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*a healthy australia*

# ROAD MAP II

A strategic framework for improving the health of  
Aboriginal and Torres Strait Islander people through research



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# Preface

The *NHMRC Road Map II: a Strategic Framework for Improving the Health of Aboriginal and Torres Strait Islander People through Research* (Road Map II) has been developed to respond to issues raised in the review of the *NHMRC Road Map: A Strategic Framework for Improving Aboriginal and Torres Strait Islander Health Through Research* (the Road Map).<sup>1</sup> The review found commitment to the Road Map principles, and to add weight to these principles, the need for an Action Plan and Communication Strategy for NHMRC activities in Aboriginal and Torres Strait Islander health. Full reports on review outcomes include:

- a report on workshop outcomes and a list of workshop participants
- a report on written submissions and issues raised
- a Final Consultation Report (includes the Terms of Reference for the review)
- a report on outcomes from NHMRC research funding in Aboriginal and Torres Strait Islander health research 2000-2007.

These reports are available from:

[http://www.nhmrc.gov.au/your\\_health/indigenous/index.htm](http://www.nhmrc.gov.au/your_health/indigenous/index.htm)

Road Map II contains seven action areas for research. The action areas are aimed at:

- increasing participation by Aboriginal and Torres Strait Islander researchers in NHMRC programs and in health and medical research generally
- promoting and linking NHMRC's activities in Aboriginal and Torres Strait Islander health with the activities of other stakeholders in Aboriginal and Torres Strait Islander health
- contributing to the Australian Government's *Close the Gap* health initiatives in Aboriginal and Torres Strait Islander health
- supporting researchers in biomedical, clinical, health services and public health research to work collaboratively
- supporting research endeavours that generate accessible and effective clinical and public health medicine in partnership with the Aboriginal community-controlled health sector.

Road Map II was endorsed by the NHMRC Council at its 180th Session on 9 December 2009.

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<sup>1</sup> For a summary of how the Road Map was developed and reviewed see Appendix A.  
For a summary of the issues raised in the consultation for the review, see Appendix B.



# Introduction

Road Map II will be used by the NHMRC's Research Committee to identify Aboriginal and Torres Strait Islander research topics requiring priority funding. Road Map II can be used by researchers to develop research proposals to apply for NHMRC funding under NHMRC Targeted Calls for Research in Aboriginal and Torres Strait Islander health, or in any biomedical, clinical, public or health services research field which includes Aboriginal and Torres Strait Islander population level health research.

Road Map II principles and Action Areas are consistent with the functions set out in the *National Health and Medical Research Council Act 1992*, which are:

- a) to inquire into, issue guidelines on, and advise government and the community on matters relating to:
  - the improvement of health
  - the prevention, diagnosis, and treatment of disease
  - the provision of health care
  - public health and medical research
  - ethical issues relating to health
- b) to advise and make recommendations to, the Commonwealth, the States and Territories on matters referred to in paragraph (a)
- c) to make recommendations to the Commonwealth on expenditure:
  - on public health research and training
  - on medical research and training
  - including recommendations on the application of the Medical Research Endowment account
- d) any function incidental to any of the foregoing.

## Road Map II – Research principles

There are significant disparities in health status between Aboriginal and Torres Strait Islander peoples and Australians generally, including lower birth weight, much higher occurrence of a range of illnesses, higher toxic loads that affect social and emotional well-being, higher death rates and lower life expectancy. Child and maternal health, including antenatal care, birth weight, access to preventive care for ear and eye diseases and oral health, are priority areas.

Statistics on the health of Aboriginal and Torres Strait Islander people show that trans-generational chronic illnesses related to poverty, inadequate nutrition and diabetes have increased.

Under the Road Map II research framework, effective research is research that breaks through the barriers to positive social participation caused by poverty and psychosocial stress. Therefore, the underlying principles for Road Map II research are:

- health being conceived of “... not just as the physical wellbeing of the body but a whole of life view, which embraces the life, death, life concept”
- Aboriginal and Torres Strait Islander community involvement in the development, conduct and communication of the research
- communication of research plans, progress and results to support effective capacity exchange
- ethical research aiming to be of practical value to Aboriginal and Torres Strait Islander people and their service providers
- research support including the enhanced development of skills, knowledge and capacity in the Aboriginal and Torres Strait Islander workforce
- a focus on identifying ‘positive models’ or examples of success.

To address health disparities, Road Map II research will be required to have an action-orientated purpose and/or be linked to the community-capacity building goals of existing primary health care service delivery agencies.



This means:

- research proposals need to support the employment of Aboriginal and Torres Strait Islander people
- community consultation needs to occur earlier in the research process
- funding applications need to outline demographic features of population groups to be researched, for example, are there more people in the population in need of care than there are carers, and if this impacts on the conduct of the research, why will the research be conducted in a particular way or over a particular timeline
- the existing commitments of Aboriginal or Torres Strait Islander people, whether they are to be involved in an active or advisory capacity need to be identified so that the ability of people to participate in research is clear.

These points have particular relevance to public and health services research that takes into account a wellness model, is cross-disciplinary, or is focussed on well-being.

Researchers are also required to include research translation activities in proposals. These may include:

- inter/multi or across sector partnerships aimed at linking Road Map II research priorities with policy objectives for national employment, education, housing and community infrastructure programs, in particular, health care agreement making processes
- meetings with research stakeholders
- data analysis activities aligned with *Close the Gap* initiatives
- targeted capacity exchange programs that support Aboriginal or Torres Strait Islander researchers to present research findings
- publication development activities for completed evaluations of health interventions in health service delivery settings.

# The Road Map and Road Map II – what's changed?

There are three differences between the Road Map and Road Map II:

- a change in the objective for the research framework
- a shift from research themes to research action areas
- the introduction of a triennial NHMRC Action Plan for Aboriginal and Torres Strait Islander health.

These differences are outlined below.

## ***Change in the objective for the research framework***

The change in the objective of the road maps is related to the second and third differences between the two frameworks.

The objective of the Road Map was to:

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*advise Aboriginal and Torres Strait Islander communities throughout Australia, on the achievement and maintenance of the highest practicable standards of individual and public health, and to foster research in the interests of improving those standards.<sup>2</sup>*

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The objective of Road Map II is to:

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*close the gap between the life expectancy of Aboriginal and Torres Strait Islander people and the overall Australian population.*

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The change in objective between the Road Map and Road Map II acknowledges advocacy from the Aboriginal and Torres Strait Islander community for a research endeavour that closes the gap in life expectancy by:

- partnering effectively with the Aboriginal and Torres Strait Islander community and national representative bodies
- maintaining guidelines for ethical conduct in Aboriginal and Torres Strait Islander health research
- implementing Road Map II Action Areas.

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<sup>2</sup> The NHMRC Road Map, page 3.

The new *Close the Gap* objective of Road Map II is underpinned by:

- broadening the basis for capacity exchange, including addressing community capacity by targeting research funding to long term intervention research supported by health literacy activities
- support for longer funding timeframes to support more effective interactions between intervention researchers and Aboriginal or Torres Strait Islander people.

### *A shift from research themes to research action areas*

Road Map II action areas have been developed in response to the Road Map review and targeted consultation over 2009 with peak national Aboriginal and Torres Strait Islander representative bodies.<sup>3</sup> The action areas are:

- improving the participation of Aboriginal and Torres Strait Islander people in NHMRC programs
- capacity exchange
- promotion of the NHMRC's role in Aboriginal and Torres Strait Islander health
- *Close the Gap*
- evaluation research
- intervention research
- priority-driven research.

These Action Areas will be implemented through:

- regular consultation and negotiations with stakeholders
- a triennial action plan for NHMRC activities in Aboriginal and Torres Strait Islander health supported in NHMRC's triennial Strategic Plan
- advice from the NHMRC's Aboriginal and Torres Strait Islander Health Advisory Committee.

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<sup>3</sup> Peak national Aboriginal and Torres Strait Islander representative bodies and Aboriginal research organisations consulted were:

National Aboriginal Community Controlled Health Organisation, Australian Indigenous Doctors' Association, National Indigenous Health Equality Council, Australian Institute of Aboriginal and Torres Strait Islander Studies, National Indigenous Drug and Alcohol Committee, National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data and the Co-operative Research Centre for Aboriginal Health. Representatives from mainland Torres Strait Islander organisations attended the review workshop held at the Townsville campus of James Cook University.

The goals of each Action Area are inter-related.

The objectives for each Action Area will be supported by:

- peer review by an Aboriginal and Torres Strait Islander Grant Review Panel
- focus on the development phases of grants and measures for assessing the local impact of research
- partnerships with communities
- a greater emphasis on interventions in community-driven research
- a greater focus on social factors that impact on health status
- support for research transfer processes that involve community representatives and health services
- reasonable reporting requirements.

### ***The introduction of a triennial NHMRC Action Plan for Aboriginal and Torres Strait Islander health***

Road Map II is the NHMRC's framework for conducting health and research activities in Aboriginal and Torres Strait Islander health and for guiding research in Aboriginal and Torres Strait Islander health. Road Map II will be supported for two triennia by a 2009-2012 Action Plan and a 2012-2015 Action Plan. The objectives and activities for each Action Area will be replicated in the NHMRC's Strategic Plan for each triennium.

Triennial Action Plans for Road Map II are documents in their own right and include research evaluation and monitoring activities.

Implementation of Road Map II Action Areas outlined below, is supported by the *National Statement on Ethical Conduct in Human Research*, the *Australian Code for the Responsible Conduct of Research, Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research*; and *Keeping Research on Track: a Guide for Aboriginal and Torres Strait Islander Peoples about Health Research Ethics*.



## Road Map II Action Areas

### ACTION AREA I

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#### Improving the participation of Aboriginal and Torres Strait Islander people in NHMRC programs

Action Area 1 targets the recruitment, participation and retention of Aboriginal and Torres Strait Islander people in research across biomedical, clinical, public health or health services research in Aboriginal and Torres Strait Islander health.

In 2009-2012, the NHMRC will:

- achieve gains in Aboriginal and Torres Strait Islander health by investing 5% of Research Funding in Aboriginal and Torres Strait Islander health
- increase participation by Aboriginal or Torres Strait Islander researchers in NHMRC People Support schemes across biomedical, clinical, public health and health services research
- foster international research collaborations
- develop effective external stakeholder relationships and increase engagement in NHMRC by Aboriginal and Torres Strait Islander health researchers
- contribute to health reform in Aboriginal and Torres Strait Islander health care
- support *Values and Ethics: a Guide to the Ethical Conduct of Research in Aboriginal or Torres Strait Islander Communities*.

The aim of Action Area 1 is to maintain involvement in health and medical research at the highest level, support mid-career researchers and establish career paths for beginning researchers. These aims will be achieved by an Aboriginal and Torres Strait Islander Grant Review Panel for peer review.

A high priority will be given to research that involves Aboriginal and Torres Strait Islander researchers or clinicians in:

- evaluating models of care
- partnerships that implement community-defined research needs and methodologies

- research translation activities such as design of health promotion messages, particularly information about genetics, cardiovascular disease, kidney disease and diabetes
- advisory roles for making new knowledge available to Aboriginal people in a culturally safe and meaningful way
- the management or development of health and medical research evidence, including linking with international Indigenous health research.

## ACTION AREA 2

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### Capacity exchange

The objectives for capacity exchange are to:

- establish research relationships which value Indigenous knowledge
- give priority to research on chronic disease in Aboriginal and Torres Strait Islander communities
- identify and support graduates in medicine undertaking research in biomedical disciplines.

To support capacity exchange, peer review in *Close the Gap* research, evaluation research, intervention research and priority-driven research will include an assessment of the potential return to a community a research project may generate. Potential return to a community can include, for example, more effective or enhanced service delivery and/or return to individuals in terms of participation, employment or skilling of Aboriginal and Torres Strait Islander people.

The NHMRC will support capacity exchange activities in *Close the Gap* research, evaluation research, intervention research and priority-driven research, that demonstrate all or any of the following:

- sustainability of interventions
- long term intervention research supported by health literacy activities
- employment/training opportunities for Aboriginal and Torres Strait Islander researchers
- social determinants of health research with a focus on filling in more of the picture for *Close the Gap* objectives across the spectrum of health status indicators
- international study exchanges as part of People Support in Aboriginal and Torres Strait Islander health research.

It is envisaged that to be successful, applications for program grants in Aboriginal and Torres Strait Islander health would need to support objectives for Action Area 1 and Action Area 2.

### ACTION AREA 3

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## Promotion of the NHMRC's role in Aboriginal and Torres Strait Islander health

The objectives for this action area are to:

- grow research partnerships and collaborations with Aboriginal and Torres Strait Islander communities
- design and implement a communication strategy for Road Map II – including podcasts, showcasing of research and evidence transfer activities.

NHMRC will also publish a “10 of the Best” in Aboriginal and Torres Strait Islander health research to promote excellence in the discipline.

### ACTION AREA 4

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## *Close the Gap*

NHMRC's role in *Close the Gap* includes investing in capacity exchange activities across the spectrum of research activities.

NHMRC priorities for *Close the Gap* research are:

- research collaborations with researchers in public health and health services research
- research collaborations which support the conduct of research in Aboriginal and Torres Strait Islander languages
- research collaborations (with a national network) between Aboriginal and Torres Strait Islander health services (Aboriginal Medical Services) and Government health programs to support practitioners to apply evidence (across all levels of evidence) in health care practice
- interventions that have a research component, for example, community-based care regimes for Diabetes Mellitus, Otitis Media, Trachoma, improving trust of the health system or maintaining nutrition, recovery from trauma or disease

- health care services research including predictive studies
- NHMRC will also support the development of best practice (non-clinical) guidelines in areas of importance to the delivery of health care to Aboriginal or Torres Strait Islander people i.e. workforce, governance, community engagement, service models, transferability/sustainability of programs.

Objectives for *Close the Gap* research are to:

- promote knowledge transfer from community level health providers to service planning or development agencies
- identify the health infrastructure requirements of Aboriginal and Torres Strait Islander communities
- promote understanding of the gap and the factors that cause higher mortality and morbidity
- research transfer
- research partnerships in evaluation, intervention and priority-driven research
- maintaining an evidence base on the geographical distribution of disease relative to health care access.

## ACTION AREA 5

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### Evaluation research

Priorities for Action Area 5 will be identified by the Aboriginal and Torres Strait Islander Health Advisory Committee and considered for funding by the NHMRC's Research Committee. The aim is to support evaluation research that enables health policy decision-makers to anticipate with greater sensitivity the health needs of Aboriginal and Torres Strait Islander populations, and to support Aboriginal and Torres Strait Islander advocates in their endeavours to share responsibility for health with the mainstream of the Australian health system.

A high priority will be given to research that identifies the social determinants of health that impact on access to treatments, including in the areas of:

- chronic illness – including prevention, cure, care and treatment and self-management regimes
- evaluations of major causes and risk factors implicated in chronic conditions, injury, social and emotional well-being



- health literacy research that identifies the best ways of explaining disease patterns and possible treatment options to Aboriginal or Torres Strait Islander people
- research to improve understanding of the factors that affect secondary and tertiary health care access
- factors that impact on access to treatment in urban areas
- meta-analyses of local studies that can be used at the national level.

## ACTION AREA 6

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### Intervention research

The objective of this action area is to apply evidence from research in health care.

An example of 'intervention research' would be a comprehensive strategy for alcohol harm reduction sensitive to local community infrastructure issues, and which includes a long term strategy for observing the effects or impacts of interventions.

Intervention research will ideally combine social health and clinical health research.

As with Action Area 5 – evaluation research, priorities for research will be identified by the Aboriginal and Torres Strait Islander Health Advisory Committee and considered for funding by the NHMRC's Research Committee.

## ACTION AREA 7

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### Priority-driven research

The objective of priority-driven research is to work with Aboriginal and Torres Strait Islander communities, peak representative bodies and the Government sector to form research partnerships that will contribute to *Close the Gap*.

The NHMRC Research Committee allocates funding from the Medical Research Endowment Account for Targeted Calls for Research in any of the major health issues identified in the NHMRC Strategic Plan. A range of

intervention, evaluation or priority-driven activities will be supported in Aboriginal and Torres Strait Islander health research. These may include:

- development of national, State or Territory health training programs for Aboriginal Health workers in any national health priority
- interventions for eligible Aboriginal and Torres Strait Islander patients
- tools for nationally managed prevention or management programs of national health issues in Aboriginal or Torres Strait Islander health
- funding base projections for the maintenance of effective interventions in Aboriginal and Torres Strait Islander health programs.

Applicants for priority-driven research may be required to demonstrate that their research is of value to service providers.

Peer review of research funding applications will include:

- the potential of the research evidence to make a difference to Aboriginal and Torres Strait Islander health, as defined by Aboriginal and Torres Strait Islander people
- the potential for the research to lead to capacity exchange and research evidence transfer
- ensuring that the research has a methodology which will lead to a positive experience from research.



# Appendix A

## Development and review of the Road Map

### Development

The Road Map was developed by the Aboriginal and Torres Strait Islander Health Research Agenda Working Group throughout the 2000-02 triennium and endorsed by the NHMRC Council in October 2002.

The consultation to develop the Road Map highlighted the areas where priority research needed to be developed as a matter of urgency and the ethical issues that needed to be addressed in the development and conduct of research involving Aboriginal or Torres Strait Islander peoples.

The research priorities adopted in the Road Map arose from advocacy from Aboriginal communities for research in the primary health care environment in which much of Aboriginal and Torres Strait Islander health care takes place; partnerships with Aboriginal health advisory bodies; compliance with NHMRC *Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research* as a condition of research funding; and consultation and community involvement in research.<sup>4</sup> *The Road Map also emphasised the need for effective project methodologies and the implementation of research outcomes at the local level, highlighting capacity building in the context of both field research and evidence transfer, and the quality of the relationship between the researcher and the subject/s of research.*

In implementing the Road Map, the NHMRC aimed to develop research programs in Aboriginal and Torres Strait Islander health in consultation with and input from key research funders within and outside the NHMRC; and to develop strategic partnerships that linked service providers, researchers and policy makers.

Key objectives were increasing capacity for training and mentoring opportunities of Aboriginal and Torres Strait Islander researchers; a project assessment process that led to positive experiences of research by Aboriginal and Torres Strait Islander communities; implementation of standards for ethical research; and co-operative funding agreements.

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<sup>4</sup> See National Aboriginal Health Strategy 1989, Royal Commission Into Aboriginal Deaths In Custody Recommendations 268 and 269, and House of Representatives Standing Committee on Aboriginal and Torres Strait Islander report, *Health is Life*, 2002.

## Review

The impact of the Road Map was reviewed over 2007-08 by the NHMRC's Aboriginal and Torres Strait Islander Health and Research Advisory Committee. Measures of impact included:

- the number of Aboriginal and Torres Strait Islander peoples who are research scholarship holders, research technicians and service interns
- increase in the number of priority and researcher-driven projects funded by the NHMRC that have the capacity to contribute to meaningful health gain for Aboriginal and Torres Strait Islander peoples
- improved mechanisms within the NHMRC for monitoring and evaluating Aboriginal and Torres Strait Islander health research activities and support
- the number of communities that report positive outcomes as a result of their involvement in research
- the growth and strengthening of Aboriginal and Torres Strait Islander research networks, especially those involved in health research
- the number of organisations that have endorsed and adopted the Road Map principles and priorities.

# Appendix B

## Issues raised in review workshops

### The impact of the Road Map as a framework

Across workshops participants agreed that the Road Map framework has been symbolically important and has improved understanding of Aboriginal or Torres Strait Islander health research as a discipline with its own unique systems of knowledge.

The Road Map has helped researchers develop grant proposals that include ethical principles for conducting research with Aboriginal or Torres Strait Islander communities and which cover the priorities for research identified in the Road Map. The framework has been used in tertiary education teaching contexts, in particular to assist post graduate students plan research goals, has been a useful reference document for researchers developing grant proposals in Aboriginal or Torres Strait Islander health or medical research, and the principles and priorities have been utilised by research organisations in direction-setting processes and publications. In these contexts, the Road Map has improved understanding of the relationships that can be developed from linking research processes with community planning processes, and improved research practice as a result of its links with *Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research*; and *Keeping Research on Track: A guide for Aboriginal and Torres Strait Islander peoples about health research ethics*.

Participants also agreed across workshops that:

- capacity building activities had had the greatest impact on increasing the participation of Aboriginal and Torres Strait Islander people in health research
- university curricula has a major impact on access by Aboriginal or Torres Strait Islander graduates to biomedical and health research
- more targeted career development opportunities for Aboriginal or Torres Strait Islander students and organisations are needed
- the Aboriginal community-controlled health sector needs to have more input to the setting of research priorities
- research needs to reflect priorities on the ground

- research evidence needs to shape health and health service delivery policy; research into the social determinants of health is needed
- capacity building in Aboriginal or Torres Strait Islander health research needs to be continued.

Summary points made across workshops were that:

1. The Road Map needs to be action orientated.
2. The Road Map needs a communication strategy.
3. Capacity building career development opportunities need to be maintained and include pathways into research fields for post-graduates.

A list of people who participated in review workshops or provided a written submission are at Appendix D.

## Appendix C

### Aboriginal and Torres Strait Islander Health and Research Advisory Committee (ATSIHRAC)

#### Terms of reference

- Improve coordination and integration of NHMRC's activities relating to Aboriginal and Torres Strait Islander health and research.
- Identify and advise on emerging issues, risks and gaps in Aboriginal and Torres Strait Islander health for consideration by the CEO and monitoring the implementation of NHMRC's Aboriginal and Torres Strait Islander health strategies.
- Providing advice on the NHMRC's contribution to the development of national and international strategies for improving Aboriginal and Torres Strait Islander health and building capabilities.
- Evaluating the implementation of the *NHMRC Road Map: A Strategic Framework for Improving Aboriginal and Torres Strait Islander Health through Research*.
- Supporting the development of effective internal and external stakeholder relationships and increasing community involvement in the NHMRC's Aboriginal and Torres Strait Islander health agenda, thereby promoting the activities and achievements of the NHMRC in Aboriginal and Torres Strait Islander health.
- Providing advice to the CEO on the commitment to spend at least 5% of the Medical Research Endowment Account on Aboriginal and Torres Strait Islander health research and ensure that outcomes of funded research are evaluated and monitored.
- Supporting the implementation of *Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research*; *Keeping Research on Track: a guide for Aboriginal and Torres Strait Islander peoples about health research ethics*; *National Statement on Ethical Conduct in Human Research* and the *Australian Code for the Responsible Conduct of Research* in relation to Aboriginal and Torres Strait Islander health research.





# Appendix D

## Road Map Review participants

### Written submissions

Aboriginal Health and Medical Research Council (NSW)

Australian Indigenous Health *Infonet*

beyondblue

Cooperative Research Centre for Aboriginal Health (CRCAH)

Dieticians Association of Australia

National Aboriginal and Torres Strait Islander Nutrition Strategy and Action Plan (NATSINAP) Steering Committee

National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data (NAGATSIHID)

Office of Aboriginal and Torres Strait Islander Health (OATSIH)

University of Western Australia

### Workshop participants

#### Sydney

Rachelle Arkles – University of New South Wales; Mura Marri Indigenous Health Unit

Professor Tony Broe – University of New South Wales

Michael Brogran – University of New England

Professor Yvonne Cadet-James – ATSIHRAC

Associate Professor Alan Cass – The George Institute for International Health

Steve Cochrane – Many Rivers Diabetes Project

Troy Combo – University of New South Wales

Professor Sandra Eades – The SAX Institute of New South Wales

Samantha Faulkner – Indigenous Health Research Panel

Sally Fitzpatrick – UNSW Muru Marri Indigenous Health Unit

Dr Graham Henderson – Australian Institute for Aboriginal and Torres Strait Islander Studies

## **Sydney** *(cont.)*

Dr Geetha Isaac-Toua – Office for Aboriginal and Torres Strait Islander Health

Associate Professor Lisa Jackson-Pulver – ATSIHRAC

Matthew James – Department of Family, Community Services and Indigenous Affairs

Dr Elizabeth Kaziro – University of New South Wales

Chris Lawrence – The George Institute for International Health

Ray Mahoney – Victorian Aboriginal Community Controlled Organisation

Daniel McAullay – ATSIHRAC

Dennis McDermott – University of New South Wales

Cathy Mitchell – NHMRC

Professor Kerin O’Dea – NHMRC Research Committee

Professor Mary Osborne – Royal Australasian College of Physicians

Sharon Pech – National Centre for Aboriginal and Torres Strait Islander Statistics

Felicia Fletcher – NHMRC

Vicki Raynes – NHMRC

Honorary Professor Sally Redman – The SAX Institute of New South Wales

Professor Robyn Richmond – University of New South Wales

Matthew Sammels – NHMRC

Professor Cindy Shannon – ATSIHRAC Chair and Member NHMRC Council

Professor Peter Smith – UNSW

Professor Ronald Trent – NHMRC Research Committee

Carol Vale – Department of Education and Training, NSW

James Ward – University of New South Wales

Professor Jeanette Ward – Royal College of Surgeons

## **Melbourne**

Professor Cindy Shannon – ATSIHRAC Chair and Member NHMRC Council

Lisa Allwell – beyondblue

Professor Ian Anderson – ATSIHRAC

Professor Judy Atkinson – Southern Cross University

Lang Baulch – Department of Human Services, Victoria

Professor Yvonne Cadet-James – ATSIHRAC

**Melbourne** (*cont.*)

Sallyann Ducker – Department of Health and Ageing – (Cth)

Samantha Fernandes – Royal Australian College of General Practitioners

Felicia Fletcher – NHMRC

Frances Green – Australian Institute of Health and Welfare

Jane Goller – Burnet Institute

Bree Heffernan – Department of Human Services, Victoria

Dr Lisa Jamieson – The University of Adelaide

Steve Larkin – Australian Institute of Aboriginal and Torres Strait  
Islander Studies

Dr Christine Latif – Heart Foundation

Dr Alex Maroya – Universities Australia

Brian McCoy – LaTrobe University

Jeff McKenzie – NHMRC

Timothy Moore – Victorian Aboriginal Community Controlled  
Health Organisation

Vicki Raynes – NHMRC

Leila Smith – Australian Institute of Health and Welfare

Rebecca Winter – Burnett Institute

**Alice Springs**

Lenny Aronsten – Ngaanyatjarra Health Service

Jenny Brands – Co-operative Research Centre for Aboriginal Health

Dr Ngiare Brown – ATSIHRAC and Indigenous Health Research Panel

David Campbell – Centre for Remote Health/Desert Knowledge CRC

Angela Dufek – Port Lincoln Aboriginal Health Service

Associate Professor Terry Dunbar – Australian Health Ethics Committee  
and ATSIHRAC

Gabby Falls – Menzies School of Health Research

Dr Peter Foster – Charles Darwin University

Professor Shane Houston – Department of Health and Community Services,  
Northern Territory

Associate Professor Lisa Jackson-Pulver – ATSIHRAC

Mr Peter Kay – Department of Families and Communities, Northern Territory

## **Alice Springs** *(cont.)*

Tahniah Edwards – Flinders University

Felicia Fletcher – NHMRC

Dean Miller – Port Lincoln Aboriginal Health Service

Cathy Mitchell – NHMRC

Irene Ogilvie – Department of Families and Communities, Northern Territory

Alice Rumbold – Menzies School of Health Research

Dr Jan Schmitzer – Batchelor Institute of Indigenous Tertiary Education

Harry Sing – Department of Health and Community Services,  
Northern Territory

Professor Peter Stephenson – Batchelor Institute of Indigenous  
Tertiary Education

Margaret Vincent – Institute for Aboriginal Development

## **Perth**

Jason Barrow – Telethon Institute for Child Health Research

Nicole Bennet – Office for Aboriginal and Torres Strait Islander Health (WA)

Dann Bessarab – Curtin University

Associate Professor Tony Butler – Curtin University

Professor Yvonne Cadet-James – ATSIHRAC

Heather D'Antione – University of Western Australia

Cheryl Davis – Curtin University

Michael Doyle – Curtin University

Associate Professor Terry Dunbar – Member of Australian Health Ethics  
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Peta Gooda – University of Western Australia

Professor Dennis Gray – Curtin University

Dr Cheryl Kickett-Tucker – University of Western Australia

Ann Larson – University of Western Australia

Professor Deborah Lehmann – Telethon Institute for Child Health Research

Avril Lowenhoff – Office of Aboriginal Health, Western Australia

Ms Lynette Mallard – Curtin University

Dr Tamara Mackean – University of Western Australia

Professor Rhonda Marriott – Murdoch University

**Perth** (*cont.*)

Felicia Fletcher – NHMRC

Anne McKenzie – Telethon Institute for Child Health Research

Dr Clive Morris – NHMRC

Professor Gary Partington – Edith Cowan University

Glenn Pearson – University of Western Australia

Sherry Siggers – Curtin University

Professor Cindy Shannon – Chair of ATSIHRAC and Member  
NHMRC Council

Carrington Shepherd – University of Western Australia

Marita Smith – University of Western Australia

Professor Fiona Stanley – Telethon Institute for Child Health Research

Jessica Stewart – Sax Institute

Neil Thomson – Edith Cowan University

Sandra Thompson – Curtin University

Val Ulrich – Alcohol and Other Drugs Council

Clive Walley – Curtin University of Technology

Associate Professor Ted Wilkes – Curtin University

**Townsville**

Associate Professor Yvonne Cadet-James – ATSIHRAC

Ms Jenny Darr – Wuchopperen Health Service

Ms Audrey Deemal – Queensland Aboriginal and Islander Health Council

Associate Professor Jacinta Elston – Member of Research Committee  
and ATSIHRAC

Wendy Fahy – NHMRC

Felicia Fletcher – NHMRC

Gail Garvey – Queensland Institute for Medical Research

Jenine Godwin – James Cook University

Alisa Hall – Health and Community Services Workforce Council Incorporated

Adrian Hepi – James Cook University

Dr Jenni Judd – James Cook University

Traven Lea – Heart Foundation

Adrian Miller – James Cook University

Frank Mills – Department of Health, Queensland

**Townsville** *(cont.)*

Cathy Mitchell – NHMRC

Don Palmer – Jimmy Little Foundation

Professor Cindy Shannon – ATSIHRAC Chair and Member NHMRC Council

Gail Watson – Mulungu Medical Centre

Lauri West – James Cook University

Roianne West – James Cook University

Dallas Young – Wuchopperen Health Service

# Notes

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