of HPV and cervical cancer in the context of vaccination and screening with a group based at the Cancer Council NSW. This team was awarded a NHMRC Project Grant to expand this work from 2011, with Dr Nickson as a CI.

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 men and women, with a particular focus on chlamydia and HPV 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 (DoHA) project – the Australian Chlamydia Control Effectiveness Pilot (ACCEPt). This world first project is being conducted as a randomised controlled trial and aims to assess the feasibility, acceptability, effectiveness and cost-effectiveness of an organised program of annual chlamydia testing in general practice. General Practice (GP) clinics will receive a multifaceted intervention designed to facilitate increased chlamydia testing in general practice. ACCEPt received additional funding from the NHMRC to fund an extension of the intervention period until end of 2014. Until the end of 2010, GP clinics in 20 postcodes in Victoria, New South Wales and Queensland had been recruited to participate in ACCEPt. ACCEPt employs a research team of eight research staff based in Melbourne (Dr Simone Poznanski, Dr Dyani Lewis, Ms Chantal Maloney, Dr Jennifer Walker, Ms Eris Smyth, Ms Alaina Vaisey, Ms Anna Wood), one research officer based in Wangaratta (Ms Anne Shaw), Victoria, and a further two research staff based at UNSW in Sydney (Ms Lisa Edwards, Ms Rebecca Lorch). The design of ACCEPt was presented at 12th International Symposium of Human Chlamydial Infections in Salzburg in June.

The Chlamydia Incidence and Re-infection Rates Study (CiRiS) is also headed by Associate Professor Hocking in collaboration with Professor Christopher Fairley at the Sexual Health Unit, MSPH, and other investigators from the Department of General Practice at the University of Melbourne, UNSW and Australian National University. Dr Jenny Walker is completing her PhD on CiRiS based at the Centre. This prospective cohort study of young Australian women aged 16 to 25 years aimed to determine the incidence of chlamydia infection and was completed in early 2010. This study has generated Australia’s first community-based estimates of chlamydia incidence and chlamydia re-infection rates, important to determining the optimal interval for chlamydia screening.

Associate Professor Hocking also leads a research project examining the impact of chlamydia on the sexual, reproductive and mental health of Victorians and their health care system. Dr Danielle Newton, a research fellow, coordinates this project and Associate Professor Jane Fisher and Dr Louise Keogh are also investigators on this project.

Gender and Health Inequities

This research theme concentrates on how various social determinants of health, including housing, employment, place, disability and socioeconomic position, influence health with a concentration on the ways in which gender and gender relations intersect with each of these determinants.

2010 was the last year of the NHMRC Capacity Building Grant: The Australian Health Inequities program (AHIP), which we held jointly with Flinders University. Over the course of the grant we developed new collaborations in the fields of housing and health and work and health, which have led to the awarding of several major grants.

Dr Rebecca Bentley continues her work in the field of housing and health, with strong collaborations with Hanover Welfare Services, VicHealth and Adelaide University. This has included the production of a major report on housing on health in Australia, to be launched by VicHealth in 2011. An ARC Linkage grant awarded in 2010 will examine the relationships between precarious housing, employment and health.

Professor Anne Kavanagh is developing a program in the field of gender, disability and health. One of her interests is in how we improve the monitoring of health inequities related to disability. She prepared a report for VicHealth documenting the routine databases that have collected information on disability and developed recommendations how progress could be made in increasing the availability of sex-disaggregated data on disability. Professor Kavanagh was awarded an ARC Linkage grant on gender, disadvantage, disability and mental health in collaboration with researchers from the MSPH, Adelaide University, Hanover Welfare Services, Women with Disabilities Victoria, and VicHealth. This grant will assess the extent to which the poorer health of people with disabilities may be shaped by the considerable social and economic disadvantage in which they live. In particular, it will focus on how gender shapes the health experiences of people with disabilities.

Work continues on aspects of the built environment and health behaviours and cardio-metabolic diseases. Of particular interest is the impact of retail, recreation and transportation local environments. We place a strong emphasis on how the associations between the built environment and health outcomes differ for women and men. This work is conducted in collaboration with colleagues at the Baker IDI Heart and Diabetes Institute as well as Deakin, Harvard and Monash universities and the Queensland University of Technology.

Women’s Mental Health and Emotional Wellbeing

This program of work includes research projects investigating factors affecting mental health at the individual level (unplanned pregnancy and abortion, exposure to trauma, social correlates of mental health service usage, and mental illness labelling), at the health service level (assisted reproductive technology, pregnancy advisory services, prenatal genetic screening, caesarean section) and at the community level (reproductive decision-making, workplace discrimination during pregnancy and mainstreaming mental health in primary care). The program also includes evaluation research for primary prevention (a universal psycho-educational program for first-time parents of newborns) and secondary prevention (early parenting services, social work program for disadvantaged clients of early parenting services and psycho-educational intervention for pregnant survivors of trauma).

It has a growing focus on the mental health of women living in resource-constrained low and lower-middle income settings, including the prevalence and determinants of perinatal mental health problems in women in rural Vietnam, and health service use, mental health and maternal and infant health in rural Pakistan.

Outcomes of this program include the development, evaluation and knowledge exchange in varied health care settings and the community, and of interventions addressing key modifiable social
determinants to improve mental health in diverse groups of women during the childbearing year.

In May a group of academics and research higher degree students in the group presented a symposium, Challenging myths about women’s sexual and reproductive mental health: New evidence across the life course from the Centre for Women’s Health, Gender and Society, The University of Melbourne. It included evidence from eight studies that had used diverse methods and included in total more than 8000 women. Together they demonstrated that myths about women’s psychological functioning and emotional wellbeing – including their freedom to choose when, if and how many children to have; capacity to form protective attachments to their foetuses; access to maternity leave and entitlements; the causes of emotional distress after childbirth and responsibility for homelessness – are not supported by the evidence.

Projects have been initiated and conducted with international, national, state and community partners, including the World Health Organisation, the United Nations Population Fund, the Research and Training Centre for Community Development in Hanoi, the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs, beyondblue the national depression initiative, the Victorian Department of Health and Education and Early Childhood Development, the Royal Women’s Hospital, Melbourne IVF, the Murdoch Childrens Research Institute, Tweddle Child and Family Health Services, the Parenting Research Centre, the Salvation Army, the Council to Homeless Persons, Melbourne Citymission and the Family Access Network.

COMMUNITY ACTIVITIES

The Centre continues to have a strong focus on interactions with our key stakeholders, with some examples here.

In May, a large number of staff and students presented at the National Women’s Health Conference in Hobart on a range of topics related to women’s mental health, women’s sexual and reproductive health, and gender and health inequities.

In June, Professor Anne Kavanagh delivered the lecture Health inequality: where does gender fit in? in the Dean’s lecture series.

In relation to her work on the insurance implications of genetic testing, Dr Louise Keogh spoke at a combined meeting of the Royal Melbourne and Austin Hospitals Family Cancer Centres. Dr Keogh also appeared in a panel discussion on Feminism and Motherhood organised by facebook group, Cherchez La Femme, at the Fox Hotel, Collingwood, in August.

Dr Maggie Kirkman was invited to present a paper on children’s experiences of homelessness at the conference on Current Research and Advocacy Projects from the Not-For-Profit Sector, hosted by the RMIT School of Global Studies, Social Science and Planning, RMIT University.

Staff have also appeared in print media and on radio in relation to a number of key women’s health issues, including abortion and chlamydia infections.

INVITED CONFERENCE AND PUBLIC PRESENTATIONS, 2010

Bentley R and Baker E. Understanding the relationship between housing and health in Australia. Invited presentation to the Centre for Housing Research at the University of St Andrews, St Andrews, June.


Fisher JRW. Consultation on Scaling up the Care for Development Intervention in Three States in India, WHO SEARO (WHO regional office for South East Asia), June.


Hocking J. Epidemiology of Sexually transmitted infections in adolescents. 16th International Union against Sexually Transmitted Infection (IUSTI), Asia-Pacific Congress, May.

Hocking J. Is there a future for chlamydia screening in Australia.

Nickson C. Breast density and breast cancer screening. Centre for Women’s Health Gender and Society seminar series, March.

Nickson C. Breast density and breast cancer screening. Cancer Council NSW Research Updates series, June.

Rowe H. Developing a novel intervention to prevent infant sleep problems. What were we thinking! An Innovative Psycho-Educational Intervention. Invited presentation to the Infant Sleep Management Symposium. Parent-Infant Research Institute, Austin Hospital, Melbourne, April.

GRANT FUNDING

Bentley R, Baker E, Mallett S, LaMontagne AD, Beer AP, Kavanagh AM, Keys D, Kolar V. New directions in health inequalities research: understanding the intersection between housing, employment and health in Australia. Australian Research Council, $130,000.


Fisher JRW, Rowe H, Bayly C, Jordan L, McNamee K, McBain J, Sinnott V. Understanding fertility management in Contemporary Australia. Australian Research Council, $291,660; plus industry linkage contributions from the Royal Women’s Hospital, Family Planning Victoria, the Victorian Department of Health and Melbourne IVF, $225,000.

Fisher JRW. Systematic reviews of perinatal mental health in resource-constrained settings to inform counseling skills training for maternal health care providers; Aus4IO. Women’s and Children’s Health Hub at Burnet Institute, $24,000.

Fisher JRW, Rowe H. Adaptation and pilot-testing of a PTSD-specific psycho-educational intervention for pregnant survivors of trauma in Australia. Consultancy to the Institute for Women, Gender and Health, University of Michigan, $15,000.

Fisher JRW, Rowe H. New parents’ views about the prevention of...
postnatal depression and anxiety with an internet resource www. whatwerewethinking.org.au. beyondblue the national depression Initiative, $50,000.

Biggs BA, Fisher JRW. Dwyer T, Tran T, Ngoc N, Casey G. Does weekly iron supplementation increase iron uptake in pregnant women and improve maternal and infant health? National Health and Medical Research Council Project Grant 2010 – 2012, $500,900.


Kavanagh AM, Bentley RJ. LaMontagne AD, Baker E, Beer AP, Mallett S, Pate AE. The importance of gender and socio-economic disadvantage for the mental health of people living with disabilities. Australian Research Council, $204,425.


PUBLICATION HIGHLIGHTS


Advances in communication technologies have dramatically changed how individuals access information and communicate. Recent studies have found that mobile phone text messages (SMS) can be used successfully for short-term behaviour change. However there is no published information examining the acceptability, utility and efficacy of different characteristics of health promotion SMS. This paper presents the results of evaluation focus groups among participants who received 12 sexual health related SMS as part of a study examining the impact of text messaging for sexual health promotion to young people in Victoria.


Using data collected as part of a population-based study of over 11,000 adult Australians, we investigated the associations between two indicators of socio-economic position – education and household income – and biomarkers of cardiovascular disease and diabetes, including measures of glucose tolerance, dyslipidaemia, adiposity and hypertension. We found both lower education and income were more associated with poorer biomarker profiles in women.


As chlamydia diagnoses continue to increase in Australia and other developing countries, research is needed to investigate different methods for increasing chlamydia screening in an attempt to control continued transmission. This paper describes the results of a randomised controlled trial that aimed to determine whether a computer alert in a patient’s electronic medical record could prompt a doctor to increase chlamydia testing among young women in general practice. This trial found a 30% increase in chlamydia testing associated with the alert. This intervention is now being used in a large national trial of chlamydia screening in general practice funded by the Department of Health and Ageing and the National Health and Medical Research Council.

INTERNATIONAL VISITORS

Dr Kelly Hobbs, Department of Psychology, Sheffield University, United Kingdom.

Professor Nicola Low, Professor of Epidemiology and Public Health, University of Bern, Institute of Social and Preventive Medicine, Bern, Switzerland. Research Collaboration on the Australian Chlamydia Control Effectiveness Pilot (Co-Investigator).

Professor Gayle Letherby and Associate Professor Elizabeth Stenhouse (School of Midwifery Research), Plymouth University.

Dr Marilyn Crawshaw: Senior Lecturer, Department of Social Policy & Social Work, University of York; founder member of the British Infertility Counselling Association.
YEAR’S OVERVIEW

The McCaughey Centre was established in June 2006 with the support of the Victorian Health Promotion Foundation (VicHealth). The McCaughey Centre’s aim is to build knowledge about the social, economic and environmental foundations of community wellbeing and mental health. A defining feature of the Centre’s work is a commitment to working respectfully and collaboratively with partners and colleagues to strengthen health equity and reduce health inequalities.

The Centre undertakes research, policy development, teaching, workforce development and knowledge translation with a focus on:

• Reducing violence.
• Reducing discrimination.
• Increasing social participation and inclusion.
• Strengthening economic participation and security.
• Improving child health and wellbeing.
• Addressing the impact of climate change on community wellbeing.
• 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, public policy and service delivery agencies and in other culturally diverse contexts. The Centre hosts a number of major research, policy and knowledge exchange initiatives, including Community Indicators Victoria, the Cochrane Collaboration Public Health Review Group and the Jack Brockhoff Child Health and Wellbeing Program.

In mid-2010, the McCaughey Centre underwent a review of its performance and achievements in the period from 2006 to 2010. The review examined the Centre’s activities in research, teaching and workforce development, and knowledge translation and exchange, as well as its organisational achievements. The review was successful and resulted in a further six years of VicHealth funding for specified Centre activities, with step-down funding starting at an equal amount to its foundation period (2006-2011) in 2011, stepping down to zero funding in 2017, by which time the Centre is expected to have alternate sources of funding. The diversity of Centre funding has been growing steadily over time. By 2009, more than half of external funding came from sources other than the VicHealth Centre grant, and this continues to grow.

The Centre has also seen much change amongst its leadership staff over the past year. Professor John Wiseman, Foundation Director of the Centre, moved on to a new position within the University in late 2010. Professor Wiseman led the Centre from its beginnings in 2006. During his time as Director, he worked to build an inclusive and supportive working environment, and truly embodied the Centre’s focus on ‘knowledge for the common good’ through his research on community wellbeing, and the health impacts of climate change. In recent years, Professor Wiseman has formed links with several climate change research centres both within and outside the University, and will continue research in this area in his new position.

Also due to depart the Centre in June 2011 is Dr Marion Frere, the Centre’s first Deputy Director. Dr Frere has led the research in the area of reducing violence as an upstream
CENTRE’S DEVELOPMENT MUCH MORE THAN A NUMBERS GAME

There are two ways to tell the story of the evolution of the McCaughey Centre from an idea in 2006 to a significant national and international centre for research on community wellbeing, says its inaugural director, Professor John Wiseman.

“The first way is to talk about the numbers, about the 120 research and evaluation projects worth about $30 million, the 10 National Health and Medical Research Council (NHMRC) and seven Australian Research Council (ARC) projects on which Centre staff have been Chief Investigators, the more than 130 peer reviewed publications and over 80 research reports,” says Professor Wiseman. “That’s the story of outputs and products.

“But the other way to talk about our achievements is in relation to the key areas of work that the Centre focuses on, about how we’ve been able to build the Centre as a significant platform for research on the key social and economic determinants of community wellbeing.

“When we think about population health, when we talk about health promotion, it’s important to understand the social, economic and mental drivers And it’s the translation of that research by the Centre that has driven debate.”

Professor Wiseman stepped down from the role of Director of the McCaughey Centre in September 2010. He remains a Professorial Fellow with both the Melbourne School of Population Health, and the Melbourne Sustainable Society Institute at the University of Melbourne, where he is concentrating on work around climate change.

The McCaughey Centre started with a staff of two – Professor Wiseman and Centre Manager Ms Janine Campbell – and grew to a staff of 17 by its official launch in 2007. By the end of 2010, it had 34 academic and four professional staff, as well as 10 honorary fellows.

Professor Wiseman said the initial research priorities of the Centre included reducing violence and discrimination, increasing social inclusion and addressing the impacts of work stress. The Centre added to this with the Community Indicators Victoria project, providing information about the wellbeing of communities across the state. Then came the group of researchers working on child health and wellbeing, leading to the establishment of the $5 million Jack Brockhoff Child Health and Wellbeing Program.

“For me, what stands out has been the privilege of working with such a great range of researchers and policy thinkers who were really dedicated and committed to improving health equity and wellbeing. It has been inspiring. It has also been terrific to work within the context of the Melbourne School of Population Health, which brings together such a fine mix of people with those commitments.

“And I want to put on record my great appreciation for the initial and ongoing support of both the School and VicHealth, which both gave a very strong endorsement of the Centre in the review process in the middle of 2010.”

Professor Wiseman says the focus on climate change in his new role is a natural extension of his work at the McCaughey Centre. “I share the view put by the Lancet that climate change is one of the, if not the most, significant health challenges of the 21st century. I want to focus on developing a better informed public debate on the range of plans and strategies for reducing carbon emissions, and in particular how to get them implemented as opposed to just talked about.”
determinant of mental health and community wellbeing. 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. Dr Frere also contributed to the development of Community Indicators Victoria, and has recently contributed to the development of the Melbourne School of Population Health’s (MSPH) new Master of Public Health (MPH) program, as well as the School’s short course in Population Health, developed in partnership with the North Western Metropolitan Region of the Department of Health.

The McCaughey Centre’s new director, Professor Billie Giles-Corti, will commence in July 2011. Professor Giles-Corti comes to us from the Centre for the Built Environment and Health at the University of Western Australia (UWA), where she was Foundation Director. She is nationally and internationally recognised for her research into environmental factors impacting on community wellbeing and physical, social and mental health. Closely aligning with the goals of the McCaughey Centre, Professor Giles-Corti’s key focus is on building knowledge about the social, economic and environmental foundations of community wellbeing.

The next few months will bring an exciting time of renewal for the McCaughey Centre, as we welcome Professor Giles-Corti and enter into a new phase in the Centre’s history.

RESEARCH

In 2010 McCaughey Centre staff produced more than 40 peer reviewed publications and more than 20 non-peer reviewed publications, including a range of research and policy reports. Centre staff also successfully applied for several new research projects and contracts. A range of examples of project achievements and impacts are included below.

TEACHING AND WORKFORCE DEVELOPMENT

The Centre has 10 PhD students currently enrolled, plus two more submitted their PhDs for examination in 2010. In addition, McCaughey Centre academic staff are involved in the co-supervision of over 25 Research Higher Degree students across the University of Melbourne and other national and international universities.

McCaughey Centre staff have given guest lectures in University of Melbourne postgraduate course work subjects, as well as contributing to the supervision of numerous postgraduate course work theses. Staff have contributed to subjects in the new MPH, as well as courses across the University and at other local universities.

During 2010 Centre staff were responsible for developing and running short courses 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.

KNOWLEDGE TRANSLATION AND EXCHANGE

In 2010 Centre staff were responsible for many invited public lectures and conference presentations. The McCaughey Centre Seminar Series presented 14 seminars. In addition some staff were engaged in media advocacy, and Centre research has influenced national and other policy (see examples below and in Publication Highlights).

Centre staff are members of a range of Advisory Committees and Boards, including:

- Foundation House, Dental Sector Capacity Building, Project Advisory Group.
- Douta Galla Community Health Services, Talking About Teeth.
- VicHealth Advisory Committee on the Prevention of Violence Against Women.
- Windermere Child and Family Services Board.

Centre staff have also been involved in the organisation of a number of research conferences and symposia, including:

- A symposium on Researching Refugees and Asylum Seekers – Ethical Considerations. This symposium took place in November at the University of Melbourne, and was attended by approximately 100 people.
- A one-day workshop in May on Identification and Response to Perpetrators of Family Violence, which brought together international and national experts on perpetrators to speak and workshop with service providers from across Australia.
- A seminar and meeting between Family Violence: Actioning Interdisciplinary Research (FAIR) and the National Association for Preventing Child Abuse and Neglect (NAPCAN), as part of child protection week in May.

PROGRAM AREA ACHIEVEMENTS

Freedom from violence

Safety and Accountability in Families: Evidence and Research (SAFER)

This five-year Australian Research Council (ARC) Linkage project (2007-2012) on learnings from Victorian Family Violence reforms is being undertaken in partnership with the Department of Social Work and the School of Social and Political Sciences at Melbourne University and the Department of Social Work, Monash University. It is funded by an ARC Linkage Grant and Industry Partners are the Departments of Planning and Community Development, Human Services, Justice and Victoria Police. In 2010, SAFER undertook a statewide survey on integrated governance of service delivery in family violence and undertook supported questionnaires with over 130 women who had recent experiences of family violence.

Family Violence: Actioning Interdisciplinary Research (FAIR)

The FAIR initiative draws together research and evaluation capacity from across the University of Melbourne to prevent and respond to family violence. In 2010 FAIR hosted a major event on the Identification and Response to Perpetrators of Family Violence. The one-day workshop brought together over 150 participants.
from diverse backgrounds (international experts and local service providers) to further thinking on how best to respond to perpetrators in an integrated family violence system.

**Interdisciplinary Seed Grant – Intimate Partner Violence and Women’s Economic Security**

Intimate partner violence is a major health, social and economic issue with long-term implications for individual women, their children, families and communities and for society as a whole. The cost of violence against women and their children to Australia’s economy has been estimated at $13.6 billion in 2008-09* with nearly one in six women having experienced violence by a current or previous partner in their lifetime. Most will also have been employed at the time of the violence. Women who have experienced intimate partner violence are at risk of low income jobs, disrupted employment, inadequate income support and homelessness even though they may have work histories that are as established as non-abused women. Intimate partner violence also manifests itself in the workplace in numerous ways, which have yet to be fully explored in the Australian context. This study will examine the consequences of intimate partner violence for women and their dependent children in relation to: health and wellbeing; social and financial security; pathways to employment, training and education; and experiences of employment.


**Freedom from discrimination**

**The economic costs of racism in Australia**

This project is designed to produce sustainable benefits to Australian society through the provision of important data needed to promote investment in strategies to address race-based discrimination. This will benefit the lives of individuals experiencing race-based discrimination, including those from Indigenous and culturally and linguistically diverse backgrounds. It will also benefit society as a whole through promotion of social cohesion and community connectedness and the economic benefits resulting from increased productivity and workforce participation and reduced burden on health, social and welfare systems. The project is supported by an ARC Linkage Grant, and is in partnership with the Australian Human Rights Commission and VicHealth.

**Localities Embracing and Accepting Diversity (LEAD)**

Dr Yin Paradies has a significant role in the VicHealth-funded Localities Embracing and Accepting Diversity (LEAD) program, on which he acts as both a scientific advisor on implementation and a key member of the evaluation team. LEAD is a multi-million dollar place-based intervention to reduce race-based discrimination and support diversity utilising multiple and reinforcing strategies across diverse settings at the individual, organisational and community levels.

**Social inclusion and connectedness**

**Screen Stories and Community Connections**

This VicHealth funded project is being conducted in partnership with the Alannah and Madeline Foundation (AMF), VicUrban and the Department of Information Systems (University of Melbourne). The aim of this project is to increase understanding through qualitative research methods in domestic and community settings of the ways new media technologies and current forms of wireless and “broadband” provisioning are being used by families in different geographical settings (urban fringe; inner city) and different socioeconomic circumstances. This will allow for identification of environmental and behavioural factors influencing access to, use of, and experience of technology; and for identification of youth, family and intergenerational issues relating to technology and social inclusion/exclusion. The outcomes of the project are expected to inform the AMF cybersafety campaign to include the community context and to develop broader principles and outcomes for digital wellbeing, participation and literacy of young people and their families. Further, it will contribute to VicUrban’s design and construction of the Cardinia Road residential and business precinct being developed, which is situated on the urban fringe of Melbourne’s South-East growth corridor. The final report for Screen Stories and Community Connections was delivered to VicHealth in 2010.

**Economic participation and security**


McCaughey Centre workplace health research has been cited in support of the 2010 National Male Health Policy (http://www.health.gov.au/menshealthpolicy). The policy acknowledges that “employment and working conditions are key determinants of health and health equity” (page 22 in the main policy document), the background for which is provided in a companion document entitled National Male Health Policy Supporting Document: Healthy Workers. This background document cites and extensively quotes (two quotes of 119 and 50 words) the 2006 VicHealth Workplace Stress report led by Associate Professor Tony LaMontagne (www.vichealth.vic.gov.au/workplacestress) in support of Australian policy positions on the need to address job stressors and other working conditions as important preventable risk factors for mental disorders, cardiovascular disease, and poor health behaviours among working Australian males, as well as the need to address both ‘lifestyle’ health behaviours and workplace risk factors integratively in ‘work health programs.’

In 2010, the Australian Human Rights and Equal Opportunity Commission (HREOC) published a guide entitled Workers with Mental Illness: a Practical Guide for Managers (50 pages, freely available at http://www.hreoc.gov.au/disability_rights/publications/ workers_mental_illness_guide.html). The 2006 VicHealth Workplace Stress in Victoria report led by Associate Professor LaMontagne is referenced in the section entitled Creating a Safe & Healthy Workplace. This section communicates employers’ responsibility to prevent and control work-related contributions to mental illness. Recognising job stress as a major concern in this regard, the Guide references and endorses our finding that combined work- and work-directed intervention strategies are the most effective means of preventing job stress and associated
mental illness. This change represents a significant extension of HREOC’s previous interest in workers with a mental illness (concerning the potential for discrimination against workers with a mental illness, regardless of cause) to proactively highlighting employer duties to provide safe and healthy workplaces under other legal frameworks (occupational health and safety regulations). Having HREOC also communicate this message strengthens the likelihood that employers will effectively act to both prevent and accommodate mental illness among working Australians.

Cross-Centre Collaborative Research on Precarious Employment (2006-2011)
Associate Professor LaMontagne, Professor Anne Kavanagh and Dr Rebecca Bentley (Centre for Women’s Health, Gender, and Society) continue to work on a NHMRC funded project in collaboration with Flinders University. The project is entitled Changing patterns of work: impacts on physical & mental health & the mediating role of resiliency & social capital. Findings to date include a 2009 publication showing that women in casual or contract jobs were 10 times more likely to experience unwanted sexual advances at work compared to women in more secure permanent full-time positions. On-going analyses include long-term trends in psychosocial working conditions, and the influence of changes in psychosocial working conditions on mental health (using data from the Household Income & Labour Dynamics in Australia (HILDA) survey). Several conference papers and seminars were presented by the team this year, and this line of research work will be extended by a new ARC Linkage Project funded in 2010 entitled New directions in health inequalities research: Understanding the intersection between housing, employment and health in Australia, led by Dr Bentley and including Associate Professor LaMontagne and a number of others as Chief Investigators.

Capacity-building in workplace health
Associate Professor LaMontagne is one of four Chief Investigators (CI) on a $1.6 million NHMRC Capacity Building Grant entitled Linking research policy and health services to build a better evidence base for workplace public health (2009-2013). The grant is based at the Monash Centre for Occupational & Environmental Health, led by Professor Malcolm Sim, and also includes a UWA collaborator, Associate Professor Lin Fritschi. The grant provides salaries for PhD students, post-doctoral researchers, and early career researchers in workplace health, broadly conceived Occupational Health & Safety (OH&S), health promotion, physiotherapy and other disciplines, with a CI-led active mentoring program. A new full-time Research Fellow, Dr Fiona Clay, joined the Centre in January funded in part by the Capacity Building Grant. Another part-time Research Fellow appointment is also anticipated in the near future. In addition to building capacity in workplace health generally through this effort, this grant is also helping to build the Economic Participation and Security team at the McCaughey Centre.

New collaborative research projects in workplace health
A number of new research grants involving collaborations with external researchers were awarded to workplace health staff in 2010, including two small grants on job stress and occupational skin hazards from SafeWork Australia and the Institute for Safety Compensation & Rehabilitation Research (involving Associate Professor LaMontagne and Dr Tessa Keegel), an ARC Discovery project on migrant worker occupational health (involving Associate Professor LaMontagne in collaboration with Dr Alison Reid and others at UWA), and an NHMRC-funded intervention project to reduce sitting time at work (involving Associate Professor LaMontagne in collaboration with Associate Professor David Dunstan and others at the Baker/IDI).

Climate Change and Community Wellbeing

Liveable and Just
The Liveable and Just project, funded by Sustainability Victoria and commissioned by the Victorian Local Governance Association, was designed to improve local government understanding of the social impacts of climate change. As a result of the project, a toolkit was developed and launched in March 2010. The toolkit consists of four booklets:

- Addressing the social and equity impacts of climate change: The case for local government action.
- Reducing vulnerability: Strategies for local government to identify and reduce vulnerability to climate change.
- Engaging communities: Tips for effective and inclusive climate change community engagement.
- Building resilience: Ideas for local government to strengthen community resilience to climate change.

Child Health and Wellbeing

The Thrive Program – Building the capacity of family day care schemes to promote the mental health of children living in low socioeconomic areas
This project, led by Dr Elise Davis, aims to design, implement and test the appropriateness, acceptability, feasibility, cost and effectiveness of an intervention that builds the capacity of Family Day Care settings to promote children’s positive mental health, in partnership with VicHealth, Family Day Care Australia and Windermere Family Day Care.

Collaboration of Community-Based Obesity Prevention Sites (COOPS)
The COOPS Collaboration is an initiative being led by a collaborative group from the World Health Organisation, University of Sydney and University of Melbourne, with the support of the Australian Government Department of Health and Ageing. With a focus on rigorous evaluation, this project seeks to identify and analyse the lessons learnt from a range of community-based projects designed to prevent unhealthy weight gain, mainly in children and adolescents; identify the elements that make community-based projects successful; and share the knowledge gained with other communities.

SPLASH!
SPLASH! aims to examine the relationships between the impact of policy, industry and environmental factors on key areas of child health inequality in rural areas, namely children’s oral health and
nutrition. A range of issues have influenced parental choices and patterns of drink consumption, with drought, fluoridation and marketing of drinks influencing children’s drinking choice.

**Teeth Tales**

Teeth Tales is a University – community partnership between the McCaughey Centre, Moreland Community Health Service, Arabic Welfare, Victorian Arabic Social Services and Dental Health Services Victoria. The Teeth Tales study explored socio-cultural differences in child oral health care. Teeth Tales worked in partnership with the community and used qualitative research methodologies to explore the social, cultural and environmental determinants of the development of poor child oral health in refugee and migrant communities. This phase of the study was funded by Telstra and Dental Health Services Victoria and resulted in the development of a community-based intervention framework to promote equity in child oral health. This intervention framework was awarded ARC funding in 2009 and will be implemented and evaluated over the period 2010-2013.

**Building the capacity of family day carers to promote the mental health of children living in low socioeconomic areas (2010-2012)**

An ARC Linkage project grant was awarded to Dr Elise Davis and team to design, implement and test the appropriateness, acceptability, feasibility, cost and effectiveness of an intervention that builds the capacity of Family Day Care settings to promote children’s positive mental health, in partnership with VicHealth, Family Day Care Australia and Windermere Family Day Care.

**Bushfire Recovery Program**

The Jack Brockhoff Child Health and Wellbeing Program, McCaughey Centre, is engaged in a program of research studies addressing community health and wellbeing in the context of bushfires. These studies are being conducted with academic colleagues in partnership with community, emergency and government agencies to ensure the relevance of the approach and the findings and immediate translation into targeted outcomes. This program of research provides a means for a coordinated response to bushfires, capitalising on the resources and expertise of all stakeholders.

This program was awarded an ARC Linkage Project grant in 2010. The 2009 Victorian bushfires caused much loss of life, property destruction, and community disturbance. It is important for promoting better health and strengthening the social and economic fabric that an accurate understanding is achieved of the factors that contribute to optimal recovery from natural disasters. This project will survey people affected by the fires over five years to both profile adaptation after the fires and to identify the individual and community processes that influence outcome. This project, which is being undertaken in partnership by academic, disaster management, health and community organisations, will provide crucial information for shaping policy for disaster management in the years ahead.

A key feature of the Bushfire Program of research is the partnership approach. The connection between the research partners and the research participants is considered a valued and ongoing relationship in which there are likely to be shared interests and which will be maintained through ongoing communication and feedback.

**Knowledge Translation and Exchange**

**Cochrane Public Health Review Group (CPhRG)**

The Cochrane Collaboration is an international not-for-profit and independent organisation dedicated to making accurate up-to-date information on the effects of healthcare readily available worldwide. It produces and disseminates systematic reviews of healthcare interventions. Cochrane systematic reviews use a rigorous process to identify and synthesise all high-quality studies that address questions of relevance to decision-makers, practitioners and communities. Professor Elizabeth Waters, as the Coordinating Editor of CPhRG, heads up a strong and distinguished team of local and international collaborators responsible for overseeing the production, editing and publication of public health reviews, with a view to improving health and other outcomes at the population level. Achieving official registration in May 2008, CPhRG works closely with public health practitioners, policy makers and researchers to conduct reviews that reflect the evidence needs of those responsible for planning, delivering and funding public health initiatives.

(*Cochrane systematic reviews are available on www.thecochranelibrary.org.)

**Improving the reporting of public health intervention research**

Evidence-based decision-making in public health depends on high-quality and transparent accounts of what interventions are effective, for whom, how and at what cost. Improving the quality of reporting of randomised and non-randomised study designs through the CONSORT and TREND statements has had a marked impact on the quality of study designs. However, public health users of systematic reviews have been concerned with the paucity of synthesised information on context, development and rationale, implementation processes and sustainability factors. This project, examines the existing reporting frameworks for research against information sought by users of systematic reviews of public health interventions and suggests additional items that should be considered in future recommendations on the reporting of public health interventions.

**Knowledge translation strategies for obesity prevention**

Knowledge Translation for Obesity Prevention (KTOP) is an innovative research partnership project that aims to assess the effectiveness of knowledge translation strategies in Victorian local governments for obesity prevention. These strategies are intended to support the use of research evidence in local government decisions. The first component of the study, a state-wide survey and a series of key informant interviews, is now complete. The survey, which was open to all Victorian local governments, explored the different types of evidence that are used to inform public health planning, policy and practice decisions. Councils also were asked to identify ways in which they could be better supported to use research evidence in their decision-making. The second study component, a cluster randomised controlled trial, began in 2009. Informed
by the initial study components, the trial is evaluating the effectiveness of a number of strategies that are intended to increase the use of research evidence in local government public health decisions.

**CONFERENCES AND PUBLIC PRESENTATIONS**

McCaughhey Centre staff attended a range of local and international conferences throughout 2010, providing an important opportunity for staff to disseminate their research outcomes and learnings, and establish new networks and partnerships with academics from around the world in shared areas of interest. A sample of the conferences, international meetings and forums attended by McCaughey staff are included below:

**January**


**February**


Keegel T and LaMontagne AD. The utilisation of material safety data sheets and workplace consultation mechanisms after diagnosis of occupational contact dermatitis. National Research Centre for OHS Regulation Eighth National OHS Regulatory Research Colloquium, Canberra, 2-3 February.

LaMontagne AD. Integrating occupational health and workplace health promotion: Promise & practice. Mental Health & Health Promotion Divisions, ACT Health, Canberra, 4 February.


March


April

Chakraborty K, Gibbs L, Nansen B. Negotiating culture, space and identity: how innovative methods can support interviews with children. Paper presented at Association of Social Anthropologists of the UK and the Commonwealth Annual Conference. Queen’s University, Belfast, UK, 13-16 April.


Nansen B. IBES Social Infrastructure and Communities workshop, University of Melbourne, 29 April.

May


Keegel T, LaMontagne AD. Thorp A, Dunstan D. Are high levels of workplace sedentary time associated with exposure to an adverse psychosocial work environment? 3rd International Congress on Physical Activity And Public Health, Toronto, 5-8 May.

LaMontagne AD. Psychosocial working conditions & mental health: Assessing the problem & developing policy responses. Worksafe Victoria Stakeholder Consultation on Risks to Psychological Health, Melbourne, 6 May.

LaMontagne AD and Sanderson K. Estimating the economic benefits of eliminating job strain as a risk factor for depression. VicHealth Workplace Stakeholder Consultation Meeting, Melbourne, 7 May.


Riggs E. Addressing Child Oral Health Inequalities in Refugee and Migrant Communities, PhD Completion Seminar, University of Melbourne.


Riggs E, Block K, Gibbs L, Warr D. Working better together: evaluating inter-agency partnerships that promote social inclusion, Australian Health Promotion Association, Melbourne.

June


Block K, Riggs E, Gibbs L, Warr D. Supporting social inclusion for refugee youth, Diversity in Health Conference, Melbourne 7-9 June.

LaMontagne AD. Job Stress: What is it, what are its effects, and what can be done about it? Stop Occupational Stress Workshop, Australian Nursing Federation, Melbourne, 21 June.


Block K, Riggs E, Gibbs L, Warr D. Supporting social inclusion for refugee youth, Diversity in Health Conference, Melbourne, 7-9 June.


Riggs E. Addressing Child Oral Health Inequalities in Refugee and Migrant Communities Corporate Seminar Series, Dental health Services Victoria.

Excessive pressure at work is costing Australia’s economy $730 million a year due to job-stress related depression, a University of Melbourne and VicHealth report has revealed (www.vichealth.vic.gov.au/jobstrain).

The report, Estimating the Economic Benefits of Eliminating Job Strain as a Risk Factor for Depression, was funded by VicHealth and led by Associate Professor Tony LaMontagne, from the McCaughey Centre, in collaboration with Dr Kristy Sanderson, from the Menzies Research Institute in Tasmania.

Associate Professor LaMontagne has previously shown that “job strain”, where workers have little control over their job while under high pressure to perform, accounts for 17 per cent of prevalent depression in working women and 13 per cent in working men.

The $730 million per year job strain price tag includes lost productive time, employee replacement costs, government-subsidised mental health services and medications for depression. It equates to $11.8 billion over the average working lifetime, with the biggest loss accruing to employers.

The report also revealed an $85 million cost of absences for depressed workers who do not have access to paid sick leave, which also represents a significant cost to employees.

However Associate Professor LaMontagne said the figures underestimated the true costs of depression in the workplace, as other factors that increase the risk of depression such as bullying, sexual harassment and job insecurity were not included in the study. In addition, the study did not include the costs of mental health-related WorkCover claims. Workers’ compensation costs totalled about $209 million nationally per year for all ‘mental stress’ claims, including chronic stress as well as other categories such as occupational violence and bullying. “Claims thus represent only a fraction of potentially avertable costs, yet they are currently the main drivers of policy,” he said. “What we need is a stronger focus on prevention in order to best address this problem.

“These figures represent a significant burden on the Australian economy that is preventable by improving job quality.

“There are legal and ethical reasons for employers to address poor working conditions and to support staff, but these new findings add an economic incentive as well. Employers would be the major beneficiaries of reducing job strain over the long term, because the greatest costs fall on employers due to lost productivity and employee replacement.”
July

Bull T, Riggs E, Nchogo S. Exploring the need for an international code of ethics for health promotion: the way forward. IUHPE, Geneva.


Gold L, Johnson B. Is a school-based cooking garden worthwhile for the stakeholders? Workshop presented at the 20th IUHPE world conference on Health Promotion, Geneva, Switzerland.


Nchogo S, Bull T, Riggs E. Exploring the need for an international code of ethics for health promotion: quantitative findings. IUHPE, Geneva, Switzerland.


Riggs E, Bull T, Nchogo S. Exploring the need for an international code of ethics for health promotion: qualitative findings, IUHPE, Geneva.


Warr D. Bad reputations: Piecing together evidence for the harmful influences of neighbourhood stigma on health, XVII World Congress of Sociology, Gothenburg.


Williamson L. Research in Family Day Care, Geary Institute, University College Dublin, Dublin, Ireland.

Williamson L. Research in Family Day Care, Childminding Ireland, County Wicklow, Ireland.

August
LaMontagne AD, Holloway A, and Lee G. SMRP Expression in a Cohort of Australian Asbestos-exposed Power Industry Workers. 10th International Conference of the International Mesothelioma Interest Group (IMIG), Kyoto, Japan, 31 August – 3 September.

LaMontagne AD, Holloway A, and Hunter C. Research in asbestos disease-affected communities – can research process aid social healing? 10th International Conference of the International Mesothelioma Interest Group (IMIG), Kyoto, Japan, 31 August – 3 September.

LaMontagne AD. Workplace mental health promotion: some recent research findings. Victorian Premier’s Task Force on Healthy Workers, Melbourne, 2 August.

Williamson L. Research in Family Day Care, Invited Speaker at the NSW Carer’s Association Conference, Port Macquarie, NSW, 28 August.

September
LaMontagne AD, K Sanderson and F Cocker. Estimating the economic benefits of eliminating job strain as a risk factor for depression. Australasian Epidemiological Association (AEA) 19th Annual Scientific Meeting, Sydney, Australia, 29 September – 1 October.


Keegel T, LaMontagne AD. Thorp A and Dunstan D. Are high levels of workplace sedentary time associated with exposure to an adverse psychosocial work environment? Australasian Epidemiological Association (AEA) 19th Annual Scientific Meeting, Sydney, 29 September – 1 October.

Nansen B, Chakraborty K, Gibbs L. Screen Stories project. Poster presentation IBES inaugural Annual Symposium, University of Melbourne.

Oliver J. The Indigeneity Complex. Australian Association of Social Anthropologists, Annual Conference, Deakin University, Geelong.
October


LaMontagne AD, Bentley R. Psychosocial work environment and mental health: Building the case for intervention, Melbourne School of Population Health, University of Melbourne, 13 October.

LaMontagne AD. Fitzpatrick T. Mental health promotion in the workplace: Recent evidence. Victorian Public Service (VPS) Mental Health Week Festival, Department of Health, Melbourne, 11-15 October.

LaMontagne AD. An integrated approach to workplace health promotion. Mental Health Promotion Conference, Benalla, Victoria, 5 October.


Williamson L. Research in Family Day Care, Invited Speaker at the Community Child Care Professional Development Forum, Melbourne, 15 October.

November

LaMontagne AD and D’Souza RM. Combined exposures to workplace psychosocial stressors: Estimating the contribution to poor mental health in a sample of working Australians. American Public Health Association Annual Meeting, Denver, USA.

LaMontagne AD. Psychosocial work environment and mental health: Building the case for intervention. Center for the Promotion of Health in the New England Workforce (CPH-NEW), Department of Work Environment, University of Massachusetts AT Lowell, USA, 3 November.


Williamson L. Research in Family Day Care, Invited Speaker at the National Family Day Care Forum, Sydney, 6 November.

PUBLICATION HIGHLIGHTS

In 2010 the McCaughey Centre produced two book chapters, 27 refereed journal articles, and one refereed conference paper for inclusion in the annual Commonwealth Department of Education, Science and Training (DEEWR) publications count. In addition, the Centre produced six non-refereed journal articles, four major reference works, one non-refereed conference paper and six major reports or working papers throughout 2010. A number of publication highlights are included below, and a full list of publications can be located in the main publications section of this report.


This VicHealth-published report led by Associate Professor Tony LaMontagne in collaboration with two University of Tasmania colleagues found that substantial economic benefits could be realised by preventing job strain-attributable depression, and that most such economic benefits would accrue to employers through gains in productivity costs. The report received substantial media coverage, including TV interviews on ABC2 News Breakfast and Sky Business News. Radio coverage included interviews on various AM and FM stations (e.g., ABC774 Melbourne and ABC NewsRadio Sydney), as well as widespread print coverage, including in the Financial Review with an accompanying commentary from the CEO.
of VicHealth, Todd Harper, as well as coverage in The Australian and a front-page story in the MX (Sydney). There were over 80 electronic media/website mentions, including internationally, when tracking ceased mid-November.


This paper described the extent to which parent-reported and teacher-reported child mental health problems vary by different indicators of socioeconomic status, using data from the Longitudinal Study of Australian Children (LSAC). The results demonstrated that the proportions of children scoring in the abnormal range varied according to socioeconomic indicator and mental health subscale. All of the SES indicators independently predicted parent-reported child mental health problems, although odds ratios were generally small to moderate (1.2 to 2.4) and not all reached statistical significance. Behavioural problems showed stronger associations with social disadvantage than emotional problems. Research examining pathways to young children’s mental health should include diverse measures of socioeconomic status, particularly of family income and education. The fact that mental health problems were most strongly associated with parent education and income should be of interest to policy-makers, since education and income reflect investments in the lives of our participants’ parents during their own childhood and adolescence


This paper is the fruit of a long-time cross-centre collaboration between researchers based in the McCaughey Centre and the Centre for Health Policy, Programs and Economics (CHPPE). It is one of a series of published papers exploring associations between health and place in socioeconomically disadvantaged neighbourhoods. The data were collected as part of the State Government’s Neighbourhood Renewal strategy where university-based researchers collaborate with community-based peer-interviewers to conduct bi-annual surveys of 300 residents living in each of the 22 Neighbourhood Renewal sites. This paper brings together quantitative and qualitative analyses, and examines issues of place-based stigma that is widely reported by residents living in disadvantaged neighbourhoods but which, to date, has received limited attention in the public health research.

The paper is one of the first studies to use a mixed-methods approach and to explore the quantitative dimensions of perceptions of place-based stigma. The paper identifies associations between perceptions of negative neighbourhood reputation and poorer self-reported health. These associations were more marked for residents from migrant backgrounds, with higher education levels and younger residents. The paper suggests the potent effects of place-based stigma on residents’ self-esteem and self-confidence and in limiting social and economical opportunities. The analyses have been critical in establishing a rationale for further research into the personal, social and health effects of living in neighbourhoods that have negative reputations among the wider communities. A successful application to the University of Melbourne Interdisciplinary Seed Funding scheme was used to conduct a pilot work for an innovative study that explored the potential for disadvantaged communities to challenge stigmatizing stereotypes. An ARC Linkage application has since been submitted to further develop and extend this promising work. If successful, MSPH researchers will be working with researchers from Victorian College of the Arts and Music, The Faculty of Architecture, Building and Planning, and the Centre for Public Policy. Organisational partners are the Brotherhood of St. Laurence, VicHealth, Wyndham City Council, Goldfields Central Shire Council and the City of Banyule.
2010 was a very good year for the Centre for Health Policy, Programs and Economics (CHPPE) in a number of ways. We made major contributions to the School and to the University through our efforts in research and research training, teaching and learning, and knowledge exchange.

Our research inputs and outputs continued to grow in 2010. We received, along with our collaborators, $7 million in research funding, and published 31 peer-reviewed journal articles and 23 major reports (compared with 27 and 12, respectively, in 2009). Some of our newer staff had particular successes here. For example, Dr Matthew Spittal was pivotal to our securing an NHMRC project grant for a study looking at suicide method substitution for individuals over time. Our research training efforts were also impressive. We had 24 students enrolled in PhDs and two enrolled in an MPhil. Three of these students submitted excellent theses and are awaiting their results – Dr Katherine Ong (PhD), Mr Michael Otim (PhD) and Ms Pauline Van Doort (MPhil). Four others who submitted their theses in 2009 were awarded PhDs in 2010 – Dr Kiusiang Tay-Teo, Dr Sonja Hood, Dr Noeline Bennett and Dr Stephen Lambert.

Our teaching and learning activities kept us very busy. We had 196 student enrolments in our postgraduate coursework units in Program Evaluation and Health Economics as part of the Master of Public Health (MPH). We also had 12 students undertaking research projects in health economics, and 17 doing so in program evaluation, with a total of 23 students completing their projects in 2010. In addition, a number of our staff were heavily involved in the redevelopment of courses under the Melbourne Model which are to commence in 2011. Professor David Dunt spearheaded the introduction of population health teaching into the new graduate-entry MD, which elevated its status to that of other biomedical disciplines. Professor Dunt, Ms Rosemary McKenzie and Dr Arthur Hsueh were involved in the redevelopment of the MPH, which will now be entirely based at the University of Melbourne from 2011. We will be coordinating two of the six core MPH subjects (Foundations of Public Health and Public Health Leadership and Management), as well as eight other subjects (Health Economics 2, which is new, Health Policy and Health Systems, which have been significantly redeveloped, and existing subjects Health Economics 1, Economic Evaluation 1 and 2 and Health Program Evaluation 1 and 2).

We continued to play a key role in influencing policy and practice. For example, my own team’s work on the evaluations of the Better Access initiative and the Better Outcomes in Mental Health Care program made important contributions to policy debates about models of delivering primary mental health care. Likewise, Associate Professor Margaret Kelaher’s work on strategies to improve the identification of Aboriginal and Torres Strait Islander patients in general practice was used as a key resource by Divisions of General Practice in their implementation of Closing the Gap. Dr Diana Bowman was invited to be a Member of the Australian Government’s National Enabling Technologies Strategy Expert Forum, which was established to assist the Government in identifying opportunities and challenges associated with emerging technologies over the next 5-10 years.

Other important highlights of the year include various awards. Dr Marie Bismark won the Graham Rouch Victorian Award from the...
**IDENTIFYING INDIGENOUS PATIENTS A HEALTH PRIORITY**

Why is it relevant to identify a patient as being Aboriginal or Torres Strait Islander? Researchers working on a project aimed at doing just that often encountered this question, and both health professionals and indigenous communities raised it.

However, strong goodwill for the project was generated once the link between identifying Indigenous Australians and providing them with better health care was understood, says one of its lead researchers, Associate Professor Margaret Kelaher, Deputy Director of CHPPE (Centre for Health Policy, Programs and Economics) at the Melbourne School of Population Health. “As part of the Commonwealth Government’s ‘Closing the Gap’ initiative, new measures were introduced to improve Indigenous people’s access to medical services,” she says. “One of the major barriers to having people take up some of those services was the problem of identifying who is Indigenous and therefore eligible for them.”

In simple terms, the project’s aim was to make it easier for health professionals to ask patients another question, one that could help improve their lifelong health: Are you of Aboriginal or Torres Strait Islander descent? This could lead to preventative health measures, such as immunisations, and/or earlier diagnosis and treatment for chronic diseases like diabetes, for which Indigenous people are at higher risk.

CHPPE’s involvement was as a member of the Cooperative Research Centre for Aboriginal Health. The project, Improving the Identification of Aboriginal and Torres Strait Islander People in Mainstream General Practice, produced a series of recommendations (see link below) to apply at practice level, community and regional level, and national level.

The project’s report emphasised that for identification strategies to be effective, they had to be relevant to both health professionals and Indigenous people, attractive to introduce, achievable and necessary. Recommendations for the latter included tightening accreditation to require GPs to do cultural competency training to ensure their practices were safe places for patients to identify themselves as being Indigenous.

Consultations with Indigenous leaders had confirmed that the option to do so had to be voluntary. “From the outset of the project we explored with community leaders what they thought best practice was and they rejected some options, such as putting a permanent marker on your Medicare card,” Associate Professor Kelaher says. “This was seen as negative because people don’t get to choose under what circumstances they get to identify and it could make them potentially vulnerable to discrimination.”

The researchers identified attitudinal, administrative and organisational barriers to better identification. An organisational barrier at a health clinic, for example, might include poor communication between reception staff and health professionals about a patient’s Indigenous status.

The project’s recommendations have been well received by GPs attending General Practice Network workshops. “People have been very positive and there have been a whole lot of new Aboriginal health care workers employed as part of the Government’s indigenous chronic disease initiative,” Associate Professor Kelaher says. “They say they’ve found the research we did very useful in guiding their activities.”

For a full list of the recommendations, visit the Indigenous health link at: [http://www.anu.edu.au/aphcri/](http://www.anu.edu.au/aphcri/)
Australasian Faculty of Public Health Medicine for her study (with Dr Matthew Spittal and Professor David Studdert) examining the characteristics of complaint prone doctors in Australia, and I won Suicide Prevention Australia’s Lifetime Research Award. Associate Professor Margaret Kelaher was successful in being awarded an ARC Future Fellowship and Dr Helen Jordan was awarded her PhD from the University of Tasmania for her thesis titled Estrogen treatment for tall stature in adolescent girls: short- and long-term effects on the breast. Our PhD students were recognised too – for example, Mr Derek Yee-Tak Cheung received PHIRST (Population Health Investing in Research Students’ Training) funding to attend a suicide prevention conference in Brisbane.

I would like to thank all CHPPE staff for their commitment in 2010. Without their unceasing efforts, none of the above achievements would have happened. Next year will be an important one for us because we are one of three centres in the School that will be undergoing a review. I am confident that we will continue to achieve the same sorts of successes next year, and into the future.

**LEARNING AND TEACHING**

The postgraduate teaching program continues to be an important part of CHPPE’s work. Health policy and health systems complement the longstanding teaching areas of health program evaluation and health economics. Short courses providing non-accredited health program evaluation training meet an important health workforce need and provide a link into accredited programs. In 2010 enrolments were again strong across the Master of Public Health (MPH), higher degree and short course offerings. Ongoing demand for advanced training in policy, program evaluation and economic evaluation underpin enrolments, coupled with the state and national reputation of CHPPE as a leader in these fields.

CHPPE staff continued to offer their teaching expertise to other faculties at the university and to other institutions.

**Master of Public Health**

Teaching staff had a particularly busy year as they prepared for the transition in 2011 from the Victorian Consortium of Public Health to a stand-alone Melbourne School of Public Health MPH.

The final year of the Consortium subject Health Economics and Program Evaluation, undertaken as a core subject by students from Deakin, La Trobe, Monash and Melbourne universities was once again coordinated by Dr Arthur Hsueh and Ms Rosemary McKenzie. Professor David Dunt, Ms Theonie Tacticos, and Dr Lucio Naccarella (Australian Health Workforce Institute) contributed to the lecture series. A large team of staff experts in health economics and health program evaluation joined the coordinators and lecturers in delivery of tutorials to the 79 students enrolled in the subject. Thanks to Dr Cathy Segan, Ms Angeline Ferdinand, Ms Kristen Moeller-Saxone and Mr Peter Feldman for their assistance in health program evaluation tutoring and to Dr Kiusiang Tay-Teo, Ms Catherine Keating, Mr Steve Crowley, Ms Chiara Mariano and Dr Sophy Shih for their assistance with health economics tutoring.

CHPPE offered a range of subjects in the MPH:

- Australian Health Systems, coordinator Dr Helen Jordan (with Professor David Dunt).
- Health Economics, coordinator Dr Arthur Hsueh.
- Economic Evaluation 1, coordinator Dr Arthur Hsueh/Mr Steve Crowley.
- Economic Evaluation 2, coordinator Mr Steve Crowley.
- Research Project in Health Economics, coordinator Dr Arthur Hsueh.
- Health and Public Policy, coordinator Dr Helen Jordan.
- Health Program Evaluation 1, coordinator Ms Rosemary McKenzie.
- Health Program Evaluation 2, coordinator Ms Rosemary McKenzie (with Professor David Dunt).
- Research Project in Health Program Evaluation, coordinator Ms Rosemary McKenzie.

Delivery of teaching was supported and greatly enhanced by Ms Joy Yeadon, who provided comprehensive administrative support across all subjects and short courses. The teaching staff record their appreciation for Ms Yeadon’s contribution to teaching and learning in CHPPE.

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 in diverse settings, often with the cooperation and support of public health agencies and service providers, with such collaboration providing a further learning experience for students. In 2010, 10 students completed a research project in economic evaluation and 13 completed a research project in program evaluation. Research projects were of a high standard and contributed to health program improvement in Australia and overseas.

Students completed research projects on the following topics:

- **Sokkab An**, supervisor Dr Arthur Hsueh. Cost effectiveness of Chlamydia Trachomatis screening in pregnant women attending antenatal care age 16 to 25 in Melbourne, Australia.
- **Alisha Devji**, supervisor Ms Rosemary McKenzie, co-supervisor Associate Professor Jane Tomnay, Centre for Excellence in Rural Sexual Health, Shepparton. Evaluation Protocol for the Implementation and Impact of CERSH (Centre for Excellence in Rural Sexual Health).
- **Thomas Donovan**, supervisor Mr Steve Crowley. Funding high cost cancer medication in an HTA environment.
- **Martin Duffy**, supervisor Dr Arthur Hsueh. The Health Economics of Alternative Providers of Anaesthetic Care.
- **Anna Flego**, supervisor Mr Andrew Dalton. Is the addition of dietician management into the laparoscopic gastric banding (LAGB) surgery pathway in Tasmanian public hospitals likely to be cost effective? An exploratory analysis from an economic perspective.
Kate Gilbert, supervisor Ms Rosemary McKenzie. Pluralistic evaluation of an online community formed by people with Type 1 Diabetes, investigating the values and success criteria which each of the key stakeholder groups ascribe to the program.

Adina Hamilton, supervisor Dr Arthur Hsu. Research protocol for investigating costs associated with hospital patients waiting for residential aged care.


Angie Hunter, supervisor Ms Rosemary McKenzie. Developmental evaluation of fostering leadership within the executive of an area based mental health service: When the journey is more important than the destination.

Sally Anne Kinrade, supervisor Mr Andrew Dalton. Lapatinib plus paclitaxel compared with paclitaxel alone or in combination with trastuzumab for the initial treatment of HER2+ Metastatic Breast Cancer: a pilot economic evaluation.

Xiaolu Liu, supervisor Professor David Dunt. An evaluation for the Outcome Measures of the Mother and Baby Outreach Program.

Chaunoda Maphane, supervisor Professor David Dunt. Protocol for evaluation of familial influence on compliance with HIV-AIDs therapy in Botswana.

Kendra McLean, supervisor Mr Andrew Dalton. Economic evaluation of a group-based exercise program for falls prevention among the older community-dwelling population.

Lenice Murray, supervisor Ms Rosemary McKenzie, co-supervisor Dr Penny Mitchell. Reviewing the usefulness of an audit tool for a Mental Health Capacity Building Project in a youth substance abuse service.

Mduuduzi Ndlovu, supervisor Professor David Dunt. A Process Evaluation of the Royal Women Hospital’s Language Aide Pilot Project.

Thi Hoang Phung Nguyen, supervisor Ms Rosemary McKenzie. Effectiveness and sustainability of the pilot Methadone maintenance treatment in Ho Chi Minh City, Vietnam.

Thi Thu Trang Nguyen, supervisor Ms Rosemary McKenzie, co-supervisor Associate Professor Jane Fisher. A formative study of factors influencing the mental health of new mothers in rural Vietnam.

Zoe Ruwoldt, supervisor Mr Steve Crowley. Issues in decision making when assessing targeted anticancer therapies for reimbursement: A case study of Trastuzumab in Australia.

Chelsea Taylor, supervisor Ms Helen Jordan, co-supervisor Dr Lisa Gibbs. Evaluating the sustainability of the Stephanie Alexander Kitchen Garden program.

Emma Tinning, supervisor Dr Arthur Hsu. The potential for introducing managed competition to the management and delivery of TAC related health care.

Rebecca Tracey, supervisor Professor David Dunt. Evaluation of the ‘Clinical Marker Score’ in the PICU (Paediatric Intensive Care Unit) Liaison Nurse Program: Analysis of an existing Data-set.

Stuart Turner, supervisor Mr Steve Crowley. IFI-CosTR: A protocol for the cost-effectiveness evaluation of empiric antifungal use in Turkey.

Cara Waller, supervisor Associate Professor Margaret Kelaher, co-supervisor Ms Angelina Ferdinand. Exploring community benefits: the Wathaurong Physical Activity Program experience.

Higher Degree Students

There were 24 PhD students enrolled in 2010. Dr Kiu-siang Tay-Teo, Dr Sonja Hood, Dr Noelene Bennett and Dr Stephen Lambert were awarded their PhD’s during 2010.

Dr Kiu-siang Tay-Teo, supervisor Professor Jane Pirkis, co-supervisors Professor Robert Carter, Associate Professor Chris Doran and Professor Wayne Hall. Priority setting for prevention of cannabis use in Australia.

Dr Sonja Hood, supervisor Professor David Dunt, co-supervisors Professor Jane Pirkis and Dr Susan Phillips. From evidence to practice: Improving the pharmacological management of heart failure.

Dr Noelene Bennett, supervisor Professor David Dunt, co-supervisor Professor Denis Spelman. The development and evaluation of the Victorian Hospital Acquired Infection Surveillance program (VICINISS) for ‘smaller’ public acute hospitals.

Dr Stephen Lambert, supervisor Professor Terry Nolan, co-supervisors Professor John Carlin, Professor Jonathan Carapetis and Professor Rob Carter. Getting evidence into practice! The management of heart failure in Australia.

Short Courses

The short course in Health Program Evaluation: Scoping the Evaluation is coordinated and delivered by Dr Helen Jordan, a lecturer at the Centre for Health Policy, Programs and Economics and administered by Ms Joy Yeardon, Centre Administrator. The course typically runs for three days, but shorter courses (one and two-day) were also offered and delivered in 2010 to government agencies across Australia. The three-day course was delivered at the Centre for Health Policy, Programs and Economics in February, July and November of 2010. Dr Jordan also ran one two-day course for the Menzies Research Institute, University of Tasmania; two three-day courses for the NSW Cancer Institute, Sydney; one one-day course for ACT Health, Canberra; one one-day course for the Mental Health Community Coalition ACT Health, Canberra; one two-day course for the Department of Health, Western Australia, Perth; and one two-day course for the National Prescribing Service, Sydney. Approximately 150 health professionals working in government, health services, health promotion and the university sector participated. Participants also included health professionals from Indonesia.

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
Dr Marie Bismark delivered the Melbourne Law School Masters subject ‘Patient Safety and the Law’, together with Professor Ron Paterson from the University of Auckland.

Dr Arthur Hsueh delivered the following invited special lectures:
- Hospital Accreditation System Reform in Taiwan. Health Care Quality (HCQ), School of Public Health, Faculty of Health Sciences, La Trobe University, 9 June.
- Clinical Governance and Effective Hospital Management. Health Care Quality (HCQ), School of Public Health, Faculty of Health Sciences, La Trobe University, 28 June.
- Patient Safety and Quality of Health Care in Hospitals. Health Care Quality (HCQ), School of Public Health, Faculty of Health Sciences, La Trobe University, 27 July.
- Introduction of Health Economics to Mental Health Care Leaders and Managers. Australian Mental Health Leadership Program (ausMHL). Melbourne School of Population Health, Faculty of Medicine, Dentistry, and Health Sciences, University of Melbourne, 3 September.

RESEARCH
The ChPPE undertakes evaluations of health programs and policies at international, national, state and local levels. Since its establishment, the ChPPE has attracted over $56 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 the ChPPE and the remaining funding has been shared with collaborating agencies.

During 2010, $7 million in collaborative research funding was received, with 3-1 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 below 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 2010 the research focused on economic evaluation.

The following new project commenced in 2010:

**Estimating value for money in rolling-out programs and services in eye disease in Indigenous communities in Australia.**

**Funding Body:** Harold Mitchell Foundation, Ian Potter Foundation and Greg Poche Donation via the Indigenous Eye Health Unit, Melbourne School of Population Health.

**Chief Investigators:** Professor David Dunt, Dr Arthur Hsueh, Mr Alex Brando.

**Description:** This study examines the constraints on the full provision of eye services to Aboriginal people particularly in remote locations. It aims to develop estimate funding requirements for a model that will provide an optimal range of services.

**Funding total:** $109,510; ChPPE $109,510
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.
- Increasing community pharmacy involvement in the prevention of cardiovascular disease.
- Spinal cord injury and physical activity – nationwide random controlled trial across Australia and New Zealand.
- Assessing Cost Effectiveness (ACE) in prevention (funding for two PhD scholarships).
- Priority setting in Aboriginal health: Planning for the prevention of non-communicable diseases in Aboriginal and Torres Strait Islander Communities (funding for PhD scholarship).

**LAW & PUBLIC HEALTH**

Early in 2010, Dr Marie Bismark and Dr Diana Bowman joined the Law and Public Health group. Dr Bismark, a dual-qualified doctor and lawyer, came from private legal practice in Wellington. Dr Bowman, an expert in science and technology regulation, came from the Centre for Regulatory Studies at Monash University. In addition, Ms Paula O’Brien, a Senior Lecturer at Melbourne Law School, commenced a PhD examining alcohol regulation under the supervision of Professors David Studdert and Robin Room.

The Law and Public Health group launched two externally-funded projects in 2010:

### Learning from Preventable Deaths: A prospective evaluation of reforms to Coroner’s recommendation powers in Victoria.

**Funding Body:** Australian Research Council (ARC).

**Chief Investigators:** Professor David Studdert, Professor Jane Pirkis, Professor Graham Sewell (Department of Management and Marketing, University of Melbourne).

**Partner Organisation:** Department of Justice, Office of the State Coroner.

**Description:** Coroners in Australia investigate nearly 13,000 deaths each year and have a unique vantage point on health and safety risks. The public as a whole will benefit from information that helps translate those insights into system changes that work to prevent injuries and accidents from occurring. This project is designed to produce such information. It will also serve stakeholders at several other levels. By illuminating circumstances in which coroners’ recommendations produce positive change, project findings will help coroners shape and disseminate their prevention messages for maximum effect. Also, for states interested in modifying or boosting coroners’ recommendation powers, our findings will help guide reforms.

**Funding total:** $363,296; CHIPPE $363,296

### Rehabilitation and Compensation for Injured Workers: A Review of the Australian Schemes.

**Funding Body:** Australian Council of Trade Unions.

**Chief Investigators:** Dr Diana Bowman and Professor David Studdert.

**Description:** The regulatory regimes that currently govern workers’ compensation schemes in Australia are complex and vary in form and function. The regulatory burden associated with the patchwork of arrangements, as well as its inefficiency and potential to produce inequity, has long been recognised by stakeholders. The recent harmonisation of occupational health and safety laws appears to have brought a new impetus to the notion of harmonisation for workers’ compensation. This project is designed to provide information on the core elements of workers’ compensation arrangements in Australia, including access to benefits and entitlements, dispute resolution and self-insurance, and to evaluate available scientific evidence regarding ‘best practice’ in relation to these elements.

**Funding total:** $48,319; CHIPPE $48,319

In addition, the Group’s research projects in the following areas continued during 2010:

- Complaint prone doctors.
- Disciplinary actions against doctors.
- Public health recommendations by Australian coroners.
- The epidemiology of inquests.
- Disputes over informed consent.
- Litigation against nursing homes.
- Health care fraud.
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.

Several projects were completed in 2010. Ms Justine Fletcher and Dr Kylie King took the lead on an evaluation of the Mental Health Professionals Network, a project designed to encourage interdisciplinary networking among mental health care providers. Dr Anna Machlin and Ms Jo Christo ‘stepped into the breach’ when Ms Fletcher and Dr King both went on maternity leave. Dr Susan Day and Professor Jane Pirkis evaluated a pilot project which provided online professional development to mental health workers (the Mental Health Professional Online Development Pilot). Evaluation reports on both of these projects were well received by the funding bodies.

A number of previously funded projects continued throughout the year. Professor Jane Pirkis continued to conduct a program of work concerned with suicide prevention through her National Health and Medical Research Council Senior Research Fellowship, and maintained her involvement with the Australian Mental Health Outcomes and Classification Network. Ms Justine Fletcher, Dr Bridget Bassilios, Dr Fay Kohn, Dr Kylie King, Mr Lennart Reifels and Professor Jane 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. Mr Andrew Dare and Professor Jane Pirkis continued to collaborate with colleagues from Sydney and Canberra to develop the Australian Health News Research Collaboration; Dr Anna Machlin will be joining this collaboration next year. Professor Jane Pirkis, Ms Justine Fletcher, Dr Bridget Bassilios and Dr Fay Kohn were successful in securing funding for an evaluation of the Better Access initiative, and Ms Shelby Williamson and Dr Maria Ftanou did an excellent job in running this project with expert assistance from Dr Anna Machlin and Ms Jo Christo.

Professor Jane Pirkis, Dr Matthew Spittal and Professor David Studdert received an NHMRC grant for a record linkage study investigating suicide method substitution for individuals over time. This new project will commence in 2011.

Several new projects began in 2010. Professor Jane Pirkis and Dr Maria Ftanou received additional funding to draw together various components of the evaluation of Better Access into a summative evaluation. Professor Jane Pirkis won a tender to develop guidelines for communities on dealing with suicide hotspots and suicide clusters, and Ms Shelby Williamson has taken responsibility for the day-to-day running of this project. These new projects are described in more detail below:

| Summative Evaluation of the Better Access to Psychiatrists, Psychologists and GPs through the Medicare Benefits Schedule Initiative. |
|---|---|
| **Funding Body:** Department of Health and Ageing. |
| **Chief Investigators:** Professor Jane Pirkis, Dr Meredith Harris, Professor Wayne Hall (University of Queensland), Professor Anthony Scott (Melbourne Institute of Applied Economics, The University of Melbourne). |
| **Description:** The Better Access to Psychiatrists, Psychologists and General Practitioners through the Medicare Benefits Schedule (Better Access) initiative aims to improve outcomes for people with mental disorders by encouraging a multi-disciplinary approach to their mental health care. It takes the form of a series of new item numbers which have been added to the Medicare Benefits Schedule (MBS). The Department of Health and Ageing has tendered out a number of components of the evaluation, and this summative evaluation is designed to draw them together into a cohesive whole. |
| **Funding total:** $60,272; CHPPE $60,272 |

| 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. |
|---|---|
| **Funding Body:** Department of Health and Ageing. |
| **Chief Investigator:** Professor Jane Pirkis, Ms Jo Robinson (Centre for Youth Mental Health), Ms Anne Lockley, Mr Derek Yee-Tak Cheung, Ms Laurencia Grant (Mental Health Association of Central Australia). |
| **Description:** This project involves the development of two sets of guidelines for communities: one on managing suicide hotspots; and one on managing suicide clusters. These sets of guidelines will be developed through an iterative process which involves recourse to the scientific literature and extensive consultation with stakeholders. |
| **Funding total:** $252,178; CHPPE $252,178 |
 Evaluation of Mental Health Professional Online Development (MhPOD) Pilot.

**Funding Body:** Department of Health.

**Chief Investigators:** Professor Jane Pirkis, Dr Susan Day.

**Description:** Mental Health Professional Online Development (MhPOD) is the product of a national project to develop and implement a web-based, professional development tool for staff from a range of disciplines in public mental health services and others in the health system who work with people who have a serious mental illness. The course is presented as a series of self-paced modules containing multimedia content and it is intended that learners will undertake this as workplace based training. It is particularly relevant to workers in their first two years working in a mental health service. MhPOD consists of 45 topics, and 10 were chosen for a pilot in 11 services spread across Australia. Researchers at the CHPPE undertook an evaluation of the six-month pilot. The evaluation used both qualitative and quantitative data to: (i) identify opportunities to enhance MhPOD’s usability for learners, educators and administrators; (ii) identify changes in health worker knowledge and understanding as a result of using MhPOD; (iii) identify actions to improve the implementation of MhPOD in mental health services nationally; and (iv) identify whether MhPOD has improved access to evidence-based educational programs for those providing health services to the seriously mentally ill, including those working in rural and remote areas.

**Funding total:** $49,260; CHPPE $49,260

**Existing research activities carried over from previous years included:**
- Independent evaluation of the Mental Health Professionals Network.
- 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.

2009 saw major developments in CHPPE’s involvement in evaluating and improving Aboriginal and Torres Strait Islander peoples’ health. This has continued and grown in 2010. 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 2010 the Primary Care Work Stream was successful in attracting approximately $4 million in research funding in conjunction with other colleagues. Some of these projects commenced in 2010 and others will commence in 2011.

**Highlights for the Primary Care stream have included:**
- Associate Professor Margaret Kelaher, despite facing very strong competition, was successful in being awarded an ARC Future Fellowship. With other colleagues she has been involved in a large number of indigenous health studies and reducing discrimination (see below).
- Professor David Dunt oversaw the completion of the evaluation of beyondblue’s activities for the years 2005-10 and was involved in mental health studies in a diverse range of groups often with Dr Colleen Doyle e.g. people with dementia and PTSD, with COPD and in adolescents and young adults with cancer.
- A Research grant from Department of Veterans’ Affairs on dementia and post traumatic stress disorder has yielded some interesting results despite challenges in recruitment of participants.
- Dr Sonja Hood and Dr Noleen Bennett completed their PhDs and Ms Pauline van Dort submitted her MPhil. Congratulations!
- Dr Suranganie Wijesundara, a Visiting Fellow from Sri Lanka, undertook a project in association with the Victorian Hospital Acquired Infection Surveillance System (VICNISS) focussing on infectious disease surveillance in long-term aged care facilities.
The Primary Care Work stream attracted funding for the following new projects that commenced in 2010:

<table>
<thead>
<tr>
<th>Project Description</th>
<th>Funding Body</th>
<th>Chief Investigators</th>
<th>Funding Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreements as a mechanism for community participation in health policy: Understanding process and evaluating effectiveness.</td>
<td>Australian Research Council (ARC) Future Fellowship.</td>
<td>Associate Professor Margaret Kelaher.</td>
<td>$788,800.</td>
</tr>
<tr>
<td>The evaluation of the behavioural and psychological symptoms of dementia in veterans in a study titled ‘Behavioural and Psychological symptoms of Dementia in Veterans research: exploring the Influence of Posttraumatic Stress Disorder and War Time Experiences’.</td>
<td>Department of Veterans’ Affairs, and the Military Rehabilitation and Compensation Commission.</td>
<td>Professor David Dunt, Dr Colleen Doyle.</td>
<td>$89,525; ChPPE $89,525</td>
</tr>
<tr>
<td>The role of planning processes in implementing National Partnership Agreements in Indigenous health: Understanding process and evaluating effectiveness.</td>
<td>The Lowitja Institute, Incorporating the Cooperative Research Centre for Aboriginal and Torres Strait Islander Health.</td>
<td>Associate Professor Margaret Kelaher.</td>
<td>$85,000; ChPPE $85,000</td>
</tr>
<tr>
<td>Indigenous Chronic Disease Program: Sentinel sites.</td>
<td>Commonwealth Department of Health and Ageing.</td>
<td>Professor Ross Bailie, Mr Marcus Goddard, (Menzies School of Health Research,) Associate Margaret Kelaher, Professor Ian Anderson and Dr Kevin Rowley.</td>
<td>$4,711,000; ChPPE $62,212</td>
</tr>
</tbody>
</table>
Strengthening health literacy among indigenous people living with cardiovascular disease, 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 Kelaher, 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 total:** $2,003,679; CHPPE nil

Family Transitions project – Post-separation parenting arrangements and developmental outcomes for infants and children.

**Funding Body:** Attorney-General’s Department via Family Transitions.

**Chief Investigators:** Dr Jennifer McIntosh (Family Transitions Pty Ltd), Dr Bruce Smyth (La Trobe University) and Associate Professor Margaret Kelaher.

**Description:** There has been much interest in impacts on children, both positive and negative, of different patterns of parenting after separation. This is particularly important in Australia where the Family Law Amendment Shared Parental Responsibility Act 2006 has led to a shift towards shared parenting arrangements post-separation, ahead of evidence about the developmental implications for children. This study uses data from the Longitudinal Study of Australian Children (LSAC) to examine differences in developmental outcomes due to different patterns of overnight care among infants and children with parents living elsewhere.

**Funding total:** $19,600; CHPPE $19,600

Existing research activities carried over from previous years included:

- Evaluation of the *Bilingual Staff at the Women’s Project*.
- Independent evaluation of *beyondblue*: the national depression initiative for the period of 2005-2010.
- 2009 Fitzroy and Collingwood Neighbourhood Renewal Surveys.
- Cancer Screening Literature Review for the Victorian Cytology Service.
- Improving the identification of Aboriginal and Torres Strait Islander people in General Practice.
- Mapping use of eye health services by Indigenous people.
- Management of depression in patients with chronic obstructive pulmonary disease.
- Evaluation of the ‘Go for your life’ Being Active and Eating Well Indigenous Community demonstration Initiative.
- Evaluation of Building Bridges Phase II. (Evaluating Practice to Reduce Discrimination Affecting Culturally and Linguistically Diverse (CALD) communities).
- VicHealth Research Practice Leader Grant – Ethnic and Race Based Discrimination.
- Social and cultural capital and its relationship with Early Child Development practices and behaviours.
- Evaluation of the Community Arts Development Scheme.
• Evaluation of surveillance programs for nosocomial infection in long-term aged care facilities.
• Interventions to improve evidence-based prescribing for heart failure.
• Child Health Partnerships: a critical review of program characteristics, outcomes and their relationship.
• Increasing vaccination among healthcare workers – review of strategies and a study of selected Victorian hospitals.
• 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.

OTHER RESEARCH
Research staff at the centre are regularly commissioned to undertake evaluation capacity building projects with government and non-government departments and agencies. Two projects that were delivered in 2010 include:


**Funding Body:** Vision 20/20.

**Chief Investigator:** Dr Helen Jordan.

**Description:** Review the Vision Initiative Evaluation activities against the 2008-2011 strategic plan.

**Funding total:** $10,050; CHPPE $10,050

‘Time to Deliver’ Evaluation Plan.

**Funding Body:** Victorian Equal Opportunity and Human Rights Commission (VEOHRC).

**Chief Investigator:** Dr Helen Jordan.

**Description:** Scope the evaluation plan for the ‘Time to Deliver’ Resource.

**Funding total:** $3659; CHPPE $3659

COMMUNITY ACTIVITIES
During 2010 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.

Details of community activities are below:

**Committee Memberships**

**Dr Bridget Bassilios**
- Member, Access to Allied Psychological Services Expert Advisory Committee.

**Dr Marie Bismark**

**Dr Diana Bowman**
- Member, Committee, Regulation Working Group, NANO Futures.
- Member, Conference organising committee, Study of Nanoscience and Emerging Technologies (S.NET), Darmstadt, 29 September - 2 October.

**Professor David Dunt**
- Treasurer, Health Service Research Association of Australia and New Zealand.
- Member, Defence Health Advisory Committee.
- Member, Australian Defence Forces (ADF) Mental Health and Well-being Prevalence Standing Advisory Committee.

**Ms Angeline Ferdinand**
- Member, International Union for Health Promotion and Education.
- Member, Migration Studies Reading Group.
- Member, Melbourne School of Population Health network on health-related research on populations and communities from refugee and migrant backgrounds.
- Ongoing services on asylum seeker audit with Hotham Mission Asylum Seeker Project (ASP) and the Asylum Seeker Resource Centre (ASRC).

**Ms Justine Fletcher**
- Member, Access to Allied Psychological Services Expert Advisory Committee.
Ms Genevieve Grant
• Member, Forensic Leave Panel (an independent statutory body established under the Crimes (Mental Impairment and Unfitness to be Tried) Act 1997 (Vic)).

Dr Ya-Seng (Arthur) Hsueh
• Member, Place, Health and Wellbeing Advisory Group, Public Health, North and West Metropolitan Region, Department of Health.

Associate Professor Margaret Kelaher
• Member, Executive Committee, Health Service Research Association Australia and New Zealand.
• Member, International Union of Health Promotion and Education.
• Member, Australian Psychological Society.

Ms Rosemary McKenzie
• Member, Evaluation and Research Advisory Group of the National Prescribing Service (NPS).
• Member, Research Advisory Group of SecondBite.

Professor Jane Pirkis
• Australian Country Representative on the Board of the International Association for Suicide Prevention (IASP).
• Chair of International Association for Suicide Prevention’s (IASP’s) Suicide and the Media Task Force.
• Member, Research Committee, ORyGEN.
• Member, Advisory Board, Lowitja Institute.

Dr Matthew Spittal
• Student Representative, Biostatistics Collaboration of Australia Teaching Committee.

Members 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
• Assessor, Australian Research Council (ARC) Future Fellowships.

Journals
Dr Diana Bowman
• Member, Editorial Board for Nanotechnology Law & Business Journal.
• Reviewer, Nature Nanotechnology.

• Reviewer, Springer.
• Reviewer, Media International.
• Reviewer, Studies in Ethics, Law and Technology.
• Reviewer, NanoEthics.

Dr Colleen Doyle
• Associate Editor, International Psychogeriatrics.
• Reviewer, Australasian Journal on Ageing; International Psychogeriatrics.

Professor David Dunt
• Associate Editor, Family Practice.
• Reviewer, Family Practice.
• Reviewer, Medical Journal of Australia.
• Reviewer, Australian and New Zealand Journal of Public Health.
• Reviewer, BioMedical Central (BMC) Family Practice.
• Reviewer, BioMedical Central (BMC) Health Services Research.
• Reviewer, Health Promotion International.
• Reviewer, European Journal of General Practice.

Dr Ya-Seng (Arthur) Hsueh
• Associate Editor, Journal of BioMedical Central (BMC).
• Reviewer, Journal of BioMedical Central (BMC).
• Reviewer, Journal of Health Economics.
• Reviewer, International Journal of Psychogeriatrics.

Associate Professor Margaret Kelaher
• Editorial Board, Health Policy, BMC Health Services.
• Reviewer, Social Science and Medicine.
• Reviewer, Medical Journal of Australia.
• Reviewer, International Journal of Epidemiology.
• Reviewer, International Journal for Equity and Health.

Ms Paula O’Brien
• Reviewer, Hastings Centre Report (Washington DC, USA).

Professor Jane Pirkis
• Member, Editorial Board, Crisis.
• Member, Editorial Board, International Journal of Mental Health Systems.
Dr Cathy Segan
- Reviewer, Health Education Research and Addiction.

Dr Matthew Spittal
- Reviewer, Tobacco Control Journal.

Professor David Studdert
- Reviewer, Quality and Safety in Health Care.
- Reviewer, Global Public Health.
- Reviewer, Journal of the American Medical Association (JAMA).
- Reviewer, Medical Journal of Australia.
- Reviewer, Medical Care.
- Reviewer, Archives of Internal Medicine.
- Reviewer, Health Affairs.

Ms Theonie Tactics

CONFERENCE AND PUBLIC PRESENTATIONS

International conferences


Cheung, YT. (2010). Suicide Clustering: Application of Spatial Statistics and Exploration of Mechanism. 4th Asia Pacific Regional Conference of the International Association for Suicide Prevention, Brisbane, 20 November.


Petersen, A., See, S., Pirkis, J. (2010). Media awards for responsible reporting of suicide: Experiences from Australia, Belgium and Denmark. 4th Asia Pacific Regional Conference of the International Association for Suicide Prevention, Brisbane, 18 November.

Pirkis, J. (2010). Use of selective serotonin reuptake inhibitors and suicidal ideation. 4th Asia Pacific Regional Conference of the International Association for Suicide Prevention, Brisbane, 18 November.

Pirkis, J. (2010). Research and evaluation in suicide prevention. 4th Asia Pacific Regional Conference of the International Association for Suicide Prevention, Brisbane, 18 November.


Pirkis, J. (2010). Media awards for responsible reporting of suicide: Experiences from Australia, Belgium and Denmark. 13th European Symposium on Suicide and Suicidal Behaviour, Rome, 3 September.


Segan, C. (2010). A vision for accessible high-quality smoking cessation treatment for people with mental illness: the successful
pilot of Quitline’s tailored callback service for smokers with a depression history. VicServ’s International Mental Health Conference, Melbourne, 29-30 April.


International Workshop Presentations


International Seminar Presentations


Other International presentations


National Conferences


Doyle, C. (2010). How do Aged Care Assessment Teams (ACATs) assess for Extended Aged Care at Home Dementia (EACHD), and what are EACHD clients like? Aged Care Assessment Program Annual Conference, Melbourne, 19 May.


Segan, C. (2010). The Victorian Quitline’s tailored callback service for smokers with a depression history: cessation and mood outcomes. Asia Pacific Conference on Tobacco or Health, Sydney, 6-9 October.


Workshop Presentations


**Seminar Presentations**


**Other**


**Studdert, D.** (2010). *Disputes Over Informed Consent.* Invited presentation to Joint Meeting of State and Territory Health Service Commissioners, Perth 21-22 April.

**Studdert, D.** (2010). *Complaint prone doctors.* Invited presentation to Joint Meeting of State and Territory Health Service Commissioners, ACT, October.


**PUBLICATION HIGHLIGHTS**

The Centre for Health Policy, Programs and Economics published 84 journal articles, books, book chapters, major reference works, reports and conference papers including 31 peer reviewed journal articles in 2010. A selection of 2010 peer reviewed journal articles are provided below. For details of all 2010 CHPPE publications please refer to the full school Publications Report, beginning at page 111.


**Objective:** Two pivotal Australian Government primary mental health reforms are the Access to Allied Psychological Services (ATAPS) projects, introduced in July 2001 and implemented by Divisions of General Practice, and the Better Access to Psychiatrists, Psychologists and GPs through the Medicare Benefits Schedule (Better Access) program, introduced in November 2006. This research explores the reciprocal impact of the uptake of psychological treatment delivered by these two initiatives and the impact of location (rurality and socioeconomic profile) on the uptake of both programs since the inception of the Better Access program. ATAPS session delivery, before and after the introduction of the Better Access program, is also examined.

**Method:** General Practice Division-level data sources included a minimum dataset containing uptake data of ATAPS services, Medicare Benefits Schedule uptake data supplied by the Medicare Benefits Branch of the Department of Health and Ageing, a Rural, Remote and Metropolitan Area classification, and Indices for Relative Socio Economic Disadvantage (IRSED). Regression analyses were conducted to examine the reciprocal impact of the two programs and the impact of rurality and socioeconomic status up to December 2008.

**Results:** A dramatic uptake of Better Access sessions, particularly in urban areas, coincided with a temporary reduction in sessions provided under ATAPS, with an overall small positive relationship detected between the two programs. A greater proportion of ATAPS sessions (45%) have been delivered in rural areas compared with Better Access (18%). The combination of socioeconomic profile, rurality, and Better Access sessions accounted for a small but significant percentage of variance (7%) in the number of ATAPS
sessions delivered, with a non-significant independent contribution of Better Access sessions to the prediction of ATAPS sessions. Weak but significant relationships between ATAPS sessions and each of socioeconomic profile ($r = 0.22$) and rurality ($r = -0.24$), respectively, were identified. In comparison, socioeconomic profile, rurality, and ATAPS sessions accounted for a much larger and significant percentage of variance (46%) in number of Better Access sessions delivered, with a non-significant independent contribution of ATAPS sessions to the prediction of Better Access sessions. Moderate significant relationships between Better Access sessions and each of socioeconomic profile ($r = 0.46$) and rurality ($r = -0.66$), respectively, were identified. The introduction of Better Access appears to have halted the steady increase in the number of ATAPS sessions previously observed. This finding should be interpreted alongside the fact that ATAPS funding is capped.

CONCLUSIONS: The findings are policy relevant. ATAPS projects have been successfully providing equity of geographic and socioeconomic access for consumers most in need of subsidised psychological treatment. The uptake of psychological treatment under Better Access has been dramatic, suggesting that the program is addressing an unmet need.


A sharp increase in the number of students graduating from Australian medical schools over the next few years looks set to outpace available intern positions. Graduating overseas students will be the first to miss out. While this treatment of overseas students is unlikely to be found unlawful, questions of fairness remain. From a policy standpoint, the bottleneck in intern places could be quite damaging as: it encourages Australian-trained medical graduates with high-quality training and culturally-relevant skills to leave; and it extinguishes a valuable opportunity to steer some of these graduates into geographical areas with the greatest medical workforce needs.


**BACKGROUND:** Novel approaches are increasingly employed to address the social determinants of health of children worldwide. Such approaches have included complex social programs involving multiple stakeholders from different sectors jointly working together (hereafter Child Health Partnerships). Previous reviews have questioned whether these programs have led to significant improvements in child health and related outcomes. We aim to provide definitive answers to this question as well as identifying the characteristics of successful partnerships.

**METHODS:** A comprehensive literature search identified 11 major Child Health Partnerships in four comparable developed countries. A critical review is focused on various aspects of these including their target groups, program mechanics and outcomes.

**RESULTS AND CONCLUSIONS:** There was evidence of success in several major areas from the formation of effective joint operations of partners in different partnership models to improvement in both child wellbeing and parenting. There is emerging evidence that Child Health Partnerships are cost-effective. Population characteristics and local contexts need to be taken into account in the introduction and implementation of these programs.


**AIMS:** The stigma of living in a disadvantaged area is a consistent theme in discussions with residents of neighbourhood renewal (NR) areas in Victoria, Australia. Despite this, stigma is rarely examined explicitly in studies of neighbourhood disadvantage and health. This study will address four questions: (1) How do residents of disadvantaged areas describe their experiences of neighbourhood stigma? (2) Do experiences of neighbourhood stigma vary within neighbourhoods? (3) Is neighbourhood stigma related to health? (4) Is the relationship between neighbourhood stigma and health explained by other social factors that may contribute to poorer health?

**DESIGN:** Cross-sectional community interviews comparing people living in NR areas ($n = 4029$) to people living in other parts of the same local government areas (LGAs) ($n = 1857$). Recruitment was achieved using community interviewers in NR areas and stratified random sampling in LGAs.

**MAIN OUTCOME MEASURES:** A neighbourhood stigma variable, self-reported health, and satisfaction with life.

**RESULTS:** About half (47.7%) of residents living in NR neighbourhoods compared to 9.4% of residents living elsewhere in the same LGAs felt that their neighbourhoods did not have a good reputation in surrounding areas. In NR areas, reported neighbourhood stigma was higher among people born in a non-English speaking country, receiving benefits or pensions, educated above year 10, or who reported having a disability. Reported neighbourhood stigma decreased with age. Stigma was associated with being in fair/poor health status (OR = 1.33, 1.06-1.89) and life satisfaction (OR = 0.66, 0.55-0.8).

**CONCLUSIONS:** Neighbourhood stigma may be a useful addition to the portfolio of variables that describe ‘place’ and its relationship with health.


**BACKGROUND:** Globally, suicide accounts for 5.2% of deaths among persons aged 15 to 44 years and its incidence is rising. In Australia,
Suicide rates peaked in 1997 and have been declining since. A substantial part of that decline stems from a plunge in suicides by one particular method: asphyxiation by motor vehicle exhaust gas (MVEG). Although MVEG remains the second most common method of suicide in Australia, its incidence decreased by nearly 70% in the decade to 2006. The extent to which this phenomenon has been driven by national laws in 1986 and 1999 that lowered permissible levels of carbon monoxide (CO) emissions is unknown. The objective of this ecological study was to test the relationship by investigating whether areas of Australia with fewer noxious vehicles per capita experienced lower rates of MVEG suicide.

**METHODS AND FINDINGS:** We merged data on MVEG suicides in Australia (2001-06) with data on the number and age of vehicles in the national fleet, as well as socio-demographic data from the national census. Poisson regression was used to analyse the relationship between the incidence of suicide within two levels of geographical area – postcodes and statistical subdivisions (SSDs) – and the population density of pre-1986 and pre-1999 passenger vehicles in those areas. (There was a mean population of 8,302 persons per postcode in the study dataset and 87,413 persons per SSD.) The annual incidence of MVEG suicides nationwide decreased by 57% (from 2.6 per 100,000 in 2001 to 1.1 in 2006) during the study period; the population density of pre-1986 and pre-1999 vehicles decreased by 55% (from 14.2 per 100 persons in 2001 to 6.4 in 2006) and 26% (from 44.5 per 100 persons in 2001 to 32.9 in 2006), respectively. Area-level regression analysis showed that the suicide rates were significantly and positively correlated with the presence of older vehicles. A percentage point decrease in the population density of pre-1986 vehicles was associated with a 6% decrease (rate ratio [RR] = 1.06; 95% confidence interval [CI] 1.05-1.08) in the incidence of MVEG suicide within postcode areas; a percentage point decrease in the population density of pre-1999 vehicles was associated with a 3% decrease (RR = 1.03; 95% CI 1.02-1.04) in the incidence of MVEG suicide.

**CONCLUSIONS:** Areas of Australia with fewer vehicles predating CO emission laws experience lower rates of MVEG suicide. Although those emission laws were introduced primarily for environmental reasons, countries that lack them may miss the benefits of a serendipitous suicide prevention strategy.

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**STAFF**

The CHPPE comprises 38 full time and part time staff, consisting of 35 Academic and three professional staff. The Centre also has eight honorary staff members.

Seven new staff joined the Centre in 2010.

- **Dr Marie Bismark and Dr Diana Bowman.**
  Dr Bismark and Dr Bowman, who joined the Law and Public Health group, are both working on Australian Research Council (ARC) linkage projects as well as other group initiatives. Dr Bismark is involved with the project ‘When informed consent goes poorly: A descriptive study of health care complaints and medical negligence claims’, and Dr Bowman is involved with the project, ‘Learning from Preventable Deaths: A prospective evaluation of reforms to Coroners’ recommendation powers in Victoria’.

- **Ms Teneha Greco, Ms Hana Sabanovic and Dr Zewdu Woubalem.**
  Ms Greco, Ms Sabanovic and Dr Woubalem are working on projects led by Associate Professor Margaret Kelaher within the Primary Care work stream. Ms Greco is assisting with evaluating two VicHealth initiatives to reduce racism; Building Bridges and Localities Embracing and Accepting Diversity (LEAD). Ms Sabanovic is involved with the project, ‘Improving the identification of Aboriginal and Torres Strait Islander people in general practice’. Dr Woubalem is assisting with a project which is examining the effects of the Indigenous Chronic Disease program (ICDP) on health service use.

- **Mr Alex Brando**
  Mr Brando is assisting Dr Arthur Hseuh and Professor David Dunt with a study examining the constraints on the full provision of eye services to Aboriginal people particularly in remote locations.

- **Ms Joanne Christo**
  Ms Christo joined the Mental Health work stream and is involved in evaluating national programs which provide mental health services to consumers via various programs funded by the Australian Government.

Please refer to the School Report for a full list of staff.
2010 was a year of consolidation and significant development of the Centre for International Mental Health’s (CIMH) international and multicultural mental health programs.

In 2010, the four-year $2.5 million project National Taskforce on Community Mental Health System Development in Vietnam funded by Atlantic Philanthropies and AusAID commenced, and the three-year $1.1 million Mental Health for the South (M4S) project in Sri Lanka, a collaboration between World Vision Australia, World Health Organisation (WHO) Sri Lanka and CIMH, was completed. M4S achieved its objective of establishing functioning community mental health systems in all three Districts of the Southern Province of Sri Lanka, where they did not previously exist. The substantial gains made by the project will be sustained through government commitment to supporting the new programs. Based on the experience of M4S, planning for work in the war-ravaged Northern and Eastern was done during the 7th International Mental Health System Development Conference, which was opened by the Governor of Victoria and the Chancellor of the University.

In March 2010 the third in-country Leadership for Mental Health Program was launched in Nigeria, with such programs having previously been developed with CIMH’s close involvement in India and Indonesia.

Although mental disorders are a major public health problem and the development of mental health services has been a low priority everywhere,
there is a growing understanding of the importance of population mental health and increased attention to the need to develop effective mental health systems. CIMH’s international mental health programs have been consolidated and are informed by a clear conceptual framework, that links research, education and training and knowledge transfer (research and education for development) in pursuing CIMH’s goals.

CIMH is recognised as a global leader in mental health system development. It was selected, in a competitive process, to host the Secretariat of the Movement for Global Mental Health for three years from 2011.

Significant successes were also achieved in CIMH’s multicultural mental health work. Plans began to be made for the transformation of the successful Australian Mental Health Leadership Program (run in collaboration with the Universities of Queensland, Sydney and the Sunshine Coast, and Barwon Health in Victoria) into a program focused specifically on leadership for multicultural mental health. The renewed program will contribute directly to the implementation of a key workforce component of the Victorian Mental Health Reform Strategy. Also as a part of the Strategy, CIMH was invited to co-chair (with the Victorian Multicultural Commission) a Migration Mental Health Taskforce, reporting directly to the Victorian Mental Health Taskforce.
Health Minister’s Mental Health Reform Council. It is anticipated that this Taskforce will contribute significantly to ensuring that implementation of the Mental Health Reform Strategy will include specific attention to the important issue of cultural diversity. An important term of reference for the Taskforce is to make recommendations to the Minister for Mental Health on the restructuring of the Victorian Government’s investments in multicultural mental health. This is expected to lead to significant re-organisation of Victoria’s multicultural mental health efforts.

CIMH’s high profile work on behalf of asylum seekers continued in a very difficult political environment. As Chair of the Research Sub-Group of the Immigration Minister’s Council on Immigration Services and Status Resolution, Associate Professor Minas has focused on the need for the Department of Immigration and Citizenship to establish an immigration detention research program in order to generate evidence to inform this most contentious area of national policy and practice. Together with the Foundation for Survivors of Torture, CIMH commenced a research project exploring mental health issues in young refugees. The CIMH Director, also Director of the Victorian Transcultural Psychiatry Unit (VTPU), initiated a process of evaluation of the VTPU’s programs, in service development and in education and training. Reports of these projects will be published in 2011. In 2010 CIMH, in collaboration with the Australian Indian Society of Victoria, embarked on an important new stream of multicultural mental health research, focusing on the neglected area of domestic violence in Victoria’s immigrant communities. This work has received funding support from Victoria’s Legal Services Board.

The announcement by the Commonwealth Department of Health and Ageing that the contract for the management of the national Multicultural Mental Health Australia project would be re-tendered was followed by the establishment of a national consortium of agencies, including CIMH and VTPU, to bid for this program. CIMH is confident that the consortium will be recognised as the preferred group to manage this important national multicultural mental health program.

**CIMH ADVISORY BOARD**

The CIMH Advisory Board met on two occasions in 2010. The members of the Board are:

- **Dr Gerry Naughtin**, CEO, MIND Australia.
- **Dr John Mahoney** (Chair), UK National Counterpart to WHO Headquarters, Geneva.
- **Mr Paris Aristotle**, Director, Victorian Foundation for Survivors of Torture.
- **Professor Helen Herman**, Professor of Psychiatry, Orygen Youth Health Research Centre, Faculty of Medicine, Dentistry and Health Sciences (MDHS), University of Melbourne.
- **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 Helen Szoke**, CEO, Victorian Equal Opportunity and Human Rights Commission.
- **Professor Hugh Taylor**, Professor of Indigenous Eye Health, Melbourne School of Population Health (MSPH), MDHS, University of Melbourne.
- **Ms Lyn Walker**, Director, Mental Health and Wellbeing Unit, Victorian Health Promotion Foundation.

**LEARNING AND TEACHING**

The approach of CIMH in pursuing its vision is “research and education for development”. The focus of CIMH learning and teaching programs has been a series of short course professional development programs that build capacity for mental health system reform and development in Australia and internationally. Participants in these programs are almost invariably professionals with whom CIMH is collaborating in development projects, and the training is a key capacity building component of these projects. The programs vary in duration: the one-year Australian Mental Health Leadership Program; the four-week flagship International Mental Health Leadership Program; two-week programs in leadership for mental health run in collaboration with partners in India, Indonesia and Nigeria; and a two-day workshop for senior psychiatry trainees.

The Australian Mental Health Leadership program

The Australian Mental Health Leadership Program (AusMHLP), established in 2005 and offered annually, is a collaborative program of CIMH (Harry Minas), Queensland Centre for Mental Health Research, University of Queensland (Professor Harvey Whiteford), The Brain and Mind Research Institute, University of Sydney (Professor Ian Hickie), the University of the Sunshine Coast (Professor John Mendoza) and Barwon Health and Deakin University (Professor Tom Callaly). The program is designed for mental health professionals working in the Australian mental health system who are committed to making a contribution to mental health reform in Australia at an organisational, system or policy level. The course is available to graduates in medicine, allied health professions, nursing, science or social science, who have relevant professional work experience and a commitment to mental health systems development. Managers, clinical leaders and academics at all levels are encouraged to apply. Since its inception in 2005, the AusMHLP has been offered annually. Four three-day workshops were held in 2010, two in Melbourne (Mental Health Leadership and Management, Team Building and Change Management), one in Sydney (Mental Health System Reform) and one on the Sunshine Coast (Mental Health Policy). The participants in the program carry out a project as part of the program. These projects were presented at the end of program in a Completion Seminar in Melbourne.

The International Mental Health Leadership Program: iMHLP 2010

The International Mental Health Leadership Program (iMHLP) was established in collaboration with the Department of Social Medicine, Harvard Medical School, in 2001. Funding for the 2010
program was from three sources: Atlantic Philanthropies (National Mental Health Taskforce for Community Mental Health System Development in Vietnam), the AusAID Vietnam project, and the AusAID Australian Leadership Award Fellowships program. The program brought together iMHLF Fellows from India and Vietnam to study mental health system development in the two countries.

Mental health leadership programs in India, Indonesia and Nigeria

These courses have been designed and developed with colleagues in India, Indonesia and Nigeria and are designed to equip participants in the methods to develop and scale up interventions for people with mental disorders in communities, based on a population model. Each program is of two weeks’ duration and has drawn on the long experience of running the iMHLF in Melbourne. Participants are generally from a wide variety of professional backgrounds (including mental health professionals, general physicians, policy makers, representatives of funding agencies, humanitarian agency workers, Non-Government Organisation (NGO) staff, epidemiologists, anthropologists and members of the user community) and there are usually 25-30 participants in each program each year. CIMH collaborates with the London School of Hygiene and Tropical Medicine, the University of Indonesia and the Indonesian Ministry of Health, and University Medical College Ibadan in the delivery of these programs.

Leadership and Management Training Workshop for RANZCP Advanced Psychiatry Trainees

This two-day training workshop for senior psychiatry trainees commenced in 2009. The training program is organised around the key reform priorities of the Victorian Mental Health Reform Strategy. 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. The program included teaching sessions and small group workshops on: Introduction to Leadership and Management; Mental Health Promotion and Early Intervention; Quality Improvement; Addressing the Needs of Vulnerable Groups; Service Planning and Clinical Governance; Continuing Medical Education; Review and Program Evaluation.

Transcultural Psychiatry Selective

CIMH and VTPU jointly teach the subject Transcultural Psychiatry in the University of Melbourne Master of Psychiatry and Monash Master of Psychological Medicine program.

University Breadth Subject

CIMH contributes to teaching in the subject Human Rights and Global Justice.
RESEARCH AND MENTAL HEALTH SYSTEM DEVELOPMENT

In 2010 CIMH has generated a total of $3.2 million in new external research and development grants. Active projects in 2010 included the following:

The Mental Health for the South (H4S) project, Southern province, Sri Lanka.

Funding body: World Vision Australia.
Chief Investigator: Harry Minas.
Description: The Mental Health for the South project in the Southern province of Sri Lanka has produced substantial system change outcomes that bring benefit to a large number of people who are among the most vulnerable in an already vulnerable population. This has been achieved with a relatively small investment over a short period (in development terms). The outcomes of this project serve to instil confidence in undertaking such mental health system development projects even in difficult circumstances. The lessons that have been learned from H4S will be valuable in the further development and implementation of mental health system development activities in the North and East of Sri Lanka, and in other low-resource and post-conflict environments. The lessons learned from the project are being widely disseminated and are informing the implementation of the National Taskforce project in Vietnam (see below).
Funding: $1.1 million (2007-2010).

The National Taskforce for Community Mental Health System Development in Vietnam.

Funding body: World Vision Australia.
Chief Investigator: Harry Minas.
Description: CIMH has been working consistently in Vietnam since 1994. In December 2009 CIMH was awarded a four-year, US$2 million grant to establish a Vietnam Mental Health Taskforce. Modelled on CIMH’s successful work in Indonesia, the Taskforce will be led by the Ministry of Health and will become the main impetus for mental health system reform and development in Vietnam. Among the areas of focus for the Taskforce will be policy development and mental health system financing, community-focused mental health service design, human resources for mental health, the mental health of children and youth, and advocacy and human rights of people with mental illness. As well as the Ministry of Health it is anticipated that other parts of government, particularly the Ministry of Labour, Invalids and Social Affairs and the Ministry of Education, will be key partners in the work of the Taskforce, as will university departments, civil society organisations and other key stakeholders.

Leadership Training for National Mental Health Taskforce for Community Mental Health System Development in Vietnam.

Funding body: AusAID Vietnam Program.
Chief Investigator: Harry Minas.
Description: The goal of the project is to develop community mental health services in Vietnam by strengthening the capacity of 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. The project will enable the establishment of the National Taskforce on Mental Health System Development; strengthen human resources by provision of the necessary international standard training; establish arrangements for provision of guidance and mentoring and linkage (both national and international); support research and policy development; and support the design and conduct of policy and practice-relevant pilot projects.
Funding: $485,000 (2010-2013).

Mental Health First Aid guidelines for helping a suicidal person in India, Japan and the Philippines.

Funding body: Nil.
Chief Investigators: Harry Minas, Erminia Colucci, Anthony Jorm, Claire Kelly.
Description: This project produced guidelines for how a member of the public should provide first aid to a person who is suicidal, i.e. has expressed suicidal thoughts or intent or has made a suicide attempt. The guidelines were produced for three countries (Japan, Philippines and India) using expert consensus (Delphi) method. The guidelines were made freely available in the Mental Health First Aid website (http://www.mhfa.com.au/Guidelines.shtml). This project was completed in 2010 and guidelines have been developed and published for each of the three countries. A training program in the use of the guidelines has been developed for the Philippines.
Funding: Nil (2009-2010).

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.

Evaluation of the Aceh Free from Pasung project in the province of Aceh, Indonesia.

Funding body: Nil.
Chief Investigators: Harry Minas, Ibrahim Puteh, Mathoenis.
Description: CIMH 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.
Funding: Nil
Aceh is a world leader in ending the horrific practice of “pasung” – the locking up of severely mentally ill people in medieval stocks, chains and tiny rooms. The Indonesian province this year started a program to achieve this goal but much more needs to be done, cautions Associate Professor Harry Minas, the Director of the Centre for International Mental Health within the Melbourne School of Population Health.

After six years of collaborating with his Indonesian colleagues over the issue, Associate Professor Minas justifiably says that Aceh’s new program, Aceh Free Pasung, to which he had been appointed technical advisor, is a major mental health and human rights advance. The program locates and releases these patients and brings them for free treatment to the Banda Aceh Mental Hospital. Following Aceh’s lead, Indonesia’s Ministry of Health has also committed to ending pasung throughout the country by 2014.

However, Associate Professor Minas’s relief is tempered by concern at what lies ahead for these severely ill patients, who have been confined for up to 15 years and bear the scars of their ordeal. In most cases, family members fearing physical harm from their mentally ill relative have enforced the pasung practice.

Associate Professor Minas applauds the program, with reservations. “What the Government of Aceh is doing is impressive but we have consistently said the practice will not be eliminated unless there is some really good research on what are the social and economic factors that lead families and communities to this obviously end-of-the-line option, and to understand what is needed for sustainable release from pasung.”

About 200 pasung patients were located in rural Aceh. Their families are not bad people, he says. “They are scrabbling out a living, are very poor, they need all hands on deck to survive. They can’t afford to have a family member devoted full time to the mentally ill relative’s welfare and being responsible for the ill person’s safety and the safety of others.”

He does not know whether Aceh has succeeded in meeting its commitment to end pasung in the province by the end of 2010 because there is no follow up monitoring or treatment. “There is a danger the government will say, ‘We’ve succeeded, we’ve taken everybody we could find out of stocks, or unchained them. We’ve done our job.’ But it’s what happens in the medium to long term that is important,” he says.

He fears that as the government’s message that pasung is unacceptable gets through it could drive the practice underground because without ongoing support and accessible and affordable mental health services families won’t be able to cope.

Pasung graphically demonstrates what happens when there are no basic health services available. “Aceh Free Pasung is a very significant program because it’s an example of necessary action to eliminate human rights abuses and governments assuming responsibility for taking that action. That’s not so common.”

Getting funding to ensure the program is sustainable is the next challenge. “It would be a very great pity if it were not possible to find support for ensuring that all of the issues around this practice are understood so they can be moved into practice and policy.”
Leadership in research and training for mental health system development. Scoping project for provision of Mental Health services for Northern Sri Lanka.

**Funding body:** AusAID.

**Chief Investigators:** Harry Minas, Alison Schafer, John Mahoney.

**Description:** The purpose of this project was to strengthen capacity to provide mental health and disability support services in Sri Lanka with a particular focus on the Northern Province of Sri Lanka. The components were to: 1: Determine extent of mental health needs; 2: Identify partners and strategic government ministries to support long-term sustainability; and 3: Develop a project design document for a large-scale mental health system development program in Northern and Eastern provinces.

**Funding:** $300,000.

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. The project was supported with grants from William Buckland Foundation and Sidney Myer Fund. The project had three components, which were completed in 2010. (1) The application of expert consensus methods to develop a mental health of refugee research agenda for Australia; (2) 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; and (3) A roundtable discussion 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.

**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, Karen Field, Erminia Colucci, Kris Reardon, Harry Minas, Reima Pryor

**Description:** This is a participatory action research project, based on forum-theatre and other theatre techniques, aimed at an understanding of issues surrounding domestic/family violence among Indian immigrant women and barriers to accessing services. The project is a collaboration between CIMH, Australian 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 will be completed in 2011.

**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 is a collaboration between CIMH and the Victorian Transcultural Psychiatry Unit, and is funded by St Vincent’s Health Melbourne. The objective is 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 is based on focus group discussion and an on-line survey. Data collection will be completed in 2011.

**Funding:** $10,000

Windows on the new world: Australia from the eyes of international students.

**Funding body:** University of Melbourne Cultural and Community Relations Advisory Group (CCRAG).

**Chief Investigator:** Erminia Colucci.

**Description:** Project enabling international students to photograph everyday events that illustrate their experience of and responses to studying and living in Melbourne and a photographic exhibition at the University.

**Funding:** $3000.

Australian culture awareness training for international students.

**Funding body:** Victorian Multicultural Commission.

**Chief Investigators:** Manjula O’Connor, Erminia Colucci.

**Description:** This project was developed in response to the concerns expressed by international students, particularly Indian students, about discrimination and safety. Its aim was to develop and deliver an introduction to the Australian cultural environment to assist international students to effectively negotiate cross-cultural encounters.

**Funding:** $20,000.

**CONFERENCES AND PUBLIC PRESENTATIONS, 2010**

**Invited keynote presentation, * Invited presentation**

**Harry Minas, Strengthening Mental Health Systems Research Capacity: The International Observatory on Mental Health Systems, 2nd Annual Suwon International Mental Health Symposium, Suwon, South Korea, 18-20 March.**

**Harry Minas, Human resources for mental health, Inaugural Forum on Human Resources for Health in the Asia Pacific Region: AusAID HRH Knowledge Hub, University of New South Wales, Sydney, 8-9 April.**

**Harry Minas, Mental health projects in Vietnam, Vietnam-Australian collaborative oral health initiatives: What has been achieved and where to from here? University of Melbourne, 23 April.**

**Harry Minas, International engagement in mental health, Australian High Commission and NH&MRC. Malaysia-Australia Medical Research Colloquium, Kuala Lumpur, 28-29 April.**
domestic violence services for the Melbourne Indian community, Royal Australian and New Zealand College of Psychiatrists Congress, Auckland, New Zealand, May.


*Harry Minas*, Multicultural mental health, Diversity in Health Conference, Melbourne, 7-9 June.

*Harry Minas*, Building mental health systems that have the capacity to support drug treatment in resource-poor settings, Nossal Institute for Global Health Seminar on Drugs, HIV and Mental Health in Asia, Melbourne, 22 June.

Erminia Colucci. Arts-based research in cultural mental health. International Congress of the International Association for Cross-Cultural Psychology; Melbourne, 7-10 July.


Erminia Colucci & Manjula O’Connor. Suicide and spirituality: considerations from research in India, Italy and Australia (poster). International Congress of the International Association for Cross-Cultural Psychology, Melbourne, 7-10 July.

*Harry Minas*, Mental health services for immigrant communities: How are we doing?, The XXth International Congress of the International Association for Cross-Cultural Psychology, Melbourne, 7-10 July.

Erminia Colucci and Michael Eales. Understanding suicide through an artist’s eyes. European Symposium on Suicide and Suicidal Behaviour, Rome, Italy, September.

Erminia Colucci. Spirituality/religion and youth suicide from a cross-cultural perspective; Colucci E, Kelly C, Jorm F, Minas H, Suicide first aid guidelines for Philippines, Japan and India (poster). European Symposium on Suicide and Suicidal Behaviour, Rome, Italy, September.

*Harry Minas*, Leadership training for mental health system development, Chair, Leadership and management workshop, The Mental Health Services Conference, Sydney, 14 September.

Erminia Colucci. Guest speaker for Mental Health Week, Towards Recovery. How do we talk about Suicide? ACT transcultural Mental Health Network and the Mental Health Community Coalition, October.

**Harry Minas**, Mainstreaming community psychiatry: addressing and promoting population-based needs for mental health programming, First National Community Psychiatry National Seminar, Jakarta, 13 October.

**Harry Minas**, Advocacy on recovery issues to decision makers and stakeholders, 8th National Congress of Schizophrenia, Schizophrenia Section of the Indonesian Psychiatric Association, Jakarta, 14-16 October.


Harry Minas, Health for the South Mental Health Development Program, Chair, 7th International Mental Health System Development Conference: Mental health in Sri Lanka, Melbourne, 28-29 October.


**Harry Minas**, Culture, human rights and international mental health, Special Guest Lecture. Culture and International Mental Health Conference, Manchester, 6-7 December.

**PRINT AND ELECTRONIC MEDIA**

CIMH staff have had a regular presence in the print and electronic media as a result of media interest in a number of CIMH programs.

**Media articles**


Erminia Colucci. February 2010, Cultures of suicide studied by University of Queensland Researcher, Australia”, Medical News Today.

Erminia Colucci. February 2010, Cultures of suicide studied by University of Queensland Researcher, Australia”, Medical News Today.

Erminia Colucci. February 2010, Cultures of suicide studied by University of Queensland Researcher, Australia”, Medical News Today.
Erminia Colucci. May 2010, Suicide First Aid Guidelines for India: Recommendations for the Indian Public for Helping a Suicidal Person, Suite101, health-psychology.suite101.com/article.cfm/suicide-first-aid-guidelines-for-india#izz20fN0L1IE

Radio Interviews

Erminia Colucci. Teens’ View on Suicide (http://news.softpedia.com/news/Teens-View-on-Suicide-134463.shtml); Radio interview for ABC radio (Australia) on youth suicide in different cultures.


Erminia Colucci. February 2010, Radio Interview ABC Mornings (Australia).


Live@Melbourne. 7th International Mental Health System Development Conference, videos of presentations posted at Live@Melbourne:

COMMUNITY ACTIVITIES
CIMH has continued to be actively engaged in a wide range of matters that are of contemporary concern to the community. Examples of this engagement include: wide-ranging activities on asylum seekers and refugee policy and practice; concerns of international students about discrimination and violence and the neglected issue of domestic violence in ethnic communities.

Reviewing and Editing
Associate professor Harry Minas was engaged, during 2010, in the following reviewing and editing activities:

Editor-in-Chief, International Journal of Mental Health Systems (Published by Biomed Central, London). International Journal of Mental Health Systems has become a key journal for publication of articles reporting mental health system research, and focusing on policy and mental health system development. IJMHS published 33 articles in 2010, with authors coming from all continents.

Section Editor (Australia and New Zealand) for International Journal of Culture and Mental Health.

Member of the Editorial Board of:
• Anthropology and Medicine (Carfax Publishing, London).
• Transcultural Psychiatry (Sage Publications).
• Psychiatry Investigation: Journal of the Korean Neuropsychiatric Association.
• Esculapio: Journal of the Services Institute of Medical Sciences, Lahore, Pakistan.
• International Journal of Culture and Mental Health (Taylor and Francis, London).

Reviewer for the following peer-reviewed journals
• American Journal of Psychiatry.
• Anthropology and Medicine.
• Australia and New Zealand Health Policy.
• Australasian Psychiatry.
• Australian and New Zealand Journal of Psychiatry.
• BMC International Human Rights.
• Bulletin of the World Health Organisation.
• Clinical Infectious Diseases.
• Health Policy.
• International Journal of Law and Psychiatry.
• Journal of Affective Disorders.
• Journal of Ethnicity and Health.
• The Lancet.
• Medical Journal of Australia.
• Monash Bioethics Review.
• Social Psychiatry and Psychiatric Epidemiology.
• Social Science and Medicine.
• Transcultural Psychiatry.

Grants Reviewer
Reviewer for the short-listed submissions in the UK Department for International Development Research Program Consortia funding program (Round 2, 2010).

Reviewer for the Project Management Agency, German Aerospace Centre, Department of Health Research, 2010. (Reviewed 18 grant submissions).
Committee memberships

Member of the MDHS Advisory Committee.
Member of the MSPH Executive Committee.
Member of the Ministerial Council on Immigration Services and Status Resolution.
Chair of the Detention Health Advisory Group, advising the Secretary of the Department of Immigration and Citizenship.
Member of the International Initiative on Mental Health Leadership Cincinnati Group.
Member of the Executive, World Association for Cultural Psychiatry.
Member of the Executive, World Association for Psychosocial Rehabilitation.
Chair, Section of Social and Cultural Psychiatry, Royal Australian and New Zealand College of Psychiatrists.
Member of a number of DHS advisory groups (e.g. the Suicide Prevention External Advisory Group).

KEY ACHIEVEMENTS

The international standing of CIMH is indicated by two invitations and a global role for CIMH. The Director General of the World Health Organisation invited the Director of CIMH to serve for a second term, for the maximum allowable period of three years, as a member of the Director General’s prestigious International Expert Panel on Mental Health and Substance Abuse. On 9 October Associate Professor Minas was invited to address the Health Commission of the Indonesian National Parliament on the issue of mental health legislation.

MGMH Secretariat
Towards the end of 2010, in a competitive process that included candidate centres in China and Brazil, CIMH was selected by the more than 1,000 members of the Movement for Global Mental Health (MGMH) to host the MGMH Secretariat from 2011 to 2013. The responsibilities of the Secretariat include oversight of the planning for the Second Global Mental Health Summit, to be held in Cape Town, South Africa, in October 2011, and the launch of the Second Lancet Series on Global Mental Health. Selection of the Centre to host the Secretariat highlights the global leadership of the Centre in this rapidly developing field.

Pasung
Based on research carried out by CIMH and the University of Indonesia, and technical advice from the CIMH Director, the Province of Aceh embarked on an ambitious program to end restraint and confinement in the community of people with serious mental illness – the Aceh Free from Pasung program. Aceh’s lead has inspired the Government of Indonesia to act on human rights. On World Mental Health Day 2010 the Minister of Health announced a national program to eliminate this most serious of human rights abuses from the whole of the country by 2014, the Indonesia Free from Pasung program. CIMH is a key advisor to this national human rights program. These developments constitute a major human rights advance in Indonesia and promise to eliminate one of the most egregious forms of human rights abuse of people with mental illness.

Mr Saifuddin, Director of the Mental Hospital Banda Aceh, and Mr Irwandi Yusuf, Governor of Aceh, release a man from restraints at the formal launch of the Aceh Free from Pasung program in March 2010.
The Mental Health for the South project in Sri Lanka demonstrated that the approach taken by CiMH to community mental health system development — integrating research, leadership development, partnerships and knowledge exchange — produces excellent results. The objective of developing and implementing a model of community mental health services, in line with the National Mental Health Policy of Sri Lanka, has largely been achieved. A comprehensive community-focused model of mental health service has been established in all three districts of Southern Province. This includes an acute inpatient unit in the district general hospitals of Hambantota and Matara as well as in Galle; intermediate care facilities at Unawatuna and Ridyagama, which previously housed long stay patients with chronic illness but are being transformed into residential rehabilitation facilities; community outreach clinics in most Divisions in each district, treating large numbers of patients in the community; a national toll-free telephone mental health advice and counselling service; a basic mental health information system has been developed in each district; and functioning procedures for inter-sectoral coordination including health, social affairs, justice, education and the police. The success of the H4S project has contributed directly to support by AusAID for developing mental health services in the Northern and Eastern Provinces.

**H4S**

The Mental Health for the South project in Sri Lanka demonstrated that the approach taken by CiMH to community mental health system development — integrating research, leadership development, partnerships and knowledge exchange — produces excellent results. The objective of developing and implementing a model of community mental health services, in line with the National Mental Health Policy of Sri Lanka, has largely been achieved. A comprehensive community-focused model of mental health service has been established in all three districts of Southern Province. This includes an acute inpatient unit in the district general hospitals of Hambantota and Matara as well as in Galle; intermediate care facilities at Unawatuna and Ridyagama, which previously housed long stay patients with chronic illness but are being transformed into residential rehabilitation facilities; community outreach clinics in most Divisions in each district, treating large numbers of patients in the community; a national toll-free telephone mental health advice and counselling service; a basic mental health information system has been developed in each district; and functioning procedures for inter-sectoral coordination including health, social affairs, justice, education and the police. The success of the H4S project has contributed directly to support by AusAID for developing mental health services in the Northern and Eastern Provinces.

**PUBLICATION HIGHLIGHTS**


**Background:** The goal of this study was to collect information to inform the design of a mental health response following the massive December 2004 earthquake and tsunami in Aceh and North Sumatra, Indonesia. As well as exploring the effect on mental health of direct exposure to the tsunami the study was designed to examine the effect on mental health of immediate post-disaster changes in life circumstances (impact).

**Methods:** Information was collected from a sample of 783 people aged 15 years and over in earthquake and tsunami-affected areas of Aceh and Nias, 616 Internally Displaced Persons (IDPs) and 167 non-IDPs. The structured questionnaire that was designed for data collection consisted of demographic information, measures of disaster exposure and of changes in life circumstances (impact), the extended version of the Self-Reporting Questionnaire (SRQ), and a brief measure of resilience. Group comparisons, contrasting responses of IDPs and non-IDPs, were by chi-square for frequency...
Conclusions: Negative changes in a person’s life circumstances following a disaster appear to have as important an effect on psychopathology as the direct experience of the disaster. Ameliorating the extent and duration of post-disaster negative changes in life circumstances may play an important role in prevention of post-disaster psychological morbidity.


Background: This study aimed to develop guidelines for how a member of the Filipino public should provide mental health first aid to a person who is suicidal.

Methods: The guidelines were produced by developing a questionnaire containing possible first aid actions and asking an expert panel of 34 Filipino mental health clinicians to rate whether each action should be included in the guidelines. The content of the questionnaire was based on a systematic search of the relevant evidence and claims made by authors of consumer and carer guides and websites. Experts were recruited by SC, EC and HM. The panel members were asked to complete the questionnaire by web survey. Three rounds of the rating were carried and, at the end of each round, items that reached the consensus criterion were selected for inclusion in the guidelines. During the first round, panel members were also asked to suggest any additional actions that were not covered in the original questionnaire (to include items that are relevant to local cultural circumstances, values, and social norms.). Responses to the open-ended questions were used to generate new items.

Results: The output from the Delphi process was a set of agreed action statements. The Delphi process started with 138 statements, 48 new items were written based on suggestions from panel members and, of these 186 items, 102 met the consensus criterion. These statements were used to develop the guidelines appended to this paper. Translated versions of the guidelines will be produced and used for training.

Conclusions: There are a number of actions that are considered to be useful for members of the public when they encounter someone who is experiencing suicidal thoughts or engaging in suicidal behaviour. Although the guidelines are designed for members of the public, they may also be helpful to non-mental health professionals working in health and welfare settings.
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 (STIs). 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 22,392 individual clients who registered in 2010, with a total of 35,630 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 at www.mshc.org.au is comprised 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 heterosexuals diagnosed with chlamydial infections on how to inform 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.

For general practitioners:

- www.mshc.org.au/GPassist (GP Assist) provides STI testing through telephone or webcam consultations for rural Victorians living at least 150kms from Melbourne. The TESTme nurse holds a 1800 number for potential clients to call; the caller is then triaged over the telephone to find out if they are eligible for the service. If the caller is eligible, an appointment will be offered and the consultation can take place by telephone or webcam.

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.
LEARNING AND TEACHING

In collaboration with the 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 (MPH)

Many students undertaking the 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 Stream 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. In 2010, four MPH students successfully submitted papers to academic sexual health journals for publication.

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 – Control of Sexually Transmissible Infections 505-531.
- Semester 1 – Sexually Transmissible Infections 505-432/532.
- Semester 1 – Clinical Sexual and Reproductive Health for nurses 505-434/534.

This subject is also accredited by the Royal College of Nursing as a Pap smear provider course and by the Department of Health (DoH), Victorian Government, as a pre and post test HIV and Hepatitis C counselling course for nurses. It is becoming increasingly popular and is oversubscribed 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 1 – Adolescent Sexuality and Sexual Health 571-821.

This subject is run collaboratively with the Centre for Adolescent Health, Department of Paediatrics, and University of Melbourne.
- Semester 2 – Sexual & Reproductive Health 505-433/533.
- Semester 2 – Sexual Function and Dysfunction 505-441/541.

Short course series in Sexual Health

Many different aspects relating to STIs are covered by a variety of short courses at the Centre. 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.

Undergraduate Teaching

- Semester 5 – public health control of STIs.
- Semester 8 – clinical aspects of STIs.
- Semesters 6 and 7 – Advanced Medical Science (AMS) – clinical research projects.
- Clinical attachments to Melbourne Sexual Health Centre.

Undergraduate and postgraduate training is also provided at MSHC for medical students from the University of Melbourne, overseas elective medical students, GP registrars, infectious diseases trainees, nurses and doctors 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.

SERVICES AND CONSULTATIONS

The numbers of consultations by type of service provided onsite are shown in the table below. A further 431 outreach consultations were carried out offsite at various venues for men-who-have-sex-with-men (MSM) and street sex workers (SSW).

<table>
<thead>
<tr>
<th>Clinic Type</th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
<th>Transgender</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Clinic</td>
<td>31,445</td>
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<td>HIV Clinic</td>
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<td>1147</td>
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<td>Vaccination</td>
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<td>431</td>
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<td>35,630</td>
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<td>13,852</td>
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<tr>
<td>Individuals</td>
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<td>Control of Sexually Transmissible Infections 505-531.</td>
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<td>Sexually Transmissible Infections 505-432/532.</td>
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<tr>
<td>25 January</td>
<td>Medical Science</td>
<td>Clinical Sexual and Reproductive Health for nurses 505-434/534.</td>
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This subject is accredited as a Pap smear provider course and by the Department of Health (DoH), Victorian Government, as a pre and post test HIV and Hepatitis C counselling course for nurses. It is becoming increasingly popular and is oversubscribed 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 1 – Adolescent Sexuality and Sexual Health 571-821.

This subject is run collaboratively with the Centre for Adolescent Health, Department of Paediatrics, and University of Melbourne.

- Semester 2 – Sexual & Reproductive Health 505-433/533.
- Semester 2 – Sexual Function and Dysfunction 505-441/541.

Short course series in Sexual Health

Many different aspects relating to STIs are covered by a variety of short courses at the Centre. 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.

Undergraduate Teaching

- Semester 5 – public health control of STIs.
- Semester 8 – clinical aspects of STIs.
- Semesters 6 and 7 – Advanced Medical Science (AMS) – clinical research projects.
- Clinical attachments to Melbourne Sexual Health Centre.

Undergraduate and postgraduate training is also provided at MSHC for medical students from the University of Melbourne, overseas elective medical students, GP registrars, infectious diseases trainees, nurses and doctors 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:**
- Screening and control of chlamydia, Jade Bilardi, PhD, University of Melbourne.
- Comprehensive models of HIV/STI prevention among sex workers and their clients in Papua New Guinea, Eunice Bruce, PhD, University of Melbourne.
- To investigate the delay in returning for HIV test results at MSHC, Daniel Sankar, MPH, University of Melbourne.
- Use of computerised medical records data to determine the feasibility of testing for chlamydia without patients seeing a practitioner, Anna Yeung, MPH, University of Melbourne.
- Outcomes of cultural literacy training workshop around sexual minorities for primary healthcare workers in rural and regional Victoria, Kimberley Ivory, MPH, University of Melbourne.
- Frequent screening for syphilis as part of HIV monitoring increases the detection of early, asymptomatic syphilis among HIV positive homosexual men, Melanie Bissessor, MPH, University of Melbourne.
- The role of the secondary school nurse in the sexual and reproductive health of young Victorians, Gillian Robinson, MPH, University of Melbourne.
- The cost effectiveness of chlamydia screening of pregnant women attending antenatal care, Sokkab An, MPH, University of Melbourne.

**In progress:**
- 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.
- 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.
- Human papilloma virus in men who have sex with men, Huachun Zou, PhD, University of Melbourne.
- Evaluation of enhancing STI control of homosexually active men in primary care (ESTIHM), Anthony Snow, MPH, 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.
- 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.

**Advanced Medical Students (AMS)**

**Completed:**
- HIV testing of men who have sex with men attending a sexual health service, Teedzani Petlo (AMS), University of Melbourne.
- The efficacy of azithromycin, 1g as current first line therapy for Mycoplasma genitalium infection, Yui Li Min (AMS), University of Melbourne.

**International Post Doctoral Research Fellows**

Dr Deepa Garnage Postgraduate Institute of Medicine, University of Colombo, Sri Lanka.
Although Bacterial Vaginosis (BV) is globally the commonest vaginal infection in women of reproductive age, very little is known about the disease. Importantly, its cause and whether it is sexually transmitted is unknown, according to the Sexual Health Unit’s Dr Catriona Bradshaw, principal researcher of the WOW (Women on Women’s Health) project. “It’s a very common disease. We see prevalences of 10% in Australian women attending general practices but this rises to 30% within the lesbian population – and we don’t know why. We wonder if that is related to the fact that it is more easily transmissible between women than between men and women.”

The WOW study is focusing on BV in the lesbian community. Since March 2010, WOW has recruited more than 300 participants. The recruitment drive has been innovative: festivals like Mardi Gras and Midsumma, advertising on lesbian Internet dating sites and other gay media. Participants commit to regularly posting in self-administered swabs during the two-year study. The swabs are tested for BV and, if diagnosed, participants receive treatment.

“A key objective of our BV research is to determine what factors or behavioural practices are associated with the development of BV in women and their female partners and this will help us understand whether it is an STI. If it’s an STI, this has enormous implications for improving our management of this common infection and for prevention,” Dr Bradshaw says.

While BV is still not considered an STI, it certainly co-exists with all the other STIs, she says. “We see it in sex workers, we see it other groups that have a high prevalence of STIs often due to factors such as poor access to healthcare, so BV is common in women in developing countries and in Indigenous populations. The exceptions to this are lesbians, who don’t have a high prevalence of STIs.”

Another reason for focusing on women is that there is no diagnostic method that can be applied to men – so the BV status of men remains a mystery, much like the disease itself. What is known is that BV can have serious health implications. In pregnancy it increases the risk of miscarriage, pre-term delivery and low birth weight, and it also increases the risk of sexual acquisition of HIV and other STIs.

Why has BV remained under the STI radar? Dr Bradshaw says that in previous trials, after treatment with antibiotics, up to 50% of women got the disease again within six months. “But when we give those antibiotics to male partners in randomised trials it doesn’t seem to make any difference to the recurrence rates in women. So usually, if a disease is sexually transmitted, if you treat the woman and you treat the man, you eradicate it from a relationship. So those treatment trials were used as evidence that this is not a sexually transmitted disease.” However, Dr Bradshaw suggests that perhaps the treatments used were not sufficiently effective to eradicate BV in either women or men, given that we don’t actually know the cause. “We might not be treating men or women correctly – we might be partially treating them but not completely treating them.”
COMMUNITY

Wonderwomen at MIDSUMMA

The team from MSHC spoke to a large number of women who expressed interest in participating in the Women On Women Health study and who were pleased that lesbian health issues are on the agenda. The WOW study aims to see how commonly bacterial vaginosis (BV) occurs in women with female sexual partners and how it may be related to sexual behaviour.

KEY ACHIEVEMENTS

• Partnership with Centre for Excellence in Rural Sexual Health (CERSH), Shepparton. MSHC has a key role at CERSH, with the Director holding Chair of the CERSH Advisory Group, providing expertise and leadership. Our nursing team manager and members of the nursing team provide support and clinical expertise in negotiating strategies aimed at building critical mass in sexual health nursing in Northeast Victoria.

• MSHC staff members had 35 abstracts accepted (15 oral and 20 posters) for presentation at the Sexual Health Conference, Sydney, 2010.

• The Australasian Chapter of Sexual Health Medicine annual update in sexual health was held in Melbourne in May 2010 and was by all measures a success with around 200 registrants attending the day. The number of registrations was encouraging, exceeding expectations, and is indicative of the level of interest there is in sexual health and the demand that exists for educational events such as these. Of the 12 speakers, seven were from MSHC.

• 10 sexual health videos were developed for health professionals and are located on the MSHC website at http://mshc.org.au/healthpro/OnlineEducation/Videos/tabid/510/Default.aspx or on YouTube at http://www.youtube.com/results?search_query=supermshc&aq=f

• Dr Melanie Bissessor obtained the Fellowship of Australian Chapter of Sexual Health Medicine (FACHSM).

• Ms Jade Bilardi was awarded a National Health and Medical Research Council (NHMRC) postdoctoral training fellowship.

• Mr Huachun Zhou was awarded a PHIRST (Population Health Investing in Research Students’ Training) scholarship in 2010 to fund registration of Australasian Hepatitis Conference, 2010 and obtained Knowledge Transfer Project funding in 2010 to develop sexual health information packages for female sex workers in Victoria in English, Thai, simplified Chinese and traditional Chinese and Korean.

• New Express Service (NETS) was implemented in June for asymptomatic heterosexual clients requiring STI screening for chlamydia and who may also request HIV and syphilis screening although their stated risk factors indicate they are at low risk for these infections.

• This is the 6th year that MSHC has hosted ‘Sex Talk’. ‘Sex Talk’ is a free one day forum that provides interested health care professionals with an annual update of epidemiological trends in STIs/HIV and other emerging information. A diverse range of 65 health professionals ranging from nurses, GPs, to Aboriginal health workers, and hailing from as close as Parkville to as far away as Sydney, took part.

2010 Conferences and public presentations

• What’s new in Sexual Health? The Geelong Hospital, Barwon Health, Medical Education Department, Victoria, March.

• Impact to Genital Warts: the Australian Experience. MSD Luncheon Symposium on Quadrivalent HPV Vaccine: Reinforcing Benefits to Various Populations. 4th Biennial Conference of Asia Oceania Research Organisation on Genital Infections and Neoplasia, AOGIN 2010 New Delhi, India, March.

• Treatment of Genital Warts – Efficacy and Limitations, Plenary – STIs & Neoplastic Diseases in the Lower Genital Tract. 4th Biennial Conference of Asia Oceania Research Organisation on Genital Infections and Neoplasia, AOGIN 2010 New Delhi, India, March.

• Introduction: Burden of Disease in Adolescent. 16th Congress of International Union Against Sexually Transmitted Infections (IUSTI), Bali, Indonesia, May.

• Continued rapid decline in warts after national quadrivalent HPV vaccine program. 26th International Papillomavirus Conference, Montréal, Quebec, Canada, July.

• What’s New in Sexual Health? Department of Microbiology, Monash University, Melbourne, August.

• Vaccine efficacy against genital warts in Australia. Cervical and other HPV Related Cancers Not Yet Beaten? AOGIN Australia, The Royal Women’s Hospital, Melbourne, September.

• Melbourne Sexual Health Centre 10 Years On, Princess Alexandra Sexual Health PASH Lecture, Mater Hospital Brisbane, Queensland, November.

PUBLICATION HIGHLIGHTS


Untreated chlamydial infection among pregnant women has been associated with adverse outcomes for both mother and infant. Like most women, pregnant women infected with chlamydia do not report genital symptoms, and are therefore unlikely to be aware of their infection. A cross-sectional study of 100 pregnant women aged 16-25 years attending antenatal services across Melbourne were invited to participate in a face-to-face, semi-structured interview on the acceptability of screening for chlamydia during pregnancy (31 women were infected with chlamydia). Women had low levels...
of awareness of chlamydia before the test, retained relatively little knowledge after the test and commonly had misconceptions around chlamydia transmission, testing and sequelae. There was a strong preference for urine testing over other methods of specimen collection. Women who tested positive for chlamydia had mixed reactions, however, most felt relief and gratitude at having had chlamydia detected and reported high levels of partner support. Chlamydia screening as part of routine antenatal care was considered highly acceptable among young pregnant women who recognised the benefits of screening and strongly supported its implementation as part of routine antenatal care. The acceptability of screening is important to the uptake of chlamydia screening in future antenatal screening strategies.

**Study:** Men who have sex with men prefer rapid testing for syphilis and may test more frequently using it. Lee DM, Chen MY, Fairley CK, Cummings R, Bush M and Read T. *Sexually Transmitted Diseases*, 2010; 37 (9): 557-558

Syphilis has re-emerged among men who have sex with men (MSM) in Australia and internationally, with over-representation among HIV-positive MSM. Syphilis is believed to increase the risk of HIV transmission. Despite public health measures aimed at reducing syphilis, reported rates remain high among MSM. Studies suggest that more frequent screening of MSM and HIV-positive MSM results in increasing early detection of early, asymptomatic syphilis and are likely to reduce transmission of infection. We undertook rapid syphilis testing of MSM using the Determine Syphilis TP immunoassay to ascertain their views on rapid testing and whether these would increase screening for syphilis. Most indicated a preference for rapid testing over conventional serology. Most also indicated that they would test for syphilis more frequently if rapid syphilis testing was available in a clinic setting. Rapid, or point of care, testing for syphilis, which can be undertaken in clinical and nonclinical settings, has the potential to increase the uptake and frequency of syphilis screening and reduce the number of syphilis infected individuals who do not return for their results.

**Study:** Australian men who have sex with men prefer rapid oral HIV testing over conventional blood testing for HIV. Chen MY, Bilardi JE, Lee D, Cummings R, Bush M and Fairley CK. *Int J STD AIDS*, 2010; 21 (6): 428-430

This study examined the views of 172 community-based Australian men who have sex with men (MSM) on the acceptability and potential uptake of rapid oral testing for HIV in clinic and home-based settings. Men were asked to complete a questionnaire that sought their views on rapid testing for HIV. When asked about which HIV test they would prefer in a clinic setting, 64% indicated a preference for rapid oral HIV testing and 74% indicated that if rapid oral HIV testing was available at a clinic they would test for HIV more frequently. If rapid oral HIV testing was available for home testing, 63% of men indicated it would be likely they would test themselves for HIV and 61% indicated they would test more frequently. Overall, MSM expressed a preference for rapid oral HIV testing and would test more frequently if testing was available for clinic or home use in Australia.

**Study:** Telling partners about chlamydia: how acceptable are the new technologies? Hopkins CA, Temple-Smith MJ, Fairley CK, Pavlin NL, Tomnay JE, Parker RM, Bowden FJ, Russell DB, Hocking JS, Chen MY. *BMC Infectious Diseases*, 2010; 10:58

The newer technologies of email and SMS have been used as a means of improving partner notification rates. This study explored the use and acceptability of different partner notification methods to help inform the development of strategies and resources to increase the number of partners notified. Semi-structured telephone interviews were conducted with 40 people who were recently diagnosed with chlamydia from three sexual health centres and two general practices across three Australian jurisdictions. Most participants chose to contact their partners either in person (56%) or by phone (44%). Only 17% chose email or SMS. Participants viewed face-to-face as the “gold standard” in partner notification because it demonstrated caring, respect and courage. Telephone contact, while considered insensitive by some, was often valued because it was quick, convenient and less confronting. Email was often seen as less personal while SMS was generally considered the least acceptable method for telling partners. There was also concern that emails and SMS could be misunderstood, not taken seriously or shown to others. Despite these, email and SMS were seen to be appropriate and useful in some circumstances. Letters, both from the patients or from their doctor, were viewed more favourably but were seldom used. These findings suggest that many people diagnosed with chlamydia are reluctant to use the new technologies for partner notification, except in specific circumstances, and our efforts in developing partner notification resources may best be focused on giving patients the skills and confidence for personal interaction.
YEAR’S OVERVIEW

This year, ViRGo continued to provide key information regarding the impact of the 2009 influenza pandemic in Australia and provided advice on future strategies to mitigate such events, locally and internationally. Ensuring the safety of both pandemic and seasonal influenza vaccines was another active area, with Professor Terry Nolan leading the Australian Technical Advisory Group on Immunisation’s (ATAGI) rapid investigation into an apparent increase in paediatric influenza vaccine-associated febrile convulsions, and Dr Jodie McVernon contributing to an influenza Vaccine Expert Panel that advised the Therapeutic Goods Administration. We also conducted research to inform optimal scheduling of vaccines within the National Immunisation Program (NIP), with a particular focus on pertussis and meningococcal disease.

RESEARCH

Pandemic H1N1 influenza
(i) National pandemic (H1N1) influenza serosurveillance study – this government-funded project, led by the University of Melbourne, involved collaboration with the Australian Red Cross Blood Service and World Health Organisation Collaborating Centre for Reference and Research on Influenza. Using plasma specimens collected from more than 3100 healthy blood donors over four time-points in 2009/2010, we were able to assess the population’s level of exposure to the novel strain over the 2009 winter, and confirm the effectiveness of the government’s monovalent H1N1 vaccine campaign to limit influenza spread and disease during the 2010 influenza season.

(ii) Learning from the 2009 pandemic response – we reported on several National Health and Medical Research Council (NHMRC) urgent H1N1 influenza projects. These included observations of compliance with school closure and quarantine measures implemented during the Victorian epidemic; macroeconomic impact of mild and potentially more severe pandemics in the Australian setting; and recommendations for capacity building efforts in preparedness for future pandemics, given the likely impacts of diagnostic and drug delivery constraints on efforts to limit influenza transmission.

(iii) Preparing for future pandemics – a national consortium of modellers, led by the University of Melbourne, provided decision support to the Australian Government Department of Health and Ageing’s Office of Health Protection through the 2009 pandemic response. The University of Melbourne was further contracted by the National Emergency Management Agency of Mongolia to conduct risk-assessment modelling to inform future preparedness activities specific to that country’s unique infrastructural and population challenges, based on evaluation of the 2009/10 pandemic response.

Pertussis
(i) Birth dose pertussis study – ViRGo was one of several trial centres around Australia to be involved in a study, led by the National Centre for Immunisation Research and Surveillance (NCIRS), evaluating the safety and antibody response to an initial dose of pertussis vaccine given to babies in the first days of life. This study continues to recruit in 2011 and will provide valuable information regarding the potential for newborn immunisation to help protect against this life-threatening disease during the vulnerable first few months of life.

(ii) Evaluation of population immunity to pertussis – Ms Trish Campbell, a PhD student at ViRGo,
Mongolia’s remoteness and sparse population are no barriers to an influenza pandemic, as VIRGo (Vaccine and Immunisation Research Group) researchers discovered this year.

Dr Jodie McVernon and research fellow Dr James McCaw visited Mongolia when the Melbourne School of Population Health’s VIRGo was commissioned by the World Bank to take part in an avian and human influenza pandemic preparedness project.

Ulaanbaatar, one of the world’s coldest capitals with winter lows of -16 degrees Celsius, was swathed in a 37 degree summer heat wave when the pair arrived in July 2010 for an intensely busy two weeks. Health authorities were still regrouping from the impact of a H1N1 pandemic and a severe outbreak of Influenza B, which were both over by the time the VIRGo team visited.

Mongolia’s health authorities already had an excellent epidemiological surveillance system that revealed a surprising story, says Dr McVernon. “Among the challenges unique to Mongolia, the big thing is space. Australia has two people per square kilometre, Mongolia has one,” she says. “In this enormous country, most of the population live in three cities.

“Before we went we thought it would take ages for flu to spread but what we found from the surveillance data was that yes, it was a bit slower in the provinces but once there was a flu outbreak in Ulaanbaatar, the flu was all over the country in a couple of weeks.

“This is because there is huge mobility of people and Ulaanbaatar is a really important hub, with a major east-west road, and another north-south road going down to China and that is how the flu mostly got in.

“You could see quite clearly how important geography was to the flu’s spread.”

The project’s emphasis on bird flu was due to the large migratory bird populations that pass through the country’s north en route to Lake Baikal in Siberia. Avian flu-infected birds had been detected in Mongolia. “Our part of the project was to help plan what to do if the avian flu got into the human population,” Dr McVernon says. “How could we reduce the impact? And what interventions were needed to reduce its spread.

“We visited hospitals, family medicine clinics, and spoke to people in the health department and in flu surveillance, and we were based in the National Emergency Management Agency which coordinates a whole of society response.”

VIRGo’s track record in helping Australian governments to deal with pandemic preparedness had prompted the World Bank to enlist VIRGo’s expertise. “This project fit our own emphasis on developing pragmatic and feasible strategies that suit the limited resources available and the setting,” she says. “The World Bank was very pleased with the detail and the quality of our work and they felt that it set an important precedent because the WHO (World Health Organisation) tends to apply a ‘one size fits all’ approach to pandemics in developing countries. But this was something where we worked with the people on the ground to identify their specific strengths and capabilities and built on that.”
led analysis of three population surveys of immunity to pertussis collected by NCIRS over the past two decades. Her work provided new insights into a current sustained national outbreak of this infection, and will be used in development of mathematical models to predict the likely impact of possible vaccine schedule changes. These findings have directly informed the ATAGI pertussis vaccine working party, of which Dr Jodie McVernon is a member.

Meningococcal disease

(i) Meningococcal vaccine trials – VIRGo has been involved in a number of industry sponsored trials to evaluate the safety and antibody response to novel meningococcal conjugate/combination vaccines. Findings will inform future considerations relevant to rationalising vaccine delivery, and/or increasing serotype coverage within vaccine schedules.

(ii) Meningococcal serosurveys – we were successful this year in securing funding from the MCRI and Novartis Vaccines Australia to evaluate persistence of protection against meningococcus serogroup C in children immunised as part of a national ‘catch-up’ immunisation campaign in 2003/04, in Melbourne and Perth. Findings will be used to consider the need for booster doses to protect Australian teenagers through the second decade of life.

STAFF APPOINTMENTS

Dr Kirsty Bolton, Research Fellow
Dr Mathew Dafilis, Research Fellow
Dr Peter Howard, Research Fellow
Dr Dora Pearce, Research Fellow
Dr Joshua Havumaki, Research Assistant
Ms Patricia Campbell, PhD student
Ms Marita Kefford, staff coordinator
Mr Stephen Petrie, PhD student
Ms Sharon Trevorrow, staff coordinator

KEY ACHIEVEMENTS

Grants and Contracts


University of Melbourne Faculty of Medicine, Dentistry and Health Sciences, Faculty Research Grant Support Scheme: Exploring potential inequality of pertussis infection risk to newborn infants, based on social determinants of disease spread. McVernon J. Funding: $41,005.

University of Melbourne Faculty of Medicine, Dentistry and Health Sciences, Faculty Research Grant Support Scheme: Understanding influenza transmission: mathematical and statistical analysis of animal data. McCaw J. Funding: $41,005.


Novartis Vaccines Australia: Meningococcal antibody levels in 11-15 year olds who received a single ‘catch-up’ dose of MenC vaccine in 2003/04. McVernon J, Nolan T, McCaw J.


McVernon J, McCaw J. Funding: USD$20,000.

AWARDS AND HONOURS

Terry Nolan, PHAA National Immunisation Achievement Award 2010.

Jodie McVernon, Academic promotion to Level D.

CONFERENCES AND PUBLIC PRESENTATIONS, 2010

(*presenting author)

Nolan T. Update on H1N1 vaccine trials, CSL Australia. 6th WHO Meeting on Evaluation of Pandemic Influenza Vaccines in Clinical Trials, Geneva, 18-19 February.

McVernon J. How big was the iceberg? Estimating population exposure and disease severity during the Australian influenza A (H1N1) 2009 epidemic. Gerry Murphy Prize Presentation, World Congress of Internal Medicine, Melbourne, March.

Moss RG*, McCaw JM, McVernon J. Considering the influence of health services capacity when developing antiviral deployment strategy. National Institutes of Health Multinational Influenza Seasonal Mortality Study (MISMS) Oceania Regional Meeting and Workshop, Melbourne, March.


McCaw JM, Moss RG. Implications of real-world capacity constraints at laboratory and drug-delivery level for the effectiveness of antiviral drug interventions during influenza pandemics. NSW Health Epidemiology Special Interest Group meeting, NSW Health, NSW, 9 April 2010.


Bolton KJ*, McCaw JM, Pallaghy P, McVernon J, Mathews JD. Alternate immune hypotheses to explain the three mortality waves of the UK 1918-9 influenza pandemic. Spoken presentation: MISHISTICAL Influenza Pandemics, Copenhagen, Denmark, 3 – 7 May.


McVernon J*, Mason K, Petrony S, Nathan P, LaMontagne A, Bentley R, Fielding J, Studdert D, Kavanagh A. Compliance with home quarantine and antiviral prophylaxis recommendations association with school and classroom closures during the early phase of the influenza A (H1N1) 2009 outbreak in Melbourne, Australia. Spoken presentation, Options for the Control of Influenza, Hong Kong, 2 – 7 September.


Hurt AC, Nore S, McCaw JM, Fryer HR, Mosse J, McLean AR, Barr IG. Poster Presentation: Assessing the viral fitness of oseltamivir-resistant influenza viruses using a competitive mixtures model, Poster: Options for the Control of Influenza VII Conference, Hong Kong, China, 3 – 7 August.

Moss R, McCaw JM, McVernon J. Poster Presentation: A decision support tool for evaluating the impact of a logistically constrained antiviral intervention strategy on an influenza pandemic, Poster: Options for the Control of Influenza VII Conference, Hong Kong, China, 3 – 7 August.


McVernon J. Serosurvey of H1N1 pandemic influenza in healthy Australian Red Cross Blood Service donors. 6th Australian Influenza Symposium, John Curtin School of Medical Research, Canberra, 7 – 8 October.

McVernon J. Population level impacts of immunity. Implications for understanding the 2009 and 2010 influenza A (H1N1) outbreaks in Australia. Australian Health and Medical Research Congress, Melbourne Convention Centre, 18 November.


The Indigenous Eye Health Unit 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 2010, good progress was made in all these areas and the findings of this work have laid the foundation for our ongoing activities.

**NATIONAL SURVEY OF INDIGENOUS EYE HEALTH**

This survey, which was completed in 2009, examined nearly 3000 Indigenous children and adults in 30 sites across the country.

The key findings were:

- Indigenous children start life with five times less poor vision than mainstream.
- Indigenous adults have six times more blindness than mainstream, but 94% of this is unnecessary.
- One third of adults have never had an eye exam and have not received the “simple” eye care they need, glasses, cataract surgery, diabetic eye exams, or trachoma control.

The summary report is available via the Indigenous Eye Health Unit website www.iehu.unimelb.edu.au

**HEALTH SERVICES RESEARCH**

The main messages from the health services research that we have undertaken over the last two years have allowed us to:

- Quantify the underutilisation of existing eye services by Indigenous people in more populated areas.
- In addition, identify the need to increase outreach eye services some four- or five-fold in more remote areas.
‘Clean faces, strong eyes’ is a simple message that is delivering powerful benefits to children in remote Aboriginal communities. Under a project led by Professor Hugh Taylor of the Indigenous Eye Health Unit at the Melbourne School of Population Health, the slogan headlines the Trachoma Story Kits being distributed to Aboriginal communities, schools and health centres in three states.

The kits are the basis of a health promotion campaign to reduce, and ultimately eliminate, trachoma. Trachoma affects 7% of children in very remote regions and is a major cause of blindness in Indigenous Australians.

The kits’ co-developers were the Katherine West Health Board and the Centre for Disease Control, Department of Health and Families Northern Territory.

The simplicity of the slogan belies the complexity of the grassroots consultation behind the kits’ development. The process ensured that the kits’ messages were clear, culturally appropriate and understood, and well received, Professor Taylor says. “It took about a year of sitting down with community groups, school principals and health care workers.”

This included the valued contribution of community elders from the Ngumpin Reference Group. Ngumpin represents leaders of the seven Indigenous communities the team visited around the Northern Territory town of Katherine.

The result is an integrated package of materials that are easy to read, and meld clinical and cultural knowledge and practices, using lively images to engage children and their families. The Trachoma Story Kit’s ‘toolbox’ is tailored to suit clinics, communities and schools using resources such as flip charts, posters, and stickers for children, lesson plans for teachers and online tutorials for clinicians.

The philanthropic backing of the projected expedited its roll-out. “If you have to write a grant to ARC or NHMRC it might take two years to get the funding. But having the philanthropic funding allowed us to get right on and do it,” Professor Taylor says. “It also gave us the flexibility to get back and forth to communities multiple times. People had faith in us and that enabled us to really move ahead.”

The Melbourne Football Club is also supporting the project, sending Indigenous footy heroes Liam Jurrah, Aaron Davey and Austin Woneamirri to promote the message in remote communities.

The kits have been a big “hit” with their target audiences. By the end of 2010 over 300 kits had been distributed across the Northern Territory, Western Australia and South Australia.

And teachers have added their own imaginative tweaks, using computer SMART Boards to digitise kit images. This gives students heightened interactivity; they can colour in the screen images and hear sound effects linked to the content.

Professor Taylor has found the enthusiastic adoption of the kits highly rewarding. “It’s having put in the work and then seeing how people have taken the kits up and used that material – it’s terrific. To see them being used widely is also very satisfying. We’re really waiting for the real proof of the pudding and that’s for the rates of trachoma to decrease in these kids. I would hope we’d see things starting to improve by the end of 2011.”
• Demonstrate that effective services are closely linked with Aboriginal Medical Services and need excellent coordination at all levels of care.
• Gather evidence for world’s best practice in the treatment of trachoma and the detection of diabetic eye disease.

In 2010, the Indigenous Eye Health Unit has focused on distilling the main messages from these various areas of research to create a number of reports that feed into policy research and development. Many aspects of these research findings were assembled in an executive summary report entitled Provision of Indigenous Eye Health Services that was launched in May 2010 by the Federal Minister for Indigenous Health, the Hon Warren Snowdon MP. Also released at that time were the full component reports Access to Eye Health Services among Indigenous Australians, Diabetic Retinopathy: Accuracy of Screening Methods for Diabetic Retinopathy: A Systematic Review and Outreach Eye Services in Australia. These reports are all available via the Unit website at www.iehu.unimelb.edu.au

Health Service Utilisation
In 2010, Associate Professor Margaret Kelaher finalised her research on the equity of access to eye health services at a community level by examining the relationship between the percentage of Indigenous people living in an area, socioeconomic status and remoteness with the utilisation of and availability of ophthalmic and optometric services. Despite a number of Government initiatives to improve Indigenous peoples’ access to eye health services, there remain significant inequities in access and availability.

This research was published in a report entitled Access to Eye Health Services among Indigenous Australians, which is available via the Unit website at www.iehu.unimelb.edu.au

Indigenous Eye Evidence Mapping
Professor Russell Gruen and Dr Peter Bragge have been working on comprehensive reviews of the research literature of eye care for Indigenous peoples, examining screening for diabetic retinopathy and the control of trachoma. A comprehensive report on the accuracy of screening methods for diabetic retinopathy was published in 2009, and a similarly comprehensive review of trachoma treatments, Trachoma. Antibiotic Treatments of Trachoma: A Systematic Review, was published in 2010. Both reports are available via the Indigenous Eye Health Unit website at www.iehu.unimelb.edu.au

History of Indigenous Eye Health Policy
Mr Graham Henderson and Ms Jilpia Jones (formerly of the Australian Institute of Aboriginal and Torres Strait Islander Studies) have been working with Professor Ian Anderson to prepare an historical review of the development of the policy in eye health programs. They have been examining the drivers and key barriers that led to the formation and implementation of the current policies, undertaking a literature review and conducting interviews with key people who have been involved in the sector over a number of years. This work, which is to be published in early 2011, will inform us as to how things came to be the way they are and what has driven and facilitated the development of new policy.

DEVELOPMENT OF INTERVENTION STRATEGIES & POLICY RECOMMENDATIONS

This major focus of our work in 2010 was assisted by the appointment of the Unit’s newly established Poche Fellows (generously supported by Mr Greg Poche AO). The Poche Fellows, Mr Mitchell Anjou, Ms Andrea Boudville, Ms Robyn McNeil and Mr Colin Garlett, have been examining the barriers experienced by Indigenous Australians in accessing eye care, and in work also supported by Mr Poche members of the Centre for Health Policy, Programs and Economics (Professor David Dunt, Dr Arthur Hseuh and Mr Alex Brando) have started to examine the health economics aspect of eye care policy development.

There are four key aims of this phase of this research:
• Identify the specific limitations and restrictions of the current funding mechanisms that support visiting eye care services to remote areas (Medical Specialist Outreach Assistance Program – MSOAP, and Visiting Optometrist Scheme – VOS).
• Identify barriers to access for Aboriginal people to existing eye care services in urban and rural areas and ways to overcome them.
• Identify key components to enhance the pathway of care for the provision of eye services through Aboriginal Health Services and at a regional level.
• Identify the health economic implications of the proposed policy changes.

Remote and Visiting Services – Service Provision
There is a marked shortage of optometric and ophthalmic services into more remote areas. Efficient outreach eye care services need proper coordination and sustainable funding. To this end, we are focusing on identification of the specific limitations and restrictions of the current funding mechanisms that support visiting eye care services to remote areas, including the Medical Specialist Outreach Assistance Program (MSDAP) and Visiting Optometrist Scheme (VOS), with a view to increasing the availability of these services some four-fold.

Pathway of Care – Service Delivery
The patient pathway of care is being explored through all project consultations undertaken in rural and visiting services and urban and rural services and in discussions with Government and other stakeholders. It is becoming quite clear that efficient and effective coordination is needed at all stages of the referral network and that many people are involved in providing care and services throughout the pathway of care. Integrated and sustainable models are being sought to enhance this process.

Urban and Rural Services – Service Utilisation
The National Indigenous Eye Health Survey (NIEHS) findings demonstrated that despite geographical location relating to remoteness, the prevalence of eye health problems were not statistically different. In urban and rural areas, where services were
locally available, there remains an issue of utilisation of available services.

This phase of our research is intended to explore the barriers to accessing eye health care services in urban and rural areas and identifying enabling solutions by examining areas where good utilisation is occurring.

It is also anticipated that local solutions can be developed with communities participating to improve access and utilisation of eye care services for Indigenous people in these communities.

The last project is being conducted in Victoria, but its findings will be combined with those of the two other studies to develop national recommendations for the development and enhancement of the provision of eye care to Indigenous Australians.

**SPECIFIC DISEASE PROGRAMS**

Trachoma control, particularly through the Katherine West project, was another main focus for the Unit in 2010. This also includes Professor Taylor’s input into the national program to eliminate blinding trachoma that was announced by then Prime Minister Kevin Rudd in February 2009.

We are working with the Katherine West Health Board and the Northern Territory Department of Health and Families (Alice Springs) on a healthy skin and healthy eyes project to raise awareness about trachoma and produce materials to support health promotion and education programs in the communities in this region.

We have prepared a suite of materials for regional trachoma control programs and health promotion and education tools to support the screening, treatment and community awareness raising on the importance of keeping kids faces clean to reduce the spread of trachoma infection.

These Trachoma Story Kits, which combine clinical and cultural knowledge and practice, were launched by Hon Warren Snowdon MP at the Katherine West Health Board on 5 August 2010.

In addition, in 2010 the Melbourne Football Club committed to support trachoma elimination in Australia. Unit staff and members of the Melbourne Football Club visited Yuendumu in May 2010 and conducted very well received health education activities and football clinics. Indigenous players Liam Jurrah and Aaron Davey are program ambassadors and in 2011, through a DVD, posters and an ambitious live link up with schools, they will be taking the key messages of trachoma elimination to Indigenous school children in many remote communities across the Northern Territory.

**ADVOCACY**

Advocacy continued throughout the year as an important part of our remit to brief State and Territory ministers, senior health bureaucrats, Non-Government Organisations (NGOs) and local community-controlled health organisations on our research and policy recommendations to close the gap for vision.

**ADVISORY BOARD**

<table>
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<tr>
<th>Professor Terry Nolan (Chair)</th>
<th>Professor Ian Anderson</th>
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<td>Professor Glenn Bowes</td>
<td>Mr Trevor Buzzacott</td>
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<td>Professor John Funder AO</td>
<td>Mrs Janet Hirst</td>
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<td>Professor Barry Jones AO</td>
<td>Ms Jillia Jones AM</td>
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<tr>
<td>Mr David Middleton</td>
<td>Mr Reg Richardson AM</td>
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<tr>
<td>Professor Hugh R. Taylor AC</td>
<td>Professor Michael Wooldridge</td>
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**EVALUATION**

The Advisory Board reviews the overall progress of our work on a regular basis and workshops are held on a six monthly basis, comprising key researchers, stakeholders and other interested parties. Findings are also presented at national and international meetings and published in the world’s leading scientific journals.

**2010 SEMINAR PRESENTATIONS – PROFESSOR HUGH R. TAYLOR AC**

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<thead>
<tr>
<th>Title of paper</th>
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<tr>
<td>Indigenous Eye Health, Closing the Gap for Vision</td>
<td>MSPH, Uni Melb</td>
<td>17 February</td>
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<tr>
<td>Indigenous Eye Health, Closing the Gap for Vision</td>
<td>Onemda, Uni Melb</td>
<td>25 May</td>
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<td>NSW Health Bug Breakfast Seminar – Trachoma</td>
<td>NSW Dept Health</td>
<td>2 July</td>
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<tr>
<td>Title of paper</td>
<td>Conference/Lecture</td>
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<td>How programs come together, eg river blindness, indigenous health; engagement of multiple partners</td>
<td>Nossal Institute Strategic Planning Day</td>
<td>University of Melbourne (internal)</td>
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<td>Reaching the underserved: Aboriginal Eye Care</td>
<td>Brian Holden Lecture Series</td>
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<td>Making trachoma history – how can optometrists help?</td>
<td>Queensland Vision Congress</td>
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<td>Trachoma an Opportunity</td>
<td>Melbourne Football Club</td>
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<td>Correlation of clinical trachoma and infection in Aboriginal communities</td>
<td>WHO GET 2020 Scientific Meeting</td>
<td>Geneva, Switzerland</td>
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<td>What experience has taught me about the impact of vision loss</td>
<td>University of Michigan, Kellogg Eye Center</td>
<td>Ann Arbor, Michigan, USA</td>
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<td>Indigenous Eye Health</td>
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<td>Symposium moderator – VISION 2020, 10 years on and 10 years to go</td>
<td>World Congress of Ophthalmology</td>
<td>Berlin, Germany</td>
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<td>VISION 2020 Australia: A Case Study in Increasing Support for Prevention – Making the Case for Government Support</td>
<td>World Congress of Ophthalmology</td>
<td>Berlin, Germany</td>
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<td>Vision 2020 in Australia – the challenge in developed countries</td>
<td>World Congress of Ophthalmology</td>
<td>Berlin, Germany</td>
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<td>The New Realities of Non-Governmental Development in 2010 and Beyond – Partnering with Chronic Disease Initiatives</td>
<td>World Congress of Ophthalmology</td>
<td>Berlin, Germany</td>
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<td>Epidemiology and etiology of pterygium</td>
<td>World Congress of Ophthalmology</td>
<td>Berlin, Germany</td>
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<td>The need for good epidemiological data on causes, prevalence and incidence of vision impairment for cost effective analysis</td>
<td>World Congress of Ophthalmology</td>
<td>Berlin, Germany</td>
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<td>Challenges in the elimination of pockets of trachoma and implications on certification</td>
<td>World Congress of Ophthalmology</td>
<td>Berlin, Germany</td>
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<td>Review and Refine, Survey methodology for different aims – 1. For prioritising interventions of districts in known endemic areas: TRA, CRS, need for prevalence survey to guide timing of outcome surveys</td>
<td>WHO/PBD-GET 2020 Global Scientific Meeting on Trachoma Elimination</td>
<td>Baltimore, USA</td>
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<td>Indigenous Eye Health</td>
<td>Australian Institute of Health and Welfare</td>
<td>Canberra</td>
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<td>Relationship between vision impairment and MDGs</td>
<td>UN Workshop</td>
<td>Melbourne</td>
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<td>Challenges in the Management of Diabetic Retinopathy – Screening methods, prevalence and global strategies for management of diabetic retinopathy</td>
<td>APAO 2010 Beijing Medical Retina Program</td>
<td>Beijing, China</td>
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Above: Ms Cate Coffee, NT Trachoma coordinator (left), ICEE staff Ms Nella Pigram and Mr Luke Arkapaw (second and fourth from left), and Ms Heather Wilson (centre) and Ms Fiona Lange (right) of IEHU.

Right: Professor Taylor at the Trachoma Story Kit launch held at the Katherine West Health Board in August 2010.

Below left: Aboriginal Health Worker Brian Pedwill at the Katherine West Health Board.

Below right: Professor Taylor and Mr Reg Richardson with the Poche Fellows (L-R) Mr Mitchell Anjou, Dr Arthur Hsueh, Mr Colin Garlett, Ms Andrea Boudville and Ms Robin McNeil.

The Hon Warren Snowdon MP and Professor Taylor at the launch at the Melbourne School of Population Health at the launch of the report Projected Needs for Eye the Provision of Indigenous Eye Health Services report in May 2010. Beijing Services for Indigenous Australians, held at VAHS.
A1 - AUTHORS RESEARCH BOOKS


A2 - EDITED BOOKS


A6 - AUTHORS BOOKS OTHER


B1 - RESEARCH BOOK CHAPTERS


C1 - JOURNAL ARTICLES REFEREED


Bassilios B, Pirkis JEP, Fletcher JRF, Burgess P, Gurrin LCG, King KEK, Kohn F & Blashki GB. 2010. The complementarity of two


Buchanan D, Sweet K, Drini MD, Jenkons M, Win AK, Gattas M, Walsh M, Clendenning M, McKeone D, Walters R, Roberts A, Young...


Bush MR, Williams H & Fairley C. 2010. HIV is rare among low-risk heterosexual men and significant potential savings could occur through phone results. Sexual Health. 7 (4) : 495-497.


Chakraborty K. 2010. The sexual lives of Muslim girls in the bustees of Kolkata, India. Sex Education. 10 (1) : 1-21.


Colucci EC, Kelly CMK, Minas IH, Jorm AFJ & Nadera D. 2010. Mental Health First Aid guidelines for helping a suicidal person: a
Delphi consensus study in the Philippines. *International Journal of Mental Health Systems. 4* (1) : 32.

**Colucci E, Kelly C, Minas IH, Jorm A & Chatterjee SC.** 2010. Mental Health First Aid guidelines for helping a suicidal person: a Delphi consensus study in India. *International Journal of Mental Health Systems. 4* (1) : 4.


Elkin K & Studdert DMS. 2010. Restricted career paths for overseas students graduating from Australian medical schools: legal


Liu JZ, Mccrae AF, Nyholt DR, Medland SE, Wray NR, Brown KM, AMFS Investigators, Mann GJ, Kefford RF, Hopper J, Aitken JF,


Spriggs MPS. 2010. Ethical Difficulties With Consent in Research Involving Children: Findings From Key Informant Interviews. AJOB Primary Research. 1 (1) : 34-43.


### C2 - JOURNAL ARTICLES UNREFEREED


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C3 - JOURNAL ARTICLES UNREFEREED LETTERS OR NOTES


C5 - OTHER REFEREED CONTRIBUTION TO REFEREED JOURNALS


**D4 - MAJOR REFERENCE WORKS**


**F - CONFERENCE PROCEEDINGS**

**F1 - FULL WRITTEN PAPERS REFEREED**


FGL - FULL WRITTEN PAPERS UNREFEREED


Kelaher MK, Parry AEP, Day SED, Paradies YP, Lawlor J & Solomon LS. 2010. Improving the identification of Aboriginal and
PUBLICATIONS REPORT


G5 - MINOR REPORTS AND WORKING PAPERS


