Message from the Head Of School

Terry Nolan,
Head of Melbourne School of Population Health

2007 proved to be another significant year of developments for the Melbourne School of Population Health. The School has been actively engaged in the development of the Melbourne Model and the University’s Growing Esteem Strategy. Our planning day in October focused on the Growing Esteem Strategy and on enhancing its standing in the three inter-related areas – research, learning and teaching and knowledge transfer.

Through these strategies the Melbourne School of Population Health has signalled its commitment to being recognised as a leading centre of public health research and teaching both in Australia and abroad by:

- Maintaining and enhancing our strong emphasis on conducting and publishing world-class research and to enhance our performance and reputation in research training.
- Further developing our program offerings to provide graduate career entry and career development programs

Overview

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

What is population health?

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

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

Our Mission

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

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

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

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

- Embedding knowledge transfer in the School’s curriculum and research.
- Boosting the links with industry, government and the community – in particular strengthening our reputation by working closely with the Department of Human Services (Victoria), VicHealth and the Commonwealth Department of Health and Ageing.
- Raising the profile and prestige of the Melbourne School of Population Health.
- Increasing the efficiency of the School’s administration through academic and IT shared services implementation.
- Further consolidation of planning and budget processes which support the School’s strategic direction.

Finally, my thanks to the very dedicated, innovative and hard-working staff at the Melbourne School of Population Health. I also wish to acknowledge and thank the many friends of the School of Population Health who have supported and assisted us throughout the year. We hope you will find this report on the activities of the School in 2007 and the profile of its staff of interest.

– Professor Terry Nolan

**Highlights of 2007**

**Centre for MEGA Epidemiology**

Professor John Hopper was awarded one of nine Australia Fellowships. This prestigious award made to researchers who are leaders in their field, both in Australia and overseas, is a fitting tribute to John’s achievements in genetic epidemiology. The award will provide five years of support for John and his research program at $800,000 per year. Within the Centre for MEGA Epidemiology, and with colleagues at the Cancer Council of Victoria, John leads and contributes to a superb critical mass of world leading expertise of which they are extremely proud.

**Key Centre for Women’s Health in Society**

**Interactive Media Awards**

Your Sex Health Website (www.yoursexhealth.org) was judged ‘Best in Class’ in the 2007 Interactive Media Awards for the education category. The sex education/ reproductive health website aimed at adolescents was commissioned by Professor Doreen Rosenthal AO, Director of the Key Centre for Women’s Health in Society. The award’s judges included representatives of leading media organisations, such as the New York Times, Time Warner Inc, the Microsoft Corporation and the Producers Guild of America. The KCWHS, along with The Royal Women’s Hospital, Family Planning Victoria and Women’s Health hosted a conference ‘Abortion in Victoria – Where are we now? Where do we want to go?’

Speakers considered both the current state-of-play and the future of abortion policy, services and research in Victoria. Many of the key themes that arose during the conference were introduced by Dr Margaret Sparrow, President, Abortion Law Reform Association of New Zealand. Other speakers included Senator Lyn Allison (Leader, Australian Democrats), Dr Jo Wainer, Director, Gender and Medicine Research Unit, Monash University, Professor Jenny Morgan, Faculty of Law, The University of Melbourne, Dr Maggie Kirkman, KCWHS, Dr John Edington, Acting Chief Medical Officer and Director, Intensive Care, Bendigo Hospital, Ms Annarella Hardiman, Manager, Pregnancy Advisory Service, The Women’s and Dr Chris Bayly, Associate Director, Women’s Services, The Women’s. The speakers identified the strengths and weaknesses of abortion in Victoria, and provided clear direction for the future.

**McCaughhey Centre**

The Honourable Peter Batchelor (Minister for Community Development) officially launched the McCaughhey Centre: VicHealth Centre for the Promotion of Mental Health and Community Wellbeing on Monday 16 July. The launch was attended by the Vice Chancellor, Professor Glyn Davis, the Chief Executive Officer of VicHealth, Mr Todd Harper, the Mayor, City of Port Phillip, Cr Janet Bolitho, the Dean, Faculty of Medicine, Dentistry and Health Sciences, Professor James Angus, and the Centre’s patron, Dr Jean McCaughhey. The McCaughhey Centre has been operating for over 12 months, and Mr Batchelor incorporated the Centre’s launch with that of the Community Indicators Victoria (CIV) website. The CIV website, hosted by the McCaughhey Centre, uses local community wellbeing indicators to improve citizen engagement, community planning and policy making.

**Centre for Health Policy, Programs and Economics**

The Centre was officially launched on 12 September by Mr Peter Allen, Under Secretary, Portfolio Services and Strategic Projects Division, Victorian Department of Human Services, together with the Dean of the Faculty of Medicine, Dentistry and Health Sciences, Professor James Angus.
Federation Fellow
Professor David Studdert commenced his Federation Fellowship, jointly sponsored by the Faculties of Law and Medicine, Dentistry and Health Services, early in 2007. David is co-located with the Law School and the Melbourne School of Population Health. He holds the second Federation Fellowship to be awarded to a researcher working in the Melbourne School of Population Health. His program of work is ‘Using law to improve population health and the quality of health care services’.

Professor Studdert aims to build a world-class research capacity in empirical health law at The University of Melbourne and foster innovative scholarship nationally in this area. He aims to address improvements in health care quality, regulation and population health.

His research program will combine methods from the social and statistical sciences with traditional legal analysis to explore a set of pressing policy issues at the intersection of legal and health systems in Australia.

Associate Dean (Knowledge Transfer)
Associate Professor John Fitzgerald is a Principal Research Fellow in the Centre for Health and Society and was appointed the Faculty of Medicine, Dentistry and Health Sciences’ Associate Dean for Knowledge Transfer.

Carrick Awards Program – Award for Teaching Excellence
Associate Professors Lynn Gillam and Marilyns Guillemin from the Centre for Health and Society were awarded the prestigious Carrick Award for Teaching Excellence. Of the 102 nominations, there were only 24 recipients Australia-wide.

The Australian Awards for University Teaching (AAUT) were established in 1997 by the Australian Government to celebrate and reward excellence in university teaching. Outstanding teaching, whether by individuals or teams, has been recognised each year since, and the achievement celebrated through these awards.

With the formation of the Carrick Institute for Learning and Teaching in Higher Education in 2006, the awards program was expanded to include new elements and thereby allow a wider recognition of a wider range and level of university staff and more diverse contributions to learning and teaching.

Diabetes Vaccine Development Centre
Following an independent administrative review of the Diabetes Vaccine Development Centre (DVDC), it was recommended that the Centre be relocated to the Garvan Institute of Medical Research, Sydney. The DVDC relocated from April. The Garvan Institute is a member of the St Vincent’s and Mater Health Campus and is affiliated with the University of New South Wales and is one of Australia’s largest autonomous medical research institutions. With its emphasis on establishing links with hospitals and industry, it was an ideal new location for the DVDC.

Victorian Premier’s Award for Medical Research
Winner – Dr Helen Cox
Dr Cox won for her PhD (2006) Dissertation: *Tuberculosis treatment and control in Uzbekistan: DOTS and Drug Resistance*. Dr Cox was enrolled in a PhD through the Melbourne School of Population Health and her work was done with supervision from the Burnet Institute and Australian International Health Institute.

Commended – Dr Robert MacInnis
Dr MacInnis studied the results from the Melbourne Collaborative Cohort Study (which included 41,528 people aged 27 to 75) to see whether certain aspects of body size – particularly fat mass, fat-free mass and waist circumference – were associated with the risk of developing particular cancers.

Staff Promotions/ Appointments
Professor Elizabeth Waters was appointed as a Professorial Fellow: Public Health and Health Equity with the McCaughey Centre. She holds a Master of Public Health from Monash University (1993) and a DPhil from the University of Oxford (2001).

Professor Waters has attracted over $14 million in competitive research funding, has published over 100 peer reviewed articles in international journals, 18 book chapters, and has been invited to present 91 national and international keynote presentations. She is on the editorial board of a number of international journals, and regular reviewer for international competitive research funders (NIH, ESRC, MRC, CIHR) and international competitive research journals. Members of Liz’s team include Dr Elise Davis, Naomi Priest, Lisa Gibbs, Rosie Ashbolt, Karen Block, Andrea Sanigorski, Elisha Griggs, Ana Neumann, Rebecca Armstrong, Jodie Doyle, Lauren Prosser and Lisa Willenberg.

Dr Bill Genat was promoted to Senior Lecturer.
Dr Shyamali Dharmage was promoted to Associate Professor.
2007 School of Population Health Awards

Knowledge Transfer Award – Open Award for Excellence in Knowledge Transfer Achievements

The award was presented to The Community Indicators Victoria project team from the McCaughey Centre: Marnie Badham, Dr Xiaogang Chen, Dr Melanie Davern, Dr Marion Frere, Steve Gelsi, Suzan Ghantous, Lucy Gunn and Sue West. The Community Indicators Victoria (CIV) is a collaborative project with VicHealth hosted by the McCaughey Centre. The purpose of CIV is to support the development and use of local community wellbeing indicators as a basis for informed, engaged and integrated community planning and policy making.

Community wellbeing indicators are statistical tools for translating broad community goals into clear, tangible and commonly understood outcomes for assessing and communicating progress in achieving these goals.

There is a growing recognition of the importance of community wellbeing indicators as an alternative to narrower, primarily economic indicators of progress and wellbeing.

Community wellbeing indicators are:
- Democratic tools for engaging citizens and communities and informed discussions about the issues identified as important by their communities.
- Policy tools, guiding evidence based policy making, planning and action to address the challenges and issues identified as important by local communities.
- Reporting tools for tracking the impact of policy initiatives on the lives of citizens and their communities and of communicating progress towards agreed goals.

The establishment of CIV as a platform for a sustainable, state-wide system of local community wellbeing indicators strengthens the capacity of local governments and local communities to:
- Identify and track local, social, economic and environmental trends.
- Develop, implement and evaluate strategies to improve local community wellbeing, health and sustainability outcomes.
- Undertake outcome focused community planning and priority setting.
- Develop and implement citizen engagement and community strengthening strategies.
- Support the development of national and international policy research programs on the development and use of community wellbeing indicators.

The School Staff Profile

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* Denotes MCRI employees

School of Population Health Management and Governance

The School’s committees are accountable for the implementation of the strategic and operational plans incorporated within the School’s management and governance framework and reinforced through the performance development framework.

School of Population Health Principal Committees

Management Resources and Compliance

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Award for Excellence in Academic Administration

Judi Maskiell was awarded the inaugural professional staff Academic Excellence Award in recognition for her work as the coordinator for:
- The Australian Colorectal Cancer Family Study.
- The Breast Cancer Family Study.
- The Australian Melanoma Family Study.
- The Paediatric Cancer Family Study.

Because of the large size of these studies, their familial nature and because they are investigating both environmental and genetic causes for disease, they are extremely complex and require specialist coordination skills. The academic administration of all these studies has enabled the research to progress and build data that lead to successful applications for future funding.

MSPH Teaching and Learning Excellence Awards

The Teaching Excellence Award (Open Award) was awarded to Catherine Bennett, Shyamali Dharmage, Lyle Gurrin, Jane Hocking and Julie Simpson for their work in the Integrated Teaching in Epidemiology: The review and redevelopment of the MSPH core Masters-level Epidemiological teaching program, 2005-2006. The award was given to recognise the unifying approaches used to develop an integrated core epidemiological program for the MSPH Masters programs in Epidemiology. The program was reviewed and the course structure redeveloped in 2005, and launched in 2006. This creative curriculum work involved:

- Engaging external stakeholders through the establishment of a learning and teaching advisory committee in the development and subsequent delivery of the new curriculum.
- Applying a novel curriculum matrix approach to preparation and communication of subject level curricula to maintain oversight of the curriculum, and to ensure the development of a cohesive curriculum at program level.
- Development of innovative interdisciplinary teaching strategies to foster development of fully integrated epidemiological and statistical theory and skills in graduates, including creating fully integrated epidemiology and statistics introductory subjects, contextualised real-world assessment tasks, and a capstone coursework subject to reinforce the development and practice of interdisciplinary skill sets.

The MSPH program receives supportive funding from the Australian Government through the Public Health Education and Research Program (PHERP) targeted at building capacity within the Public Health workforce nationally. In particular, there is a recognised shortfall in strong analytic skill, and higher-end theory and research skill mastery in biostatistics and Epidemiology within the public health workforce.

The process to review, rebuild and accommodate transition to the new teaching program was challenging.

MSPH Research Excellence Awards

Associate Professor Shyamali Dharmage was awarded the School Research Award for Career Development or New Researcher Award (within seven years of completion of a doctorate or seven since commencing a research program).

Shyamali has established a major research program in allergy and respiratory disease within the Centre for MEGA Epidemiology. She has taken existing cohort studies and revitalised them to create exciting new opportunities for her large research team of postdoctoral and PhD researchers. Substantial competitive grant funding and an invitation to speak at a major international meeting are indicative of the quality of work being done on these studies. The type of research that she is doing, combining life course epidemiology with studies of biological markers and of genetics is at the leading edge internationally and promises much in helping to understand and ultimately control these important diseases.

The Head of School Award for PhD Excellence (for those who were awarded their PhD in the previous year) was shared by Karin Hammarberg (KCWHS), Robert MacInnis (MEGA) and Nichole Lister (SHU).

Robert MacInnis’s thesis was entitled ‘A prospective study of body size and composition and the risk of cancer’.

As a result of the research reported in Robert’s PhD thesis, The Cancer Council Victoria commenced a media campaign in May 2007 to raise awareness of the link between waist circumference and the risk of cancer. This represents a major change in practice for The Cancer Council, which previously had concentrated on sun protection and smoking in its public campaigns.

Nichole Lister’s PhD thesis was entitled ‘Screening men who have sex with men for gonorrhoea and chlamydia’. The research and continuing activities (outreach clinics for men who have sex with men and sexually transmitted infection screening according to national guidelines) have contributed to the detection and treatment of Neisseria gonorrhoeae and Chlamydia trachomatis (Ng/CT) among men who have sex with men. Outreach clinics in sex-on-precinct-venues resulted in detection of infection in men who may not have otherwise been tested. A high prevalence of Ng/CT infection was detected, in particular asymptomatic infection.

It is likely that this research has the potential to impact on HIV transmission or acquisition: by detection of HIV among men who have sex with men in outreach clinics, and detection and treatment of Ng/CT which can facilitate HIV transmission or acquisition.

The research and continuing outreach clinics in sex-on-precinct-venues have contributed to increased access to care for men who have sex with men who are possibly at immediate risk of STI/HIV transmission or acquisition.

Karin Hammarberg’s PhD thesis was entitled ‘The experience of birth and early mothering after assisted conception’. The study was a prospective longitudinal study of a consecutively recruited cohort (n=181) of women who had conceived with assisted reproductive technology. The main findings were that compared with women who conceive spontaneously women who conceive with ART are more anxious about caring for the baby when leaving hospital after the birth, less likely to breastfeed their baby at three months and have a three-fold risk of early parenting difficulties necessitating admission to residential early parenting centres in the first 18 months of the baby’s life.

One in six Australian couples suffers infertility and increasingly couples seek medical assistance to have a family. In 2002, 7000 babies were born as a result of assisted reproductive technology and this increased to almost 10,000 in 2006, representing 4% of all births.
Learning and Teaching

Enrolments 2001 – 2007

From second semester 2007 there were 332 continuing students within the MSPH postgraduate coursework programs and 90 research higher degree students.

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ENR = Enrolments
SL = Effective Fulltime Student Load
Shaded cells represent programs that are no longer offered.
International students show School’s global reach

Graduations of international students at the Melbourne School of Population Health continued to rise in 2007, along with applications for 2008, reflecting the School’s strengthening global reputation as a public health training and research institution.

In 2007 there were 370 postgraduate students actively enrolled in coursework programs with the School, and 77 of these were international coursework students. There were also 18 international research higher degree students. There were 44 new international students joining MSPH programs in 2007 alone, and 35 of these were commencing in the School’s flagship program, the Master of Public Health.

Between 2005 and 2007, the number of graduates of the Master of Public Health program grew from 32 to 65 and also doubled in the recently restructured Master of Epidemiology and Master of Women’s Health programs.

Dr Catherine Bennett, the School’s Post-graduate Coursework Coordinator, says the Master of Epidemiology had been rebuilt to meet the needs of the many international applicants who were eligible for direct entry to a Masters because they had medical training, an MPH and/or substantial experience. “It allowed us to establish a new epidemiology program to give them access to a one-year intensive training program that gives them the full core skills they need in epidemiology.”

Dr Bennett says that the range of disciplines and expertise offered, the flexibility to accommodate the needs of individual students from all over the world, and its evolving response to the demands of changing global conditions are “standout features” of the School’s postgraduate offerings. “We have a comprehensive program that allows people to select or build a degree tailored to their own needs,” she says.

Examples of the School’s responsiveness to real-world demands included projects with a large tertiary hospital that required students to evaluate how data was collected and reported around patient outcomes and services. For international students, projects can be set up to develop protocols for a major intervention based in the student’s own country, with the ultimate aim of preparing the student to return to work as a public health practitioner.

Internationally, the skill capacities that were increasingly in demand included program evaluation. “Many international donor funds have introduced requirements for program evaluation to be built in to intervention programs. They are looking for the best return on the international aid dollars,” Dr Bennett says. “And we have a strong program for that within our Masters of Public Health.”

Students of the Master in Public Health program also benefit from the School’s special partnership with the Nossal Institute for Global Health. “This allows us to offer subjects that are taught by staff who are fully experienced in working in resource-poor settings,” she says. “Students take the core skills they build in the mainstream program and add on those special skills and understandings that you need to work in an international setting, which gives local students both a good strong skill base and international students relevant, transferable skills they can take back with them. That’s quite critical.”

Ms Nurulwahida Saad is a Malaysian academic whose international experience includes studying in London. At the Melbourne School of Population Health she completed the Master of Epidemiology in 2007, before returning to be promoted as a lecturer at the International Islamic University of Malaysia Kuantan, Pahang.

Ms Saad says the School was welcoming towards international students, and the mixture of students sharing their respective experiences on topics created a “cross-borders communication” that brought issues alive. Infectious disease epidemiology provided a broad view of infectious disease management utilising case studies, some of which were provided by the international students. “So although challenging it was very interesting and much more than any textbook could provide,” she says.

“The course helped develop organisational skills and team-working skills essential in epidemiology and we could do this through the many simulations of public health decision-making.”

Ms Saad says that if she later wants to move into research, the Master of Epidemiology has equipped her to make that transition.
Quality of Teaching and Learning

MSPH has continued to maintain excellent teaching evaluations in 2007. All 27 Semester 1 subjects evaluated were rated as well taught, 13 of these were rated as very well taught (scoring an average of 4 or more out of a possible 5), with 13 rated as exceptionally well taught (scoring 4.5 or higher). The responses to satisfaction with the quality of the learning experience indicated that 24 subjects were ranked as providing a quality learning experience – that is (scoring an average of 4 or more out of a possible 5). These results were supported by an even better performance in Semester 2. Of the 38 subjects, 12 subjects rated as well taught and 17 as very well taught. The responses to the satisfaction with the quality of the learning experience were that 30 subjects were ranked as providing a quality learning experience. Once again, our student evaluations were well above both the Faculty and University averages.

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Learning and teaching programs

Postgraduate

The School’s postgraduate coursework programs continued to grow and evolve. The School welcomes student feedback and actively seeks input from industry partners, community representatives and future employers of our graduates in order to shape program development. Recent changes included the continued roll out of the new epidemiology program for the Master of Epidemiology and Master of Public Health and the introduction of the revised Women’s Health curricula for the Postgraduate Diploma and the Master of Women’s Health and the Master of Public Health.

Following the success of the Postgraduate Diploma of Public Health (Sexual Health), and the uptake of sexual health electives in the MPH, the School is working towards the development of a sexual health stream within the MPH, including the option of taking a research project in this area.

Add to this the ongoing redevelopment of existing subjects and the introduction of new and already well subscribed subjects (eg Australian Healthcare Systems), it is clear that teaching development is dynamic in the School. This program of review and re-development and our standing as a quality provider of postgraduate public health education means the School’s programs sit well with the Melbourne Model and that the School is prepared for the University-wide review of postgraduate programs that will commence in 2008.

E-Community of Practice

The E-Community of Practice was launched during the year and aims to extend and sustain knowledge transfer of Master of Public Health graduates returning to developing countries. The project is led by Drs Robyn Wooward-Kron (Faculty International Student Support Unit) and Catherine Bennett (MPH Coordinator) and supported by a seeding grant from the Australian and New Zealand Association of Medical Education. One of our recent MPH graduates, Durga Shrestha from Kathmandu, Nepal, will also be a key contributor on the project.

A number of our MPH students elect to develop a public health research program protocol as part of their Masters degree, for example to develop a public health intervention or evaluation program, which the students intend to implement or carry out once they return to their professional roles in their communities. The E-Community of Practice project will track the processes and nature of knowledge transfer from the the students to their research and practice communities. The main objective for this first phase of the program is to establish and maintain a research community among returning AusAID students so that they can support each other and share expertise.

A continuing link with the University of Melbourne provides necessary research infrastructure, such as access to library databases, and research expertise, as well as creating future project opportunities for those MPH students with an International Health focus.

The E-Community of Practice is an initiative to extend the learning networks established in the School and strengthen the links among our graduate community.

Undergraduate

Again Health Practice Semesters 1 to 5 in the Bachelor of Medicine and Bachelor of Surgery attracted a number of excellent tutors from the School in 2007, and they made important contributions to the Health Practice Tutorials and Evidence-Based Practice Training. In addition numerous Melbourne School of Population Health staff have been involved in teaching Health Practice 1 and 3, and in redeveloping Health Practice 3 in particular.

With the decision to have a Bachelor of Biomedicine Degree that will commence in 2009, there will still be a need to teach Health Practice in its current form until the last intake of undergraduate medical students for this current curriculum in 2008. The establishment of the new undergraduate degree presents the Melbourne School of Population Health with some exciting possibilities for curriculum input and teaching.

Advanced Medical Science

The highlight of each AMS year is the conference held for those students being supervised by Melbourne School of Population Health staff and PhD students. The conference is held in May each year and provides AMS students the opportunity to present and showcase their year’s research to staff, students and parents. It is rewarding to see students develop from novice researchers in week one to present often sophisticated research by the end of the AMS year. The success of the AMS year is testament to a lot of hard work by supervisors and the AMS administrator, Anita Lucas, under the leadership of Associate Professor Lynn Gillam.

The 2007 AMS program trialled a mentoring supervision scheme of junior supervisors, including a number of PhD students and recent graduates, by more senior staff. From all accounts it was a very successful scheme and will continue in 2008.

The AMS cohort that completed their year in May 2007 had a total of 27 students, with 13 of these students from Universitas Indonesia.

The new cohort that commenced in mid-July had 14 local students and two students from Universitas Indonesia.

From 2001/2002 the School has supervised a total of 211 AMS students – 32 of these students were from Universitas Indonesia.
Six years after establishing the Melbourne School of Population Health, its foundation professor and head, Professor Terry Nolan, is expanding his vision of the School’s potential.

In 2007, after the official launches of the McCaughey Centre and the Centre for Health Policy, Programs and Economics (formerly the Program Evaluation Unit), he believes the Melbourne School of Population Health is continuing to grow in reputation and relevance.

As the School gains increasing international renown for leadership in teaching, learning, research and knowledge transfer, Professor Nolan is aiming higher, aspiring to see the Melbourne School of Population Health approach the recognition accorded institutions such as Harvard School of Public Health, Johns Hopkins Bloomberg School of Public Health, and the London School of Hygiene and Tropical Medicine.

“The Melbourne School of Population Health is pursuing its vision and knowledge transfer is a key driver, but we face a range of challenges if we are to fulfil our goal of achieving the public prominence and professional relevance of the world’s major institutions of population health,” he says. “Our School needs to increase its depth in relation to its research strengths and realise the opportunities that exist to gain external funding for high-quality population research in a range of different areas.

“To achieve this, we need more funding to grow and continue the work that is valuable and an essential part of the knowledge transfer process for community strategies, policies and priorities.”

Professor Nolan says the Melbourne School of Population Health has been successful in integrating a full range of social sciences, medical and biomedical sciences into an array of activities for teaching, learning, research and knowledge transfer. It would “continue to develop successful collaborations with internal and external partners”, he says.

But he points to areas where the School can deliver more. “It’s an ongoing challenge to maintain a distinctive approach to our teaching and learning, especially in the way we help prepare people for roles in the public health workforce and careers in research.

“This is why we are examining the structure of our postgraduate coursework degrees and how we can better integrate and more efficiently deliver those programs.”

The Melbourne School of Population Health’s research capacity had been substantially expanded in 2007 with the establishment of the McCaughey Centre, which had provided a new dimension through its focus on structural and societal determinants and solutions for health and wellbeing. He says, “this has opened a whole range of new connections into the School, into the Faculty, into the University and beyond. That has been exciting.”
## Research and Research Training

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## Research Training – PhD Completions

<table>
<thead>
<tr>
<th>Surname</th>
<th>Centre/Unit</th>
<th>Supervisors</th>
<th>Final Thesis Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adams, Karen Eileen</td>
<td>KCWHS</td>
<td>Assoc Prof Anne Kavanagh, Dr Jenny Lewis, Dr Jon Willis</td>
<td>Koori kids and otitis media prevention in Victoria</td>
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<tr>
<td>Bwembya, Phoebe Albina</td>
<td>KCWHS</td>
<td>Assoc Prof Jane Fisher, Dr Wendy Holmes</td>
<td>Reproductive decision making of HIV positive Zambian women</td>
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<tr>
<td>Coles, Janice Yvonne</td>
<td>CHS</td>
<td>Dr Alison Brookes, Assoc Prof Marilyns Guillemin and Prof Jill Astbury</td>
<td>Breastfeeding and maternal touch after childhood sexual assault</td>
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<td>Farooqui, Atika</td>
<td>KCWHS</td>
<td>Assoc Prof Jane Fisher, Dr Andrea Whittaker, Dr Julie Thacker</td>
<td>Tobacco use during pregnancy and perinatal health in rural Kanataka, India</td>
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<tr>
<td>Fetherstonhaugh, Deirdre Marie</td>
<td>CHS</td>
<td>Dr Alison Brookes, Prof Michael Ashby, Dr Margaret Fraenkel</td>
<td>Hobson’s choice: dialysis or the coffin. A study of dialysis decision-making amongst older people</td>
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<tr>
<td>Surname</td>
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<td>Final Thesis Topic</td>
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<td>Hall, Sandra Isabel</td>
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<td>Prof Ian Anderson</td>
<td>Decolonisation or recolonisation? A comparative analysis of colonial constructs and racial discourse in key indigenous policy statements in Australia and Aotearoa</td>
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<td>Hodge, Allison Mary</td>
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<td>Prof John Hopper, Prof Kerin O’Dea, Prof Graham Giles</td>
<td>Diet related predictors of type 2 diabetes in the Melbourne Collaborative cohort study</td>
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<td>Hodgson, Janet Margaret</td>
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<td>Assoc Prof Lynn Gillam, Assoc Prof Sylvia Metcalfe, Mrs Margaret Sahhar</td>
<td>Testing times, challenging choices: women, prenatal testing and genetic counselling</td>
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<td>Johnston, Vanessa</td>
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<td>Prof Doreen Rosenthal, Dr Milica Markovic, Prof Pascale Allotey, Prof Kim Mulholland, Prof John Carlin</td>
<td>Weapons of mass destruction: the health impact of human rights violations in the context of Australian asylum policies</td>
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<td>Kowal, Emma Esther</td>
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<td>Prof Ian Anderson, Prof Sandra Gifford, Prof Ross Bailie</td>
<td>The proximate advocate: improving indigenous health on the postcolonial frontier</td>
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<td>Li, Lin</td>
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<td>Dr Martha Morrow, Dr Michelle Kermode</td>
<td>Vulnerable but feeling safe: HIV risk among male rural-to-urban migrant workers in Chengdu, China</td>
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<td>Mitchell, Penelope Fay</td>
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<td>Assoc Prof Jane Pirkis, Prof Pip Pattison, Assoc Prof John Tournbourou</td>
<td>Mental health care roles and capacities of non-medical primary health and social care services: an organisational systems analysis</td>
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<td>Myers, Paul Michael</td>
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<td>Hepatitis C testing among young people who experience homelessness in Melbourne</td>
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<td>Saw, Saw</td>
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<td>Dr Elizabeth Bennett, Prof Lenore Manderson, Dr Mridula Bandyopadhyay</td>
<td>Strategies for public-private partnership in tuberculosis control: the involvement of private practitioners in Myanmar</td>
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<td>Sidat, Mohsin Mahomed</td>
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<td>Dr Jeffrey Grierson, Prof Christopher Fairley</td>
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<td>Skull, Susan Anne</td>
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<td>Prof Terry Nolan, Prof Graham Brown, Dr Graham Byrnes</td>
<td>Effectiveness of influenza and pneumococcal vaccination against hospitalisation for community-acquired pneumonia among persons &gt; 65 years</td>
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<td>Stone, Jennifer</td>
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<td>Tideman, Robin Lesley</td>
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<td>Dr Shelley Mallett, Dr Milica Markovic, Dr Andrea Whittaker</td>
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<td>Welch, Nicola Maree</td>
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<td>Dr Deborah Warr, Assoc Prof Fiona Haines</td>
<td>Bendigo calling: opportunities and limitations of telephone call centre work</td>
</tr>
</tbody>
</table>
The School continued to strengthen its research programs with a total of 18 NHMRC and ARC grants awarded to researchers in the school or involving MSPH partner institutions and commencing in 2008.

This represents research income of $12,245,482, with $8,620,188 being directly administered by the School over the next few years.

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### Research Income

#### Research Income: 2007 Higher Education Research Data Collection (HERDC)

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

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</table>

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<thead>
<tr>
<th>Sponsor</th>
<th>Responsible Ci</th>
<th>Description</th>
<th>Grants Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHMRC Project Grants</td>
<td>Shyamali Dharmage, John Hopper, Melanie Matheson, Michael Abramson, Graham Byrnes</td>
<td>Genetic epidemiology of chronic respiratory diseases from childhood to adult</td>
<td>$840,113</td>
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<td></td>
<td>Jane Fisher, Heather Rowe, Doreen Rosenthal, Julie Quinliven, Lyle Gurrin</td>
<td>A randomised trial of an early parenting intervention to reduce maternal mood disorder and infant behaviour disturbance.</td>
<td>$376,375</td>
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<tr>
<td></td>
<td>Kit Fairley, Catriona Bradshaw, Marie Pirotta, Suzanne Garland, Jane Hocking</td>
<td>Treatment of bacterial vaginosis: a randomised controlled trial</td>
<td>$255,425</td>
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<tr>
<td></td>
<td>John Hopper, Mark Jenkins, Graham Byrnes, Laura Baglietto, Carmel Apicella</td>
<td>Statistical analyses of breast cancer risks for BRAC1 and BRAC2 mutation carriers</td>
<td>$410,250</td>
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<tr>
<td></td>
<td>John Hopper, Shyamali Dharmage, Gillian Dite, Carmel Apicella</td>
<td>A prospective study of the effects of early life growth of adult mammographic density</td>
<td>$442,838</td>
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<td></td>
<td>Kelly-Anne Phillips, John Hopper, Michael Friedlander, Mark Jenkins, Sue Ann McLachlan, Roger Milne</td>
<td>kConFab follow-up: A prospective study of non-genetic risk modifiers in women at high risk of breast cancer</td>
<td>$698,575</td>
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<td>Sepher Tabrizi, Kit Fairley, Basil Donovan</td>
<td>Surveillance of LGV Chlamydia trachomatis types among men who have sex with men</td>
<td>$186,875</td>
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<tr>
<td>Administered by Partner Institution (MCRI)</td>
<td>Sheena Reilly, Margot Prior, Anne Castles, Melissa Wake, Edith Bavin, John Carlin</td>
<td>Understanding how language and reading problems develop: a population-based longitudinal study from infancy age 7</td>
<td>$633,550</td>
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<tr>
<td>Cancer Council</td>
<td>Gialuca Severi, Vanessa Hayes, Justine Ellis, Rodney Sinclair</td>
<td>Markers of Androgen action, genetic variation and prostate cancer risk</td>
<td>$772,700</td>
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<tr>
<td>Cancer Council</td>
<td>Ron Borland, Melanie Wakefield, Hua Hie Yong, Mohammad Siahpush</td>
<td>Extending the Australian arm of the International Tobacco Control Policy Evaluation Study</td>
<td>$837,125</td>
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<tr>
<td>Cancer Council</td>
<td>Lyle Gurrin</td>
<td>Bayesian Statistical Methods for Combining Evidence in Genetic Association Studies of Complex Disease</td>
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<tr>
<td>NHMRC Population Health Capacity Building Grants</td>
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<td>Administered by MCRI</td>
<td>Melissa Wake, John Carlin</td>
<td>Developing child health research with a focus on preventative interventions for common childhood disorders</td>
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<td>NHMRC Strategic Research Grants</td>
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<tr>
<td>Administered by Peter McCallum Institute</td>
<td>Andrew Holloway, Anthony LaMontagne</td>
<td>Establishment of a Latrobe Valley power industry cohort and biospecimen bank for the study of asbestos related disease</td>
<td>$581,225</td>
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</table>
### Administered by Flinders University

<table>
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<tr>
<th>Sponsor</th>
<th>Responsible Ci</th>
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<th>Grants Income</th>
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<tbody>
<tr>
<td>Sue Richardson, Anna Ziersch, Fran Baum, Diannah Lowry, Anne Kavanagh, Laurence Lester, Tony La Montagne, Rebecca Bentley</td>
<td>Changing patterns of work: impacts on physical and mental health and the mediating role of resiliency and social capital</td>
<td>$1,060,623</td>
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### ARC Discovery Grants

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<th>Description</th>
<th>Grants Income</th>
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<tbody>
<tr>
<td>John Hopper, MA Reuter, J Langford</td>
<td>Expert judgement of environmental health risks from exposures to contaminants in urban water systems</td>
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<tr>
<td>Tony Scott</td>
<td>Blended payment system for doctors; evaluation of a natural experiment</td>
<td>$165,000</td>
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### Administered by the University of Tasmania

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<tr>
<td>H Maxwell Stewart, R Kippen, Janet McCalmn, G McCarth R Shilomowitz, Alison Veni, Shyamali Dharmage</td>
<td>Founders and survivors: Australian lifecourses in historical context</td>
<td>$800,000</td>
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### ARC Linkage Grant

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<tr>
<td>C McMahon, F Gibson, Jane Fisher, J Boivin, D Saunders</td>
<td>Age at first birth, mode of conception and adjustment to parenthood</td>
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### New grants awarded in 2007, commencing 2008

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<tbody>
<tr>
<td>NHMRC Project Grants</td>
<td>Jane Hocking, Catriona Bradshaw, Sepher Tabrizi, Kit Fairley, Marie Potter, Basil Donovan</td>
<td>A longitudinal study of bacterial vaginosis and Mycoplasma genitalium in young Australian women</td>
<td>$115,000</td>
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<td>Lyle Gurrin, Katrina Allen, Lawrie Powell, Christine McLaren</td>
<td>Early versus delayed therapeutic venesection for the prevention of hereditary haemochromatosis</td>
<td>$190,000</td>
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<td>Catherine Bennett, Paul Johnson, Geoff Coombs, Gillian Wood</td>
<td>The epidemiology of Staphylococcus aureus and antibiotic resistance in community-acquired infections</td>
<td>$908,750</td>
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<td>Dallas English, Joanne Young, Mark Jenkins, Jeremy Jass</td>
<td>Risk factors for molecular sub-types of colorectal cancer</td>
<td>$418,750</td>
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<td>Anne Kavanagh, Dallas English, Graham Byrnes, Carolyn Nickson</td>
<td>Evaluation of the efficacy of the Australian mammographic screening program</td>
<td>$486,250</td>
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### Partners in NHMRC Project Grants

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<tbody>
<tr>
<td>Cancer Council</td>
<td>Melanie Wakefield, Sarah Durkin, Victoria White, Ron Borland, Mohammad Siahpush, Matthew Spittal, Julie Simpson</td>
<td>How do media campaigns and tobacco-relevant news coverage influence adolescent and adult smoking?</td>
<td>$395,725</td>
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<tr>
<td>MCRI</td>
<td>Katrina Allen, Melissa Wake, Shyamali Dharmage, Mimi Tang, Lyle Gurrin, Melanie Matheson</td>
<td>Population prevalence and environmental/genetic predictors of food allergy in an infant cohort</td>
<td>$529,625</td>
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<td>Cancer Council</td>
<td>Dallas English, David Whiteman, Robert Thomas, Andrew Haydon, Graham Giles</td>
<td>Risk factors for gastro-oesophageal reflux disease &amp; Barrett’s oesophagus in a prospective cohort study</td>
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<tr>
<td>The Peter McCallum Clinic</td>
<td>Stephen Fox, Gillian Mitchell, <strong>Gillian Dite</strong>, Christobel Saunders, Donna Taylor</td>
<td>Histopathological, magnetic resonance and ultrasound correlates of mammographic density in BRCA1/2 mutation carriers</td>
<td>$332,725</td>
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<tr>
<td>Cancer Council</td>
<td><strong>Gianluca Severi</strong>, Mark Jenkins, Vanessa Hayes, Catherine Hayden</td>
<td>Markers of inflammation and prostate cancer risk</td>
<td>$562,150</td>
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<tr>
<td>Deakin University</td>
<td><strong>Boyd Swinburn</strong>, Andrea Sanigorski, Marj Moody, Lisa Gibbs, Liz Waters, Rob Carter</td>
<td>Sustainable impact, capacity gains and cost-effectiveness of a successful community-wide, child obesity prevention program</td>
<td>$390,545</td>
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<tr>
<td>School of Rural Health</td>
<td>Teng Liaw, John Furler, Kevin Rowley, Priscilla Pyett, Margaret Kelaher, Phyllis Lau</td>
<td>Culturally appropriate diabetes care in mainstream general practice for urban Aboriginal and Torres Strait Islander people</td>
<td>$365,675</td>
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**NHMRC Fellowships**

<table>
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<tr>
<td>John Hopper</td>
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<td>Kevin Rowley</td>
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<td>Melissa Southey</td>
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**ARC Discovery Grants**

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<tr>
<td><strong>Ian Anderson, Jane Freemantle, Joan Ozanne-Smith, Jane Halliday, Jill Gallagher, Mary-Ann Davey, Mary Sullivan, Pam Muth</strong></td>
<td>A mortality profile of Victoria’s Aboriginal (and non-Aboriginal) children 1998-2008 using an innovative method and research process</td>
<td>$625,866</td>
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**Partners: APC Discovery Grants**

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<tr>
<td>Deakin University</td>
<td><strong>Kay Cook, Liz Waters, Siang Kai Lo, Elise Davis</strong></td>
<td>The health implications of uncertain child support payments for children in low income single parent families</td>
<td>$234,944</td>
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<tr>
<td>Monash University</td>
<td>Lynette Russell, <strong>Marcia Langton, Zane Ma Rhea</strong></td>
<td>Food, Traditional Aboriginal knowledge and the expansion of the settler economy</td>
<td>$210,000</td>
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**ARC Indigenous Research Development Grants**

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<tr>
<td>Kylie Cripps, Ian Anderson, Marcia Langton, Maggie Walter, Mark Rose</td>
<td>Building and supporting community led partnership initiatives to respond to Indigenous family violence in Victoria</td>
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**ARC Linkage Grants**

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<tbody>
<tr>
<td>University of Queensland</td>
<td>Harvey Whiteford, Michael Hilton, Geoff Waghorn, <strong>Jane Pirkis,</strong> Paul Scuffham</td>
<td>Mental health intervention and non-urban detection screening</td>
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**Other Grants**

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<tr>
<th>Sponsor</th>
<th>Responsible Ci</th>
<th>Description</th>
<th>Grant s Income</th>
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</thead>
<tbody>
<tr>
<td>Department of Human Services, Victoria</td>
<td>John Fitzgerald</td>
<td>Health credits: identifying the economic benefits of licensed premises and translating them into health outcomes at a local level</td>
<td>$99,804</td>
</tr>
<tr>
<td>University of Melbourne Early Career Researcher Grant</td>
<td>Julie Simpson</td>
<td>Optimal design of antimalarial population pharmokinetic studies</td>
<td>$28,768</td>
</tr>
<tr>
<td>IATSIS</td>
<td>Marcia Langton</td>
<td>Indigenous involvement in water management and policy and regulation development</td>
<td>$22,000</td>
</tr>
</tbody>
</table>
# School Of Population Health Seminar Series 2007

The School seminar series was well received throughout 2007 with increasing attendance levels. 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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</thead>
<tbody>
<tr>
<td>7 Mar</td>
<td><strong>Professor John Mathews</strong>, Professorial Fellow, Centre for MEGA Epidemiology, Melbourne School of Population Health, University of Melbourne</td>
<td>Negotiating science and politics</td>
</tr>
<tr>
<td>21 Mar</td>
<td><strong>Professor Jane Gunn</strong>, Chair of Primary Health Research, Department of General Practice, University of Melbourne</td>
<td>The role of GPs in population health</td>
</tr>
<tr>
<td>4 Apr</td>
<td><strong>Professor David Studdert</strong>, ARC Federation Fellow, Melbourne School of Population Health and Law School, University of Melbourne</td>
<td>American health policy: Just cautionary tales?</td>
</tr>
<tr>
<td>18 Apr</td>
<td><strong>Professor Robin Room</strong>, Professor of Social Research in Alcohol, Melbourne School of Population Health, University of Melbourne, &amp; Director of the AERF Centre for Alcohol Policy Research at Turning Point Alcohol &amp; Drug Centre</td>
<td>Prescription regimes and drug control</td>
</tr>
<tr>
<td>2 May</td>
<td><strong>Dr Giuliana Fuscaldo</strong>, Research Fellow, Department of Epidemiology and Preventive Medicine, Faculty of Medicine, Nursing and Health Sciences, Monash University &amp; <strong>Associate Professor Lynn Gillam</strong>, Centre for Health and Society, Melbourne School of Population Health, University of Melbourne</td>
<td>Ethical issues in research</td>
</tr>
<tr>
<td>16 May</td>
<td><strong>Professor Ian Gust</strong>, Professorial Fellow, Department of Microbiology and Immunology, University of Melbourne</td>
<td>AIDS vaccine development: The role of the International AIDS Vaccine Initiative</td>
</tr>
<tr>
<td>30 May</td>
<td><strong>Professor Marcia Langton</strong>, Foundation Professor of Australian Indigenous Studies, Centre for Health and Society, Melbourne School of Population Health, University of Melbourne</td>
<td>Agreement-making, Australian Indigenous People and the mining and resource industry: Trends and issues</td>
</tr>
<tr>
<td>13 Jun</td>
<td><strong>Dr Jodie McVernon</strong> and <strong>Dr James McCaw</strong>, Vaccine and Immunisation Research Group, Melbourne School of Population Health, University of Melbourne</td>
<td>Modelling the impact of vaccine schedule change on Pertussis in Australia</td>
</tr>
<tr>
<td>27 Jun</td>
<td><strong>Professor Robert Power</strong>, Director, Centre for Harm Reduction, Burnet Institute</td>
<td>Successes and challenges for HIV harm reduction targeting injecting drug users</td>
</tr>
<tr>
<td>11 Jul</td>
<td><strong>Ms Beth Wilson</strong>, Health Services Commissioner, Department of Human Services</td>
<td>Turning health complaints into quality changes</td>
</tr>
<tr>
<td>25 Jul</td>
<td><strong>Professor Fiona Judd</strong>, Director, Centre for Women’s Mental Health, Royal Women's Hospital</td>
<td>Issues in women’s mental health</td>
</tr>
<tr>
<td>8 Aug</td>
<td><strong>Professor John Wiseman</strong>, Director, The McCaughey Centre, Melbourne School of Population Health, University of Melbourne</td>
<td>Developing and using community wellbeing indicators: An overview of the role and work of Community Indicators Victoria</td>
</tr>
<tr>
<td>Date</td>
<td>Speaker</td>
<td>Presentation</td>
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<tr>
<td>29 Aug</td>
<td><strong>Professor Ray Pawson</strong>, Professor of Social Research Methodology, School of Sociology and Social Policy, University of Leeds, United Kingdom</td>
<td>Educating Archie: post-Cochrane systematic reviews</td>
</tr>
<tr>
<td>5 Sep</td>
<td><strong>Professor Donna Stewart</strong>, Senior Scientist, Division of Behavioural Sciences and Health, Toronto General Research Institute</td>
<td>International women’s health indicators (mental health, general health): A comparison between Canada, Peru and Colombia</td>
</tr>
<tr>
<td>19 Sep</td>
<td><strong>Mr Shaun Ewen</strong>, Senior Lecturer and Deputy Director, Academic Programs, Onemda VicHealth Koori Health Unit, Melbourne School of Population Health, University of Melbourne &amp; <strong>Ms Leah Walker</strong>, Director, Division of Aboriginal People’s Health, University of British Columbia</td>
<td>Indigenous health research and teaching: A cross-national case study from Australia and Canada</td>
</tr>
<tr>
<td>26 Sep</td>
<td><strong>Professor Dallas English</strong>, Director, Centre for Molecular, Environmental, Genetic and Analytic Epidemiology, Melbourne School of Population Health, University of Melbourne</td>
<td>What do we know about preventing the second five most common cancers?</td>
</tr>
<tr>
<td>10 Oct</td>
<td><strong>Associate Professor Sean Clarke</strong>, University of Pennsylvania School of Nursing * Joint seminar with the University of Melbourne School of Nursing</td>
<td>The impact of workforce issues on healthcare safety and quality</td>
</tr>
<tr>
<td>17 Oct</td>
<td><strong>Associate Professor Russell Gruen</strong>, Associate Professor of Surgery, University of Melbourne, Royal Melbourne Hospital, and Coordinating Editor, Australian Cochrane Effective Practice and Organisation of Care (EPOC) Group Satellite</td>
<td>Specialist outreach to remote Northern Territory communities: the effectiveness and sustainability of provider-driven initiatives</td>
</tr>
<tr>
<td>31 Oct</td>
<td><strong>SPH Teaching, Research, Knowledge Transfer and Professional Staff Awards Presentation</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>7 Nov</td>
<td><strong>Professor James Buchan</strong>, Faculty of Social Sciences and Healthcare, Queen Margaret University, Edinburgh, United Kingdom * Joint seminar with the University of Melbourne School of Nursing</td>
<td>Nursing Shortages and “Scaling Up”: the UK and international recruitment of nurses</td>
</tr>
<tr>
<td>14 Nov</td>
<td><strong>Professor Christopher Fairley</strong>, Professor of Sexual Health, Sexual Health Unit, Melbourne School of Population Health, University of Melbourne, and Director, Melbourne Sexual Health Centre</td>
<td>Sex workers</td>
</tr>
<tr>
<td>16 Nov</td>
<td><strong>Professor George Davey Smith</strong>, Department of Social Medicine, Bristol University, United Kingdom</td>
<td>Life course approaches to chronic disease epidemiology – What do we know?</td>
</tr>
<tr>
<td>28 Nov</td>
<td><strong>Dr Shekhar Saxena</strong>, Coordinator, Mental Health: Evidence and Research, World Health Organisation</td>
<td>Global resources for mental health</td>
</tr>
</tbody>
</table>
Two researchers connected to the Melbourne School of Population Health were honoured in the prestigious 2007 Premier’s Award for Medical Research.

Epidemiologist Dr Helen Cox has won the 2007 Premier’s Award for Medical Research. Dr Cox enrolled for her PhD at MSPH and was based at the University’s Australian International Health Institute, now part of the Nossal Institute for Global Health. Dr Cox won $16,000 from the Victorian Government and $30,000 from the Jack and Robert Smorgon Families Award. Dr Cox says the award has raised the profile of both tuberculosis research and more broadly health issues in Australia. Her PhD research into multi-drug resistant tuberculosis was conducted while she worked for Médecins Sans Frontières in Uzbekistan. After many years of working for aid agencies, Dr Cox welcomes both the money and the recognition. She hopes to use the $30,000 from the Smorgon family to extend TB drug-resistance research in Cambodia, work which could have significant implications for our region. Dr Cox, now based at the Burnet Institute in Melbourne, continues to work collaboratively with the Nossal Institute. Research into the links between obesity and cancer has won Dr Robert MacInnis an $8000 commendation in the awards. Now a Research Fellow at MSPH, Dr MacInnis’s work for his PhD at MSPH contributed to a Cancer Council Victoria public education campaign focusing on the link between waist circumference and cancer risk. Dr MacInnis used the Melbourne Collaborative Cohort Study, which surveyed the health status of 41,528 Melburnians over 10 years, to track the link between obesity and cancer. Dr MacInnis is currently based at the Genetic Epidemiology Unit at Cambridge University, UK, but will return to MSPH next year. “It is certainly gratifying to know that the work I put in over the years into this research has had an impact on health policy with the Cancer Council Victoria’s campaign to reduce waist size,” he says, “and that this has been formally recognised with the Premier’s Award Commendation.”

He says the recognition afforded by the award may have contributed to further research opportunities in the form of an invitation to represent the Melbourne Collaborative Cohort Study in a world wide cohort consortium which is investigating obesity/overweight and deaths from all causes.
Staff

*denotes part-time staff

School of Population Health

Head of School and Associate Dean and Professor

Terence Nolan, BMedSc MB BS W.Aust. PhD McG. FRACP FAFPHM

Deputy Head of School and Professor

Ian Anderson, MB BS Melb. PhD LaTrobe

Professors/Professorial Fellows

*John Carlin, BSc W.Aust. PhD Harv
Dallas English, BSc Melb. MS Wash. PhD Wash. (Professor and Chair of Epidemiology and Biostatistics)
John Hopper, BA Melb. BSc Monash MSc Monash PhD LaTrobe (NHMRC Australia Fellow)
Christopher Kincaid Fairley, MB BS Melb. PhD Monash FRACP FAFPHM FACSHM
Marcia Langton, AM, BA (Hons) ANU, PhD Macquarie, FASSA
*Janet McCalman, BA Melb. PhD ANU FAHA
Robin Room, BA Princeton MA(English) MA(Sociology) PhD Berkeley
Dureen Rosenthal, AO, BA, PhD Melb. FASSA
David Studdert, BA,MBL MBA MPh Harvard ScD Harvard (Federation Fellow)
Elizabeth Waters BSc Melb, PGradBusAdmin RMIT MPH Monash PhD Oxf.
John Wiseman, BA BSW Melb. PhD LaTrobe

Associate Professors/Principal Research Fellows

David Dunt, MB BS Melb. MAPrelim LaTrobe PhD Monash FFPHM
Lynn Gillam, BA Melb. MA Oxf. PhD Monash
Jane Rosamond Fisher, BSc Oxf. PhD Melb.
John Fitzgerald PhD Monash, PhD Melb.
*Peter Greenberg, MB BS Melb. MD Melb. PhD Melb. FRACP
*Bridge Hsu-Hage, BSc Melb. GradDipBehHealth LaTrobe D.Psych (Clin Health) Melb.
Anne Kavanagh, MB BS Finders PhD ANU AFAPHP
Steven Klimidis, BSc Monash PhD ANU
Anthony Lamontagne, BSc Mass PhD Harvard ME Mass Sc.D Harvard
Martha MacIntyre, PhD ANU CertSocAnth Camb.
Harry Minas, MB BS BMedSc Melb. DPM FRANZCP
Jane Pirks, BA MPI Psychology Tas. MAPAppEpi ANU PhD Melb.

Senior Lecturers/Senior Research Fellows

Rebecca Armstrong BNurs/BAppSc(HealthProm)(Hons)
*Deakin MPH Latrobe PhD Deakin
Catherine Bennett, BSc LaTrobe MAppSci ANU PhD LaTrobe
*Steven Crowley, BAppSc Curtin MSc York MBA Monash PGDipDiet Deakin
*Andrew Dalton, BSc MEd DipEd GDipHecEval Monash
Shyamali Dharmage, MBA BS Colombo MSc Colombo MD Colombo PhD Monash
Colleen Doyle, BA (Hons) MAPS Adel. PhD Melb.
Elise Davis BAppSc(Hons) Deakin PhD Deakin
Shaun Ewen, BAppSc S.Aust.
*Louisa Flander, BA G.Wash. MA G.Wash. MA RMIT PhD Colorado
Lisa Gibbs BSc (Hons) Melb PhD Deakin
Jane Hocking, BAppSc(MLS) RMIT, MPH, Melb, MHSc(PhPh)

LaTrobe, PhD, Melb (NHMRC Postdoctoral Research Fellow)
* Ya-seng Hsueh, BPM Taiwan NHSHA Michigan MAE
Michigan PhD Michigan
Mark Jenkins, BSc Monash PhD Melb.
Margaret Kelaher, BSc (Psych) NSW PhD NSW
*Louise Keogh, BSc West.Aust. MA Monash PhD LaTrobe
Shelley Mallett BAppSc LaTrobe BA LaTrobe PhD LaTrobe (Vic Health Public Health Research Fellow)
Jodie McVernon, MB BS BMedSc Monash PhD Oxf.
Priscilla Pyett, BA Monash PhD Deakin
*Julie Simpson, BSc Melb. PhD Open Uni UK
PGDip(MathStat) Cambridge UK
Deborah Warr BA Deakin, MA PhD Melb.
*Henrietta Williams, MB BS Lond. MPH Monash DRCOGUK
DCh MRCGP MFFP DipGUM FRACGP

Lecturers/Research Fellows

Carmel Apicella, BSc Monash MSc Melb. PhD Melb. GDipEpiBio Melb.
Hans Baer, BS Pennsylvania State U, MA Nebraska, PhD Utah.
*Bridge Bassilios, BSc Melb, GradDipBehHealth LaTrobe D.Psych (Clin Health) Melb.
*Rebecca Bentley, BBSc LaTrobe
Kathleen Brasher, CertGeneralNurs Royal Melb CertMidwifery
Monash BAppSc(Nursing) Monash GradDipArts Melb PhD Monash
James Bradley, MA (Hons) History PhD Edinburgh, Dip IT Dundee
Viki Briggs, BA S.Aust.
Alison Brookes, BA Deakin PhD Deakin
Xiaogang Chen, BSc Hangzhou MSc Changchun
PostgradDiplMGP ITC Netherlands PhD Melb.
Angela Clarke, BA VUT MPubHlth Deakin
Kylie Cripps, BA S.Aust PhD Monash
Melanie Davern, BSc Melb BSc(Hons) Deakin PhD Deakin
Jodie Doyle DipNurs Deakin BNurs Deakin
GradDipHealthProm LaTrobe MPH LaTrobe MPH LaTrobe
Gillian Dite, BSc., PhD, GDipEpiBio Melb.
James Dowty, BSc, PhD Melb.
*Peter Feldman, BA Tas.
Elodie Fernandez, MSc Statistics Institut National Des Sciences Appliques, Toulouse, France
*Justine Fletcher, B.Psych (Hons) Vic Uni. M.Psych (Clinical) RMIT
Karim Hammarberg, RN BSc Sweden, MWH Melb, PhD Melb.
*Helen Jordan, BSc GDipEd Melb. GDipEpi8Biostat Melb.
Tessa Keegel, BA(Hons) Monash MA Monash
GradDipEpiBioMelb(PhD)
*Deborah Keys, BA Deakin PhD LaTrobe
Tania King, BA BSc Melb.
Maggie Kirkman, PhD Melb. PhD LaTrobe
*Fay Kohn, MA Deakin DEd Melb. DipPT Deakin GDipTESOL Deakin
*Jennifer Livingston, BSc Med DipEd Melb.
Robert MacLinnis, BSc Monash PhD Melb. GDipEpiBio Melb.
Melanie Matheson, BSc Monash MAppSc RMIT PhD Monash
James McCaw, BSc PhD Melb.
*Rosemary McKenzie, BA Monash MPH Curtin
PG dipHlthProm Curtin
Tania Nadalina Miletic, BA PGrad Psych Melb.
M CertInterstudies ICU Tokyo MPubAdmin ICU Tokyo
Johanna Monk, BA Melb. MA Monash
*Belinda Morley, BA Monash
*Lucio Naccarella, BSc Adel. GDipMHs(Transcult) Melb.
*Carolyn Nickson, BA LaTrobe Grad Dip (Epi & Biostats) Melb
PhD Melb.
*Nicholas Osborne, BSc Adel. BSc Flinders MA@Sc Qld. PhD Qld.
*Michael Ottim, BSc Makerere Uni. Uganda MEcon Monash GDipEc Newcastle PG Dip Hlth Ec & Evln
Monash
Yin Paradies, BSc MMEdStats MPH PhD
*Susan Peake, Dip Ed Loc, BA (Hons) Qld, MMS Qld, PhD Melb.
Gregory Phillips, BA Qld. MMedSc Qld.
*Anne-Marie Polimeni, BA (Hons) Swinburne PhD Swinburne
Nanai Priest BAppSc(Hons) S Aust PhD Melb.
*Helen Rawson, BSc Southbank MSc Oxford PhD Candidate The LaTrobe
Elishe Riggis BAppSc(Hons) Deakin
Belinda Robson BA(Hons) Melb MA Monash PhD Melb.
Heather Rowe, BA LaTrobe PhD Melb.
*Therese Rilev, B Soc Sci RMIT MA RMIT PhD RMIT
*Helena Sandahl, MSc Gothen, BA (Hons) Melbourne DPsych Melbourne
Katrina Scurrah, B.Math Newcastle PhD W.Aust.
*Ting Fang Shih, BS CMC Taiwan MPH Tulane USA DrPh Melb.
Paul Stewart, GDipIndigSt Syd MPubHlth Deakin
Jennifer Stone, BSc Guelph MSc Guelph
*Theonie Tacticos, BBus Monash GDipCommDev RMIT
*Kui-siang Tay-Teo, BPharm Monash MPH(HlthEco) Melb.
David Thomas, MB BS Syd. MMEdScience Newcastle PhD NTU
Lyndal Thomas, BSc Monash
*Pauline Van Dort, BA (Hons) Psych Swinburne
Sue West, BA Phillip IT MA RMIT
*Michelle Williamson, BHlthSc LaTrobe

Senior Tutor
Ann Brothers, BA Melb.

Research Officers/ Assistants
Kristie Adams, BSci Melb. GradDipEpi Melb.
*Melanie Adams, BAppSci Deakin
*Claudine Chionh, BA Melb.
*Joanne Christo, BSc (Hons) Psych Vic Uni. DipAppIsc (Nursing) Vic Uni.
*MPSyCh (Counselling) Swinburne
Anne Cust, BSc Qld BA Qld MPH Sydney PhD Sydney
*Jennifer Foord
*Alan Headley, BA Qld.
Kris Jamsen, BSc Michigan MBiostat Melb PG Dip Melb.
Ana Lopez-Polin, BMEdSc Melb.
Christopher Thomas McCaw, BA BSc Melb.
*Joan McPhee, BA Rutgers MNutr&Diet Deakin
Lauren Matheson, BA Calg. MWH Melb.
Katherine Morley, BA Qld BSc Qld GCert(HEcon) Qld PhD Qld.
Amanda Richardson, RN

*Lukar Thornton, BSc Soc (Environ) RMDip (Environ)
Melb MEnv Melb PhD candidate Melb.
Gael Trytell, BSc Monash BA Swinburne

Professional Staff
Senior Professional Staff
School Manager
Leanne Taylor, BSc Deakin BHA NSW PG Dip Diet Deakin
MHSc LaTrobe
Information Technology Service Manager (South of Grattan Street Cluster)
Nick Golovachenko BA Syd.

Academic Programs Manager
Elizabeth Lagias

Finance and Resources Officer
Fiona Kostidis BSc Melb.

Personal Assistant to Head of School
Nora Li Dip Exec Sec Studies HK Polytechnic

Centre Managers
Jenny Burchill BA VU
Janine Campbell, BA Melb Grad Cert U Monash.
Maggie Lenaghan, BA Monash BA(FineArt) Prahran GDipFA VCA GDipBusAdmin RMIT
*Tracey Mayhew
 Felice Rocca, BA Melb.
Doug Scobie, BA Deakin

Centre /Unit Staff
Maggie Angelakos, BSc Monash
*Kelly Aujard, BlInfoSys Swinburne
Jennifer Boadle, BA Deakin
*Jacqui Carter
Kim Dorrell, BA Qld
Emily England, BA/BSc La Trobe GDipEd Monash
Fiona Finlayson
Kate Jenkins, DipBus RMIT
Vicki King
Debra Knoche, BA (Hons) Melb.
Anita Lucas BSc Monash
Nicole McMillan
Megan Mackay BAppSC (Human Movement) Deakin
AdvDipAppSc (Myotherapy) RMIT
Judith Maskiell, BAppSc(Nurs) Monash GDipBusSt(Mgt) Monash
Odette Mazel
Adam Moffatt
Niven Mathew BE TIEC, MIT Monash
Giles Ng
Annie Nguyen, M Acct RMIT GDip Fin RMIT B Ec HCMC, Vietnam
Karen O’Brien
Shaie O’Brien BA Monash MA Monash
*Leanne Prior
Judy Pryor
Danielle Pullin BA Melb
Caitlin Raynor
Jennifer Sievers BlinfMan Monash
Katie Symes, BA Melb.
Vladimir Tittl
Nicole Waddell
Laura Thompson, BA BEd Deakin
Patricia Van Kampen
Kellie Vizard, AdvCert(Admin) Box Hill TAFE, ADip(Bus) Box Hill TAFE
Work driven by links between racism and health

For Dr Yin Paradies (right), winning the 2007 NAIDOC Scholar of the Year award provided both personal inspiration and professional affirmation to continue his work. “It was really inspiring to be able to be honoured by my peers and the broader community. And sometimes in academia we can be fairly unseen and unacknowledged so having that type of award was also really positive in terms of recognition and moving forward in my research agenda,” he says.

Dr Paradies’s work is driven by an overall aim of having the links between racism and health addressed as public health priorities. To this end he focuses on putting his research to work across a range of knowledge transfer avenues that can contribute to health policy and raise public awareness.

Among his recent projects was his contribution to a significant 2007 VicHealth report, ‘More Than Tolerance: Embracing diversity for health’, which explored options for working against discrimination affecting migrant and refugee communities in Victoria. Also for VicHealth, he is evaluating an anti-discrimination intervention called, ‘Building Bridges’.

“I’m involved also in a new ARC research grant about identifying the various forms of racism across Australia, and developing particular solutions that may be appropriate in local areas . . . This new work will help us to develop anti-racism tool kits that could later be used by local councils and other organisations.”

Nicole Waddell
Joy Yeadon
Jane Yule, BA Monash MA Monash GDipRec PhillipIT

Honorary Appointments

Professorial Fellows
Warwick Hugh Anderson, MB BS BMedSc MA MD Melb. PhD Penn.
Ross Bailie, MBChB MPhil MD(CommHlth) CapeTown
MRNZCPGP FCCH(SA) FAFPHM
Stephen Bird, BSc PhD Leic. PGCE ScEdu Sussex FIOB FBASES
Ron Borland, BSc Monash MSc Monash PhD Melb. MAPS
John Nicholas Crofts, MB BS Melb. MPH Monash FAFPHM
Graham Giles, BSc MSc Mich. PhD Tas.
Margaret Ann Hamilton, BA MSW Mich. DipSocSt
Allan Kellehear, BA PhD
Lenore Hilda Manderson, BA(AsianSt) ANU PhD ANU FASSA
(Australian Research Council Federation Fellow)
John Mathews, AM, BSc Melb. MB BS Melb. MD Melb. PhD Melb. Hon DSc NT FRACP
FRCPA FAFPHM
Alan Rob Moodie, MB BS Melb. MPH Harv. FAFPHM
FRACGP DRACOG DTM Paris FAIM

Robert Power, BSc Lond. PhD Lond. PGCE Lond.
Edward William Russell, BA Melb. BEd Monash PhD Monash DipArchSt Lond. FAIM FIPAA(Vic)
Anthony Scott, BA Northumbria MSc York PhD Aberd.
Julian Savulescu, MB BS LaTrobe BMedSc LaTrobe PhD LaTrobe
Haydn Walters, BA Oxford BMBCh Oxford MA Oxford MRCP Lond. DM Oxford FRCP Lond. FRACP FCCP

Principal Fellows with the title Associate Professor
Donald Alexander Campbell, MBBS Monash MMedSc(Clin Epi) Newcastle MD Monash FRACP
Christopher John Clements, MB BS. Lond. MSc Manchester DipChildHlth, RCP Lond. DipObst Auck. FAFPHM MPH MCCM LROP MRCP
Alex Cohen, BA NY MA NY PhD UCLA
Joan Cunningham, BA Harv. MLibArts Harv. PhD Harv.
Peter William Deutschmann, MB BS MPHIC FRACS
Dorota Gertig, MB BS Monash MHC(ClinEpi) UBC ScD(Epi)
Harv. FAFPHM
William Hart, MB BS Monash MBScPrelim GDipCH LaTrobe
Fumi Horiguchi, BMed TokyoWmMed-College PhD Keio
Damien John Jolley, BSc Melb. MSc Lond. MSc LaTrobe DipEd SCVic.
Heath Kelly, BSc MB BS MPH W.Aust. FAFPHM
Vikram Patel, MB BS Bom. MSc Oxf. MRCPsych RCP (UK) PhD Lond.
Kelly-Anne Phillips, MB BS Monash MD Monash FRACP

Senior Fellows with the title Senior Lecturer
John Carnie, MB BS. MMed Melb. MPH Harv. DipCH Ceylon DipCH Lond. MRCP(UK) FRACMA FAFPHM
John Condon, MBBS Monash MPh Harvard CertHlthEcon Monash PhD Charles Darwin
Michelle Haby de Sosa, BAAppSc S.Aust. MAAppSc Synd. PhD Sydney

Wendy Holmes, MB BS MSc Lond.
Krishna Philip Hort, MB BS Synd. DRCOG Lond DTCH Liverpool MGH NSW FAFPHM
James Humphery, BA MA MPhil Camb. PhD Robin Hyndman, BSc PhD
Rosemary Ann Lester, MB BS MPh Monash MS(Epid) UCLA FAFPHM
Duncan MacGregor, MB BS BMedSc PhD Melbourne. Catherine Louise Mead, PSM MB BS DPH Syd. FRACMA FAFPHM
Michael Montalto, MB BS PhD DipRACOG Melb. FRACGP Daniel Reidpath, BA Swinburne PhD W.Aust. DEdPsych
Monash Mohammad Siahpush, BS MS Utah MIbiostats Melb. PhD Ohio Julie Thacker, BSc W.Aust. PhD ANU GDipEd Curtin UCLES/ RSA CLEFLA Lond.
Susan Treloar, BScScStud Syd. MSc Lond. MSc NSW PhD Qld. Tarun Stephen Weeramantri, MB BS W.Aust.

Fellows with the title Lecturer
Karyn Alexander, MBChB Leicester MPH Monash
Laura Baglietto, BSc MSc Italy PhD Birm.
John Biviano, BAAppSc MBUS RMIT GDipBus RMIT
Michelle Boglis, PNG
Janet Briggs, BAAppSc DipAppSc LaTrobe RN RM Clare Teresa Brophy, RN
Richard Clark, BSc Melb. DHCs Deakin
Heather Elizabeth Dawson, BAppSci(Physio) Lincoln BEd PGDipHistResMethods LaTrobe MPH Monash
Richard Di Natale, MB BS Monash MPH MHSc LaTrobe FAFPHM FACRRM
Bircan Erbas, BSc Melb. MSc Melb. PhD Melb. Ashley Fletcher, BSc MPH MAppScMelb.
Susan Foxman-Feldman, BA Swinburne BAppSc RMRN
Jane Freeman, PhD UWA Craig Lindsay Matthew Fry, BSc Monash
Jane Gibson Elizabeth Hoban, BA Edith Cowan MThStatHlth Qld PhD Melb.
Marita Keeford, DipAppSc PhillipIT Harald Klein, BA Qld. PhD Monash
Ruth Lawrence, RN David Michael Lee, BAppSc(UTS) DrPH Melb. MPH GDip(CritCare) Synd. FRCNA FCN

Stephanie Lenko, GDipOHP LaTrobe RN RM Tania Lewis, BM BS Otago BA Canterbury MA Canterbury PhD Melb.
Betty Yar Yuan Lim, BNurs Deakin RN Tamara Mackean, BM BS (hons) UNSW BM BS UWA MPH Adel.
Ethna Mary Macken, BA Swinburne DipAppSc PhillipIT RN Milica Markovics, BSc MSc Belgrade PhD Qld.
Brian McCoy, BA Melb. DipCrim Melb BTheol Melb. GradCert Comm Mental Hlth Flinders PhD Melb.
Elizabeth McGrath, BA Melb. Roger Mlne,BA Melb. BComm Melb. GDipClinEpi Monash
Penny Mitchell, BSc Psych NSW MPH Syd PhD Melb. Alison Morgan, MB BS Synd. DRANZCOG DTM&H Liverpool Christopher John Morgan, MB BS Synd. DTCH Liverpool FRACP
Paula Nathan, AssDipMedLabSci RMIT Kerry-Ann O’Grady, BSc NCU MAEdPDip ANU GDipPH Syd. Aleck Ostrey, BSc UBC MSc UBC MA Simon Fraser PhD UBC
Phillip Patterson, RN IDCert Michaela Riddell, BAAppSc RMIT GDipEpiBio Melb. PhD Melb. Mary Rillstone, BA MHS DipTheoSt Otago Jane Ryrie, RN Deborah Saunders, RN Gianluca Severi, BSc Genoa MSc Milan Italy PhD Milan Italy PhD Birmingham UK
Diane Tibbits, BSc PhD Monash GDip LaTrobe Eve Urban, BN LaTrobe MEd Monash RN Sandra Walker, BA Swinburne GDipAppPsych VUT DPsych
Swinburne RN RM Marie West, RN Ann Westmore, BSc MSc PhD Melb. Vanessa Wood, BAAppSc Nsg LaTrobe GDip Mgmt VU AdvSexualHealth Nurse
Tiam Yap BAAppSc RMIT

Adjunct Staff
Professors
Sidney Bloch, MB ChB Capetown PhD ECFMG DipPsyMed Sioban Nelson, BA LaTrobe PhD Griff.
Loane Skene, LLM Monash LLB Barrister & Solicitor Victoria

Senior Research Fellow
Jenny Lewis, BSc MEnvS PhD GDipRecPlng Canberra GDipPubPol

Senior Lecturers
Tim Marjoribanks, PhD Harv. Rosemary Robins, BA PhD NSW
Overview
The Centre completed a successful year in 2007 as the detailed reports here indicate. Its contribution to the School of Population Health’s postgraduate and undergraduate teaching programs is substantial and continues to grow. The feedback from students on the Centre’s quality of teaching was excellent. A PhD student, Robert MacInnis, received a commendation in the Premier’s Award for Medical Research. The Centre had substantial research output in terms of peer-reviewed publications and had great success in winning new competitive grants. Professor John Hopper’s outstanding research achievements were recognised by the award of an inaugural NHMRC Australia Fellowship. The prestigious Australia Fellowships are awarded to researchers with an exemplary record of achievements in a variety of fields.

Teaching and learning
The Centre delivers postgraduate coursework programs in Epidemiology and Biostatistics. Both streams have now been recognised with School Teaching and Learning Awards. Professor John Carlin received the MSPH award in 2006 for the development of the Biostatistics suite of programs and in 2007 the MEGA teaching team, who re-developed the Epidemiology programs in the Master of Epidemiology and MPH, received an award for excellence in teaching and learning.

We have also had individual subject success stories. The introductory statistics subject coordinated by Julie Simpson in the MPH program delivered by the Victorian Consortium for Public Health was rated very highly by students across all universities, and achieved its highest student feedback for the quality of the lectures in the 10 years since the joint foundation program commenced (scored 4.5 out of a possible 5).

One of the Centre’s specialist subjects, Infectious Disease Epidemiology, introduced in 2003, attracted the highest enrolments of any Masters level subject in the School in 2007 (n=43) while maintaining high overall student ratings for “is this subject well taught” (4.7/5). Enrolments at course level were also higher in 2007. The maturation of the Biostatistics programs and the restructure of the epidemiology curriculum has resulted in the centre attracting higher numbers of both international and local students to our specialty programs.

In addition, the epidemiology/biostatistics stream within the MPH program continues to be the most popular stream choice within those offered by the School, and with the number of MPH students increasing...
on the increase, so too are the number completing the epidemiology/biostatistics stream. When MPH specialties and our specialist degrees are combined, the steady growth in successful completions is strong, rising by more than 100% in 2006, and a further 40% in 2007. Our contribution to the School’s total completions has also risen over this time, from 21% in 2005, to 32% in 2006, and 36% by 2007.

Research

During 2007, academic staff of the Centre were first-named investigators on five NHMRC project grants and chief investigators on nine other successful NHMRC grants; three NH; one ARC and nine other ongoing grants. Staff also maintain research collaborations with numerous national and international projects.

Actual income from research grants in 2007 was $4.9 million, including funding from NIH (USA), NHMRC Fellowships, a NHMRC Capacity Building Grant in Population Health Research, a NHMRC Enabling Grant, NHMRC project grants, a NHMRC Strategic Award Grant, Career Development Awards, an ARC development project, NHMRC postdoctoral fellowships, along with University of Melbourne support, Cancer Council Victoria, National Breast Cancer Foundation, and numerous national and international research awards. We published 72 peer-reviewed articles on a wide variety of topics. A common theme was the use of advanced epidemiological and statistical methods applied to molecular, clinical and public health problems.

Major research programs

Asthma, allergy and other respiratory disease

The research program on allergy, asthma and other respiratory disease at the Centre is headed by Dr Shyamali Dharmage. The aim of this program is to understand the complex interplay between environmental and genetic risk factors for these diseases both in children and adults, and thereby to contribute to the development of interventions that could be directed at the population level, at high-risk groups, or at individuals. Over the past seven years, this program has provided training opportunities for a number of honours and doctoral students, and post doctoral researchers to undertake ground-breaking research at the forefront of airway disease research. Currently four PhD students and two postdoctoral research fellows are conducting their research within this research program. Over 2007, the research conducted within this program has been published in high impact journals, including the world’s top allergy journal, and the researchers have frequently been interviewed by the media.

This program mainly encompasses two world-class longitudinal studies and is funded by a number of external funding bodies, including NHMRC.

The Centre, in collaboration with Monash University and the University of Tasmania, is investigating the natural history, environmental and genetic risk factors for childhood asthma and allergies using a population-based prospective study of a high risk cohort of children born from 1991-94 (the Melbourne Atopic Cohort Study). The 15-year follow-up of the MACS cohort including their parents and siblings is now funded by a Healthy Start to Life for All Australians NHMRC strategic award and will commence at the beginning of 2008.

In addition, the researchers of this program are collaborating with other local and international research groups working in this research area. The Centre is part of an international working group investigating early-life risk factors for asthma in collaboration with Haraldsplass Hospital, Bergen, Norway, and the Department of Public Health Sciences, King’s College London. This is...
a working group within the European Community Respiratory Health Survey that has been conducted in 56 centres in 28 countries, including Australia. A separate collaboration with the Royal Children’s Hospital is investigating the prevalence of food allergy and its risk factors among infants, which is a population based cross sectional study funded by NHMRC. The Centre is part of a study investigating the impact of air pollutants and pollen on asthma hospital admissions conducted by the La Trobe University in collaboration with the Department of Human Services and Monash University. The Centre also has a collaborative study of occupational allergy underway. This is a study of prognostic indicators for occupational contact dermatitis in collaboration with the Occupational Dermatology Research & Education Centre, i.e. Skin Watch Study, and is currently following up a cohort of 600 workers who have been diagnosed as having occupational contact dermatitis.

**Family studies of cancer**

This program of research is headed by Professor John Hopper. The Centre has pioneered population based family studies of cancer that are emerging as a standard for genetic epidemiological research. The Australian Breast Cancer Family Registry, the Australasian Colorectal Cancer Family Registry, the Australian Melanoma Family Study, the Victorian Paediatric Cancer Family Study, Australian Prostate Cancer Family Study (in conjunction with The Cancer Council Victoria), and The Twins and Sisters Study of Mammographic Breast Density (in conjunction with the University of Toronto and the Queensland Institute of Medical Research) are large population based and clinic based case control family studies funded by the National Health and Medical Research Council (NHMRC), VicHealth, the NSW Cancer Council and the National Institutes of Health (USA). The analysis of genetic mutations and variants is a common thread to all studies and much of this work is being conducted in the Genetic Epidemiology Laboratory in the Department of Pathology at The University of Melbourne.

The Australasian Colorectal Cancer Family Study is Australia’s foremost resource for research into the genetic and environmental causes of bowel cancer. The Principal Investigator, Professor John Hopper, in collaboration with Professor Jeremy Jass and colleagues throughout Australia and New Zealand, has been awarded $16.7 million over 10 years to recruit colorectal cancer families, and collect blood samples, epidemiological questionnaires, tumour samples, medical records, dietary questionnaires and family cancer histories from more than 28,000 individuals from over 7400 families. This study is funded by the National Institutes of Health (USA) as part of an international consortium, the Colon Cancer Family Registry. Other collaborating institutions include the Mayo Clinic, the Fred Hutchinson Cancer Research Center, the University of Hawaii, Cancer Care Ontario, and the University of Southern California. More than 13,000 families have been recruited. Major funded projects stemming from the Colon CFR include: studies to
identify new genes for bowel cancer; studies on bowel cancer aetiology including molecular pathways; studies on the risk of cancer in carriers of mutations in known high risk genes; and studies on cancer prevention including screening – as well as over 100 other studies related to bowel cancer. The Australasian Colorectal Cancer Family Study is expected to continue recruitment and follow-up of all participants under new funding in 2008 for a further four years.

**The Melbourne Collaborative Cohort Study**

The Melbourne Collaborative Cohort Study (MCCS) is conducted by The Cancer Council Victoria and is headed by Professor Graham Giles (honorary professorial fellow). Professors Dallas English and John Hopper are chief investigators on the study and it represents Professor English’s main research interest. It is a prospective cohort study of 41,528 people (17,049 men, 24,479 women) aged between 40 and 69 years at recruitment, which occurred between 1990 and 1994. An unusual feature of the study is that 25 percent of participants are migrants to Australia from Italy and Greece. These migrants were included to increase the variability in lifestyle and genetic factors. The main focus of the study to date has been on identifying risk factors for cancer, type 2 diabetes, cardiovascular disease, eye disease and arthritis. During 2007, new grants were awarded to study the role of infection and inflammation in causing prostate cancer, risk factors for gastro-oesophageal reflux disease and Barrett’s oesophagus (a precursor to oesophageal cancer), risk factors for molecular subtypes of colorectal cancer and risk factors for breast cancer.

**Hereditary Haemochromatosis**

This program of research is headed by Dr Lyle Gurrin and Associate Professor Katie Allen from the Murdoch Childrens Research Institute. Between 2003 and 2006, more than 1000 participants in the Melbourne Collaborative Cohort Study (which started in the early 1990s) were recruited by the HealthIron study, an investigation into the genetic and environmental modifiers of inherited disease of iron overload known as hereditary haemochromatosis. These participants visited a study centre in Carlton, provided blood samples, completed questionnaires and underwent a clinical examination. Analysis of data during 2007 revealed that those experiencing iron overload are much more likely to have symptoms of serious disease than previously thought. Almost 30 percent of men who are genetically predisposed to accumulate too much iron in their body (due to having two faulty copies of the HFE [haemochromatosis] gene) had signs of iron overload related disease such as fatigue, arthritis, abnormal liver function tests or signs of liver damage. Women with the same genetic predisposition to iron overload had only a one percent chance of developing signs and symptoms of disease. Reasons for the difference in disease risk between men and women, and the identification of other genetic and environmental modifiers (using genotyping of iron-related genes from collected blood samples and the extensive databases of questionnaire responses) will be the focus of research on the HealthIron project over the next year.

Investigators from the HealthIron study at the Centre for MEGA Epidemiology, The Cancer Council Victoria and the Murdoch Childrens Research Institute have been awarded a project grant from the National Health and Medical Research Council to link records from the HealthIron database to the Australian Red Cross Blood Service to obtain details of the blood donation history of HealthIron participants. Although hereditary haemochromatosis can be both treated and prevented by regular blood donation, it is not known how frequently those at genetic risk of iron overload need to donate blood for them to benefit from it, and whether the age at which people start donating blood is important. The aim of this study will determine whether earlier treatment by blood removal is more effective at preventing disease than treatment after diagnosis when symptoms are already present. Results from this new work will have important implications for the cost-effectiveness of population genetic screening for hereditary haemochromatosis. We hope that this collaborative project will demonstrate that the resources of a large, population based cohort study can be combined effectively with health services databases to answers questions about chronic conditions of adult life and promote healthy ageing.

**Statistical methods**

This program of research is headed by Professor John Hopper. Methodological research in biostatistics has focused on the development and refinement of methods for genetic epidemiology and for the analysis of correlated data more generally. These include methods of clustering and data reduction for extracting relevant information from pathology data, optimising design of genome-wide scans and methods for analysing data from families, for both continuous and binary outcomes. These studies help us understand the aetiology of disease and provide opportunities for public health interventions such as targeted screening of high risk individuals and families.

**Community-Onset Staphylococcus aureus Household Cohort study**

This research program is led by Dr Catherine Bennett. The Centre is leading research on the epidemiology of community-onset Staphylococcus aureus infections, and virulent antibiotic resistant ‘MRSA’ or ‘superbug’ strains in particular. We are among the first researchers globally to recognise MRSA as being more than a hospital-based issue, and to approach this as a community-wide public health problem.
Fellowship to expand pioneering research

The School of Population Health’s Professor John Hopper has already started putting his 2007 Australian Fellowship – for which funding commenced in October 2007 – to work. Worth $4 million over five years, this highly prestigious award enables the Director (Research) and Professorial Fellow of MEGA (Molecular Environmental Genetic & Analytic Epidemiology) to expand his pioneering research.

Over a 15-year period, Professor Hopper has become internationally renowned as a leader in genetic epidemiology and was recently named as a Member of the Order of Australia (AM). His citation in the 2008 Australia Day honours noted his service to public health and the biomedical sciences, particularly in the field of genetic epidemiology as an academic and researcher, and to the Australian Twin Registry.

Drawing upon large population-based studies, he investigates the roles of genetic and environmental factors on risks of breast cancer, colorectal cancer, early childhood cancer, melanoma, prostate cancer and other diseases. Professor Hopper’s work is highly collaborative, relying for its success on networks within the University of Melbourne, across Australia and around the world. Working closely with Professor Graham Giles, the Director of the Cancer Epidemiology Centre at The Cancer Council of Victoria, Professor Hopper has developed extensive resources – including DNA samples from 100,000 Australians – that provide a solid foundation for an intensive, well-structured research program. “We are now at the cutting edge of cancer genetics worldwide,” Professor Hopper says. “It has taken years of work to get to this position.”

He cites two defining characteristics of their work: it takes a population-based perspective and it focuses on early onset disease. Examples of the latter include breast cancers before age 40, colorectal cancers before age 45 and melanomas before age 40. “By studying early onset cancers, genetic factors are more likely to play an important role, and we are more likely to identify those genes because more of the previous generations are living.”

Professor Hopper and colleagues have identified that there are very high risks of early onset breast and colorectal cancer that appear to have a familial nature, if not a genetic cause, suggesting there are genes yet to be discovered. “One of our major efforts will be to find early onset cancer genes that have not been identified by previous studies.”

He says they are developing new protocols to rapidly identify mutation carriers among people with early onset cancers by working with surgeons and hospitals that treat these patients. Substantial savings in public health expenditure would result from offering genetic testing to these patients, rather than the traditional model of testing only families who present themselves to genetic-testing clinics, he says. “For over 50% of the people we test we will be finding mutation carriers whereas at the moment, through the current cancer family genetic services, that figure is about 10 to 20%.”

Those who are identified as mutation carriers and their carrier relatives then have a much better chance to minimise their future cancer risks and/or get better treatment. “By taking a population-based approach to targeted genetic testing, we can use genetic knowledge to save lives.”
The collaborative research group combines Centre expertise in infectious disease epidemiology with clinical (Austin Health) and laboratory capacity (Royal Perth Hospital and Dorevitch Pathology). Our pilot research work started in 2004 and anticipated the international interest now being focussed on this problem. In 2007, we took our pilot findings to the international research community at the 47th Annual Interscience Conference on Antimicrobial Agents & Chemotherapy in Chicago, and we were awarded a project grant by the NHMRC to expand this work into a substantial community-based study.

**Australian Twin Registry (ATR)**

Professor John Hopper is the Director of the ATR. During 2007 the ATR continued to develop and improve service levels to the Twin Research community.

**Governance:** The development of an Operational Manual covering all policy and procedure undertaken by ATR and the subsequent Human Research Ethics Committee approval of this document was a highlight of the work of the Management Group and Advisory Board. This clarification also resulted in a review and update of the fees and charging policy of the ATR. The ATR also published a mid-grant report to stakeholders (ATR Annual Report 2005-2007), which outlined activities and achievements over Year 2 and Year 3 of the current NHMRC Enabling Grant. The ATR Advisory Board met throughout 2007, accepting four new members. Sue Treloar resigned as Deputy Director of ATR, and Debra Foley was accepted into the role.

**Capacity Building:** In terms of our efforts to build the capacity of the ATR, the project ‘Mothers and Twin Children (match)’ was launched and began recruitment. This project aims to recruit mothers pregnant with twins. Data collection is undertaken throughout the pregnancy and includes the collection of cord blood samples at the time of birth. The ATR also continued work on consolidation with the West Australian Twin Registry (WATR) and the West Australian Twin Children study (WATCH), including a facilitation workshop to define shared goals and an action plan.

**Projects:** The ATR completed an electronic back-up of all registration documentation in conjunction with the University of Melbourne Imaging Department. This was to ensure that this business critical documentation was backed up and easily accessible to ATR staff. A Data Archiving Project subcommittee was formed and recommendations were made to the ATR Advisory Board.

There was an email-based promotional campaign to universities Australia wide to encourage interest in utilising ATR and the ATR-awarded Round 3 and 4 of the ATR Travel Grant Scheme totalling $10,000. This funding was provided to researchers to continue to promote and improve their skills in twin research. A workshop exploring research utilising twin children was convened which stimulated conversation to encourage use of this underutilised cohort.

The Stakeholder Survey project initiated during 2006 was completed and a report delivered to key stakeholders. This report outlined a range of actions the ATR will take to improve facilitation of twin research across Australia.

The start of the year saw our online registration system launched via the revamped website, which led to an increase in monthly registrations of 36 percent. The ATR also sponsored the ‘Bundles for Multiples’ Australian Multiple Birth Association initiative, which will assist in recruitment of members.

**Conferences:** Sue Treloar, ATR Deputy Director, John Hopper, ATR Director, and Supriya Raj, Match Coordinator, presented ATR work at the International Congress on Twin studies (ICTS) in Ghent, Belgium. The ATR sponsored the Gene Mappers 2007 Conference in Brisbane, which included staffing a booth at the conference venue. Many ATR-supported studies presented their results at the conference. Our relationship with the Australian Multiple Birth Association led to presentations on the ATR and genetics of twinning at the AMBA NSW State Symposium and the AMBA National Convention.

**Research:** Several important studies began in 2007: Garland (HPV/Cervical Cancer risk factors), Trollor (Brain Ageing), Greene (Calcium in Teens), Fatkin (Atrial Fibrillation), Dent/Hay (Attention), Halliday (Folate) and Champion (Growing Pains). Recruitment for 18 studies was conducted throughout 2007 (total activity 100 mailouts, in excess of 8085 mailed approaches – number of approaches reduced due to increase in use of telephone follow-up). New studies in development during 2007 scheduled for commencement 2008 (pending final approval) include: Marks (Reasoning), Seeman (Menopause) and Mayberry (Autism).

**Community activities**

Staff of the Centre have many varied and influential external advisory roles related to research policy, policy and practice of public health and policy related to teaching of public health. These include memberships of boards and advisory committees, memberships
of grant review panels and membership of Human Research Ethics Committees.

**Publication highlights**

For a full list of publications, see the 2007 Publications Report, page 93.


This high profile paper, published in *Nature*, is the result of a worldwide collaboration to find new genes involved with breast cancer risk. It identified six new “loci” of which there are common markers (SNPs) associated with small increased risks. Due to the enormous sample size of the replication study (50,000 cases and controls), the results have high credibility. The Australian Breast Cancer Family Study and the Melbourne Collaborative Cohort Study (Health 2020) contributed the vast majority of the Australian samples to this endeavor, which in total was about 10 percent of the replication data set.


The literature regarding the association between breastfeeding and atopic diseases has been contradictory. Possible explanation for these discrepancies includes differing duration of follow-up, variation in breastfeeding duration and difference in asthma definition. Furthermore, while several studies have examined risk of asthma and atopy into early adolescence, fewer have followed subjects into adulthood and none into middle-age. This is the first study that prospectively examined the effect of exclusive breastfeeding in the first three months of life on risk of current asthma and atopy throughout childhood and into middle age. Our
study found at age seven, exclusively breastfed children with a maternal history of atopy had a marginally lesser risk of current asthma than those not exclusively breastfed. However after age seven the risk reversed and exclusively breastfed children had an increased risk of current asthma at 14, 32 and 44 years. Exclusively breastfed children also had a reduced risk of food allergy at age seven but an increased risk of food allergy and allergic rhinitis at 44 years. The current clinical recommendation is to breastfeed high risk infants for protection against asthma and allergic disease. Our study suggests that breastfeeding of these infants can be recommended for protection against early wheezing illness, however it should be reconsidered for protection against allergic asthma and atopy in the longer term. This paper was published in the Journal of Allergy and Clinical Immunology, which is the highest ranking allergy journal. It received considerable local and international media attention. The paper also provides further evidence for the modification of clinical guidelines regarding protection against asthma and allergies.


Eczema in early life affects approximately 20 percent of babies, and it is believed to be a risk factor for childhood asthma and hay-fever. It has been suggested that this increased risk may be greater in toddlers with atopic eczema (with allergic sensitisation), rather than those with non-atopic eczema (without sensitisation). In this paper, we found that infants with atopic eczema had an almost three-fold higher risk of childhood asthma and hay-fever than infants with non-atopic eczema. The risk was even greater if the child had a very large skin prick test reaction. This indicates that there are at least two forms of eczema, and that the prognosis of atopic and non-atopic eczema are quite different.

This paper has implications for research, clinical practice and health policy. Separating atopic and non-atopic eczema may aid in discovering risk factors for each form of eczema, as it seems likely that the risk factors for these conditions are different. This work also indicates that skin prick testing of eczematous infants is useful in identifying children at the greatest risk of asthma and hay-fever. As skin prick testing is limited outside specialist allergy centres, which have long waiting lists, there are also implications for health care policy on how this test is provided.

These findings have attracted widespread media interest. The University of Melbourne highlighted this study in Melbourne University Visions (episode 18), while Channel 10 reported these results to a national television audience. In addition, the study findings have been summarised in national radio programs and in newspapers. A representative of the Department of Health and Ageing requested a copy of this manuscript to brief the minister on these findings.


A systematic review of nine primary cross-sectional studies was conducted to assess the validity of glycated haemoglobin A1c (HbA1c) as a screening tool for early detection of Type 2 diabetes using the oral glucose tolerance test as the reference standard and fasting plasma glucose (FPG) as a comparison. We found HbA1c and FPG to be equally effective screening tools for the detection of Type 2 diabetes. The HbA1c cut-off point of > 6.1 percent was the recommended optimum cut-off point for HbA1c in most reviewed studies; however, there is an argument for population-specific cut-off points as optimum cut-offs vary by ethnic group, age, gender and population prevalence of diabetes. Previous studies have demonstrated that HbA1c has less intra-individual variation and better predicts both micro- and macrovascular complications. Although the current cost of HbA1c is higher than FPG, the additional benefits in predicting costly preventable clinical complications may make this a cost-effective choice.


This publication arose from an intervention to reduce sun exposure in primary school children in Western Australia. Sun exposure is the main cause of skin cancer, which is particularly common in Australia. Previous papers had shown that the intervention was effective in reducing the time that children spent outdoors in the middle of the day. Of concern was the possibility that the intervention might have caused children to become more sedentary and hence increase their risk of becoming overweight or obese. This publication showed that this was not the case. Thus, sun exposure can be reduced without compromising other important components of promoting health.
Overview

This year saw the Centre for Health and Society (CHS) continue to grow both in terms of size and productivity. We welcomed Professor Marcia Langton, Foundation Professor of Australian Indigenous Studies at the University of Melbourne, and her team. Our position as a joint centre within the Faculty of Medicine, Dentistry and Health Sciences and the Faculty of Arts was further strengthened with the new appointment of Dr James Bradley, a medical historian who is jointly working with CHS and History and Philosophy of Science.

As the University of Melbourne moves towards the Melbourne Model with its emphasis on Knowledge Transfer/Exchange, CHS continues to foster and grow its long-term commitment in this area. Since the inception of CHS and the Onemda VicHealth Koori Health Unit, one of the Centre’s achievements has been its commitment to building and nurturing relationships, which has led to a strong record in Knowledge Transfer/Exchange.

In 2007, these achievements included, firstly, Professor Marcia Langton, Odette Mazel and the Agreements, Treaties and Negotiated Settlements (ATNS) project team being awarded an inaugural Vice-Chancellor’s Knowledge Transfer Award. This project outlines agreements with Indigenous people across various jurisdictions and has led to an internationally-recognised resource which is publicly accessible.

The project, involving a number of industry partners, has played an important role in agreement-making by highlighting the importance of proper processes needed to monitor and evaluate the benefits (and pitfalls) of agreements to all signatories. The ATNS website receives an average of more than 460,000 hits each month. For further information about the ATNS project and the award, see http://www.atns.net.au/ or http://www.knowledgetransfer.unimelb.edu.au/KT_NOV07_webservice.pdf

In addition to this achievement, Priscilla Pyett and Deborah Warr were awarded a University of Melbourne Knowledge Transfer Grant to examine models of community development in collaborative health research, where universities engage with disadvantaged communities to conduct health research.

Another achievement in the area of Knowledge Transfer/Exchange in 2007 was the appointment of Associate Professor John Fitzgerald, Principal Research Fellow at the Centre for Health and Society, as the inaugural Associate Dean (Knowledge Transfer) in the Faculty of Medicine, Dentistry and Health Sciences.

In addition to John’s appointment was his innovative work in developing and curating the Needle and Syringe Culture Exhibition (18–28 July). The exhibition featured 35 interviews and micro movies with people who are involved with syringes – including a syringe disposal worker, immunisation clinic workers, drug users, and a family with twin sons who have type 1 diabetes. It also included a number of needles and syringes from the University’s Medical History Museum. To view the catalogue from the exhibition, see http://www.nsperease.unimelb.edu.au/pods/catalogue.pdf

To assist the Centre with its strategic development and management, a new Advisory Committee was established in February 2007. The CHS Advisory Committee will assist the Centre to develop links between its academic teaching and research program and stakeholders in the community, health professions and policy sector; provide advice on
Aboriginal health programs

This year saw Onemda VicHealth Koori Health Unit strengthen its existing relationships at local, national and international levels. The planning processes identified three key overarching themes which tie Onemda’s research, teaching and community development together:

1) Aboriginal Health Policy, Health Information systems and practice;
2) The social context of Aboriginal Health (and Interventions in Aboriginal Health); and
3) The Aboriginal Health Workforce.

Onemda’s research grant applications in 2007 were rewarded with a very high success rate. This success was for both established and emerging researchers, and for Indigenous and non-Indigenous academics within the Unit. This included an ARC Indigenous Researcher’s Development Grant to Kylie Cripps; a number of project grants from NHMRC, ARC, Department of Human Services Victoria, VicHealth and the CRC for Aboriginal Health; a NHMRC Senior Research Fellowship to Kevin Rowley; and several grants for the development and evaluation of teaching and learning curricula.

The second Leaders in Indigenous Medical Education (LIME) Connection meeting was oversees by the LIME project officers, culminating in a successful conference in Sydney in September, attracting international presentations from New Zealand, North America and the Pacific Islands. The LIME website was launched at the LIME Connection, and it was announced that the LIME network would be funded for a further 12 months.

The teaching program delivered by Onemda continued to consolidate its presence within the Faculty of Medicine, Dentistry and Health Sciences. This year saw new stand-alone subjects in Indigenous health being delivered to the School of Nursing and the Department of Psychiatry, while continuing to deliver an integrated program to the medical course. The Indigenous health suite of subjects in the Master of Social Health program continues to have increasing student numbers, while maintaining above average Quality of Teaching results.

Medical history programs

The Medical History Program, under the umbrella of CHS, includes the Johnstone-Need Medical History Unit, the Medical History Museum and the Gateways to the History of Medicine. Achievements in 2007 for the Medical History Program included James Bradley being awarded a University of Melbourne Early Career Research Grant, for his project The Medical Society of Victoria and the Making of the Colonial Medical Profession, 1855-1901. To consolidate the position of the Medical History Museum, particularly in relation to the Growing Esteem model, a review of the role of the Museum was carried out by Dr Ann Westmore. This review has led to a report which outlines recommendations for future directions of the Museum. Strategies for implementing these recommendations are currently being developed.

Teaching and learning

Undergraduate

CHS staff members continued to play a major role in curriculum development, subject coordination and teaching in the University of Melbourne’s undergraduate medical curriculum. The Centre contributed to the teaching of ethics, Aboriginal health, sociology of health and illness, the history of medicine and health policy in the Health Practice subject of the undergraduate medical curriculum.

Postgraduate

The CHS offers a comprehensive postgraduate coursework program in Social Health that reflects the Centre’s unique interdisciplinary environment. Within the Social Health program, students can undertake a comprehensive interdisciplinary program, or choose streams in Ethics, Medical Anthropology, Aboriginal Health or Health Care History. The program continues to draw local and international students who are interested in using approaches from the social sciences and humanities to the study of health and health care.

Research highlights

In 2007 the CHS continued to be highly research productive, both in terms of attracting research income and producing research outcomes. Research outcomes generated included academic publications and presentations, community reports, discussion papers, as well as refereed conference proceedings. This year’s research achievements included:
**Fellowships**

- Kevin Rowley being awarded a NHMRC Research Fellowship.
- Kyllie Cripps being awarded an ARC Indigenous Research Development Fellowship, together with Professor Ian Anderson, Professor Marcia Langton, Dr Maggie Walter and Associate Professor Mark Rose: Approved Building and supporting community led partnership initiatives to respond to Indigenous family violence in Victoria.
- Jane Freemantle being awarded an ARC Fellowship as part of a Discovery Project, with Professor IP Anderson, Professor J Ozanne-Smith, Associate Professor JL Halliday, Ms J Gallagher, Ms M Davey, Ms ME Sullivan and Ms PT Muth: A mortality profile of Victoria’s Aboriginal (and non-Aboriginal) children 1998-2008 using an innovative method and research process.

**Research grants**

- Dr Priscilla Pyett and Dr Deb Warr, University of Melbourne Knowledge Transfer Grant.
- Dr James Bradley, Research grants
- Jane Freemantle being awarded a NHMRC Project grant with colleagues, Professor Siaw-Teng Liaw, Dr John Furler, Dr Margaret Kelaher and Dr Phyllis Lau: Culturally appropriate diabetes care in mainstream general practice for urban Aboriginal & Torres Strait Islander people.
- Professor Marcia Langton with colleagues, Professor LW Russell and Dr Z Ma Rhea, ARC Project grant: Food, Traditional Aboriginal Knowledge and the Expansion of the Settler Economy.
- Professor Marcia Langton with colleagues, Professor LW Russell and Dr Z Ma Rhea, ARC Project grant: Food, Traditional Aboriginal Knowledge and the Expansion of the Settler Economy.

**Key Achievements**

**Staff**

- John Fitzgerald was appointed as Associate Dean (Knowledge Transfer) in the Faculty of Medicine, Dentistry and Health Sciences.
- Marily Guillemin and Lynn Gillam were awarded a 2007 Carrick Australian Award for University Teaching (Priority area: team teaching).
- Ian Anderson was a finalist in the Smart 100 list, The Bulletin.
- Bill Genat was promoted to Lecturer Level C.
- Paul Stewart was promoted to Lecturer Level B.
- Yin Paradies was awarded the NAIDOC (National Aborigines and Islanders Day Observance Committee) scholar of the year.
- Marcia Langton and the Indigenous studies team were awarded one of four Knowledge Transfer Excellence Awards given by the University of Melbourne for the Agreement Treaties and Negotiated Settlements project.
- Nicole Waddell won the Outstanding Victorian Koori Student of the Year Award, as part of the National Training Awards.
- Alexis Wright was awarded the Miles Franklin award for her book, Carpentaria.

**Other achievements**

**CHS 2007 PhD completions**

The Centre is proud of our high quality PhD candidates, most of whom are funded on prestigious PhD scholarships including NHMRC, Australian Postgraduate Awards, Melbourne Research Scholarships and VicHealth scholarships. In 2007 we saw the successful completion of four of our PhD students (see below). These PhD projects were excellent illustrations of the Centre’s interdisciplinary focus in combining perspectives from the humanities and social sciences to the study of medical science, clinical and public health practice and health policy.

The PhD completions were:

- **Kowal, Emma, The Proximate Advocate: Indigenous health on the postcolonial frontier.**
- **Adams, Karen, Koori kids and otitis media prevention in Victoria.**
- **Fetherstonhaugh, Deirdre, Hobson’s choice: Dialysis or the coffin! A study of dialysis decision-making amongst older people.**
- **Hall, Sandra, Decolonisation or recolonisation? A comparative analysis of colonial constructs and racial discourse in key Indigenous policy statements in Australia and Aotearoa.**

**Publication highlights**

For a full list of publications, see the 2007 Publications Report, page 93.

The Centre continued its established record of high numbers of research publications. These comprised a total of 78 publications, 46 of which were DEST publications. These publications covered the areas of health policy, youth drinking, ethical decision-making, Aboriginal health, and research methodologies.

In addition to these academic publications were a number of research outputs that are illustrative of our record of knowledge transfer/exchange. An example of this is the Talkin’ Up Good Air: Australian Indigenous Tobacco Control Resource Kit. This is a national Indigenous tobacco control health promotion resource kit developed for use by the Aboriginal and Torres Strait Islander community to assist health professionals, along with community and education workers, to become community leaders in the area of tobacco control; raise the priority of tobacco control in Indigenous communities; and build community ownership in tobacco control by supporting community-initiated and controlled action.

Award for ‘intellectual duelling’

Winning a prestigious 2007 Carrick Award for Australian University Teaching in the category of team teaching has given associate professors Marilys Guillemin and Lynn Gillam recognition of their skills and contributions, and much more.

The teachers and researchers from the Centre for Health and Society won the award for their innovative teaching of social health, health ethics and qualitative research design to postgraduate students.

Their unorthodox but passionate and highly successful approach to team teaching has them both in the classroom throughout, challenging each other’s ideas and exploring issues without always knowing where a lesson will lead.

Associate Professor Guillemin says, “Applying for and then winning the award forces you to stop and reflect and articulate what you do and why you do it that way. It’s a really useful process, personally and professionally. That’s been fantastic.”

For Associate Professor Gillam, the award has connected them with colleagues in other disciplines within the University and at other institutions and also to being part of a “bigger picture”. “You don’t normally talk to other people in other disciplines in the university about teaching – so it has put us in touch with others,” she says. “That gives you a sense of broadly working with other people towards the same goal: of engaging students and opening up people’s minds.”

It has renewed her sense of vocation: “I think that education, and being taught well in a supportive learning environment, is one of the best things that can happen to anyone and I want to make that happen because I think it transforms people’s lives.”

Their differences in personality, academic background and philosophies create a dynamic, stimulating team-teaching approach that was dubbed “intellectual duelling” by one student. Associate Professor Guillemin is a sociologist of health and illness, with a background in microbiology and education. Her research for the past 15 years has been informed by gender and feminist theory. Associate Professor Gillam is a bioethicist with a background in moral philosophy, theology and classics, who has never noticed gender differences.

The pair say that intellectual tension and disagreement are the cornerstones of their approach. Their award application noted: “We don’t just teach our students about social health, we teach them about the value of diverse perspectives, about respecting other points of view and, above all, we give them the capacity – and the licence – for independent, critical thought. In short, we don’t just tell them how to be critical thinkers, using intellectual duelling we show them how it works in action.”

Despite their differences, their common ground is a shared passion for teaching, “and a shared vision for stimulating engagement, critique and active learning in our students,” they wrote.

It is obvious that both find their work intensely rewarding. For Associate Professor Guillemin, “It’s most gratifying when our students come back and they have adapted the kind of learning skills they’ve acquired to their own context and taken that in new directions. That’s brilliant. That to me, is the most satisfying part of my job.”

Associate Professor Gillam particularly enjoys seeing mature age students replace initial uncertainties about being in a tertiary classroom with self discoveries of new possibilities through learning. “It makes people think of themselves in a totally different way,” she says. “All sorts of things can happen and that’s really exciting.”
The Key Centre for Women’s Health in Society, since its foundation in 1988, has been at the forefront of thinking, researching, teaching and disseminating information about women’s health.

The vision for the Key Centre is that it will be the leading centre for research, education and advocacy in women’s health, gender and society in Australia and the Asia-Pacific region.

The Key Centre’s work recognises that women’s health and wellbeing is integral to the health and wellbeing of their families and the whole community.

Overview & key achievements

The Key Centre continues to contribute, at the highest level, to research, teaching and training, and knowledge transfer in women’s health.

Significant highlights of 2007 include:

• The Key Centre was redesignated as a World Health Organisation (WHO) Collaborating Centre in Women’s Health for a further five years, and remains one of only two such Centres worldwide. Our WHO connection is a significant honour which enables the Centre to work with greater recognition internationally.

• Organisation and co-hosting of an international experts’ meeting on maternal mental health and child development held in Hanoi, Vietnam, between 19-27 June. The meeting was a joint initiative with WHO and UNFPA and brought together experts in the field from many countries, together with government officials from Vietnam.

• Our annual conference in 2007 was on the topic Abortion in Victoria: Where are we now? Where do we want to go? This highly successful event provided an opportunity for collaboration between four key organisations involved in women’s health. As well as the Centre, these were the Royal Women’s Hospital, Women’s Health Victoria, and Family Planning Victoria. The conference was held in November with over 140 participants from community organisations, government and tertiary institutions. The ‘Melbourne Declaration’, which outlined key recommendations, was endorsed by the conference participants and will be widely circulated. The conference coincided with the deliberations of the Victorian Law Reform Commission on the laws relating to abortion.

• AusAID awarded an Australian Travelling Award to Dr Tuan Tran, Director of the Research and Training Centre for Community Development (RTCCD) in Hanoi, Vietnam. The award enabled Dr Tuan Tran to be located at the Centre for three months to continue and extend his research collaboration with Jane Fisher and Doreen Rosenthal; in particular to increase his capacity to lead mental health service and system development, and contribute to a national mental health policy in Vietnam.
Eminent women’s mental health expert, Professor Donna Stewart, Lillian Love Chair of Women’s Health, University of Toronto, visited the Centre and gave a special public lecture as part of the Royal Women’s Hospital 150th anniversary celebrations.

Our new postgraduate teaching program, aimed at providing a contemporary suite of subjects, was implemented and was extremely well received by students.

Your Sex Health website (www.yoursexhealth.org), developed at the Key Centre, was judged ‘Best in Class’ in the prestigious international Interactive Media Awards for the education category. This is the highest honour bestowed by the New York-based Interactive Media Council. The website was also judged best education resource for tertiary students in the Australian Teachers of Media awards for 2007.

The Victorian Lifestyle and Neighborhoods Environment Study (VicLANES) report was launched by the Victorian State Health Minister, Ms Bronwyn Pike, on 23 May.

Associate Professor Anne Kavanagh and Ms Carolyn Kavanagh received by students. Further information about these highlights, and on other activities and outcomes at the Key Centre, can be found on the website at http://www.kcwhs.unimelb.edu.au/

Staff arrivals
Dr Jane Hocking and Dr Shelley Mallett were appointed as Senior Lecturers to the Key Centre. Jane Hocking, an epidemiologist with research interests in sexual health, started at the Key Centre in May. She is currently a National Health and Medical Research Council Post Doctoral Research Fellow and was already a staff member at the Melbourne School of Population Health. Jane Hocking was also the staff recipient of the Harold Mitchell Travelling Fellowship in 2007.

Shelley Mallett is a medical anthropologist interested in marginalised young people and community development. She also is currently a VicHealth Senior Research Fellow, having joined the Key Centre in 2003 with the Project team.

Ms Jenny Cope joined the Key Centre in January to work with Associate Professor Anne Kavanagh as an Administrative Assistant. Jenny has a degree in the History of Art and Design from the Metropolitan University, Manchester, and has worked for various arts organisations and festivals and as an events coordinator.

Dr Helen Rawson was appointed to manage the NHMRC-funded Randomised Early Parenting Intervention Trial (REPIT), to investigate the efficacy of a residential early parenting centre. Helen’s PhD thesis was on the factors that shape the sexual behaviour of Vietnamese-Australian young women.

Dr Helena Sandahl is a clinical psychologist who was appointed to work with Professor Rosenthal and Associate Professor Fisher in writing a WHO-commissioned systematic review of the determinants of adolescent mental health problems in resource constrained countries.

Dr Susan Peake was appointed as a researcher to work on a Melbourne Research Grant Scheme project, funding being awarded to Professor Rosenthal and Dr Maggie Kirkman, and called Discourse, Technology and the Reproductive Life. Susan was awarded her PhD through the Key Centre in 2005.

Departures
Dr Elizabeth Bennett returned to New Zealand in May 2007 after four-and-a-half years at the Key Centre. Elizabeth joined the Centre in 2002 as a member of Professor Lenore Manderson’s Federation Fellow team. More recently, she contributed in a teaching capacity at the Centre and represented the Centre in several international activities.

Ms Lauren Matheson completed her two-year contract in November 2007 as project manager for the PEPP Project, leaving to take up a position in Ethiopia as a Health Information Officer with the International Rescue Committee. Lauren came to the Key Centre to study and complete a Master’s in Women’s Health after undergraduate studies in her native Canada.

Ms Amanda Tattam, the Centre’s Community Liaison Officer and Research Translator, left in February 2007 upon completion of the VicHealth grant. Amanda came to the Key Centre 18 months ago with a background in journalism. Her media skills were put to outstanding use in providing
accessible information about the Key Centre’s research and she was able to attract increased media exposure for research undertaken within the Key Centre. In addition to the considerable media coverage she obtained for the Centre, she was also responsible for research dissemination through presentations, fact sheets and reports.

Teaching and learning

This year saw some reshaping of courses, continuing development of teaching in Japan and a high output of degrees awarded. Also see http://www.kcwhs.unimelb.edu.au/courses for more information.

Postgraduate Award teaching

In 2007 the Key Centre offered a new, updated and more flexible course program to postgraduate students. The Centre’s postgraduate courses are informed by a social model of health which focuses on understanding women’s health as it is shaped by familial, social, economic, cultural and political contexts. Our courses are unique in Australia and internationally and articulate into other programs. The changes in course content reflect the changing health environment, including the development of new technologies, increased requirements for an evidence base for policy and practice and demographic changes in terms of ageing and fertility. All of these have distinct effects on women.

The suite of new subjects, which is comprehensive and contemporary, is designed to provide students with an ability to utilise new knowledge and technologies, and to develop lifelong skills of critical enquiry and a sustained capacity to integrate research evidence from multiple sources into practice, policy and research. Response from students has been very positive. We made some changes to the subject and course structure for 2008.

Short course in Women And Global Health

This short course addressed the health of women in the dynamic context of development, globalisation and social and cultural change. Run concurrently with the award subject in Women’s Health, it explored the determinants of health and illness of women in this international context, with a particular emphasis on the Asia Pacific Region. There was an emphasis on practical training in the development and use of gender and rights assessment tools for health policy in developing and newly-industrialised countries.

Degrees

The following degrees were awarded in 2007:

PhD

- Karen Eileen Adams
  Koori kids and otitis media prevention in Victoria.
- Phoebe Albina Bwembya
  Reproductive decision making of HIV positive Zambian women.
- Atika Faroqui
  Tobacco use during pregnancy and perinatal health in rural Karnataka, India.
- Vanessa Johnston
  Weapons of mass destruction: the health impact of human rights violations in the context of Australian asylum seeker policies.
- Saw Saw
  Strategies for public-private partnership in tuberculosis control: involvement of private practitioners in Myanmar.
- Katherine Vasey
- Paul Myers
  Hepatitis C testing among young people who experience homelessness in Melbourne.
- Narelle Warren
  Markers of midlife: interrogating health, illness and ageing in rural Australia.
- Doctor of Public Health
  - Victoria Team
    Health and caregiving experiences of Russian speaking women migrants.

MWH by Research

- Lignet Chepuka
  Experiences of HIV-positive mothers with dependent children in Blantyre, Malawi.

MPH with Research Project in Women’s Health

- Kelsi Kriitmaa
  Prevalence and determinants of common mental disorders in pregnant women in Vietnam.
- Julia Leinwebber
  The costs of ‘being with the woman’ - Secondary Traumatic Stress in Midwifery.
- Catherine Mary Mayes
  Understanding the impact of the grey legal status of abortion in Victoria on women’s access to abortion.

MWH by Coursework with Research Report

- Cameryn Garrett
  Being an XY female: An analysis of accounts from the website of the Androgen Insensitivity Syndrome Support Group.
- Ornwipa Rugkha
  Condom use and STI rates in female sex workers who attended the Melbourne Sexual Health Centre between 2004 and 2007.

MWH by Coursework

- Letsema P Oagle
- Karin Butler
- Shukrya Nasrah
- Josephine Foong Yin Wong

Master of Medicine (Women’s Health) by Coursework

- Meike Magnasofa

Postgraduate Diploma in Women’s Health

- Anna Kristen Butlinski

Teaching in Japan

This was a highly successful year in the Master’s of Women’s Health (in Japanese Language), which is offered to Japanese health professionals. Organised through the School of Enterprise, teaching took place in intensive blocks in Tokyo and Osaka, Japan, with Dr Heather Rowe (May) and Dr Deborah Keys (August) teaching three subjects between them to a total of 14 students overall. In May, Associate Professor Jane Fisher, Dr Heather Rowe and Professor Fumi Horiguchi attended the third Master of Women’s Health graduation ceremony in Japan for two students who completed their degrees.
under this program in 2006. Professor Fisher also attended a further graduation in October, while Dr Keys attended an Alumni Dinner in August.

AMS Achievements
Five Advanced Medical Science (AMS) students completed projects with the Key Centre in 2007. They were:

- **One Bayani** Screening for Chlamydia.
- **Ayu Hasida Hassan** Service delivery for women who have experienced rape in Penang, Malaysia.
- **Sari Intan Nordiana MD Saleh** Exploring attitudes, knowledge and self-efficacy of physical activity by gender and socio-economic position.
- **Belinda Elizabeth Oddy** Social burden of disease of postnatal depression in women admitted to early parenting centres.
- **Amy Claire Williamson** Geographic separation from family of origin in first time parents.

Student awards
Victoria Team was awarded the 2007 Australian Federation of University Women (AFUW-Vic) scholarship for a coursework student.

Sudirman Nasir has been awarded a prestigious Nossal Institute of Global Health fellowship for his PhD titled *Ethnography of drug use in a slum area (Lorong) in Makassar, Indonesia*.

Lukar Thornton was the student recipient of the Harold Mitchell Travelling Fellowship ($5000) in 2007, awarded by the Key Centre from funding by the Harold Mitchell Foundation. He visited institutions in the Netherlands and the USA, spending time with Assistant Professor VK Subramanian at Harvard University, who is a supervisor on this thesis. His PhD thesis is on the subject *Individual and environmental influences on fast food intake*.

Ahsan Maqbool Ahmad, Lukar Thornton, Carolyn Nickson and Catherine Mayes were all recipients of the Key Centre’s student support bursary of $1000.

Research
The Key Centre’s research program has gone from strength to strength. The Key Centre’s research concentrations on four core themes:

1. **Health services and technology**
   The KCWHS conducts a diverse range of research on health services for women and young people and the effect of technological interventions on women’s health. Research in these areas variously focuses on screening programs, governance, evaluation of practice in relation to evidence based guidelines, communications styles with socially disadvantaged sub-populations and culturally and linguistically diverse women; critical analysis of the ideas and policies that inform service delivery; client access, uptake, satisfaction and engagement with services; and service provider reflections on practice. KCWHS also conducts research in partnership with health and welfare services.

2. **Mental health and wellbeing**
   Women experience the common mental disorders of depression and anxiety at two to three times the rates reported in men. Research at the KCWHS focuses on the social determinants of mental health and on the relationships between women’s physical health and their psychological wellbeing. We aim to translate our research findings to improve mental health literacy among health care professionals and to reduce the stigma about mental health in the broader community.

3. **Reproductive and sexual health**
   This research theme explores the social determinants and consequences of fertility and infertility; the impact of technologies on women’s reproductive mental health; development and evaluation of health promotion programs for pregnancy and early parenthood; sexual and reproductive health of young people; and cervical cancer, Human Papilloma Virus (HPV) and attitudes to HPV vaccine.

4. **Social and economic inequalities in health**
   Our research focuses on how differences in the social and economic circumstances of individuals and communities are related to health differentials. Research conducted in this theme investigates the circumstances and processes that contribute to social and economic inequalities in health. Some of the characteristics that are of particular interest include social networks and social capital; behaviour and practices; and the importance of geographic location.

Following are some highlights from some of the specific project work undertaken at the Centre during the year. Further details can be also found at http://www.kcwhs.unimelb.edu.au/research

**Understanding women’s experiences of unplanned pregnancy and abortion**
This project has two components: an audit of data collected by the Pregnancy Advisory Service of the Royal Women’s Hospital and interviews with women who have contacted the service about a pregnancy for which they may be considering abortion. Both components are progressing well. The audit was completed on 30 September 2007, with data recorded from nearly 4000 women, and most of the 60 interviews were conducted in 2007, with the final few in early 2008. Women were invited to participate in the interview component if they were aged 16-18, lived in a rural or regional area, or approached the Pregnancy Advisory Service when their estimated gestation was 12-18 weeks. Of the 60 women interviewed, five are continuing their pregnancies; the remainder had an elective abortion.

Analyses of the audit and interviews are continuing. Preliminary results of both components were presented at the conference ‘Abortion in Victoria: Where are we now? Where do we want to go?’ at the University of Melbourne on 30 November 2007.
Shining a light on Centre and staff

Professor Doreen Rosenthal AO retires in February 2008 as Director of the Key Centre for Women’s Health in Society. Recognised internationally as an expert in the field of adolescent sexuality and sexual and reproductive health, Professor Rosenthal compressed the equivalent of a career-span of productivity into her five-year appointment. By her own assessment, “These past five years have been a very busy time for people but we have achieved a huge amount”.

The progress of the Key Centre under her leadership is recorded in its annual reports, which chart its increasing productivity and the emergence of more highly focused research activities and changes in subjects taught in the Centre’s courses.

To read between the lines of the reports is to trace the development of many academic careers over the years. Under Professor Rosenthal’s encouragement and guidance, the number of staff presenting at international forums, publishing widely in respected journals and gaining competitive grants and academic promotions rose steadily.

Tapping the potential of her staff was one of Professor Rosenthal’s early priorities when she became Director in 2001, having previously been the Foundation Director of the Australian Centre for Research in Sex, Health and Society (ARCSHS) at La Trobe University. “My aim was to develop partnerships with staff that would support them in further developing their careers. We were applying for more major competitive grants and focusing together on the sorts of activities they needed to engage in if they wanted a promotion and, importantly, what their goals were in making a real contribution to women’s health.”

Raising the Key Centre’s profile was an urgent priority. “I had a sense that very few people knew about the Key Centre. Even though it had been going since 1988, it seemed to have slipped off the map both within and outside the University,” she says. “I wanted to see that the very good work that was being done by some people at the Centre was recognised and utilised.”

Part of Professor Rosenthal’s early work focused on setting up policies to ensure that the Key Centre functioned optimally, she says. She initiated a review of the Centre’s research programs that highlighted its strengths and goals, developed research and teaching programs that aligned with the Centre’s priorities and ensured that these new policies were observed.

She takes pride in having been “ahead of the game” in practising Knowledge Transfer before it was a University policy. “I brought with me from my earlier work a very keen interest in ensuring that the outcomes of the research that we do get disseminated widely and, in particular, to policy makers and to service providers, which is the way we operated at ARCSHS.”

Professor Rosenthal persuaded VicHealth to fund a part-time community liaison officer on staff. Initially, not all staff were comfortable doing media interviews about their research findings or producing reports for policy makers. “That was part of a huge cultural change in the organisation and it was not without its stresses,” she says. The development of a stronger collegial spirit at the Key Centre has been a positive result of this cultural change, she says. Among the issues that still cause her great concern, she cites the need for better communication between biomedical and clinical researchers, and social researchers. “It’s important that biomedical and clinical researchers recognise the importance of understanding and valuing the contributions that social researchers can make, and that we take every opportunity to work together.”

Clinical research into women’s cancers, for example, will not necessarily reveal the reasons behind women’s decisions concerning such critical issues as screening and treatment. “Social research contributes to understanding the social, environmental, economic and psychological contexts in which these decisions are made – or not made.”

The opportunity to learn about women’s health, work with highly talented people and develop strong networks have been rewarding aspects of her time as Director of the Key Centre, she says.

While her role as Director is over, her academic career continues. Her renowned energy will undoubtedly maintain her enthusiasm for discovering new ideas, knowledge and people as she pursues her own research interests, works with PhD students, serves on boards, and finds more time for recreation.
The Project's chief investigators are Professor Doreen Rosenthal, Dr Heather Rowe, Dr Shelley Mallett (from KCWHS), and Ms Annarella Hardiman (Royal Women's Hospital). Dr Maggie Kirkman is the Research Director. It is funded by an ARC Linkage Grant, in partnership with the Royal Women's Hospital and VicHealth.

AusAid Fellowship
The Key Centre was one of 39 organisations awarded Fellowship grants worth a total of $8 million to host 370 fellows from across the Asia Pacific region. The aim is to strengthen ties between Australia and promising leaders and organisations within the Asia Pacific region. The Key Centre hosted Dr Tran Tuan, Director of the Research and Training Centre for Community Development (RTCCD) in Hanoi, Vietnam. The grant enabled Dr Tran Tuan to spend three months at the Key Centre, working closely with Associate Professor Jane Fisher and Professor Doreen Rosenthal. Dr Tran Tuan also spent time at the School of Population Health's Centre for International Mental Health with Associate Professor Harry Minas and with Professor Helen Herman at the Australian International Health Institute.

Discourse, Technology and the Reproductive Life
A preliminary study, funded by the University of Melbourne and designed to address proposed methods of investigation for a broader study of reproductive lives of young adults, has been conducted by Professor Doreen Rosenthal, Associate Professor Jane Fisher, Dr Maggie Kirkman and Dr Susan Peake. The broader study seeks to understand how young adults construct their past, present and future reproductive lives and how participants might represent the complex interactions among technology, social policy, intimate relationships and personal fulfillment.

Launch of VicLANES
The Victorian Lifestyle and Neighborhoods Environment Study (VicLANES) report was launched by Health Minister Bronwyn Pike in May 2007. This report was the culmination of a three-year project to study the food purchasing, alcohol consumption and exercise habits of almost 5000 people in 50 low, medium and high socio-economic status neighborhoods around Melbourne. Funded by VicHealth, the project was led by Associate Professor Anne Kavanagh. The study showed that reducing the density of fast food outlets and improving walking tracks could help promote healthy behavior in local communities. It also found that lower socio-economic areas also had twice as many fast food outlets than high socio-economic areas and fewer kilometres of walking tracks.

Research based resource for young homeless mums
The voices of young mothers who took part in a qualitative research project were featured in a new booklet by Dr Deb Keys. The project, 'Becoming a mother', explored the impact of becoming a mother on young women who have experienced homelessness. It was carried out in partnership with Family Access Network, an accommodation and support service for young people.

The booklet, Becoming a mum – just the whole world changes, covers the social aspects of pregnancy, birth and motherhood from the perspective of homeless young mothers, and provides contact details and resources for others who may find themselves in similar circumstances. It was launched in June by Ms Tanya Plibersek, now the Minister for Status of Women, at a public forum, together with a report of the findings. The research was funded by a Telstra Foundation Community Development grant, with additional funding from the Department of Human Services, Office of Housing.

This book, designed to assist parents to disclose to their children that they were conceived using donated sperm or eggs, was launched on 8 August, 2007, by Victoria’s Infertility Treatment Authority, which described it as “the world's first evidence-based ‘telling’ guide for parents of donor-conceived adolescents”.

The book is based on research conducted by Dr Maggie Kirkman and written with Professor Doreen Rosenthal, in collaboration with Ms Louise Johnson, Chief Executive Officer of the ITA. The research involved group discussions with students, aged 14 to 18 years.

Update on the PEPP trial
Associate Professor Jane Fisher and Dr Heather Rowe report that their trial of the new parenting program, PEPP: Living well with a first baby, has moved into its second phase. The intervention arm of the trial was launched in February and participants are now being recruited to Phase 2 of the trial. Two successful pilot seminars were run and they were enthusiastically endorsed by the 10 families who took part.

The ultimate aim of the project is to incorporate PEPP into the usual care and education provided by maternal child health nurses across the country. Thanks to the efforts of the project management team, the local government collaborators, 55 recruiting nurses, a fleet of interviewers and three highly trained facilitators, the study was on target to complete data collection by the end of October 2007. A website for both professionals and consumers is under development.

The PEPP trial is funded by a grant from the Commonwealth Government's Department of Family and Community Services and Indigenous Affairs to assess the seminar’s efficacy in improving new parents’ mental health.

Grants and contracts
(commercing in 2007)

Keys DW. Young mothers and mental health, how mothers’ groups can help. $14,568, Windemere Foundation.
Knowledge Transfer

Community Activities

Mediation of sexual and reproductive health issues to the Community

Key Centre staff were regularly in the news, offering comment about topical issues or talking about their own research. Over the past few months, Professor Doreen Rosenthal, Associate Professor Jane Fisher, Associate Professor Anne Kavanagh, Dr Karin Hammarberg, Dr Deb Keys, Dr Maggie Kirkman and Dr Louise Keogh have appeared in print, on radio, TV and on line. They spoke about sex and young people, the ethics of surrogacy, teenage motherhood, the effect of infertility on motherhood, findings from VicLANES, family planning and the optimal age for childbearing. Some of these items can be read on the news section of our website at http://www.kcwhs.unimelb.edu.au/news

Breastfeeding submission

Dr Lisa Amir, Amanda Cooklin and Amanda Tattam prepared a submission for the Parliamentary Inquiry into Breastfeeding, with contributions from Heather Rowe and Karin Hammarberg, in February 2007. The submission canvassed the following topics:

• The need for research to understand which interventions promote breastfeeding postnatally;
• Caesarean birth and assisted conception as risk factors for breastfeeding cessation;
• Need for public health education campaign to promote breast milk as optimal infant food for first six months of life; and
• Requirement for evidence-based clinical guidelines for clinicians (GPs, paediatricians, midwives, maternal/child health nurses) to address and treat breastfeeding problems.

A sexual and reproductive health website with a difference

A new reproductive and sexual health website was launched by the Key Centre and is already helping young people throughout Australia and around the world deal with their real-life dilemmas. Your sex health contains facts and true stories for 16 to 24-year-olds and has been translated into French and Spanish.

It has been warmly welcomed by health professionals and others working with young people and has won two prestigious awards.

The site is online at www.yoursexhealth.org and is a follow-up to the earlier award-winning site, The Hormone Factory (www.thehormonefactory.com), targeted at 10 to 12-year-olds and developed by a team headed by Professor Rosenthal.

Launch of Report on Assisted Reproductive Technology and Adoption

Dr Maggie Kirkman was invited by the Victorian Law Reform Commission to be one of three speakers after the tabling of its Report on Assisted Reproductive Technology and Adoption at Parliament House, Melbourne, on 7 June 2007. The other speakers were the acting chair of the VLRC, Dr Iain Ross, and Infertility Treatment Authority deputy chair, Mr Michael Gordon.

Visitors/new collaborations

Professor Chris Bayly, Associate Director, Women’s Services, Royal Women’s Hospital, elected to spend six months study leave from November 2007 with the Key Centre, attending seminars and working on collaborative projects with staff.

Ms Kerryn O’Rourke, Public Health Trainee, started a four-month rotation in October 2007, working with Dr Jane Hocking.

International Activities

World Health Organisation

Collaboration with WHO continued successfully in 2007, with Associate Professor Jane Fisher visiting Geneva in March and again in September. Her visits were mainly related to two consultancies awarded to the Key Centre in 2006, of approximately $135,000. The first, smaller project was a
review and discussion paper on health workers dealing with adolescent mental health problems, conducted by Associate Professor Fisher and assisted by Dr Helena Sandahl.

The second was to enable Associate Professor Fisher to organise an international expert meeting on maternal mental health and child health and development, co-hosted by the Research & Training Centre for Community Development, Hanoi, Vietnam. Associate Professor Fisher and Professor Doreen Rosenthal, with assistance from Ms Kelsi Kritimaa, attended the meeting in Hanoi in June, together with leading international researchers in the field and including delegates from Pakistan, Japan, South Africa, France, Switzerland, Turkey, United Kingdom, Nigeria, India, Vietnam and Australia. Outcomes of the meeting will include a joint publication of the state of the art papers presented at the meeting, a summary of the evidence and a Consensus Statement.

International Conferences and Collaborations

March: Dr Louise Keogh presented a 2nd Biennial Meeting of the International Society for Gastrointestinal Hereditary Tumours, Kyoto, Japan.

April/May: Dr Heather Rowe taught in the Master of Women’s Health (Japanese) in Tokyo, and also presented a lecture to Master of Midwifery students at Keio University, Tokyo, Japan.

May: Associate Professor Jane Fisher and Dr Heather Rowe both presented at the International Psychosocial Obstetrics & Gynaecology Congress, Kyoto, Japan. Dr Rebecca Bentley attended the International Social Network Conference Corfu Greece. While there, she also participated in the Workshop on the Analysis of Longitudinal Social Network Data. Dr Bentley then visited the University of Glasgow, Scotland, to present a seminar at the Social & Public Health Sciences Unit.

August: Professor Doreen Rosenthal and Dr Shelley Mallett travelled to the USA, first visiting the Centre for Community Health, UCLA, to make presentations on knowledge transfer regarding homeless youth research. They then visited Washington DC for research collaborations.

Dr Karin Hammarberg was invited to present a keynote lecture to the Fertility Centre Symposium at the University of Gothenburg, Sweden, based on her PhD research.

September/October: Associate Professor Jane Fisher, after visiting WHO in Geneva, was an invited participant to a conference on post-traumatic stress disorder and childbirth, University of Sheffield, England.

October: Associate Professor Jane Fisher was a visiting scholar at Sapporo University, Japan, and was the keynote speaker at the Congress of the Hokkaido Society of Maternal Health. She also gave a public lecture at the Tokyo Women’s Medical University, Japan.

December: Professor Doreen Rosenthal and Dr Shelley Mallett attended a NIHE/UCLA workshop in Hanoi, Vietnam, on Structural Community-led Interventions, also holding several meetings with US and Vietnamese collaborators.

International Visitors

Associate Professor VK Subramanian, Harvard School of Public Health, Harvard University, visited the Key Centre in June 2007, maintaining his regular collaboration with Associate Professor Anne Kavanagh on issues around social determinants of health, multi-level modelling and health inequalities.

Professor Donna Stewart, Lillian Love Chair of Women’s Health, University of Toronto, visited the Key Centre on 5 September and presented a Melbourne School of Population Health Seminar on international women’s wealth indicators (mental health, general health): a comparison between Canada, Peru and Colombia. She was in Australia as part of the Royal Women’s Hospital 150th anniversary celebrations.

Conferences and public presentations

See also http://www.kcwhs.unimelb.edu.au/news/conferences for more information.

Abortion in Victoria: Where are we now? Where do we want to go?

This conference involved about 140 participants from community organisations, government and tertiary institutions and took place at the University on 30 November. It led to a set of statements to be known as ‘The Melbourne Declaration’ outlining the key things women in Victoria want in abortion policy and services. The statements call for the same rules that apply to best practice in any other medical or surgical procedure being applied to women undergoing abortion and their providers.

Talking secret women’s business

Doctors Heather Rowe and Karin Hammarberg convened the local organising committee for the 33rd Annual Scientific Meeting of the Australian Society for Psychosocial Obstetrics and Gynaecology, held in Melbourne in August. Entitled ‘Talking secret women’s business’, this year’s conference gave voice to aspects of women’s health and wellbeing that do not usually make front page news.

Publication highlights

For a full list of publications, see the 2007 Publications Report, page 93

Cooklin Amanda R. Rowe

Pregnant women’s mental health is multifactorially determined. The workplace environment is known to be salient to mental health, but its contribution to antenatal psychological functioning was unknown.
This study investigated the relationship between employment conditions and antenatal mental health in Australian women. A sociodemographically diverse consecutive cohort of 171/205 (83%) employed nulliparous women was recruited in late pregnancy. Data were collected by structured interview and self-report questionnaires. They included employment arrangements, experience of pregnancy-related discrimination as defined by the Human Rights and Equal Opportunity Commission, access to maternity leave entitlements and standard assessments of mood.

Overall, only 46% had access to paid maternity leave. Despite current Australian legislation mandating unpaid maternity leave for all women continuously employed for a year, only 60% had access to it. One in five women reported at least one form of HREOC-defined workplace discrimination, including negative or offensive comments from an employer, difficulty negotiating leave for medical appointments or exclusion from promotion because of the pregnancy. In total, two-thirds of participants reported at least one form of pregnancy-related workplace adversity.

We found that workplace adversity was independently associated with poorer maternal psychological well-being. Although routine assessment of mental health in pregnancy is now recommended, workplace adversity has not been identified as a salient risk factor. Our data indicate that employment conditions and workplace discrimination contribute to the mental health of pregnant Australian women.

The relevance to public health and public policy of these findings was highlighted by the Australian and New Zealand Journal of Obstetrics and Gynaecology, which selected the paper as the feature article in the issue of publication.


We have shown through cross-sectional surveys and a medical record audit that Australian women conceiving with assisted reproductive technologies (ART) are at fourfold risk of admission to early parenting treatment programs compared with those conceiving spontaneously. In order to identify prevalence and determinants of antenatal mood disturbance and other risks for early parenting difficulties after assisted conception, we initiated a prospective investigation of a consecutive cohort of women who conceived with ART. Participants were followed from confirmation of a viable pregnancy until their infants were 18 months old.

This paper reports data about psychological functioning during early and late pregnancy. Of the 288 women with confirmed pregnancies, 239 were contactable, and 183 (77%) were recruited, 95% of whom completed both early and late pregnancy assessments. Participants were socio-economically advantaged, had very good pregnancy health, exceptional marital relationships, normal personality styles, and intense affectionate attachment to the foetus. Very few (<5%) had clinically significant mood disturbance in late pregnancy and other risk factors for postpartum depression. We conclude that pregnancy and parenthood might be idealised after ART conception, and that preparation for the realities of infant care might then be insufficient and the inevitable losses associated with motherhood underestimated. In addition women who have conceived with ART might feel unable to express ambivalence or to seek support.


Vaccines are now available to prevent the development of cervical cancer from genital human papillomavirus (HPV) infection. The decision to vaccinate depends on a vaccine’s cost-effectiveness. Dr Jane Hocking was part of a consortium of researchers from the University of New South Wales and Australian National University who developed a mathematical model of HPV transmission in Australia to evaluate the potential impact of a HPV vaccine on HPV prevalence in Australia.

Methods: A mathematical model was developed to estimate the impact of a prophylactic vaccine on transmission of HPV type 16 in Australia. The model was used to estimate the expected reduction in HPV incidence and prevalence as a result of vaccination, the time required to achieve these reductions, and the coverage required for elimination. The modelled population was stratified according to age, gender, level of sexual activity and HPV infection status using a differential equation formulation.

Results: The model predicts that vaccination of 80% of 12-year-old girls will eventually reduce HPV 16 prevalence by 60–100% in vaccinated and 7–31% in unvaccinated females. If 80% of boys are also vaccinated, reductions will be 74–100% in vaccinated and 86–96% in unvaccinated females. A campaign covering only 12-year-old girls would require 5–7 years to achieve 50% of the eventual reduction. With a catch-up campaign covering 13 to 26-year-olds, this delay would be reduced to only two years.

Conclusions: Mass vaccination with a highly effective vaccine against HPV 16 has the potential to substantially reduce the incidence and prevalence of infection. Catch-up vaccination offers the potential to substantially reduce the delay before the benefits of vaccination are observed. A booster vaccination might be required to prevent an increase in incidence of
infection in women over 25 years of age.


The research behind this paper was prompted by legislation in Victoria permitting gamete donors to seek identifying details of people conceived from their gametes. Maggie Kirkman and Doreen Rosenthal, in collaboration with Louise Johnson of the Infertility Treatment Authority, investigated the views of adolescents from the general population on how parents can best talk to their donor-conceived adolescent children about their conception. They used focus group discussions and an interview with secondary students at two Melbourne co-educational schools. It was found that naive adolescents had views largely consistent with those of donor-conceived adults: for example, urging parental honesty, adaptation to individual children, and family cohesion. They identified the social father as the parent while acknowledging the significance of genetic connection to the donor. A minority asserted a preference for non-disclosure; all said that, if disclosed, it should be by parents. This study has not only contributes to increasing understanding of communication within families about donor-assisted conception, but also led to the publication of a book for parents, available both on-line and in hard copy:


Background: In Australia, studies finding an association between area-level socioeconomic disadvantage and mortality are often based on aggregate-ecological designs which confound area-level and individual-level sources of socioeconomic variation. Area-level socioeconomic differences in mortality therefore may be an artefact of varying population compositions and not the characteristics of areas as such.

Objective: To examine the associations between area-level disadvantage and all-cause mortality before and after adjustment for within-area variation in individual-level socioeconomic position (SEP) using unlinked census and mortality-register data in a multilevel context.

Setting, participants and design: The study covers the total Australian continent for the period 1998-2000 and is based on decedents aged 25-64 years (n = 43,257). The socioeconomic characteristics of statistical local areas (SLA) were measured using an index of relative socioeconomic disadvantage, and individual-level SEP was measured by occupation.

Results: Living in a disadvantaged SLA was associated with higher all-cause mortality after adjustment for within-SLA variation in occupation. Death rates were highest for blue-collar workers and lowest among white-collar employees. Cross-level interactions showed no convincing evidence that SLA disadvantage modified the extent of inequality in mortality between the occupation groups.

Conclusions: Multilevel analysis can be used to examine area variation in mortality using unlinked census and mortality data, therefore making it less necessary to use aggregate-ecological designs. In Australia, area-level and individual-level socio-economic factors make an independent contribution to the probability of premature mortality. Policies and interventions to improve population health and reduce mortality inequalities should focus on places as well as people.
Overview
Commencing operation in June 2006 the McCaughey Centre completed its first year of establishment activity in 2007. The year was marked by a number of highlights, including the official launch of the Centre by the Minister for Victorian Communities, Mr Peter Batchelor, the establishment of initial Centre strategic directions, the consolidation of our staff group, securing long-term Centre accommodation, the production and publication of a wide range of research papers and policy reviews and the organisation of numerous forums, seminars and workforce development events. The McCaughey Centre is rapidly becoming an exciting source of new ideas, conversations and projects and is continuing to explore and build a wide range of collaborative research, teaching and knowledge transfer partnerships.

Key Achievements
Centre Launch
The McCaughey Centre was officially launched on 16 July 2007 by Mr Peter Batchelor, Minister for Victorian Communities, in the Woodward Conference Centre, University of Melbourne, with around 130 people in attendance.

Expanding staffing profile
This year saw significant growth in the McCaughey Centre staffing profile, with 15 new academic staff, 2 new visiting staff, and 1 new professional staff member joining the team.

Strategic planning and implementation
In early 2007 McCaughey Centre staff participated in a series of intensive planning sessions to develop the Centre’s initial strategic directions.

The Centre’s mission was identified in the following way:
To be a catalyst for knowledge which strengthens the
Foundations of healthy, just and sustainable communities and builds social, emotional and spiritual wellbeing.

The Centre’s core values are:
- Strengthening community wellbeing and reducing health inequalities;
- Creating a culture of rigorous, reflective and innovative intellectual inquiry;
- Maximising the policy and practice impact of our work;
- Working respectfully and collaboratively with our partners and colleagues; and
- Establishing and sustaining a healthy, supportive and rewarding workplace.

The Centre’s research, policy development, teaching and workforce development work will focus on the following priority areas:
- Community wellbeing issues, indicators and policies; and
- Key determinants of mental health and community wellbeing:
  - Freedom from Violence,
  - Freedom from Discrimination,
  - Social Inclusion and Reducing Health Inequalities,
  - Economic Security and Participation, and
  - Healthy and Sustainable Environments.

The Centre also carries out research on the effectiveness of knowledge transfer, translation and exchange strategies.

With strategic and workplans in place, the McCaughey Centre is embarking on a comprehensive business planning process encompassing income generation, physical and human resource growth, breadth and timing of Centre and project growth, and long-term sustainability.

A new home
In July 2007 the McCaughey Centre moved into a new space within its long-term home in the Melbourne School of Population Health, University of Melbourne, Level 5, 207 Bouverie Street, Carlton.

Project overview and future funding
McCaughey Centre staff made significant contributions to collaborative projects in progress, and to a range of new Centre-based project proposals, throughout the year. Centre staff were partners on five ARC and NHMRC grants totaling $6,413,000, and were the lead Chief Investigators on 11 research grants contracts totaling $1,258,000. With the arrival of new staffing groups in October, the McCaughey Centre is now auspice to an additional suite of competitive and contract grants totaling $2,880,000.

Alongside the McCaughey Centre’s alignment with key VicHealth priorities, the Centre continues to initiate and build strong relationships with a broad range of stakeholders. Partnership building and securing additional funding was a major priority during the year, and widespread consultation was undertaken with key stakeholders to align the Centre’s work with tangible issues and needs of the local community and policy makers.

Research and Policy Development
Community wellbeing issues, indicators and policies
Community Wellbeing in an Unwell World
The Centre’s first Policy Signpost Report, Community Wellbeing in an Unwell World, was written and published by Professor John Wiseman and Dr Kathleen Brasher.

Community Indicators Victoria
Community Indicators Victoria (CIV) is a collaborative project hosted by the McCaughey Centre which aims to support the development and use of local community wellbeing indicators as a basis for informed, engaged and integrated community planning and policy making. Key project partners include VicHealth, the Victorian Government, the Municipal Association of Victoria, the Victorian Local Governance Association, the Australian Bureau of Statistics and the Victorian Council of Social Service.

CIV indicators, which include both subjective and objective measures, are grouped according to five domains: healthy, safe and inclusive communities; dynamic, resilient economies; sustainable built and natural environment; culturally rich and vibrant communities; and democratic and engaged communities.

Data to support reporting on these indicators is drawn from the Australian Bureau of Statistics, Victorian Government administrative data and a new statewide Victoria Community Survey, conducted by the McCaughey Centre with a total sample size of 24,000 households.

A user-friendly CIV website at www.communityindicators.net.au provides two key functions. It allows easy access to a summary overview of headline wellbeing indicators for each Local Government Area. Further, community members and policy makers are able to explore and analyse indicator trends of particular interest in one or more local communities.

Initial capacity building resources and events include a community indicators resource kit, a series of information sharing and capacity building workshops, best practice case studies, and work commissioned by local and state governments.
Family violence reform: Using knowledge to support integration of policy and practice.

In collaboration with a range of academic colleagues and State Government departments, Dr Marion Frere is leading the Centre’s work on reducing violence. This ARC Linkage project investigates reform in the Victorian response to family violence, with a focus on the integration of intervention responses. The project aims to provide an account of the development of inter-agency governance of family violence services, including police, government and non-government organisations. It examines women, children and perpetrators’ experiences and decisions, and how practitioners work individually and in cooperation with others to deliver services to the victims of family violence and to intervene with perpetrators. A key theme is the role of the governance framework in supporting multi-agency working.

2. Violence and social inclusion

This research, led by Dr Marion Frere, is currently being developed into an Australian Research Council grant proposal. Focused on family and intimate partner violence, it is exploring how the experience of violence impacts upon the development of neighbourly and community interactions and the relationship of individuals and families to community activities and institutions. It examines how violence is experienced, represented and regulated in particular groups and communities and how this impacts on experiences of trust, support, participation and belonging in these communities. It asks: How can social inclusion be enabled across relations that include violence? And, how can violence be reduced through strategies that focus on strengthening social inclusion?

3. Freedom from discrimination

Refugee resettlement in rural and regional areas

Professor John Wiseman worked closely with colleagues from VicHealth, Foundation House (The Victorian Foundation for Survivors of Torture) and La Trobe University’s Refugee Health Research Centre to develop an issues paper and convene a forum to inform policy and program development to support refugee resettlement in rural and regional areas.

Exploring the potential of social and community enterprise models for health promotion in refugee background communities

Dr Marion Frere joined with Foundation House and the Brotherhood of St Laurence to undertake a project aimed at improving health promotion and information dissemination strategies for refugees resettling in Victoria.

Building Bridges evaluation: Reducing discrimination affecting culturally and linguistically diverse communities

Dr Deb Warr, Dr Gabrielle Berman and Professor John Wiseman worked with colleagues from the Melbourne School of Population Health’s Centre for Health Policy, Programs and Economics (Project leader) and the Centre for Health and Society on an evaluation of VicHealth’s Building Bridges Initiative.

Framework for reducing racism and strengthening cross cultural understanding

Dr Marion Frere, Dr Gabrielle Berman, and Dr Yin Parades from the Centre for Health and Society have begun work with VicHealth on a framework to guide future research and policy work designed to reduce racism and strengthen cross cultural understanding.

Social inclusion and connectedness

Social Justice Initiative

The McCaughey Centre is a partner in the University of Melbourne’s multi-disciplinary Social Justice Initiative, supported by the University’s Strategic Research Initiative Fund. SJI partners include the faculties of Arts; Law; Medicine, Dentistry and Health Sciences; and Economics and Commerce. The aim of the Social Justice Initiative is to facilitate research into social justice of international standing and to strengthen the growing interest in questions of social justice at the University of Melbourne and within the non-university sector. The SJI aims to establish itself as a long-term major research cluster at the University of Melbourne, and has been awarded three-year funding of $636,000.

Responding to health inequalities

Dr Deb Warr worked with the MSPH Centre for Health Policy, Programs and Economics and Centre for Health and Society on a public health research project titled ‘Responding to health inequalities: Investigating the impact of Neighbourhood Renewal on health and wellbeing in disadvantaged Victorian Communities’. The project links quantitative analysis of the scheme’s survey data, qualitative data about Neighbourhood Renewal strategies and their implementation, and learnings from the United Kingdom’s Neighbourhood Renewal initiative to develop an integrated picture of neighbourhood renewal and its effects on reducing health inequalities.
Outside the School Gates: A community report
A community report prepared by Dr Deb Warr titled ‘Outside the School Gates’ was launched at the Meadow Bank Primary School’s annual Harmony Day Celebration on 21 March. The report outlined a model for tackling disadvantage and promoting participation in preschool education at the Meadowbank Early Learning Centre (MELC). Dr Warr undertook the study while a Research Fellow with the Melbourne School of Population Health’s Centre for Health and Society, and her report highlighted ways in which the MELC is supporting local families to become connected in a range of social networks, presented insights into the needs of local families, discussed processes for effective community engagement, explained how the MELC operates as a community hub facilitating access to a range of social services and community contacts, and described the positive outcomes that are generated for children and their families.

Creating liveable new communities
The McCaughey Centre joined forces with Griffith University’s Urban Research Centre to commence a project for the Victorian Growth Areas Authority on ‘Creating Liveable New Communities’. The research team is led by Ms Sue West, and will produce a strategic framework and practical tools for creating socially sustainable new communities underpinned by a review of key literature and interviews with stakeholders.

Northern growth corridors social cohesion project
Dr Belinda Robson and Dr Marion Frere are leading a McCaughey Centre collaboration with the Crossroads Youth and Family Services Division of the Salvation Army examining social justice issues within the Northern growth corridors of metropolitan Melbourne. The project addresses emerging issues in communities in the northern growth suburbs, building knowledge about impact of demographic change in local areas and identifying common themes which impact upon social cohesion and interconnection.

Age-friendly cities
Professor John Wiseman and Dr Kathleen Brasher completed the Melbourne component of this World Health Organisation project in collaboration with the Municipal Association of Victoria and the Victorian Council of the Ageing. The project identified indicators of an age-friendly city, and produced a practical guide to stimulate and guide advocacy, community development and policy change to make urban communities age-friendly.

Community building framework for disability services
Ms Sue West and Dr Kathleen Brasher worked with the Department of Human Services to develop a Community Building Framework for the Disability Services Division, including the development of a set of key performance indicators.

4. Economic participation and security
Work-related psychosocial hazard surveillance
Associate Professor Tony LaMontagne was commissioned by the Australian Safety & Compensation Council to scope the Household Income and Labour Dynamics in Australia (HILDA) database for potential use on work-related psychosocial hazard surveillance (trending job stress, job insecurity, etc.). Dr Rebecca Bentley from the Key Centre for Women’s Health in Society collaborated on this project. Associate Professor LaMontagne also completed his role as Chair of a peer review panel of the investigation of a suspected cluster of brain cancers at RMIT’s Building 108.

Changing work arrangements and health
This four-year NHMRC funded project draws on existing data sources (eg, the HILDA national panel study, ABS) as well as a qualitative interview study, and involves collaborators from Flinders and Melbourne Universities: Sue Richardson and Fran Baum from Flinders, Anne Kavanagh (Key Centre for Women’s Health) and Tony LaMontagne (McCaughey Centre).

Provision of Workplace Mental Health Promotion
Associate Professor Tony LaMontagne, Ms Tessa Keel and Dr Deb Vallance are working with beyondblue on this ACT Health funded project to develop and deliver a Workplace Mental Health Promotion program to address aspects of workers’ wellbeing, workplace staff management and workplace stress.

Asbestos disease in the Latrobe Valley: Establishment of a Latrobe Valley power industry cohort and biospecimen bank for the study of asbestos-related disease
In collaboration with Dr Andrew Holloway at the Peter MacCallum Cancer Centre, this NHMRC funded research program commenced in January 2007, with Dr Deb Vallance joining the team to run this study as well as participate more broadly in the group’s various initiatives on job stress and other psychosocial working conditions. The team has
130 gather for Centre’s launch

Opening celebration:
Speakers at the McCaughey Centre’s official launch on 16 July included (above) the Vice-Chancellor of the University of Melbourne, Professor Glyn Davis, and the Minister for Victorian Communities, Mr Peter Batchelor, as well as (below) the CEO of VicHealth, Mr Todd Harper, and the Mayor of Port Phillip, Cr Janet Bolitho.

A special guest at the launch was the Centre’s patron, Dr Jean McCaughey, pictured (right) with McCaughey Centre staff. More than 130 guests attended the launch, which was held in the Woodward Conference Centre and coincided with the public release of the Community Indicators Victoria data and launch of the Community Indicators Victoria website.
5. Healthy and sustainable environments

The Centre’s main work in this area has been to begin to explore and scope research on the impacts of climate change on mental health and community wellbeing. McCaughey Centre researchers were part of a major submission coordinated through the Climate Adaptation Science and Policy Initiative to the Commonwealth Environment Research Facilities scheme in 2007, and contributed to the development of ‘Climate Change and Rural Health: A one day seminar on the challenge of climate change for health in rural and regional Victoria’, opened by Ms Bronwyn Pike, Minister for Health, on 22 August. In 2007 Dr Grant Blashki began working closely as a collaborator with the Centre in the areas of mental health and climate change and health, as well as providing support on a range of funding application development schemes. Dr Blashki is a GP, a Senior Research Fellow at the Primary Care Research Unit, University of Melbourne, an Honorary Senior Lecturer at Kings College, London, Victorian Representative of Doctors for the Environment Australia, and Mentor in the Al Gore Climate Change Leadership Program.

Knowledge Transfer and Translation

Cochrane Public Health Review Group

The move of the international Cochrane Public Health Group to the McCaughey Centre provides new opportunities for strengthening research and action to promote knowledge transfer within the University and internationally. It is an international initiative that aims to integrate research synthesis, leverage new primary research, and impact on knowledge translation and exchange in the area of population health, with an equity orientation and a strong interface with action on social determinants of health.

In doing so the group aims to identify what works, for whom, how, why, and in what circumstances. Working with decision-makers on policy relevant questions has highlighted the need for an additional research program comprising trials on the effectiveness of knowledge transfer strategies. With funding from the NHMRC, the Group is exploring the feasibility and effectiveness of knowledge translation and exchange strategies for public health decision making in local government in Victoria.

Victorian Health Inequalities Network

The McCaughey Centre is a participant in the Victorian Health Inequalities Network roundtable series, which promotes information sharing and policy development on health inequalities. The roundtable series seeks to begin a cross sectoral dialogue, to address broad issues associated with health and equity, and to facilitate future action on health inequalities.

Research and knowledge transfer: Universities working with and for communities

Dr Sarah MacLean and Dr Deb Warr are working with Dr Priscilla Pyett from the Onemda VicHealth Koori Health Unit on this pilot project which aims to explore strengths and weaknesses of models for collaborating with and sharing the findings of research projects with communities. Research staff, community liaison staff at research centres and community partners will be interviewed to ascertain advantages and disadvantages of up to eight research dissemination models operating in Melbourne. Questions for research participants will consider how research is initiated, conducted, and any formal processes for engagement between researchers and communities.

The study will produce recommendations regarding possible structures for community engagement and research dissemination to be considered within the Melbourne School of Population Health, its research centres and individual researchers within the School.

New directions

In October 2007 Professor Elizabeth Waters and a team of public health researchers joined the McCaughey Centre (Lisa Gibbs, Elise Davis, Rebecca Armstrong, Jodie Doyle, Rosie Ashbolt, Elisha Riggs, Naomi Priest and Lauren Prosser). They brought with them a comprehensive range of funded child public health research projects, which will continue as part of the work of the Centre. The projects being led by members of the team include:

- Fun ‘n healthy in Moreland! – cluster randomised trial of a sustainable school-community intervention to promote child health and wellbeing and prevent overweight and obesity.
• Evaluation of the Stephanie Alexander Kitchen Garden Project.
• NHMRC Capacity Building Grant on child and adolescent obesity prevention.
• Teeth Tales – social, cultural and environmental determinants of oral health in families with young children from migrant and refugee communities.
• CountryKIDS – development and cluster RCT evaluation of community intervention study to address dental health inequalities of preschool children in rural Victoria funded by NHMRC (with MCRI).
• Environmental, social, behavioural and biological risk and protective factors for children’s oral health and wellbeing. A new Victorian birth cohort funded by NHMRC.
• CountryKIDS cohort – monitoring and measuring oral health and behaviours of rural preschool children.
• Smiling Schools – addressing the oral health literacy of school-aged children and their families (in collaboration with Dental Health Services Victoria).
• Evaluation of the effectiveness of environmental water fluoridation in Victoria (with MCRI).
• Making a difference to rural children’s oral health: community intervention study with policy makers, health professionals and community.
• Health of Young Victorians Study, 1997-2005 cohort follow-up funded by NHMRC with MCRI.
• Aboriginal concepts of child health and wellbeing.
• Framework for the determinants of mental health and wellbeing of children.
• Promoting the Mental Health of Children; Assessing the Knowledge of Family Day Care Workers.
• Quality of Life for Children with Cerebral Palsy – development of the child and adolescent self and proxy reports of the international CPQOL.
• Riding for the disabled – evaluating the effectiveness of horse riding for the disabled on QOL and functioning (RCT).
• Social exclusion of children in culturally diverse communities: Factors influencing and development of school community solutions.
• Health implications of uncertain child support payments for children in low income single parent families.
• Community Building Framework for Disability Services.
• Model of cultural competence in public health research.
• Three-yearly updated Cochrane Systematic Reviews: Prevention of Childhood Obesity; Treatment of Childhood Obesity; Policy interventions implemented through sporting organisations for promoting healthy behaviour change; Increasing participation in sport; Family and carer smoking control programs for reducing children’s exposure to environmental tobacco smoke; and Knowledge Translation strategies for public health decision making.
• Progress in Public Health – examining issues of equity across the public health evidence base.
• Cochrane Collaboration Health Promotion and Public Health Field, and transition to the new Cochrane Public Health Review Group.
• Knowledge translation for public health decision making in local government planning (KTOP). An NHMRC cluster randomised trial of the effectiveness of KT strategies to address public health decision making in relation to childhood obesity prevention.

Teaching and learning
The McCaughey Centre’s initial teaching and learning focus is on research higher degree supervision. The Centre has capacity to supervise research higher degree students across a range of disciplines, and in 2007 had four PhD students enrolled under the auspice of the Centre, with a further four research higher degree students under the primary or secondary supervision of Centre staff.
McCaughey Centre academics provide guest lectures to a range of programs across the School and the broader University. Initial discussions have commenced around the development of coursework subjects for incorporation into the Melbourne School of Population Health’s postgraduate program.

Knowledge transfer and translation
The McCaughey Centre is strongly committed to knowledge transfer and ensuring our research and other academic activities are informed by and have a positive impact on the communities around us. The Centre is therefore highly consultative in the development of our policy research priorities, and establishing effective, intersectoral partnerships across academia,
government departments and agencies, community groups and public and private sector organisations is a guiding principle in the McCaughey Centre’s approach to policy research, teaching and learning. The Centre’s strong focus upon disseminating research findings so these can be employed ‘on the ground’ to make a real difference is manifest in a range of knowledge transfer and community engagement activities, from presenting at conferences and facilitating local community forums, to addressing State Government department meetings and initiating round table discussions with key stakeholders and relevant peak body institutions around issues of health and community wellbeing.

Examples of McCaughey Centre contributions to research and policy forums and roundtables in 2007 include:

- Invited keynote speaker to City of Hume launch of ageing strategy, presenting on ‘Age-Friendly Cities’ (K Brasher).
- VicHealth Review Panel for the Tobacco Control Unit (T Lamontagne).
- Invited Public Presentation, Department of Premier and Cabinet (M Frere).
- Invited keynote address to DHS executive meeting on Age-Friendly Cities (K Brasher).
- Community Indicators Victoria: Presentation to the VicHealth Board (M Frere).
- Forum on strategic research directions around discrimination with the VicHealth Advisory Board (M Frere).
- CIV and poverty alleviation, China Social Entrepreneur Foundation (X Chen).
- Keynote address at launch of WHO Age-Friendly Cities guide (K Brasher).
- Department of Premier and Cabinet’s Expert Roundtable on ‘Agile Government’ (M Frere).
- Overview of the work of the Cochrane Health Promotion and Public Health Field and plans for the future at the 15th Cochrane Colloquium, Sao Paulo, Brazil (J Doyle, E Waters).
- Promotion of the Cochrane Library and Public Health in the Cochrane Collaboration at the Global Forum for Health Research, Beijing, China (N Priest).
- Outline of Cochrane Collaboration and role of public health within the Collaboration to the Institute of Forensic Medicine at the Coroners Office (R Armstrong).
- Knowledge sharing with ABS on data visualisation and access to regional data (X Chen, M Davern, S Gelsi).

Conferences and seminar presentations

6-8 February, LaMontagne AD. Oral presentation at National Research Centre for OHS Regulation Colloquium on ‘Workplace stress in Victoria: developing a systems approach: summary of findings and implications for policy and practice’, National Research Centre for OHS Regulation 2007 Colloquium, Australian National University, Canberra.

6-8 February, Stuckey R, LaMontagne AD, and Sim MR. ‘Risk and protective factors for occupational light vehicle user crash, injury, and fatality outcomes’, National Research Centre for OHS Regulation 2007 Colloquium, Australian National University, Canberra.

6-8 February, Keegel T, and LaMontagne AD. ‘Worker participation in OHS: Theory, policy and practice’, National Research Centre for OHS Regulation 2007 Colloquium, Australian National University, Canberra.

Centre’s values and aims a ‘natural fit’

For Professor Elizabeth Waters, joining the McCaughey Centre – and returning to Melbourne University – is a natural fit as she continues her impressive public health career, which focuses on child public health.

“There is such a strong affiliation of what we want to achieve and the values and overall aims of the Melbourne School of Population Health and the McCaughey Centre,” says Professor Waters, who took up her appointment as Professorial Fellow: Public Health and Health Equity with the McCaughey Centre in October 2007.

“The strength of Melbourne University and in particular the Melbourne School of Population Health is its very strong foundations in research systems, impressive academic and administrative staff, and the attitude of ‘let’s make it happen’.

“Much of our research on child health inequalities has revolved around building the evidence base and working towards solutions that can make an impact, and the McCaughey Centre’s philosophy of ‘knowledge for common good’ aligns perfectly with our work.”

Joining Professor Waters at the Centre is a core team of about a dozen researchers, which has gradually built up since the late 1990s when she was at the Murdoch Childrens Research Institute and the Centre for Community Child Health at the Royal Children’s Hospital.

Her early research during this period focused on building epidemiological knowledge of the health and wellbeing of children and adolescents across Victoria and, in particular, the health inequalities experienced by particular groups within the population.

Child health inequalities remain a central theme of her research because “if you focus on the life course approach and make a difference early in life we know we can make an impact on norms, behaviours and environments over the longer term”.

Among her key research projects, Professor Waters and her team will continue their partnership with the Moreland Community Health Service to run fun ‘n’ healthy in Moreland!, a five-year, 23-school community program aimed at improving child health and wellbeing and preventing obesity. This is being funded by the State Government through its Go For Your Life program.

As well, Professor Waters has received five years of funding from VicHealth for the new international Cochrane Public Health Review Group, which is being formed out of the Cochrane Health Promotion and Public Health Field. Part of the International Cochrane Collaboration, a not-for-profit organisation of more than 15,000 authors and members, the review group is scheduled for registration in April 2008.

“The opportunity to align the review group with a strong international university such as Melbourne has already made a difference.” says Professor Waters. “It is helping to build the critical mass that is at the core of high quality research. With the security of a base at Melbourne, the Public Health Agency of Canada is now planning to establish its own site, while there are also similar developments in India and Asia.”

On the future of public health in Australia, Professor Waters is optimistic but practical. “The challenge is that while public health is now more on the political agenda and we are seeing a stronger focus on careful development of interventions and stronger evaluations in the area of health promotion and prevention, the solutions are complex. “The contemporary political scene means there is often a need for quick wins, but you don’t get quick wins in health promotion and prevention. We need to move beyond well-intentioned actions hoping for quick wins to the need for thoroughly researched policy relevant long term sustainable programs.”


4-8 June, Professor John Wiseman facilitated a 2007 Cranlana seminar series. The Cranlana Program offers people from all sectors of Australian society the opportunity to participate in a unique program of seminars directed at enhancing their understanding of the philosophical, ethical and social issues central to creating a just, prosperous and sustainable society in Australia and to securing Australia’s place in the world.


4-6 June, ‘5th Annual Communities in Control Conference’, Melbourne, attended by G Berman.


27-30 June, Professor John Wiseman was the discussant on a session exploring the work being done on producing sets of progress indicators for local communities at the OECD Istanbul World Forum – Measuring and Fostering the Progress of Societies.

3 July, Wiseman J. ‘Community wellbeing in an unwell world: Trends, challenges and opportunities’, Faculty of Medicine, Dentistry and Health Sciences Dean’s Lecture Series, University of Melbourne.


20 August, LaMontagne AD. ‘Work and You: Happy Together’, presentation in the Shine Dome, Canberra. Associate Professor Tony LaMontagne participated in a panel discussion on work and mental health on the ABC’s Life Matters program as part of National Science Week.

4-9 August, X Chen. ‘Community Indicators and Geovisualisation’, International Cartographic Association Conference, Moscow.


24-26 September, X Chen. ‘Community Indicators and Geovisualisation’, International Conference on Virtual Systems and Multimedia, Brisbane.

29-31 October, Lamontagne AD, Holloway A, Vallance D. ‘The establishment of a Latrobe Valley power industry cohort and biospecimen bank for the study of asbestos-related diseases’, National Research Centre for Asbestos-Related Diseases, 2007 Annual Scientific Meeting, University of Western Australia, Perth.


7 December, Wiseman J. ‘Learning from the experience of developing Community Indicators Victoria’, presentation to forum on the development of ‘Community Indicators Queensland’.


McCaughey Centre events and co-hosted events:

April-May, The McCaughey Centre, in conjunction with Swinburne University, delivered a series of statewide information forums for local governments and community organisations on behalf of the Community Indicators Victoria (CIV) project. The forums covered the use of CIV as a tool for policy making and planning, and were undertaken in eight Victorian locations.

29 May, ‘Labour Market Flexibility and Regulation: Australian and International Impacts and Strategies’. This forum for policy makers and practitioners was hosted by The McCaughey Centre in...
collaboration with the Centre for Applied Social Research, RMIT University. The forum speakers were: Dr Iain Campbell, Senior Research Fellow, Centre for Applied Social Research, RMIT University, on ‘Australian Dimensions of Labour Market Flexibility and Regulation’; Associate Professor Tony LaMontagne, McCaughey Centre, on ‘Job Stress, Psychosocial Working Conditions, and Health’; Dr Sara Charlesworth (Senior Research Fellow, Centre for Applied Social Research, RMIT, on ‘Right to Request Regulation’; and Dr Jim Stanford, Chief Economist, Canadian AutoWorkers Union and Research Fellow, McCaughey Centre, on ‘International Dimensions of Labor Market Flexibility and Regulation’.

27 June, In conjunction with the Centre for Health and Society, Dr Deb Warr co-hosted a forum on ‘Reflections on Place, People and Policy’. The forum brought together a breadth of people to explore the impact of place-based initiatives in addressing health disadvantages, including guest speaker Dr Hilary Thomson from the University of Glasgow.

3 July, ‘Community wellbeing in an unwell world: trends, challenges and opportunities’, by Professor John Wiseman as part of the Dean’s 2007 Lecture Series, Faculty of Medicine, Dentistry and Health Sciences, University of Melbourne.

8 August, ‘Developing and using community wellbeing indicators: An overview of the role and work of Community Indicators Victoria’, by Professor John Wiseman as part of the Melbourne School of Population Health’s seminar series.

22 August, ‘Climate Change and Rural Health’, presented by the Climate Adaptation Science and Policy Initiative (CASPI) and the Menzies Foundation and supported by the McCaughey Centre.

11 December, ‘Left Out and Missing Out: Developing New Indicators of Deprivation and Social Inclusion’, by Professor Peter Saunders, Director of the Social Policy Research Centre at the University of New South Wales.

Visiting Fellows, 2007:
The McCaughey Centre’s Associate Professor Tony Lamontagne was a visiting academic at the University of Massachusetts, Lowell, for the month of December.

Dr Jim Stanford, the Principal Economist with the Canadian Auto Workers Union in Toronto, held a visiting appointment with the McCaughey Centre from January to September.

Dr Rob Salter, a Community Development Worker with the Crossroads Youth and Family Services division of the Salvation Army, held a visiting appointment with the McCaughey Centre from April to December.

Ms Stephanie Rich, the Australian Health Practice Association’s Victorian Student of the Year and an Honours student in Health Promotion at Deakin University, completed a placement with the McCaughey Centre from August to September.

Dr Dianne Vella-Brodick, a Lecturer in the School of Psychology, Psychiatry and Psychological Medicine at Monash University, spent part of her sabbatical with the McCaughey Centre from September to December.

Dr Angela Harden, Associate Director of the Evidence for Policy and Practice Information and Co-ordinating Centre (EPPI-Centre), Social Science Research Unit, Institute of Education, University of London, and the Co-Director of the Cochrane Health Promotion and Public Health Field, visited the McCaughey Centre from 3 to 10 December.

Publication highlights
For a full list of publications, see the 2007 Publications Report, page 93

With a strong emphasis on knowledge transfer and communicating research findings in a useful way to our various stakeholders, the McCaughey Centre aims to utilise a range of formats and mediums for published work. In addition to peer-reviewed publications (outlined in the general publication section of the School Report), the Centre has produced a range of reports for government departments, community groups and other organisations, a number of which are noted below.


Older people are a significant and growing part of local communities. According to the United Nations, the number of older persons (60+) will double from the current 600 million to 1.2 billion by 2025, and again, to 2 billion by 2050. The vast majority of older people live in homes and communities that have not been built with their needs in mind. To support Governments, the World Health Organisation released a Policy Framework on Active Ageing in 2002. This document shows what needs to be done to help older persons.

Brasher, K and Wiseman, J. ‘Community Wellbeing in an Unwell World: Trends, Challenges and Opportunities’, McCaughey Centre Policy Signpost #1,
If we measure the health of our communities, our country and our world solely by growth in wealth and consumer spending, then many of us, at least in Australia, are thriving. But if our definition of community wellbeing is broaden to include the full range of social, economic, environmental, cultural and political issues which matter most to citizens and communities, then the diagnosis and prognosis are far more mixed. Globally, three billion people still live on less than two dollars a day. Eleven million children under five die every year due to poverty related diseases. One billion people do not have safe drinking water. In Australia the gap in income, in employment opportunities, in housing and in health outcomes continue to grow. As in many affluent countries, there is also a rising tide of anxiety and depression even among the richest and most fortunate. And for all of us, rich and poor, our planetary environment appears in danger of becoming increasingly fevered. Internationally, and in Australia, there is growing interest in the concept of community wellbeing as a more holistic and accurate measure of societal progress than the dominant paradigm of economic growth. This paper addresses the following three questions: What is community wellbeing? Why is community wellbeing important? What are the most important international and Australian community wellbeing trends and issues?


Psychological working conditions are an emerging issue for all working people. Occupational health and safety has traditionally been considered a blue-collar concern, however psychological working conditions are now emerging as an OH&S concern for all working people, and as a potentially important contributor to health inequalities, including job stress, job insecurity, sexual harassment, bullying, occupational violence, shift work and working hours. This paper concludes that job stress is a serious public health problem that can be addressed effectively using a systems approach based on the following outcomes from the study:

- Identified barriers and facilitators to action, and evidence of a critical opportunity to advocate for a systems approach;
- Identified new priorities for intervention as well as evidence that job stress is a significant contributor to health inequalities; and
- A substantial and inequitable disease burden could be addressed by applying a systems approach to job stress in Victoria.

Warr, D. ‘Outside the School Gates’, Centre for Health and Society, the University of Melbourne, March 2007. This report was developed and produced based on work undertaken in the Centre for Health and Society. Since 1978, an early learning centre hosted by Meadowbank Primary School in the outer Melbourne suburb of Broadmeadows has become the site of intense community engagement activities for children and families in the neighbourhood. With clear understanding that circumstances outside the school gates impact on children’s learning prospects, the Meadowbank Early Learning Centre (MELC) offers an innovative and exemplary model of an organic community hub that is responding to household contexts of socio-economic disadvantage and other vulnerable circumstances among local families. As a community hub, the MELC offers a physical and social setting that enables organisations to provide integrated services, resources and activities targeting families with young children. The program is also integrated into the school structure with staff working across the MELC and school activities. A community hub model for the delivery of early childhood services is capturing the interest of policy makers in Australia and elsewhere (McCain & Mustard 1999). This report provides insight into key aspects of a community hub that has been developing at the MELC. It explains the network structure of the community hub, outlines features of the early learning program, presents insights into the needs of local families, discusses processes for community engagement, and describes the positive outcomes that are being generated. To illustrate these issues, the report draws on interviews that were conducted with staff, parents and local service providers.

West S, Raysmith H. ‘Planning Together: Lessons
This report captures the community planning experiences of 11 Victorian local governments in order to increase the knowledge and understanding of community planning within the local government sector and among other interested stakeholders. The report was commissioned by Local Government Victoria and represents a commitment by the Victorian Government to support the strengthening of local communities by:

- Improving people’s ability and opportunity to get involved in community planning and decision-making; and
- Changing the way Government works to improve the way it responds to local priorities and aspirations.

The report provides an overview of the history and context of local government community planning in Victoria, suggesting that community planning has benefits for communities and governments. It also indicates that as the number of councils doing community planning grows, there is an increased need to learn from and improve upon current approaches.

Growing team: 2007 saw significant growth in the McCaughey Centre staffing profile, with 15 academic staff, 2 visiting staff and 1 professional staff member joining the team.
A real highlight for the year was the official launch of our new centre, the Centre for Health Policy, Programs and Economics on 12 September 2007 following the acceptance by The University of Melbourne in 2006 to establish the new Centre based on the existing Program Evaluation Unit. The Centre’s name much better reflects our strengths and our broadening interest in health policy than our old Program Evaluation Unit name. The new Centre will aim particularly to engage strategically in policy development with the main stakeholders in the health care system.

At the Centre launch, presentations were made by Professor Terry Nolan, Head, Melbourne School of Population Health, Professor James Angus, Dean, Faculty of Medicine, Dentistry and Health Sciences, and the Centre’s special guest, Mr Peter Allen, Under Secretary, Portfolio Services and Strategic Projects Divisions, Victorian Department of Human Services. The launch was very well attended by both staff of the Melbourne School of Population Health and the wider University community, as well as colleagues from external organisations. As a part of the launch I released a paper arguing that a new paradigm or model for the Australian health care system is urgently needed to address the chronic illness epidemics that dominate patterns of disease in Australia currently. It is both necessary and highly desirable that there be an Advisory Committee to the Centre. This committee was also established during 2007, comprising individuals from a range of health sectors. The Advisory Committee’s principal role will be to provide strategic advice to the Head of Centre and to support the growth of the Centre’s funding and its profile. We have been successful in attracting a truly outstanding committee membership with very wide representation across the whole health sector. Representation of the private health care sector is particularly pleasing.

The Advisory Committee membership is:

Mr Peter Allen, the Under Secretary, Portfolio Services and Strategic Projects Division, Victorian Department of Human Services;
Professor Mark Considine, Head of School, Centre for Public Policy, School of Political Science, Criminology and Sociology,
The University of Melbourne;

Mr Philip Davies, Deputy Secretary, Department of Health and Ageing;

Mr Bruce R Dixon, Managing Director, Healthscope Limited;

Mr Patrick Grier, Managing Director, Ramsay Health Care;

Mr Todd Harper, Chief Executive Officer, VicHealth;

Mr Alan Kinkade, Group Chief Executive, Epworth Hospital;

Dr Brendan Murphy, Chief Executive Officer, Austin Health;

Professor Terry Nolan, Head, Melbourne School of Population Health, The University of Melbourne;

Professor Stephen Sedgwick, Director, Melbourne Institute of Applied Economic and Social Research; and

Professor Doris Young, Chair of General Practice, Department of General Practice, The University of Melbourne.

The other important highlight was the arrival in January of Professor David Studdert, Federation Fellow and previously Associate Professor of Law and Public Health from the Harvard School of Public Health. David is a Law/Arts graduate of The University of Melbourne who holds a Doctor of Science in Public Health from Harvard University. He has an outstanding reputation for linking the skills of these areas to inform the derivation of more effective public health and health care services. He is regarded as the leading practitioner of his academic generation in his field and will make a significant contribution to this critical area in Australia. His appointment at The University of Melbourne is a joint one between the Faculty of Medicine, Dentistry and Health Sciences and the Faculty of Law.

Other highlights were:

- CHPPE’s externally earned income in 2007 was $2.6 million ($3.4 million including funding from collaborative grants). This is an increase of 27% on 2006 and in excess of 50% on 2005.
- A total of 50 articles and reports were published in 2007, including 32 refereed journal articles.
- CHPPE’s student numbers continued to steadily grow, with 297 Master of Public Health (MPH) students from both The University of Melbourne and other universities in the Victorian Consortium of Public Health undertaking our postgraduate units in Program Evaluation and Health Economics. Twelve MPH students completed their research projects in program evaluation and health economics. There were 18 higher degree students, including 5 new enrolments in 2007.
- The two courses in Health Program Evaluation continue to attract enrolments from health professions. A total of 36 participants undertook the courses internally over four workshops, with 44 participants attending the three workshops that were delivered externally to government organisations.
- Penny Mitchell, Honorary Fellow, was awarded her PhD.

- Associate Professor David Dunt

Teaching and learning

The ongoing demand for well taught and supervised and workplace-relevant subjects and courses has continued in 2007, with very substantial growth in enrolments within our two streams of subjects in the Master of Public Health and research training through doctoral studies, as well as with the external delivery of our short courses in Health Program Evaluation to government health departments.

All subjects with the exception of Environmental Health Services Evaluation, which was offered as distance delivery only in 2007, were offered on-campus with Health Program Evaluation 1, Health Program Evaluation 2, Health Services Research 1 and Research Project in Health Program Evaluation also offering the flexibility of off-campus delivery.

Master of Public Health

This very substantial growth in enrolments in our subjects is well reflected in the foundation subject, Health Economics and Program Evaluation, which is offered across the Victorian Consortium of Public Health to students from Deakin University, La Trobe University, Monash University and The University of Melbourne. Rosemary McKenzie and Arthur Hsueh coordinated this subject, with David Dunt, Margaret Kelaher, Michelle Williamson, Theonie Tacticos, Peter Feldman, Lucio Naccarella, Michael Otim, Kiu-Sang Tay-Teo, Katherine Ong and Michelle Haby providing lectures and tutorials. There were 138 students enrolled in this subject in 2007.

Master of Public Health students had access to the following suite of health economics/economic evaluation subjects:

- Health Economics: Arthur Hsueh (Subject Coordinator).
- Economic Evaluation 1: Arthur Hsueh (Subject Coordinator).
- Economic Evaluation 2: Steve Crowley (Subject Coordinator).
- Research Project in Health Economics: Arthur Hsueh (Subject Coordinator).
In the health program evaluation field, the following subjects were available in 2007. Those in distance mode have been designated D:

- Health Program Evaluation 1 (D): Jenni Livingston (Subject Coordinator).
- Health Program evaluation 2 (D): David Dunt and Rosemary McKenzie (Subject Coordinators).
- Health Services Research 1 (D): David Dunt (Subject Coordinator).
- Methods for Evaluating in Health Services 1: Margaret Kelaher (Subject Coordinator).
- Using Evaluation in Program Design: Jenni Livingston (Subject Coordinator).
- Research Project in Health Program Evaluation (D): Jenni Livingston (Subject Coordinator).
- Environmental Health Services Evaluation (D only): Helen Jordan (Subject Coordinator).

During 2007, 12 students completed their two semester Research Project in either Health Economics/ Economic Evaluation or Health Program Evaluation. These students completed reports on the following topics:

- Katharine Grace Hogg, supervisor Andrew Dalton. Constructing a nonpareil health workforce planning model: an examination of the necessary components.
- Andrew Metz, supervisors Rob Carter and Stephen Colgan. A cost analysis of coeliac screening strategies in symptomatic and asymptomatic individuals.
- Susan Clare Phillips, supervisor Steve Crowley. Targeted therapies: clinical panacea or economic fallacy?
- Meivyta Belani Husman, supervisor Jenni Livingston. Reproductive health programs for young people in Indonesia – a proactive evaluation.
- Yen Nguyen Thi, supervisor Jenni Livingston. A proposal for a needs assessment of the capacity to investigate outbreaks of foodborne diseases for sentinel provinces to support establishing a foodborne disease surveillance system in Vietnam.
- Vivienne Joan Twigg, supervisor Jenni Livingston. What are the needs of haematology patients at Peter MacCallum Cancer Centre? The early stages of planning a functional rehabilitation program for survivors of cancer treatment.
- Norea Yem, supervisor Jenni Livingston. A proposal for needs of midwifery training program for traditional birth attendants in Ratanakiri Province, Cambodia.

Higher degree students

There were 18 PhD students enrolled in 2007, including five students new to the program. The following two students submitted their theses in 2007:

- Penny Mitchell submitted in May and was conferred in August 2007. Thesis title: Mental health care roles and capacities of non-medical primary health and social care services: An organisational systems analysis.
- Susan Day submitted in October 2007. Thesis title: An investigation into the extent to which General Practitioner (GP) remuneration can be used to overcome geographic inequities in the supply of, and demand for, Medicare-funded GP services.

Short courses

Health Program Evaluation

Two short courses in Health Program Evaluation attracted health professionals working across a range of health policy and program areas in Australia and overseas. The short courses provide an opportunity for practical, workplace-oriented learning about health program evaluation and the opportunity to network with other public health practitioners who share an interest in health program evaluation. Short Course 1, on Planning, Negotiation, Evaluation Approaches, Criteria Selection and Program Logic Modelling,
was held three times in 2007 and attracted 27 participants. Short Course 2, on Data Collection, Analysis and Reporting in Health Program Evaluation, was run once in 2007 and attracted a total of 9 participants.

Short Course 1 was coordinated and taught by Helen Jordan. Rosemary McKenzie provided a session as a guest lecturer during one of these courses. Short Course 2 was taught by Helen Jordan, Michelle Williamson, Theonie Tacticos, Peter Feldman and Sonja Hood. Helen also ran three short courses interstate. One three-day short course in Health Program Evaluation was delivered to 14 participants at the NSW Cancer Council in Sydney in February. Two two-day short courses were delivered for the Office of the Australian Safety and Compensation Council, Department of Employment and Workplace Relations, Canberra, with 15 participants on 1-2 May, and 15 participants on 13-14 June.

Research

The CHPPE undertakes evaluations of health programs and policies at international, national, state and local levels. Since its establishment, the CHPPE has attracted more than $31 million in funding from key granting bodies such as the National Health and Medical Research Council (NHMRC) 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. Since 2007, the CHPPE has focussed its research around four work streams: Primary Care, Mental Health, Health Policy and Health Economics.

Details of new and existing research activities are set out under the following four work streams and includes major grants awarded.

### Seminar program

Once again, the Centre’s lunch time Seminar Series, which is open to all colleagues and the general public, proved to be extremely successful. The seminar topics are chosen to highlight current and key aspects of the Centre’s Research Program.

<table>
<thead>
<tr>
<th>Date</th>
<th>Presenter’s Name</th>
<th>Topic of Presentation</th>
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<tbody>
<tr>
<td>6 March</td>
<td>Jane Pirkis</td>
<td>Research priorities in suicide prevention</td>
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<tr>
<td>20 March</td>
<td>Rosemary McKenzie</td>
<td>Evaluation of a consultation and education model in provision of advice on eating disorders</td>
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<tr>
<td>3 April</td>
<td>David Studdert</td>
<td>Disclosure of medical injury to patients: an improbable risk management strategy</td>
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<tr>
<td>17 April</td>
<td>Penny Mitchell</td>
<td>Emergent process constructs in inter-organisational research: using qualitative data to assess the construct validity of quantitative measures</td>
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<tr>
<td>1 May</td>
<td>Sonja Hood</td>
<td>Implementing evidence in health care: lessons from heart failure</td>
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<tr>
<td>15 May</td>
<td>Arthur Hsueh</td>
<td>The economics of finding a good doctor</td>
</tr>
<tr>
<td>5 June</td>
<td>Andrew Dare</td>
<td>The media monitoring project: preliminary findings</td>
</tr>
<tr>
<td>19 June</td>
<td>Jenni Livingston</td>
<td>Teaching program logic approaches</td>
</tr>
<tr>
<td>3 July</td>
<td>Colleen Doyle</td>
<td>Evaluation of the Extended Aged Care at Home Dementia (EACHD) community care packages for people with dementia</td>
</tr>
<tr>
<td>17 July</td>
<td>Kristen Moeller-Saxone</td>
<td>Implications of tobacco control measures for people with a mental illness</td>
</tr>
<tr>
<td>7 August</td>
<td>Julia Witt</td>
<td>Measuring hospital quality from re-admission and death records</td>
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<tr>
<td>21 August</td>
<td>Katherine Ong</td>
<td>The role of equity in the economic approach to healthcare resource allocation</td>
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<tr>
<td>29 August</td>
<td>Emma Halliday</td>
<td>Health policy evaluation and appraisal in the NHS in Scotland</td>
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<tr>
<td>4 September</td>
<td>Bridget Hsu-Hage</td>
<td>The value of evaluation: a rural experience</td>
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<tr>
<td>11 September</td>
<td>Sandiran G. Premakanthan</td>
<td>Planning for gathering performance results: Are we making the right investment upfront?</td>
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<tr>
<td>25 September</td>
<td>Susan Day and Rasika Rampitage</td>
<td>Evaluating Measure 1 of the dementia initiative</td>
</tr>
<tr>
<td>2 October</td>
<td>Margaret Kelaher</td>
<td>Changes in access to mainstream services among Aboriginal and Torres Strait Islander people</td>
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<tr>
<td>16 October</td>
<td>Colleen Doyle and David Dunt</td>
<td>Raising community awareness of successful strategies for chronic obstructive pulmonary disease (COPD)</td>
</tr>
<tr>
<td>7 November</td>
<td>Peter Feldman</td>
<td>“There is no such thing as society”: promoting health risk and responsibility to poor neighbourhoods</td>
</tr>
<tr>
<td>20 November</td>
<td>Theonie Tacticos</td>
<td>Governance or empowerment? Conflicting aims of community engagement initiatives</td>
</tr>
<tr>
<td>11 December</td>
<td>Helen Jordan</td>
<td>Tall girls, breast density study: work in progress</td>
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</table>
Primary Care

The Primary Care Work Stream includes evaluations of projects run in general practice and other primary care settings, projects aimed at increasing the health and wellbeing of particular consumer groups (e.g., older people, people with diabetes) and/or projects that have a health education focus. Much of the work of the Primary Care Work Stream involves developing the capacity of funders and project workers to undertake evaluations of their own. This year saw the conclusion of CHPPE’s involvement in the Well for Life program. Well for Life is a health promotion initiative in Victorian aged care settings aimed at improving health and quality of life of frail older people through sound nutrition and participation in physical activity. Rosemary McKenzie and Lucio Naccarella, with assistance from Andrew Stewart in 2007, conducted an evaluation and capacity building strategy in Well for Life for three years. The evaluation found strong organisational and workforce development around health promotion in the aged care sector and identified new partnerships between aged care and the broader primary care sector. The project has generated a number of publications and conference presentations.

The Primary Care Work Stream attracted funding for the following new project in 2007:

<table>
<thead>
<tr>
<th>Title</th>
<th>Funding body</th>
<th>Chief investigator(s)</th>
<th>Description</th>
<th>Funding</th>
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<tbody>
<tr>
<td>Evaluation of Building Bridges Phase 11 (Evaluating practice to reduce discrimination affecting Cultivating and Linguistically Diverse (CALD) communities</td>
<td>The Victorian Health Promotion Foundation</td>
<td>Margaret Kelaher, Yin Paradies, Anne Pederson (Murdoch University), Deborah Warr, Ian Anderson, John Wiseman</td>
<td>The project will evaluate practice to reduce discrimination affecting culturally and linguistically diverse communities focusing on programs in VicHealth’s ‘Building Bridges’ scheme. The Building Bridges initiative aims to improve mental health and wellbeing by promoting positive contact and cooperation between migrant and refugee groups who are affected by discrimination and others in the community.</td>
<td>$260,000</td>
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Existing research activities carried over from previous years included:

- Helping smokers with a history of depression quit smoking safely: Depression and smoking cessation outcomes among clients of a tailored quitline callback service offering doctor-quitline co-management of smoking cessation and depression.
- Responding to health inequalities: Investigating the impact of Neighbourhood Renewal on health and wellbeing in disadvantaged Victorian communities.
- Raising awareness of prevention programs for chronic pulmonary disease.
- The impact of the new post mortem consent procedure on recently bereaved parents.
- Arts and Health Strategy.
- Evaluation of the Centre of Excellence for Eating Disorders.
- Evaluation of the Best Start Program.
- National Evaluation of the After Hours Primary Medical Care Trial.
- Evaluation of the supply of pharmaceuticals to remote area Aboriginal health services.
- Evaluation of the Well For Life Initiative.
- Evaluation of the Centre of Clinical Research Excellence in Neurosciences.
- An investigation into the extent to which General Practitioner (GP) remuneration can be used to overcome geographic inequities in the supply and demand for GP services.
- Evaluation of surveillance programs for nosocomial infection in smaller hospitals.
- Interventions to improve evidence-based prescribing for heart failure.
- Use of breast cancer screening and treatment services by Australian women aged 25 to 44 years following Kylie Minogue’s breast cancer diagnosis.
- Evaluating the actions towards environmental health using Driver, Pressure, State and Exposure (DPSEEA) and program logic.
The Mental Health Work Stream continues to conduct internationally-recognised projects in the area of mental health and suicide prevention, and its team of research staff is growing under the leadership of Jane Pirkis. In 2007, Andrew Dare (assisted by Shelby Williamson and Bree Rankin) completed a project examining changes in media reporting of suicide and mental illness over the past seven years (Media Monitoring Project 2). Andrew Dare and Shelby Williamson commenced a study examining outcome measures for carers of people with mental illness. Shelby Williamson also continued her involvement in a randomised controlled trial of an intervention designed to improve GPs’ ability to detect and manage depression and suicidality among their older patients. Justine Fletcher, Fay Kohn and Bridget Bassilios continued to work on the ongoing evaluation of the Better Outcomes in Mental Health Care program. Justine Fletcher ably managed an evaluation of a new set of Medicare Benefits Schedule item numbers which provide reimbursement for psychologists’ services, assisted by Jo Christo. Jo Christo and Angela Delle Vergini commenced work on a project which is developing a set of clinical prompts for mental health care providers. Jane Pirkis had oversight of all the above projects and also continued her involvement with the analysis and reporting component of the Australian Mental Health Outcomes and Classification Network. She also undertook a number of additional projects on the epidemiology of suicide.

New research activities funded this year include:

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<thead>
<tr>
<th>Title</th>
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<tbody>
<tr>
<td>Evaluation of the Queensland Government Suicide Prevention Strategy</td>
<td>Queensland Health</td>
<td>Jane Pirkis, Jo Robinson (Orygen Research Centre), Michelle Williamson, Philip Burgess (University of Queensland), Meredith Harris (University of Queensland), Cathrine Mihalopoulos (Deakin University)</td>
<td>This project is evaluating the governance, programs and outcomes of the Queensland Government Suicide Prevention Strategy, using a variety of data sources and both qualitative and quantitative methods.</td>
<td>$99,980</td>
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<tr>
<td>Clinical prompts project</td>
<td>Commonwealth Department of Health and Ageing, via New South Wales Institute of Psychiatry</td>
<td>Philip Burgess (University of Queensland), Tim Coombs (New South Wales Institute of Psychiatry), Rod McKay (Sydney South West Area Health Service), Jane Pirkis</td>
<td>As part of the Australian Mental Health Outcomes and Classification Network, this project is developing a library of clinical prompts which will assist clinicians to use information from a range of outcome measures that are being used in public sector mental health services across Australia. The project is drawing on existing guidelines to develop evidence-based prompts to guide clinicians in monitoring and intervening with consumers whose scores on given outcome measures indicate that they may have particular problems (e.g. aggression, suicidality).</td>
<td>$16,300 (UM component only)</td>
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<tr>
<td>Monitoring media reporting of depression</td>
<td>beyondblue</td>
<td>Jane Pirkis, Andrew Dare, Warwick Blood (University of Canberra)</td>
<td>This project compares media reporting of depression in 2000/01 and 2006/07, in order to determine whether there have been changes in the accuracy of reporting of symptoms, causes, treatment and prognosis.</td>
<td>$33,200</td>
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<tr>
<td>Title</td>
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<tr>
<td>Carer outcome measurement in mental health services</td>
<td>Commonwealth Department of Health and Ageing</td>
<td>Philip Burgess (University of Queensland), Jane Pirkis, Tim Coombs (New South Wales Institute of Psychiatry), Judy Hardy, Andrew Dare</td>
<td>This project constitutes a scoping study which represents the first step towards the introduction of carer outcome measurement in mental health services. It is addressing the following questions: (a) what instruments for measuring outcomes for carers have been developed for use by mental health services, or are relevant to mental health services, both in Australia and internationally? (b) How do the available instruments compare in terms of measurement domains, psychometric properties and feasibility for use in clinical practice? (c) Of the available instruments, which, if any, show best potential for use in Australian mental health services and should be subject to further investigation?</td>
<td>$105,450 (UM component only)</td>
</tr>
<tr>
<td>An evaluation of the new Medicare Benefits Schedule psychologist item numbers: Impacts for psychologists and their patients.</td>
<td>Australian Rotary Health Research Fund</td>
<td>Jane Pirkis, Philip Burgess (University of Queensland), Harvey Whiteford (University of Queensland), Grant Blashki (Department of General Practice, The University of Melbourne), Lyn Littlefield (Australian Psychological Society)</td>
<td>This project is evaluating the uptake of new Medicare Benefits Schedule item numbers which provide rebates for psychologists’ services. The evaluation is considering whether the item numbers are achieving their aim of providing improved access to high quality mental health care for Australians.</td>
<td>$58,625</td>
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Existing research activities carried over from previous years included:
- Monitoring media reporting of suicide and mental illness.
- Australian Mental Health Outcomes and Classification Network.
- Evaluation of the Access to Allied Psychological Services Component of the Better Outcomes in Mental Health Care program.
- Reducing depression and suicide among older Australians: A cluster randomised clinical trial in primary health care.
- Health risk screening of adolescents in primary care: A cluster randomised controlled trial.
Work in the new health policy and law stream of the Centre began in January 2007 with David Studdert’s arrival. Efforts focused mainly on foundational work, scoping opportunities for improving understanding of legal and regulatory issues in public health through empirical research. Activities in 2007 include the launching of investigations into pathology service delivery, drivers of caesarean section rates in Australia, and compensation system reform.

Funded Projects include:

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<th>Funding</th>
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<tbody>
<tr>
<td>Using law to improve population health and the quality of health care services</td>
<td>Australian Research Council (Federation Fellowship)</td>
<td>David Studdert</td>
<td>This research program will combine methods from the social and statistical sciences with traditional legal analysis to explore a set of pressing policy issues at the intersection of legal and health systems in Australia, including: medical negligence litigation and consumer complaints; innovative approaches to compensation and dispute resolution in accident compensation schemes; the role and impact of coronial investigations in injury prevention; and the clash of law and science in litigation over severe birth injuries.</td>
<td>$1,819,350</td>
</tr>
<tr>
<td>Compliance with adverse event reporting requirements in cancer clinical trials</td>
<td>National Institute of Health</td>
<td>David Studdert and Steven Joffe (Dana-Faber Cancer Institute)</td>
<td>Methods for estimating the incidence of adverse events (AEs) in clinical trials have not been developed. This study adapts chart review-based methods developed for identifying AEs in the routine clinical (non-research) setting to the clinical trial context. The specific aims of the proposal include: 1) to estimate the incidence of reportable AEs in phase II cancer trials; 2) to estimate the proportion of AEs that meet reporting criteria but are not reported, as required; and 3) to estimate the inter-rater reliability of reviewers’ judgments concerning critical elements of AE determination, including severity, attribution to study interventions, and expectedness.</td>
<td>$US49,271</td>
</tr>
</tbody>
</table>
**Health Economics**

The Health Economics Work Stream includes economic evaluation and health economics in general. In 2007, the research focused on economic evaluation and priority setting. One major project, Assessing cost effectiveness (ACE) in prevention, was funded by National Health and Medical Research Council. The work stream was responsible for the economic evaluation component for this project. Another project, Priority setting in Aboriginal health: planning for the prevention of non-communicable disease in Aboriginal and Torres Strait Islander communities, was funded by the Cooperative Research Centre (CRC) for Aboriginal Health. This project also applies the ACE approach to priority setting to the prevention of non-communicable diseases in Indigenous Australians and how to contextualise Indigenous health. The Health Economics Work Stream has also successfully attracted funding for a new project which will start in 2008: How does chlamydia infection impact on the sexual, reproductive and mental health of Victorians and the Victorian health care system? The work stream will be responsible for the investigation and analysis of economic impacts for this project. Further details are below.

<table>
<thead>
<tr>
<th>Title</th>
<th>Funding body</th>
<th>Chief investigator(s)</th>
<th>Description</th>
<th>Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>How does chlamydia infection impact on the sexual, reproductive and mental health of Victorians and the Victorian health care system?</td>
<td>Department of Human Services, Victoria</td>
<td>Hocking J, Fairley CK, Temple-Smith M, Keogh L, Chen M, Fisher J, Williams H, Hsueh A (Centre for Health Policy, Programs and Economics), Henning D, Bayly C, McNamee K.</td>
<td>This project will use different research methods to make an assessment of the impact of chlamydia on the sexual, reproductive, mental health and economic aspect of Victorians and their health care system. The research methods include a comprehensive literature review, analysis and evaluation of existing data sources, qualitative interviews with key informants, people affected by chlamydia and health care professionals and quantitative surveys. We will review participatory action-based chlamydia programs and will assess the economic evaluation literature of chlamydia control strategies.</td>
<td>$186,869</td>
</tr>
</tbody>
</table>

**Existing research activities carried over from previous years include:**

- Assessing Cost Effectiveness (ACE) in prevention.
- Priority setting in Aboriginal health: Planning for the prevention of non-communicable diseases in Aboriginal and Torres Strait Islander communities.
Shedding light on the intersection of where health meets law

Professor David Studdert is using his 2007 Federation Fellowship to map new territory in Australia. His ambitious research program is focusing on policy issues at the intersection of the legal and health care systems. It combines conventional research methods from law, such as analysis of regulation and litigation, with those from public health, mainly epidemiology and statistics.

The aim of this blended approach is to shed fresh light on contentious policy issues, such as poor quality health care and the role of the coroner in reducing fatal injury. The application of this kind of multidisciplinary approach to the study of health policy is more developed in the United States, he says, where Professor Studdert has been living and working for the past 12 years.

A joint professorial fellow in the Faculty of Medicine, Dentistry and Health Sciences, and the Faculty of Law, Professor Studdert arrived in January 2007 from the Harvard School of Public Health, where he was Associate Professor of Law and Public Health.

Under the umbrella title, ‘Using Law to Improve Population Health and the Quality of Health Care Services’, the four major projects funded by the Federation Fellowship span highly challenging issues, including the use of scientific evidence in litigation over severe birth injuries.

New field of research: Professor Studdert says law and health policy connect in several crucial ways.

Based at CHPPE and the Melbourne Law School, Professor Studdert has spent much of his first year attempting to foster an appetite for this new field both inside and outside the University, with the aim of making the research self-sustaining in the longer term.

“Law and health policy connect in several crucial ways,” says Professor Studdert. “Law is a tool for improving population health. Behind every important health policy you’ll find a tangle of rules and regulations. But then public health programs often provoke legal concerns—the individual freedoms and coercive measures like quarantine regulations being the classic example.”

Interest in using empirical approaches to investigate the real-world impact of health laws and policies is growing internationally. Professor Studdert believes it has the potential to transform the way that health care systems make decisions about the use of limited resources. “This is one part of a broader push to try to understand better what it is we actually do in the health care system. It springs from a desire to measure important outcomes, improve performance, and use legal and financial incentives to improve the quality of health care.”

“Knowledge in these areas must shape the way we deliver health care over the next 20 or 30 years,” he says. “All countries face the same harsh reality in health care – there are not enough resources to do all the things we’d like to do, and that forces some difficult choices.

“Those choices need to be made in an informed way, and empirical insights drawn from a mix of perspectives – clinical, legal, ethical, political and economic – should provide the information that decision-makers need. Rather than sending fragmented signals from various academic disciplines, it is going to be far better for decision-makers if we can produce research that rolls together a number of those perspectives into a coherent message.

“But ultimately there are important normative judgements to be made. Mathematical equations are not going to tell you whether we should spend our limited health care dollars on keeping the terminally ill alive or providing preventative services to children – but they can certainly illuminate the tradeoffs involved.”

Professor Studdert is enjoying the professional challenge of helping to raise understanding of a field that is not well understood here. “Ultimately, the objective is to inform policy. We owe it to ourselves not to embark on a debate about issues that really matter, like abortion or preventable deaths in hospitals, in some kind of information vacuum. Solid evidence from good research needs to be there at the table in a form that speaks to politicians and bureaucrats,” he says.

“The ultimate test of this work is whether the papers I write turn out to be interesting and useful to the people making the hard decisions about health policy in Australia and around the world.”
The launch of the Centre for Health Policy, Programs and Economics (CHPPE) in September 2007 signalled a broadening of the Centre’s scope to embrace “the big picture” issues of health policy and health systems, while continuing its health program evaluation and health economics activities.

CHPPE’s director, Associate Professor David Dunt, says the elevation of the Program Evaluation Unit to the status of a centre will help raise its profile as it takes a more active role in high level health policy forums, applies for competitive grants and engages in the public debate about health policy at a macro level.

Mr Peter Allen, Under Secretary, Portfolio Services and Strategic Projects Division, Victorian Department of Human Services, was a key speaker at CHPPE’s 12 September launch, along with the Dean of the Faculty of Medicine, Dentistry and Health Sciences, Professor James Angus, and the Head of the Melbourne School of Population Health, Professor Terry Nolan.

At the launch, which was attended by about 80 people, Associate Professor Dunt said that despite the obvious need for health service evaluation and research, this area was only now emerging as a discipline.

In keeping with CHPPE’s expanded focus, in his speech he called for a new universal healthcare system to replace Medicare. “Our system – based on the fee-for-service, doctor-patient consultation – was set up to deal predominantly with acute, short-term illnesses,” he said. The mixture of private/public health services that had built up around it was confusing and inefficient.

The current system was unsuitable for meeting the demands that have evolved, as the population has aged, for the treatment of chronic diseases.

Nor was it geared for illness prevention, he said.

“Around this fee-for-service system has developed our largely uncoordinated health care system based on mixed public/private health care sectors and the overlapping roles of Commonwealth and State governments in both funding and delivering services,” he said. “The private health expenditure sector in Australia is the third highest of the 10 comparable OECD countries with similar socio-economic structures, health systems and standards of living to Australia.”

The system urgently needs major change, he said.

Associate Professor Dunt called for a strict separation of the roles of the Commonwealth and the States or to have funding for health services put under one of the two jurisdictions or even under a new regional administering body.

He said the separation of public and private sectors should be broken down so there was only one sector.

“Private health insurance could still exist in such a system but be restricted to health extras such as optometry and funding higher levels of hospital amenity,” he said.

“Third, and most importantly for chronic illnesses, the Medicare Benefits Schedule (MBS) should be overhauled so that payment for services can be made to teams of health professionals providing ongoing care, not just doctors providing one-off care.”

Centre embraces ‘big picture’ issues

Helping to launch CHPPE were Melbourne School of Population Health head, Professor Terry Nolan (left), the Centre’s Associate Professor David Dunt, Mr Peter Allen, Under Secretary, Portfolio Services and Strategic Projects Division, Victorian Department of Human Services, and Professor James Argus, Dean of the Faculty of Medicine, Dentistry and Health Sciences. Professor Argus and Mr Allen also gave keynote addresses at the launch.
Community activities

During 2007 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.

Committee memberships

David Dunt
- Treasurer, Health Services Research Association of Australia and New Zealand.
- Health Ambassador, UNESCO Observatory on Multi-disciplinary Research.

Bridget Hsu-Hage
- Goulburn Valley Health, Board Director.
- Goulburn Valley Health, Primary Health Care and Population Health Committee.
- Goulburn Valley Health, Research and Ethics Committee.
- Chinese Health Foundation, Board Director.

Margaret Kelaher
- Health Ambassador, UNESCO Observatory on Multi-disciplinary Research.
- Scientific Advisory Committee, Third Vietnam Veteran’s Mortality Study, Department of Veteran’s Affairs.

Jenni Livingston
- Member of the Drinkwise Research Advisory Committee.
- Member of the Evaluation Working Group of the National Prescribing Service Ltd (ongoing appointment since 2006).

Rosemary McKenzie
- Australian National Representative, International Association for Suicide Prevention.
- Chair, Suicide and the Media Task Force, International Association for Suicide Prevention.
- Executive Member, Health Services Research Association of Australia and New Zealand.

Journals

David Dunt
- Reviewer, Family Practice.
- Reviewer, BMC Family Practice.
- Reviewer, BMC Health Services Research.
- Reviewer, European Journal of General Practice.

Jenni Livingston

Jane Pirkis
- Member, Selection Committee, Australian Rotary Health Research Fund Mental Health Research Grants.
- Member, Selection Committee, Australian Rotary Health Research Fund Mental Health.
- Reviewer, Raine Medical Research Foundation.

David Studdert
- Reviewer, Australian Development Research Awards.
- Reviewer, Agency for Health Care Research and Quality (US).

Colleen Doyle

Fay Kohn
- Reviewer, Medical Journal of Australia.

Margaret Kelaher
- Member, Editorial Board, Health Policy.

Jane Pirkis
- Member, Editorial Board, Health Policy.
- Reviewer, Medical Journal of Australia.

Theonie Tacticos
- Reviewer, Australian and New Zealand Journal of Development.

Bridget Hsu-Hage
- Assessor, NHMRC Alternative Medicine Special Grants.

Grant bodies

Journals

Arthur Hsueh

Margaret Kelaher
- Reviewer, Medical Journal of Australia.
- Reviewer, Medical Care.

Jane Pirkis
- Reviewer, Medical Journal of Australia.

Theonie Tacticos
- Reviewer, Australian and New Zealand Journal of Psychiatry.
Public Health.

- Reviewer, Journal of Sociology.
- Reviewer, RMIT Women and Work monograph.
- Reviewer, "Environmental Health", the Journal of the Australian Institute of Environmental Health.

International conferences


Pirkis, J. (2007), Copycat suicides, 14th International Association for Suicide Prevention World Congress, Killarney, 28 August – 1 September.

Pirkis, J. (2007), Australia’s suicide prevention activities, 14th International Association for Suicide Prevention World Congress, Killarney, 28 August – 1 September.


Poster presentations

Christie, J., Day, L., Osborne, R., Segan, C. and Warke, J.D. (2007), Bone mineral density in quitters compared with continuing smokers at one year: the Quitline cohort study, 17th Annual Scientific Meeting of the Australian and New Zealand Bone and Mineral Society, Rydges Lakeland Resort, Queenstown, New Zealand, 9-12 September.


Seminar presentations


National conferences

Campbell, T., Pierce, D. and Hsu-Hage, B. (2007), The development of a research proposal on a shared experiences online intervention program for sub-acute lower back pain, PHCRED Conference, School of Rural Health, The University of Melbourne, Shepparton, November.


Hsueh, A. (2007), Impacts of individual/household socio-economic conditions and area environment on health in Australia, Using Five-Wave
Panel Data of HILDA surveys, HILDA Survey Conference 2007, The University of Melbourne, 19-20 July.


**Pirkis, J.** (2007), Suicide and the media: What we know and what we don’t know, 5th World Conference of Science Journalists, Melbourne, 19 April.

**Rasekaba, T., Williams, E. and Hsu-Hage, B.** (2007), Will an eight-week pulmonary rehabilitation course at Kyabram and District Health Services improve Chronic Obstructive Pulmonary Disease patient outcomes? PHCRIS Conference, Sydney, June.


**Workshop presentation**


**Poster presentation**


**Seminar presentations**


**Dare, A.** (2007), The Media Monitoring Project, Melbourne School of Population Health, 24 June.


**Fletcher, J. and Bassilios, B.** (2007), Access to Allied psychological Services (ATAPS) Projects – Minimum Data Set as Evaluation Tool,
Funding boost: Jane Pirkis (left), Justine Fletcher and Jo Christo received an Australian Rotary Health Research Fund Grant at the Australian Psychological Society, Melbourne, in October. The grant will allow them to continue an evaluation of the uptake of Medicare rebates for psychologists’ services.


Publication highlights

The Centre for Health Policy, Programs and Economics published 50 journal articles, reports and conference papers, including 32 peer reviewed journal articles, in 2007, a selection of which are provided below. For details of all 2007 CHPPE publications please refer to the full school 2007 Publications Report, beginning on page 93.


Internationally, media guidelines on the reporting of suicide suggest that the method of suicide should not be explicitly reported. This paper presents quantitative data on the reporting of suicide in Australia, which suggest that the media present a skewed image of reality with an over-reporting of suicide by violent and unusual methods. It also presents qualitative textual analyses of examples of newspaper reports of suicide in an attempt to examine differences in reporting practices across media and genres and to explore the limits of the notion of “explicitness”. The paper concludes that journalistic decisions to maximise the newsworthiness of a story often conflict with the promotion of the accurate, ethical, and responsible reporting of suicide.


Studies from more than six countries report a high prevalence of harmful medical errors. Most providers and patients realise that health care services are potentially hazardous and that errors sometimes occur despite the best efforts of people and institutions. Patients expect to be informed promptly when they are injured by care, especially care that has gone wrong. However, a divide between these expectations and actual clinical practice is increasingly evident.


This paper examines whether unemployment and partnership affects pregnancy, live births and terminations among young Australian women. Unemployment has conventionally been used in epidemiological studies to examine the health effects of loss of opportunity, material resources and satisfaction associated with work. During welfare reform in the 1990s it was argued that unemployment and
associated welfare receipt could influence reproductive choice.


The physician’s role as expert witness in legal proceedings can be controversial, especially in medical malpractice litigation in which physicians opine on the quality of care rendered by their colleagues. Concerns about high-cost malpractice claims in recent years has focused attention on the potential for physician experts to fuel inappropriate litigation through testimony that is not well grounded in prevailing clinical standards or science.


This paper discusses the findings and policy implications of an evaluation of Well for Life, a health promotion initiative that focuses on good nutrition and physical activity for frail older people in Planned Activity Groups and residential aged care facilities. The evaluation methodology employed the RE-AIM framework to identify various dimensions of program quality and public health impact. The evaluation found that Well for Life has achieved positive results in workforce development, health promotion capacity-building and linkages between aged care services and the broader primary care sector. Planned Activity Groups are a promising setting for health promotion for frail older people. Residential care settings are a more challenging environment as there are greater barriers to change in staff practices and greater frailty among residents. Further evaluation is required to inform decision-making about the focus of investment in health promotion for frail older people in the longer term.


Program budgeting and marginal analysis (PBMA) is becoming an increasingly popular tool in setting health service priorities. This paper presents a novel multi-attribute utility (MAU) approach to setting health service priorities using PBMA. This approach includes identifying the attributes of the MAU function; describing and scaling attributes; quantifying trade-offs between attributes; and combining single conditional utility functions into the MAU function. We illustrate the MAU approach using a PBMA case study in mental health services from the Community Health Sector in metropolitan South Australia.

Staff

The Centre comprises 30 full time and part time staff, (27 academics, three professional staff). The Centre also has five honorary staff members.

Five new staff joined the Centre in 2007:

- **Professor David Studdert**, Federation Fellow (please refer to Head of Centre report for further details).
- **Associate Professor Bridget Hse-Hage**. Associate Professor Hse-Hage is a population health researcher with a background in statistics and epidemiology.
- **Dr Arthur (Ya-Seng) Hseuh**. Dr Hseuh is coordinating the teaching of Health Economics and Economic Evaluation, as well as Health Economics and Program Evaluation within the Master of Public Health. His current research focuses on the following areas:
  - exploring ways to move from a single disease and curative care model to a patient-centred multiple-disease focused care strategies with preventive care;
  - developing incentive systems that reduce the need for care of patients while also increasing the demand for better health awareness and prevention; and
  - deploying ways to achieve and maintain both hospital efficiency (for reducing costs) and effectiveness (for safety and quality of care).
- **Dr Bridget Bassilios**. Dr Bassilios is currently involved in the national evaluation of the Better Outcomes in Mental Health Care program headed by Jane Pirkis.
- **Ms Justine Fletcher**. Ms Fletcher is also currently involved in the national evaluation of the Better Outcomes in Mental Health Care program and the evaluation of the new Medicare Benefits Schedule psychologist item numbers.

Please refer to the School Report for a full list of staff.
## CHPPE Major Grants awarded in 2007

<table>
<thead>
<tr>
<th>Grantor</th>
<th>Investigators</th>
<th>Scheme</th>
<th>Project Title</th>
<th>Period</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Victorian Health Promotion Foundation</td>
<td>Margaret Kelaher, Yin Paradies, Anne Pederson (Murdoch University), Deborah Warr, Ian Anderson, John Wiseman.</td>
<td>Evaluation of Building Bridges Phase 11 (Evaluating Practice to Reduce Discrimination Affecting CALD communities)</td>
<td>2007-2011</td>
<td>$260,000</td>
<td></td>
</tr>
<tr>
<td>Commonwealth Department of Health and Ageing</td>
<td>Philip Burgess (University of Queensland), Jane Pirkis, Tim Coombs (New South Wales Institute of Psychiatry), Judy Hardy, Andrew Dare</td>
<td>Carer outcome measurement in mental health services</td>
<td></td>
<td>$105,450 (UM component only)</td>
<td></td>
</tr>
<tr>
<td>Queensland Health</td>
<td>Jane Pirkis, Jo Robinson (Orygen Research Centre), Michelle Williamson, Philip Burgess (University of Queensland), Meredith Harris (University of Queensland), Cathrine Mihalopoulos (Deakin University)</td>
<td>Evaluation of the Queensland Government Suicide Prevention Strategy</td>
<td>2007-2008</td>
<td>$99,980</td>
<td></td>
</tr>
<tr>
<td>National Institute of Health (Via Dana Farber Cancer Institute)</td>
<td>David Studdert and Steven Joffe (Dana-Faber Cancer Institute)</td>
<td>Compliance with adverse event reporting requirements in cancer clinical trials</td>
<td>2007-2008</td>
<td>$US49,271</td>
<td></td>
</tr>
<tr>
<td>Australian Rotary Health Research Fund</td>
<td>Jane Pirkis, Philip Burgess (University of Queensland), Harvey Whiteford (University of Queensland), Grant Blashki (Department of General Practice, The University of Melbourne), Lyn Littlefield (Australian Psychological Society)</td>
<td>Mental Illness Research Grant</td>
<td>An evaluation of the new Medicare Benefits Schedule psychologist item numbers: Impacts for psychologists and their patients.</td>
<td>2007-2008</td>
<td>$47,375 $58,625</td>
</tr>
<tr>
<td>beyondblue</td>
<td>Jane Pirkis, Andrew Dare, Warwick Blood (University of Canberra)</td>
<td>Monitoring Media Reporting of Depression</td>
<td>2007-2008</td>
<td>$33,200</td>
<td></td>
</tr>
</tbody>
</table>
Overview

2007 saw increased emphasis given to mental health and the need for mental health service development locally and on a global scale. In September 2007 *The Lancet* published a series of six papers on global mental health. This was launched, together with the launch of the International Journal of Mental Health Systems, by CIMH and the Nossal Institute for Global Health in Melbourne in October. *The Lancet* Global Mental Health Group (Associate Professor Minas is one of three Australian members of the Group) is working – with the active support of *The Lancet* – on the creation of a more active and effective movement for global mental health.

CIMH Director, Associate Professor Minas, was appointed to the WHO International Panel of Experts on Mental Health and Substance Abuse. Associate Professor Minas is a member of the Immigration Minister’s Immigration Detention Advisory Group and is Chair of the Detention Health Advisory Group. With significant contributions from these two advisory groups there were major changes in Australian immigration detention policy and practice. These changes are both welcome and long overdue. Further positive change in this area of policy is expected in 2008 following the election of the Rudd government.

CIMH mental health system development projects in Aceh and Sri Lanka (supported by World Vision Australia) made substantial progress in the development of community-based mental health service capacity during 2007. Towards the end of 2007 substantial agreement had been reached for major stakeholders on the establishment of a national taskforce on mental health system development in Indonesia and in Vietnam. CIMH is technical advisor to both of these emerging programs of activity.

Learning and teaching

CIMH contributed to the field of transcultural mental health in learning and teaching through provision of education and training programs. The annually offered Selective in Transcultural Psychiatry (as part of the Master of Psychiatry (Melb) and Master of Psychological Medicine (Monash) program) continued in 2007 to attract large numbers of psychiatric registrars. CIMH also contributed to the wide range of professional...
development courses offered by the Victorian Transcultural Psychiatry Unit, with which CIMH collaborates closely. Tania Miletic, with colleagues from the former International Conflict Resolution Centre, developed, with the assistance of the Biomedical Multimedia Unit, a DVD-based training program on conflict analysis.

The Australian Mental Health Leadership Program and the International Mental Health Leadership Program continues to be refined and re-developed. AusMHP attracts students from across Australia and IMHLP from throughout Asia and the Pacific.

“Having the opportunity to learn from leaders in mental health policy and other broader realms beyond clinical practice through ausMHP has been invaluable. I have also enjoyed the interaction with colleagues from different states and mental health systems.”

– Dr Simon Jones, Principal Psychiatry Registrar, Department of Neuropsychiatry, Royal Melbourne Hospital, Victoria

Master of International Mental Health

This postgraduate degree program is a response to the global need for strengthened capacity in mental health policy, service development and health systems research. MIMH is a one-year full-time or two-years part-time postgraduate degree open to medical and other mental health professionals. The program is taught in mixed delivery mode, with intensive teaching at The University of Melbourne, regional workshops, online seminars and project supervision. It is intended that in 2008 this program will be re-structured in the context of the changes that are occurring as part of the introduction of the Melbourne Model.

Graduate Research Students

PhD

Angela Donohue, The effects of individual, family and community level mediators on adolescent adjustment as a result of war-related experiences in Croatia and Australia.

Catherine Lazaroo, Making meanings; East Timorese asylum seekers, narrative, and mental health.

Rafidah Aga Mohd Jaladin, Multicultural counselling and competencies in Malaysia.

Dzenana Kartal, Post-traumatic stress in population of Bosnian refugees in Australia, Austria and Bosnia.

Helen Evert, War experiences and the emotional health and well-being of Polish elderly migrants.

Highlight: Helen Evert submitted her PhD thesis in 2007. Helen has interviewed 72 Polish elderly people living across Melbourne about their experiences during the Second World War. The study aimed to assess the emotional health and well-being of people who experienced a range of traumatic events. Each person has generously given a detailed account of their lives in pre-war Poland, what happened to them during the war and the events leading up to their migration to Australia. A quantitative interview schedule was developed in Polish to measure depression, anxiety and PTSD, as well as collect socio-demographic and other health related information. A narrative interview was also included for some of the participants as an opportunity to tell their story.

Master of Mental Health Sciences (Transcultural Psychiatry) (completed in 2007)

Ku Tan, Culture and stigma of mental illness.

Research

The CIMH research program is focused on applied and theoretical research on issues of population mental health and relevant health systems. It is divided into two streams, the first focused on mental health of immigrant and refugee communities in Australia and the second focused on populations in resource-constrained countries (particularly, but not exclusively, in the Asia-Pacific region).

Transcultural Mental Health Research

The main focus of this work to date has been on longer-resident communities in Australia as the refugee and recent arrival research has received substantially more attention. In view of the population trends in ageing within the large population of culturally and linguistically diverse groups in Australia and the increased somatic morbidity related to increased age, CIMH has more recently been engaged in examining the relationship between mental and physical disorders, taking the case of diabetes and depression as its central point for this work. A second direction has been to examine the health services providing mental health care (including public mental health services, general practice and primary care settings and private practicing psychology and psychiatry services). CIMH has developed and applied new methodologies for examining internal organisational processes in mental health services and pathways through care in order to understand how such factors interact in service delivery under the weight of client cultural and social diversity, therefore providing insight into the quality of care and factors related to this.

International Mental Health Development Research

The problems in mental health care in resource-limited countries are wide-ranging and often severe, including inadequate infrastructure and workforce, inadequate policy and political attention to mental health issues, and poor availability or coordination of systems of care. The CIMH sees value in the development of research and research capability/capacity in such countries as a means for promoting reform and developing appropriate mental health systems. In Sri Lanka, projects focusing on the mental health and well-being of school-aged children affected by the tsunami and examining issues of suicide risk, particularly among women, are continuing. In Aceh, Indonesia, a particular focus of research that has emerged is examination of the practice of restraint and confinement of mentally ill people in the community.

Community activities

In its role as a WHO Collaborating Centre, CIMH continues to be an active contributor to WHO programs in Asia, in close collaboration with Regional Offices in Manila and New Delhi and with WHO country offices in Indonesia, Sri Lanka and Vietnam. As part of the emerging movement for global mental health that has been initiated...
An open-access, online journal highlighting the urgent need for mental health services in developing countries is generating strong global interest since its launch earlier this year by the Centre for International Mental Health (CIMH).

The CIMH’s Director, Associate Professor Harry Minas, is Editor-in-Chief of the International Journal of Mental Health Systems, which has an editorial board of eminent experts drawn from 28 countries.

Associate Professor Minas says individual papers had been downloaded more than 3000 times since the website’s launch in the second half of 2007. “Given that we’ve done very little promotion of the Journal, it’s really encouraging and demonstrates that there’s interest in this field.”

Visitors to the website, www.ijmhs.com, can access all the content for free because the authors pay an article processing charge to BioMed Central, the open access publisher. However, Associate Professor Minas says these costs could be a barrier to publishing for some researchers.

“One of the key reasons for setting up the journal was to have an avenue for publication for people from low and middle-income countries,” he says. “They are still prevented from doing that because of the cost of publishing, so the next task is to get funding to enable us to pay the article processing charges for researchers from low and middle-income countries.

“We want to get as much high quality research and comment from those countries as possible.”

Associate Professor Minas has been having discussions with major NGOs about funding for the journal, and he hopes that organisations such as AusAID would also contribute to article processing charges. “It’s an extension of what they already do – it’s the last part of the process,” he says. “It would be a very small investment for a very big return, but without that small investment we can’t realise the Journal’s potential.”

Another highlight of 2007 for CIMH was a separate new website venture, this time by The Lancet Group’s Movement for Global Mental Health, that has also enlisted Associate Professor Minas’s support. Working jointly with Professor Oye Gureje, of Nigeria, he is responsible for the Capacity Building section of the new website, which continues the efforts of the recent Lancet Series to promote scaling up of mental health services in low and middle-income countries.

Associate Professor Minas was one of three Australians invited to join The Lancet Global Mental Health Group, and, with the Nossal Institute for Global Health, the CIMH later co-hosted the Australian launch of The Lancet Series in October 2007.

In a significant recognition of CIMH’s standing, the Centre has the prospect of being appointed by the government health authorities of both Indonesia and Vietnam as technical advisor in the development of their respective mental health systems, as the result of negotiations during 2007. Indonesia’s Ministry of Health will lead a national taskforce, with CIMH as the international technical advisor in the development of the Indonesian mental health systems.

At a workshop convened by WHO in Hanoi in December, Vietnam agreed to set up a similar taskforce.

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• The International Journal of Mental Health Systems is at www.ijmhs.com
by The Lancet series on global mental health, it is expected that CIMH will play a particularly active role in advocacy and capacity building components of this new program.

Through the Immigration Detention Advisory Group and the Detention Health Advisory Group, CIMH has consistently pointed to the lack of relevant research for Immigration Department policies and practices. In 2007, the Department agreed to establish a detention research program, which is expected to commence in 2008.

**International mental health seminars**

CIMH holds seminars on a regular basis with distinguished guest speakers from Australia and abroad. These seminars help to keep staff, students and the interested public informed about current issues and research in the area of international and transcultural mental health and related fields, with a special theme for 2007 focusing on international mental health systems development. Seminars were well attended by a diverse range of staff and students across faculties and from a vibrant cross-section of private and public sector organisations and community groups.

**Key Achievement**

- Launch of the new journal *International Journal of Mental Health Systems*.

The CIMH Director has established a new, independent, peer-reviewed, open access journal, published by BioMed Central. The Journal has a distinguished international Editorial Board. The International Journal of Mental Health Systems will publish papers on all aspects of mental health system development. As mental health is increasingly recognised as a priority public health issue, and important developments are occurring in mental health systems development in a number of world regions, this initiative provides the first single journal to which those who are engaged can turn for relevant research, debate and education in this growing field.

**Publication highlights**

For details of all 2007 CIMH publications please refer to the full school 2007 Publications Report, beginning on page 93.


Overview
The Melbourne Sexual Health Centre (MSHC) has provided high quality care to 16,877 individual clients who registered in 2007 with a total of 27,457 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) in diagnosing and treating STIs. MSHC provides wide-reaching support to GPs through various means such as extensive web page and 1800 009 903 telephone number directly to a sexual health physician.

A new website was launched for MSHC (http://www.mshc.org.au), which is comprised of three major sections that include the general public, health professionals, and research and education. There are also interactive online services for the general public to check their risk of exposure to an STI (http://www.checkyourrisk.org.au) and for HIV positive people to find out what tests are needed and also what issues should be on the agenda for the next visit to the doctor or clinic (http://www.healthmap.org.au). 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.

Improving partner notification is one of the most effective means of improving STI control because partners of individuals with STIs are most likely to also have STIs and continue transmitting their infection because so few have symptoms. Consistent with MSHC’s aim of supporting GPs, an online service called GP-Assist (http://www.mshc.org.au/GPassist) was developed and tested. It provides a mechanism to improve partner notification through providing the http://www.mshc.org.au/GPassist web address on laboratory reports of positive results of common STIs. Accessible information about treatment of the more common STIs, and simple tools such as partner letters and fact sheets for GPs to use in discussing partner notification are also available at this site.

Services and Consultations
The numbers of consultations by type of service onsite are shown in the table below. A further 505 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>23,744</td>
<td>13,446</td>
<td>10,265</td>
<td>33</td>
</tr>
<tr>
<td>HIV Clinic</td>
<td>1557</td>
<td>1390</td>
<td>165</td>
<td>2</td>
</tr>
<tr>
<td>Outreach</td>
<td>407</td>
<td>357</td>
<td>49</td>
<td>1</td>
</tr>
<tr>
<td>Counselling</td>
<td>932</td>
<td>700</td>
<td>231</td>
<td>1</td>
</tr>
<tr>
<td>Vaccination</td>
<td>817</td>
<td>565</td>
<td>252</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>27,457</td>
<td>16,458</td>
<td>10,962</td>
<td>37</td>
</tr>
<tr>
<td>Individuals</td>
<td>16,877</td>
<td>9962</td>
<td>6891</td>
<td>24</td>
</tr>
</tbody>
</table>
Teaching and learning

In collaboration with the Melbourne School of Population Health, the Centre offers a number of postgraduate courses, postgraduate subjects and short courses in sexual health. These have been well attended and will provide the Victorian community with a highly trained workforce that improves the quality of sexual health services outside the Centre.

Master of Public Health (MPH)

Many students undertaking the MPH select sexual health subjects as part of their master's degree. These subjects have become increasingly popular and, as a result of this, from 2008 there will be a formal Sexual Health Stream within the Masters of Public Health. This will enable students to pursue research projects in Sexual Health as part of their MPH program.

Post Graduate Certificate of Public Health (Sexual Health)

This course continues to attract students from a variety of professional backgrounds. The PG Certificate has become a valued qualification for both nurses and doctors wanting to specialise in sexual health.

- 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 Royal College of Nursing as a pap smear provider course.
- Semester 1 – Adolescent Sexuality and Sexual Health 571-821. This subject is run collaboratively with the Centre for Adolescent Health, Department of Paediatrics, University of Melbourne.
- Semester 2 – Sexual Function and Dysfunction – 505-441/541.

Short course series on many different aspects relating to STIs and clinical attachments at MSHC are also offered.

Undergraduate Teaching

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

Research

The Centre has continued to maintain strong research and education activities through the Melbourne School of Population Health at The University of Melbourne. The research projects of higher degree candidates enrolled through the Melbourne School of Population Health are aimed at enhancing the services and promotion of sexual health offered at MSHC.

Postgraduate Courses Completed:

HIV/AIDS prevention and management. Moshin Sidat, PhD.

Using computers to improve sexual history. Robin Tideman, PhD.

In progress:


Quality assurance project of the diagnostic accuracy of pelvic inflammatory disease. Asiye Doxanakis, MPH.

An investigation of interventions aimed at enhancing sexual satisfaction in women. Richard Hayes, PhD.

Chlamydia incidence and re-infection rates: a longitudinal study of young Australian women. Jennifer Walker, PhD.

The screening and control of Chlamydia. Jade Bilardi, PhD.

Advanced Medical Students

Completed:

More than just anal sex: the potential for STI transmission among men visiting sex on premises venues in Melbourne. Chee Wun Phang, Advanced Medical Student (AMS).

Diagnoses

The numbers of the most frequently made diagnoses in consultations are shown in the table below.

<table>
<thead>
<tr>
<th>Diagnoses</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chlamydia trachomatis</td>
<td>721</td>
</tr>
<tr>
<td>Neisseria gonorrhoeae</td>
<td>205</td>
</tr>
<tr>
<td>Nongonococcal urethritis</td>
<td>781</td>
</tr>
<tr>
<td>Herpes simplex virus</td>
<td>786</td>
</tr>
<tr>
<td>Syphilis</td>
<td>117</td>
</tr>
<tr>
<td>Bacterial vaginosis</td>
<td>518</td>
</tr>
<tr>
<td>Warts</td>
<td>1611</td>
</tr>
<tr>
<td>Human immunodeficiency virus (new cases)</td>
<td>42*</td>
</tr>
<tr>
<td>HIV post exposure prophylaxis</td>
<td>190</td>
</tr>
<tr>
<td>Post coital intervention</td>
<td>83</td>
</tr>
<tr>
<td>Trichomoniasis in women</td>
<td>10</td>
</tr>
</tbody>
</table>

* includes 2 females
In progress:
The Clinical Features of HIV patients in Melbourne Sexual Health Centre who Experienced Renal Impairment Events: Case Series and Case-Control Study, Jeremia Siregar (AMS).

Survey of female patients on the use of chaperones with male practitioners, Charley Simanjuntak (AMS).
The perception of MSM about HPV and the use of chaperones with men-who-have-sex-with-men (MSM) with and without HIV: Survey of medical practitioners who are members of ASHM. (GSK Australia Pty Ltd) 2006-2007, $19,546.

Key achievements

The Centre was the winner in the Category of Innovation in Information Technology, Victorian Health Awards 2007, for the online program aimed at GPs that was initiated to improve partner notification by using the website GP-Assist (http://www.mshc.org.au/GPAssist).

Melbourne Sexual Health Centre was the recipient of the 2007 President's Award, Victorian Aids Council (VAC), presented at the discretion of the President of VAC to an individual, group or organisation that has demonstrated visionary leadership in improving the quality of life for HIV-positive people. Often the recipient will have served over a long period and contributed to high level improvements in services for HIV positive people and to an increased awareness of HIV issues.

Chlamydia screening: What is new in BV and what is new in NGU and syphilis – Seeing the epidemic is returning. Adolescent Sexual Health Day, Melbourne Division of General Practice, Melbourne, March.

An Update on Sexually Transmitted Infections. RWH – The Annual Women’s Health Update and Education Day, University of Melbourne, March.


Sexual health, Palliative & HRT. The Royal Australasian College of Physicians (RACP) – Adult Medicine Scientific Program Committee Congress. Melbourne, May.

HIV Diagnoses among Gay Men and Other MSM – AFAO National Forum on HIV. Sydney, August.

Chlamydia Screen: but how? Mother and Child Health Research, La Trobe University, Melbourne, November.

2007 conferences and public presentations

Chlamydia screening: but how? Mother and Child Health Research, La Trobe University, Melbourne, November.

Publication highlights

For a full list of publications, see the 2007 Publications Report, page 93.

Study: Experiences and perceptions of patients with 100% adherence to highly active antiretroviral therapy (HAART) – a qualitative study.

Sidat M, Grierson J, Fairley CK. AIDS Patient Care and STDs 2007; 21(7): 509-520

The aim of this study was to understand from patients’ perspectives and experiences what resulted in them having 100% adherence to HAART. In-depth interviews were conducted with 10 participants (seven men and three women).

The study found that 100% adherence was associated with:

• a readiness to go on HAART;
• HAART being viewed as a life-line and related with a willingness to live longer and healthier;
• an ongoing patient-
All of these aspects reinforced the patients’ motivation to continue 100% adherence. The differing views of male and female patients toward chaperones for genital examinations in a sexual health setting. Teague R, Newton D, Fairley CK, Hocking J, Pitts M, Bradshaw C, Chen M. Sexually Transmitted Diseases, 2007; 34(12): 1004-1007.

An anonymous questionnaire was administered to patients attending Melbourne Sexual Health Centre to determine the attitudes of male and female clients to the use of chaperones during genital examination within a sexually transmitted infection clinic. Only 7% of male patients expressed the need for a chaperone when examined by a male practitioner and 6% if examined by a female practitioner.

Among female patients, 27% felt the need to have a chaperone when being examined by a male practitioner, compared to 6% when being examined by a female practitioner. Around one third of male and female patients indicated they would feel uncomfortable having a chaperone present regardless of whether the practitioner was male or female.


The current practice and attitudes of Australian sexual health practitioners towards the use of chaperones for genital examinations was examined by use of an anonymous questionnaire. Of 166 questionnaires posted out to members of the Australian Chapter of Sexual Health Medicine, 110 completed the questionnaire (66%).

Of these, only 9% and 19% offered chaperone services routinely for all male and female genital examinations, respectively. Among practitioners who did not offer chaperone services routinely, chaperone services were offered with a mean frequency of 19% for female examinations and 8% for male examinations (P=0.01). Significantly more male practitioners compared to female practitioners thought a chaperone was important for medico-legal purposes when examining females (72% v 53%, P=0.05). In addition, significantly more female practitioners compared to male practitioners thought a chaperone was sometimes important for reasons of support when examining male patients (52% v 26%, P < 0.001). However, only 39% of male practitioners and 36% of female practitioners felt resources spent on chaperones were justified by the benefits they provided.

Despite only a minority of practitioners offering chaperones to patients during examinations, many feel they are important for medico-legal reasons and support for the patient. The authors concluded that best practice may be to offer chaperone services routinely and record when the offer is declined.


The objective of the study was to determine by anonymous survey the proportion of sex workers and non-sex workers with sexual difficulties attending Melbourne Sexual Health Centre. There were 93 female sex workers and 178 non-sex worker female clients who consented to participate in the self-administered questionnaire about demographic characteristics, sexual behaviour, prevalence of sexual difficulties with their non-work related partners, distress regarding their sex life, physical pleasure, emotional satisfaction with sex and overall satisfaction with their life.

Comparing sex workers to non-sex workers, 34% v 42% respectively experienced painful sex, anorgasmia was recorded in 43% v 40%; vaginal dryness in 45% v 36%; and performance anxiety in 28% v 37%. Physical pleasure and emotional satisfaction with sex and overall life satisfaction was similar in both groups. Sex workers were more likely to experience sexual disinterest (odds ration 1.9; 95% CI 1.1 to 3.2), and were less likely to report being distressed about their sex life (p = 0.04). The prevalence of sexual difficulties, other than desire was similar to non-sex workers. These findings may be relevant only to sex workers operating in a highly regulated sex industry.

**Study:** A randomised controlled trial comparing...
Twenty years after the "Grim Reaper" TV advertisements bowled fear of HIV into our living rooms, Australia's rates of HIV infection are still, in international terms, comparatively low.

But the Director of the Sexual Health Unit (SHU), Professor Christopher Fairley, says that the controversial 1987 campaign was not responsible for keeping HIV (Human Immunodeficiency Virus) from becoming an epidemic in Australia.

Professor Fairley credits the introduction of needle exchange programs, the availability of universal healthcare in Australia and the early involvement in education programs by gay community-based organisations as major factors that successfully "muted" a potential epidemic here. The SHU, which opened in 2001, has built on the knowledge gained from that era. Located at the Melbourne Sexual Health Centre (MSHC), the SHU has created a highly responsive model in which the Unit's research priorities address the sexual health challenges facing the community, as they emerge through the treatment of patients at the Centre.

In 2007 alone, the MSHC provided about 30,000 client consultations.

"Our ability to make this contribution by bringing prevention into the provision of healthcare is about accessing programs by people at the point of healthcare," he says. "So whether it's treatment or screening, our effectiveness is greatly facilitated by the synergy that results from a clinical service, that is, the Melbourne Sexual Health Centre, being so strongly associated with an academic university. The MSHC is funded by Department of Human Services through Bayside Health and it is very well integrated into the Melbourne School of Population Health (MSPH),” he says.

“A high level, sophisticated, pragmatic practice of clinical medicine results from that union.”

“At the MSHC, our main focus for heterosexuals is chlamydia screening,” he says. “We have a number of large research grants aimed at trying to determine the most optimal way to get young women under 25 tested for chlamydia.

“For men who have sex with men, our focus is on how to improve their access to healthcare. Many STIs are asymptomatic and you will improve the detection of STIs if you have frequent screening, followed by termination of the STIs.

“Then there is our work to ensure that clinicians recognise symptoms earlier. For example, syphilis wasn't around for 20 years so many clinicians and patients have never seen it so they are persisting with symptoms longer than they need and passing it around in the interim period before diagnosis,” he says. “We are focusing on better education, so we reduce the period of time between when someone gets symptoms and then gets treatment. Our website has quite graphic pictures of what syphilis can look like.

“We are also trying to get more regular testing for syphilis. Men who have sex with men and who have HIV are particularly badly affected by syphilis so we recommend they get tested on a monthly basis.” For gonorrhoea, the MSHC is also emphasising the need for more frequent testing, because the STI is often asymptomatic.

The Centre's work on HIV is two-fold: to encourage the practice of protected sex and to encourage more frequent testing to assist early diagnosis and to prevent its spread.

“All of this work is only possible due to the substantial contribution of a number of people,” Professor Fairley says, “particularly Dr Marcus Chen, Research Fellow at MSPH, Dr Jane Hocking, of the Key Centre for Women's Health in Society, and Dr Catriona Bradshaw, an honorary member of the MSPH.”
computer-assisted with face-to-face sexual history taking in a clinical setting. Tideman RL, Chen MY, Pitts MK, Ginige S, Slaney M, Fairley CK. Sexually Transmitted Infections 2007; 83: 52-56.

Sexual health history taking is an important routine component of any sexual health consultation. The accuracy is important as it has direct implications on the resulting management and treatment. This randomised study evaluated computer-assisted self-interviews (CASI) compared to face-to-face interviews (FTFI) using identical predefined questions for eliciting sexual history. FTFI was the pre-existing routine method for taking sexual history at Melbourne Sexual Health Centre. All participants completing CASI also underwent FTFI and the clinicians were not aware that these patients had undergone CASI.

The majority of participants (95%) found CASI easy to use and 86% were comfortable using CASI. There were no differences in reported risk behaviours between CASI and FTFI except women reported considerably higher numbers of male partners using CASI. The results of this study indicated that CASI can be reliable, efficient and a highly acceptable method for screening of sexual risk in a clinic setting. CASI could be used routinely before a clinical consultation, saving time and thus improving clinical efficiency of services.
Research

Vaccine clinical trials
1: Phase II clinical trials of a pandemic influenza (H5N1) candidate vaccine in adults and children. These two studies extend the previously conducted Phase I study by evaluating safety and immunogenicity (immune response) with higher antigen doses (30mg and 45mg) of adjuvanted vaccine in 400 adults aged 18-64 years and 150 children aged between 6 months and 8 years.

2: Two Phase III clinical trials of combined Hib meningococcal serogroup CY and serogroup C conjugate vaccines in approximately 1300 infants. The purpose of these studies is to provide data on the immunogenicity and safety of a primary vaccination and boosters with these new vaccines, and to examine longer-term protection.

Mathematical modelling
Mathematical models of infectious disease can be used both to improve understanding of past outbreaks and to predict the likely ability of public health interventions to control future threats. This dual focus was apparent in our work this year, with a continued primary focus on pandemic influenza. Ongoing NHMRC funding allowed us to utilise the rich data resources represented in the historical influenza database established in 2006 (see http://www.influenza.sph.unimelb.edu.au). In particular, we used models to explore possible causes underlying the far higher attack rates often observed in isolated populations compared with those in more populous countries and considered the implications of these findings for pandemic preparedness. Other NHMRC funded work included development of a novel model structure within which to consider optimal use of a limited stockpile of antiviral drugs during an influenza pandemic. We further collaborated in the development of a spatial model of influenza transmission to examine the effectiveness of social distancing measures, including school closure. Insights arising from these various approaches are being used by the Australian Government and other policy makers and planners.

Epidemiologic research
In collaboration with the University of Queensland, we have continued to develop a program of research focussed on working out the frequency of common and
newly discovered respiratory viruses in community-based samples, with potential for new virus discovery. Planning is progressing for studies involving healthy adult populations and longitudinal cohorts of families with young children to extend earlier work. We are also conducting studies of social contact patterns underlying the spread of infection within and between households to aid interpretation of epidemiological data.

Evaluation of immunisation and screening programs

This program of research includes continuing studies to evaluate the effectiveness of screening for chlamydia infection; evaluation of the prevention by conjugate pneumococcal vaccine of severe pneumonia in Australian Aboriginal children in the Northern Territory; and studies of the effectiveness of polysaccharide pneumococcal vaccine and inactivated influenza vaccine in preventing hospital admissions due to community-acquired pneumonia.

Publication highlights

For details of all 2007 VIRGo publications please refer to the full school 2007 Publications Report, beginning on page 93.


Major presentations


Melbourne School of Population Health

Publications Report

2007

A2 – Edited Books


Jarvinen M. & Room R. 2007, Youth Drinking Cultures: European Experiences, Ashgate, Aldershot, UK.

A6 – Authored Books

Other

Keys D. & Mayes C. 2007, Becoming a Mum: Just the Whole World Changes, The University of Melbourne, Melbourne.


B1 – Research Book Chapters


B2 – Book Chapters

Other


C – Journal Articles

C1 – Journal Articles
Referred


Colucci E. 2007, ‘Focus groups can be fun’: The use of activity-
Implementing the birth dose

advanced pregnancy in women in Vietnam', International Journal of Mental Health Systems, 1:3 (3): 0.


Read T., Hocking J., Sinnott V. & Hellard M. 2007, 'Risk factors for incident HIV infection in men having sex with men: A case-


Tomnay J., Pitts K. & Fairley C. 2007, 'General Practitioners’ Use of Internet-Based Patient Materials for Partner Notification', *Sexually


C5 – Other Refereed Contribution to Refereed Journals


F2 – Full Written Papers Unreferred


G – Reports and Working Papers

G4 – Major Reports and Working Papers


Doyle C., Dunt D. & Pattewagne L. 2007, Promoting Public Awareness of Prevention, Early Detection and Treatment of Chronic Obstructive Pulmonary Disease, for Victorian Department of Human Services, Centre for Health Policy, Programs and Economics, The University of Melbourne, Melbourne.


Fletcher J., Pirks J., Kohn F., Bassilios B., Blashki G. & Burgess P. 2007, Evaluating the Access to Allied Psychological...
Services Component of the Better Outcomes in Mental Health Care Program: Tenth Interim Evaluation Report – Progressive Achievements over Time, Centre for Health Policy, Programs and Economics, Melbourne.


Palassis J., Mattheissen C., Santiago A., Hadley J., Lamontagne A. & Harris A. 2007, ALERT: Preventing Worker Injuries and Deaths from Explosions in Industrial Ethylene Oxide Sterilization Facilities, NIOSH National Institute for Occupational Safety and Health, Cincinnati, US.


Renhard R., Kelaher M. & Anderson I. 2007, Review to Identify Opportunities through DHS Funding to Improve Outcomes for Aboriginal People: Final Report, Australian Institute of Primary Care, Melbourne.


G5 – Minor Reports and Working Papers

Brasher K. 2007, Disability Services Community Building Program Interview Data Report, McCaughey Centre, The University of Melbourne, Melbourne.


West S.A. 2007, Disability Services Community Building Program Performance Indicators Report, Department of Human Services, Melbourne.

West S.A. 2007, Disability Services Community Building Program: Desktop Audit Report, Local Government Victoria, Department of Planning and Community Development, Melbourne.
How to contact the
Melbourne School of Population Health

Melbourne School of Population Health
Academic Programs Office
Level 4, 207 Bouverie Street
Carlton, Vic 3053
Tel: +61 3 8344 9338/9339
Fax: +61 3 8344 0824
Email: sph-gradinfo@unimelb.edu.au
www.sph.unimelb.edu.au

Centre and Units
Centre for Molecular, Environmental, Genetic
and Analytic Epidemiology
Level 1, 723 Swanston Street
Carlton, Vic 3053
Tel: +61 3 8344 0671
Fax: +61 3 9349 5815
Email: epi-info@unimelb.edu.au
www.epi.unimelb.edu.au

Centre for Health and Society
Level 4, 207 Bouverie Street
Carlton, Vic 3053
Tel: +61 3 8344 0822
Fax: +61 3 8344 0824
Email: chs-info@unimelb.edu.au
www.chs.unimelb.edu.au

Key Centre for Women’s Health in Society
Level 2, 723 Swanston Street, Carlton The University of Mel-
bourne, Victoria, 3010, Australia
Tel: +61 3 8344 4333
Fax: +61 3 9347 9824
Email: enquiries-kcwhs@unimelb.edu.au
www.kcwhs.unimelb.edu.au

Centre for Health Policy, Programs and Economics
Level 4, 207 Bouverie Street
Carlton, Vic 3053
Tel: +61 3 8344 0710
Fax: +61 3 9348 1174
Email: chppe-enquiries@unimelb.edu.au
www.healthprograms.unimelb.edu.au

Centre for International Mental Health
Level 5, 207 Bouverie Street
Carlton, Vic 3053
Tel: +61 3 8344 0908
Fax: +61 3 9348 2794
Email: h.minas@unimelb.edu.au
www.cimh.unimelb.edu.au

Sexual Health Unit
Melbourne Sexual Health Centre
580 Swanston Street
Carlton, Vic 3053
Tel: +61 3 9341 6236
Fax: +61 3 9347 6757
Email: shu-gradinfo@unimelb.edu.au
www.mshc.org.au

The McCaughey Centre: VicHealth Centre
for the Promotion of Mental Health and
Community Wellbeing
Level 5, 207 Bouverie Street
University of Melbourne
Victoria 3010 Australia
Tel: +61 3 8344 9101
Fax: +61 3 9348 2832
Email: info-mccaughey@unimelb.edu.au
www.mccaugheycentre.unimelb.edu.au

Vaccine and Immunisation Research Group
Level 5, 207 Bouverie Street
University of Melbourne
Victoria 3010 Australia
Tel: +61 3 8344 9325
Fax: +61 3 9348 1827
Email: virgo-studies@unimelb.edu.au