SPHCM SUMMARY  
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Welcome from the Head of School  

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Health Economics and Financing for Developing Countries  
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Primary Health Care  
Indigenous Health  
Social Research  
Football United – a flagship program in sport for development and social change  
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SPHCM PUBLICATIONS 2013-2014  

OUR PEOPLE  
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SPHCM People  

OUR STUDENTS  

Compiled by School of Public Health and Community Medicine  
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In the spirit of deep respect, the School of Public Health and Community Medicine (SPHCM) and UNSW Australia acknowledge Aboriginal peoples as being the original owners of the land upon which much of our work occurs. Aboriginal and Torres Strait Islander peoples have inhabited Australia for well over 50,000 years and their unique cultures and identities are bound up with the land, sea and kinship connections. Australia is the only place in the world where Indigenous Australians belong, and there is no place in Australia where this is not true.

SPHCM and UNSW Australia recognise the unique position of Aboriginal and Torres Strait Islander peoples in Australia’s history and contemporary culture. SPHCM seeks to understand and observe Aboriginal and Torres Strait Islander cultural protocols and incorporate the knowledge of Indigenous peoples into the activities of the school. The years 2013 and 2014 saw growth in SPHCM’s student numbers, research and service related to Aboriginal health and community wellbeing, often emphasising the contributions Indigenous Australians make to enhancing our understanding of public health, including holistic health care, community development and environmental protection.
Welcome to SPHCM!

We are a leader in academic excellence, global impact and social engagement. We have the oldest and largest Health Management program in Australia, and one of the largest public health and international public health programs. Public health and community medicine are different but related disciplines, which have key elements in common that bring us together as a School. These include a concern beyond the individual, an interest in the societal context in which health care is provided, strengthening of health systems, health leadership and a commitment to equity and social justice. Public health is a powerful tool with which we can bring some equality into an unequal world. For example, vaccination programs protect the entire community, even those who are unvaccinated through herd immunity effects, regardless of socioeconomic status. Where there is poverty, inequity and suffering, public health can make a difference, and Australia has a very strong tradition and culture of public health and programs for the public good. In health management, we seek to achieve health system strengthening, translation of evidence into policy and practice, and leadership skills in health management, building on our long track record and reputation in training health managers in Australia and our region. Our programs are closely linked to our research, and we strive to be relevant to practice and policy. We are aligned with the UNSW 10 year strategy to 2025 in academic excellence, global impact and social engagement. In 2016 the PLuS Alliance was launched, for a truly global education experience with UNSW, Arizona State University and Kings College London. SPHCM is offering the first programs in the PLuS Alliance.

Personalised, flexible delivery

We understand that students have different needs. Some prefer to be on campus and have a face-to-face experience, while others are working full time or have otherwise busy lives and prefer online learning. We pride ourselves in excellence in all modes of delivery. We are leaders in online education, having delivered our programs online for nearly a decade. We offer students the choice of doing their postgraduate coursework degree fully online, fully face-to-face or in blended mode, in whatever mix of modes best suits their lifestyle and needs. Our approach to online learning is innovative, interactive and engaging, using the Moodle platform and many other add-ons to enhance your learning experience. Our dedicated team of instructional designers and educational design experts work with academics to ensure the highest quality of our courses and that our online students get
an equivalent learning experience to face-to-face students.

Work-ready@UNSW
At SPHCM, our teaching and training is designed to be applied, practical and relevant to the workforce. We believe that academic learning should be relevant to the workplace, and to enhance these links, we offer internships for our coursework masters programs.

We offer a range of domestic and international internship placements in Australia, Asia and the Pacific. We also have the elite UNSW Future Health Leaders Program, a work-place based program leading to a professional doctorate. We are the first choice of employers who want work-ready graduates. We offer a suite of courses in public health, international public health and health management. We offer dual degree and extension options which are in high demand. Students interested in health management can also do a dual degree and receive our MHM with a MBA from SRM university in India. Our graduate Summer School in public health and health management can be taken by coursework students, but also as stand-alone courses for professional up-skilling. We provide flexible learning opportunities with face-to-face and distance education options, as well as a mix of short courses and semester long courses.

We also have a major role in teaching within the UNSW Medicine Program. UNSW SPHCM is also a founding member of the ARM network, and a member of the WHO Global Outbreak Response Network. Our other links with WHO include running a WHO course on managing communicable diseases during humanitarian emergencies.

Career choices in public health
These are Aboriginal Health and Wellbeing, Infectious Diseases Epidemiology and Control, Health Promotion, Primary Health Care, International Health, Health Economic Evaluation, Quantitative Research Methods, Public Security and Social Research. UNSW specialist MPH degrees are taught by leading research experts in the field, with the additional benefit of interaction within an active research environment. For those interested in a career in international health, we offer a Master of International Public Health, now one of our most sought after programs. We also have the Infectious Diseases Intelligence program, for people interested in developing advanced skills in infectious diseases epidemiology and outbreak analysis. You can choose from a graduate certificate, diploma or masters in Infectious Diseases Intelligence, available fully online or face to face to suit your needs.

Health leadership and management
We also have the oldest, and one of the most respected health management program in Australia, which has produced many health leaders and managers across Australia and the world. Academics within SPHCM are experts in consumer engagement, teamwork, innovative approaches to workplace change including practice development, workplace learning and development, human resource management, health economics and the quality and safety of care. We are therefore ideally placed to meet the needs of Australian and international health managers faced with complex, ever changing environments for the delivery of effective health services. Our alumni network occupy senior leadership positions nationally and internationally. In 2016 we will celebrate the 60th anniversary of the UNSW Health Management program.

Research
Our largest areas of research strength are in infectious diseases, global health, primary health care, epidemiology, social research and health systems leadership & management. We have expertise in many other areas. Some of the other highlights in our school include the Football United program and our strength in health promotion. For research students, we have a wide range of research courses and projects. We are very strong in both quantitative and qualitative research methodologies, with a mix of social scientists, qualitative researchers, clinical researchers, epidemiologists and mathematical modellers at SPHCM. We have a strong track record in attracting research funding from NHMRC, ARC and other agencies, with a NHMRC Centre for Research Excellence in Population Health. We have several NHMRC funded research fellows within SPHCM conducting a range of exciting research programs.

A community of practice
Academia is not an ivory tower, but should be deeply connected and relevant to the world we live in and to sustainable futures. We believe advocacy, engagement and impact matter. At SPHCM we get involved when it matters. For example, we convened a national symposium on the health and human rights of asylum seekers at a time when this issue was highly
topical and controversial. During the 2014 Ebola epidemic, students and staff came together to form the UNSW Alliance Against Ebola, which not only raised funds for the West African response to Ebola, but also provided a focal point for students and staff to unite, support each other and mobilise. During the 2015 Nepal Earthquake, again students and staff came together for a day of action to raise funds for the earthquake relief efforts. Other staff and students have been involved in climate change and environmental health advocacy, and in many other areas of importance.

This is the school to be at if you have a genuine passion for the health of populations, if you care about the inequities in health in our world, if you seek to improve and strengthen health systems, and if you want to make a difference. The people in this school are unified by a common belief in the power of education and research to bring about change in health systems and population wellbeing. We embrace our important role in mentoring and shaping the future leaders in the field. Browse these pages and learn about the breadth and depth of our teaching and research, and I hope we can welcome you into the UNSW School of Public Health and Community Medicine.

Professor Raina MacIntyre
Head, School of Public Health and Community Medicine

Research Profile

Raina MacIntyre is an international expert in infectious diseases epidemiology, and involved in numerous vaccinology and respiratory pathogen research studies. Her most significant research is on the transmission and control of infectious diseases, particularly those spread by the respiratory route. Her research encompasses clinical trials, epidemiology and modeling of face masks, vaccines and other preventive measures in communicable diseases control. She has also done research on using risk-analysis methods for analysing emerging infectious diseases outbreaks such as MERS-CoV. She does research in special risk populations such as health care workers, immunosuppressed, refugees and the frail elderly. She has led a NHMRC Capacity Building Grant in Population Health in mathematical modeling of infectious diseases from 2005-2010, and leads two NHMRC Centres for Research Excellence – one in immunization and one in Epidemic Response from 2016-2020. She has a significant track record in ARC and NHMRC grants, leading five such grants in her 7 years as Head of School.

Her research is underpinned by extensive field outbreak investigation experience. She is a graduate of the only Australian Field Epidemiology Training program, the MAE at ANU, and has extensive experience in shoe-leather epidemiology of infectious diseases outbreaks including influenza, meningococcal disease, clostridium perfringens, hepatitis A, legionella, mycoplasma, pertussis and gastroenteritis to name a few. Her in-depth understanding of the science of outbreak investigation draws from this experience combined with her academic training through a Masters and PhD in Epidemiology. Her passion for field epidemiology led her to co-found the ARM network for Australian outbreak response. She also has an interest in the ethics of medicine, and specifically in dual-use research of concern and the risk of bioterrorism.

Among numerous career awards, she received the Sir Henry Wellcome Medal and Prize, from the US military in 2007 for her work on bioterrorism, and has previously been awarded the Frank Fenner Award in Infectious Diseases (2003). In 2012 she won the Dean’s Award, the highest honour awarded at UNSW Medicine, for outstanding contributions to the Faculty. She was the 2014 winner of the Public Health Association of Australia National Immunisation Achievement Award, which is the peak national award in the field of vaccinology. She also won the Peter Baume Public Health Impact award in 2014 for her research in infectious diseases.

She is the Director of the UNSW Future Health Leaders program, which she conceived and initiated. She also conceived and began the idea of internships within the MPH/MIPH/MHM, underpinned by her belief in the importance of linking academia to health practice. She has overseen transformational change and continual growth in academic programs and research at SPHCM during her tenure as Head of School.
Research is a fundamental part of the work of the School of Public Health and Community Medicine, addressing a number of key local, national and global public health issues. SPHCM has a vibrant, thriving research culture and a pipeline for research development from research students to post-doctoral researchers and senior research leaders, which makes it one of the leading research schools in Australia.

Our largest areas of research strength, underpinned by large research groups, are in our flagship areas. We have a Master of Public Health specialisation in each of the public health research areas, which attract students who have a desire to learn within a strong research environment and be taught by research leaders. SPHCM is very strong in both quantitative and qualitative research methodologies across our flagship areas – and a range of other areas.

Our academic staff profile includes a mix of social scientists, qualitative researchers, clinical researchers, epidemiologists and mathematical modellers. This core is supplemented by more than 180 conjoint staff who bring experience from their external roles to contribute to the School’s research profile.

The School has six flagship research areas, each of which has dedicated staff and students:

- Infectious Diseases
- Global Health
- Primary Health Care
- Indigenous Health
- Social Research
- Health Systems Leadership and Management
The School has a large critical mass of multidisciplinary expertise in epidemiology, mathematical modelling, health economic modelling, special risk populations, social research and clinical research in infectious diseases. The multidisciplinary nature of our research also facilitates the translation of research outcomes into policy and practice. Infectious disease research within the School is undertaken with national and international partners including collaboration with government, industry, other universities and community groups. We run infectious diseases journal clubs on a regular basis and have linked our research to our MPH specialization stream in Infectious Diseases Epidemiology and Control to integrate teaching and research. A new Master of Infectious Diseases Intelligence was started in 2015 which will be offered in the PluS Alliance from 2016. We are also leaders in advocacy and public health action, with many academics on expert advisory groups nationally and internationally. In 2014, students and staff came together over the Ebola crisis to form the UNSW Alliance Against Ebola, which raised funds for the Ebola response. SPHCM also ran the ARM Ebola Infection Control national training workshop in October 2014.

Clinical research

Prof Raina MacIntyre, Prof Mary-Louise McLaws, Dr Holly Seale, Dr Anita Heywood

We conduct investigator designed and driven clinical research on interventions to control infectious diseases in Australia and overseas. Many of our clinical studies are in the area of vaccines and respiratory pathogens, and on the prevention and transmission dynamics of these pathogens. We also conduct observational epidemiologic studies in the clinical setting such as case control and cohort studies. We have a large program of research including the use of face masks in the community and in health care workers, the relationship of infections to ischaemic vascular disease and adult vaccine research, including studies in vulnerable populations such as immunosuppressed and the frail elderly. We have successfully obtained funding from key research funding bodies, such as the National Health and Medical Research Council (NHMRC) and the Australian Research Council (ARC) to conduct these studies. Specific disease areas include Influenza, HPV, TB, pneumococcal disease and other respiratory pathogens. Our research sites include Australia, India, China and Vietnam. Prof MacIntyre leads a NHMRC Centre for Research Excellence which also conducts clinical studies in vaccination of special risk groups.

Key publications in this period include:


Epidemiology and data linkage

A/Prof Bette Liu, A/Prof Anthony Newall, Dr Heather Gidding, Dr Anita Heywood, Prof Raina MacIntyre, Prof Mary-Lou McLaws, A/Prof Glenda Lawrence, Dr Alex Rosewell

Infectious disease epidemiological research in the School aims to provide evidence for policy development and evaluation of disease control programs. We conduct research in the areas of infectious disease epidemiology (patterns of infectious diseases in the community) and the impact of disease prevention and control measures, such as immunisation, on the burden of disease. Primary sources of epidemiological data include routinely collected disease notification, hospitalisation and death records. Analysing linked records for people across multiple data sources brings together a wealth of information about each person and improves estimates of the burden and determinants of infectious diseases. Observational methods are also used to study the epidemiology of infectious diseases and the impact of control methods. Key publications in this period include:


Healthcare-associated infection epidemiology, prevention and control

Prof Mary-Louise McLaws, Prof Raina MacIntyre, Dr Holly Seale

Our research aims to reduce the risk of acquiring and transmitting infections in healthcare facilities, in both patients and healthcare workers. Our patient safety improvement research focuses on patients and healthcare workers in healthcare facility settings. We research changes in clinical practices to reduce the risk of transmission of healthcare-associated infections and improve healthcare worker’s knowledge, attitude and beliefs associated with infection control practices.

Current collaborations include the Clinical Excellence Commission, the World Health Organization, First Global Patient Safety Challenge, The Beijing Center for Disease Prevention and Control, Beijing, China, Imperial College and the London School of Hygiene and Tropical Medicine. Other patient safety collaborators include the Australian Group for Antimicrobial Resistance to statistical modelling of the resistant Staphylococcus aureus infection, Sigma Sustainability Institute using cybernetics to map and predict the transmission of infection within intensive care patients. Our World Health Organization First Global Patient Safety Challenge collaboration is examining the relationship between hand hygiene and infection rates in six test sites globally. Key publications in this period include:


Immunisation

Prof Raina MacIntyre, A/Prof Bette Liu, Dr Anthony Newall, Dr James Wood, Dr Heather Gidding, Dr Anita Heywood, Dr Holly Seale, Dr Alex Rosewell, A/Prof Glenda Lawrence

Vaccines are one of the greatest achievements in public health with dramatic reductions in morbidity and mortality from vaccine-preventable diseases. With the expansion of available vaccines and the cost and complexity of immunisation programs in Australia and internationally, there is a need for high quality, multi-method research that informs vaccine policy and practice. Immunisation and vaccine-preventable diseases are a key focus of the research undertaken within the School and we have advanced expertise across a range of methodologies including clinical research, epidemiology, disease and economic modelling, data linkage and social research methods. We are currently involved in numerous research projects.
spanning from program evaluation, the impact of immunisation program schedule changes and predictors of behavioural factors associated with vaccine uptake in vulnerable and high risk populations. Specific vaccines and vaccine-preventable diseases of interest include influenza, pneumococcal disease, HPV, herpes zoster, measles, mumps, rubella, hepatitis A and travel vaccines. Our research directly contributes to national and international policy and practice in vaccine-preventable disease control. Key publications in this period include:


Infectious disease and health economic modelling

Dr James Wood, A/Prof Anthony Newall, Dr Zhanhai Gao, Prof Raina MacIntyre

We have a large program of research in mathematical modelling and economic evaluation of infectious disease prevention. Modelling has become an important tool to help inform our understanding of infectious disease epidemiology and control. Infectious disease models can be used to predict the impact of alternative control strategies and can be linked with economic models to estimate the cost-effectiveness of these programs. Together these factors can play a major role in policy and funding decisions. Infections of interest include vaccine-preventable diseases, particularly influenza, rotavirus, varicella zoster virus, measles, mumps, rubella, tuberculosis, pertussis and pneumococcal disease, among others. We also have interests in more theoretical questions such as structural uncertainty in model outcomes and the impact of antibody decline on disease elimination. Key publications in this period include:


Social and behavioural research

Prof Nick Zwar, Prof Mary-Louise McLaws, Prof Juliet Richters, Prof Raina MacIntyre, Prof Heather Worth, Dr Holly Seale, Dr Niamh Stephenson

We have high level expertise in social research methods and sociology at SPHCM. Research in these areas includes sexual health, prison health, social aspects of global control of HIV, behaviour and attitudes of health care workers and how this impacts on infection control and connections between pandemic influenza science, policy and public understandings. The School is also involved in a number of HIV social and behavioural research projects being undertaken in Asia and the Pacific. Key publications in this period include:

- Stephenson N; Davis M; Flowers P; MacGregor C; Waller E, 2014, ‘Mobilising "vulnerability" in the public health response to pandemic influenza’, Social Science and Medicine, 102: 10 – 17.

Traveller health research

Dr Anita Heywood, Prof Raina MacIntyre, Prof Nick Zwar, Prof Heather Worth, Dr Holly Seale, Dr Mohamud Sheikh

International travellers are important sources of infectious disease in countries with low disease incidence and strong national disease control systems, such as Australia. Current research in the School aims to control the importation of diseases into Australia by understanding traveller behaviour and travel patterns, including epidemiologic research on travel related infections, travel vaccine research and social and behavioural research. Our research identifies areas for national disease control policy development in the prevention of travel-related infectious diseases in travellers and their contacts and provides data for modelling the impact of global disease transmission and travel patterns on Australia’s national disease control. Important work on travel, border control and screening has directly informed Australia’s national pandemic response. Our research examining the knowledge, attitudes and behaviours of international travellers to infectious disease risks and preventative health practices has identified poor uptake of pre-travel health advice and vaccination in travellers, particularly migrant Australians who travel.
The School is also involved in the promotion of health travel through representation on the Travel Health Advisory Group. Key publications in this period include:


Migrant and Refugee health research

Prof Raina MacIntyre, Prof Nick Zwar, Prof Heather Worth, Dr Anita Heywood, Dr Holly Seale, Dr Mohamud Sheikh

The potential impact of population mobility, particularly in complex humanitarian emergencies, on health care provision is significant. Research in the School aims to develop understanding of the trends and burden of infectious diseases in complex humanitarian situations and also on refugees and Internally Displaced Persons (IDPs) who resettle in Australia but become marginalised members of the community. The School is engaged in studies on the epidemiology of exotic infectious diseases of refugees and internally displaced persons (IDPs) who resettle in Australia. The School is also involved in the promotion of health travel through representation on the Travel Health Advisory Group. Key publications in this period include:


Frail elderly

Professor Raina MacIntyre

The School has strengthened its focus on aged care research with the establishment in 2011 of the Hammond Chair of Positive Ageing and Care, in partnership with the Hammond Care group. Together with other key staff from the SPHCM, the nucleus for a new focus on aged care research within the School has been generated. The aged care research partnership between the SPHCM and Hammond Care has already delivered approximately $1.6 million dollars of funding from various Commonwealth government grants and other funding bodies. Professor Raina MacIntyre leads a NHMRC Centre for Research Excellence at SPHCM, which conducts research in a number of research projects with frail older adults undertaken in hospital and aged care facility settings. Specific projects include investigating the burden of respiratory infections in older adults; investigating specific aspects of adult immunisation practices, beliefs regarding adult immunisation in hospitals and aged care facilities involving healthcare workers, inpatients and residents and long term immunity following vaccination in older adults. Key publications in this period include:

I am a Senior Lecturer and NHMRC Early Career Research Fellow (ECRF) at the SPHCM, with over 17 years of experience as a quantitative infectious diseases epidemiologist, mainly in the field of vaccine preventable diseases (VPDs). I began my career as a diagnostic microbiologist after completing a Bachelor of Applied Science. However, my passion for infectious diseases epidemiology led me to undertake further studies (a Graduate Diploma in Epidemiology and Biostatistics and then the Master’s of Applied Epidemiology training program). The combination of these courses gave me both the theoretical and practical skills to begin a career as an epidemiologist. After completing my masters in 1998, I worked at the National Centre for Immunisation Research and Surveillance (NCIRS), where I am currently a Visiting Fellow. My PhD, undertaken at the Kirby Institute, involved the analysis linked population-based data to quantify the burden of hepatitis C (HCV) in New South Wales (NSW) and a national clinic-based cohort study evaluating HCV treatment uptake and outcomes. After completing my PhD in 2011, I joined the SPHCM as a post-doctoral researcher, funded initially through the Centre for Research Excellence (CRE) in Immunisation in Understudied and Special Risk Populations and now as an ECRF.

My research interests predominantly focus on measuring and optimising the public health impact of vaccination programs, particularly by using linked routinely collected health data. I currently lead an NHMRC project grant involving the linkage of health records (including the Australian Immunisation Registry-ACIR) for more than 2 million children in Western Australia and NSW. This is the first study to link ACIR data to evaluate Australia’s childhood immunisation program. Over the next three years we aim to use the linked data to produce population estimates of vaccine effectiveness, identify factors associated with poor effectiveness and delayed vaccination, and identify which sub-populations would benefit most from improving vaccine timeliness. I am also leading studies to examine the seroprevalence of Q fever and measles antibodies in the general population and risk factors for exposure to Q fever in blood donors, which is part of a larger research project involving vets, laboratory scientists, researchers, and clinicians from around Australia.

NHMRC researcher funding has given me the time to undertake a complex long-term research project. Without NHMRC researcher funding, first through the CRE and then for my ECRF, it is unlikely that the ACIR linkage project would have received funding or succeeded. This study was the first time Commonwealth health data had been linked to data from multiple states, and it has taken 2.5 years to go from the concept to the reality of having linked de-identified data for analysis. So having a full time researcher position was vital to foster the strong collaborations needed for the success of the project, develop a detailed project protocol, establish an Aboriginal Immunisation Reference Group and obtain all the necessary approvals for data release.

My fellowship has also given me the flexibility and funding to expand existing and explore new areas of research. I am able to fund travel to visit other researchers and attend workshops, conferences and training. Choosing my own research direction is exciting but also daunting. It means I have had to develop strategies to identify priorities and decide on the best way to use my time. The pressure to ‘publish or perish’ and the competitiveness of ongoing research funding post ECRF can be distracting, but the rewards of developing your own research project and seeing it come to fruition outweigh these stresses. Therefore I would encourage other early career researchers with a passion to undertake important long-term projects to apply for an ECRF.
An unprecedented epidemic of Ebola, one of the most severe infections known, affected the world in 2014, with West Africa being most affected. A number of West African, other international and domestic students as well as SPHCM staff formed the UNSW Alliance Against Ebola and raised thousands of dollars to support Médecins Sans Frontières in the response. A day of action was held on October 23rd 2014, accompanied by a multimedia campaign, campus event and evening forum. The Alliance was led by some passionate students and staff of UNSW. This showed how our academic community can mobilise and respond to a public health emergency.

This global crisis started in March and infected over 15,000 persons with 7,000 lives lost in the process. The Alliance aims to raise awareness, enhance understanding of Ebola outbreak within the university and Australian communities, as well as to raise funds to support efforts to end Ebola. The involvement of students from two of the most affected countries – Liberia, Sierra Leone – within the Alliance has further enhanced the reach-out efforts to engage not just the minds, but also the hearts of the public to take prompt action as well.

The Ebola Day of Action brought together international and local students as well as staff. Dressed in colourful national attires, everyone was engaged in one way or the other through various platforms. Activities ran throughout the day. It started off with bake sales on the library walk in the early morning hours, offering a scrumptious spread of local and overseas delicacies, and a barbeque in the afternoon. The main highlight of the morning hours was the flash-mob by the students and staff at the library lawn featuring ‘Go Ebola Go’ – a song written by the Alliance members in various languages.

The need for global involvement to adequately and swiftly control the outbreak was strongly advocated by the Alliance members; as expressed by one of our students, distance and geographical barriers now mean little with global exchanges becoming a part of our daily lives. It has become increasingly apparent that we all share both responsibility and global engagement accountability to jointly tackle any issues as big and deadly as Ebola.

The afternoon continued with a simulation of a typical Ebola treatment unit in West Africa, portraying the dire situation of providing care to the large numbers of patients with limited resources, such as trained healthcare workers and personal protective equipment. The simulation showcased a holistic aspect of issues faced by families and communities when a member is infected or dies from Ebola: rejection of patients by most health facilities due to closure or limited space capacity; trauma of witnessing death of a family or community member; dealing with apparent hopelessness – grief over the loss of lives, and Ebola related stigma and discrimination. The simulation ended with showing more survivors with the increasing amount of aid and donations. The message expressed through the smiling faces was that, ‘one more life lost to Ebola is one too many, and that together, we can end Ebola.’ The day ended with an evening of documentary screening and panel discussions. The panelists included Professor Raina MacIntyre, Dr Mike Kamara and Ms Haijaratu Thomas, both Sierra Leoneans and actively involved in advocacy for Ebola efforts. Prof MacIntyre provided a historical perspective of Ebola and highlighted the catastrophic public health implications of the prevailing Ebola outbreak, while Dr Kamara and Ms Thomas, spoke about the social, cultural, and economic impacts of Ebola in Sierra Leone and the West African region. The panelists stressed the need for effective public health leadership in coordinating the Ebola control efforts in West Africa to ensure a successful and rapid end of the outbreak in the region and prevent further international spread.

All funds raised on the UNSW Ebola day of Action were donated to Médecins Sans Frontières, which has been actively involved in controlling the Ebola outbreak in West Africa since its onset in March. Further information is available at: sphcm.med.unsw.edu.au/research/infectious-diseases/unsw-alliance-against-ebola
The recent Ebola outbreak in West Africa is the largest and most devastating in history. The World Health Organization reported that there are now 28,637 cases and 11,315 deaths from the disease worldwide since the first case report in March 2014. The spiralling epidemic in West Africa is a global health catastrophe in which we are all stakeholders. Controlling the epidemic at the source is the highest priority.

Ebola healthcare workers warning

Professor of Infectious Diseases Epidemiology Raina MacIntyre is the lead author of a guest editorial that questions the health worker protection guidelines issued by the World Health Organization (WHO), the US Centers for Disease Control and Prevention (CDC) and countries including Australia. It is published in the online issue of the International Journal of Nursing Studies (IJNS). Professor MacIntyre’s concerns are shared by co-authors Professor Patricia Davidson, Dean of Nursing at John Hopkins University in the US and Professor Guy Richards, an intensive care specialist from the University of Witwatersrand, Johannesburg, South Africa who managed an Ebola outbreak and whose work was cited in support of the WHO/CDC guidelines. All three argue the guidelines that recommend surgical masks for Ebola should be urgently reviewed.

ARM training workshop for Ebola responders

The ARM network presented a 1 day intensive workshop for ARM members intending to deploy to West Africa for the Ebola response, as well as for first-line responders (GP, police, defence, emergency workers, paramedics) in Australia who may be faced with a local case. We are aware that some responders are non-clinicians, and that some clinician responders do not have extensive infectious diseases training. Field epidemiologists and first line responders may also be in situations of increased risk in contact tracing activities outside of the direct clinical setting. Given the high rate of health worker infections in the West African outbreak, there is clearly a major occupational health and safety risk to responders. A free short workshop was offered for ARM members who are considering deploying for the Ebola outbreak. The workshop intended to fill gaps in routine training provided by deploying agencies. Workshop video’s available sphcm.med.unsw.edu.au/research/infectious-diseases/ebola-training-workshop

Our students deliver training courses to Aid agencies

Two SPHCM Masters students, Walton Beckley and Mohammed Alpha Jalloh, in the final stages of dual degrees with Professor Raina MacIntyre recently delivered much needed Ebola training sessions for the humanitarian aid agency Red-R Australia in 2014. The intensive training course was for health workers heading to West Africa to help contain the outbreak. The staff needed to know how to manage the condition and the risk of infection, but also how to stay safe in a fraught environment and operate sensitively across cultures. Beckley and Jalloh, both from Sierra Leone, were thrilled by the opportunity to contribute to the international effort. During the Red-R training, which took place in Darwin, they presented units about working effectively and safely in a cross-cultural setting, and safe and dignified burial in the West Africa Ebola context. “The fact that we got to contribute something to the whole Ebola effort was a huge thing for us,” says Beckley.
SPECIAL RISK GROUPS

The $2.5m NHMRC Centre for Research Excellence in Population Health, led by Professor MacIntyre, is linked to this area of SPHCM’s research. The CRE is titled “Immunisation in under studied and special risk populations: closing the gap in knowledge through a multidisciplinary approach”, and involves a multidisciplinary and collaborative team across UNSW, The National Centre for Immunisation Research and Surveillance of Vaccine Preventable Diseases, The Children’s Hospital at Westmead, The Kirby Institute, Westmead Hospital, The University of Sydney and the University of Antwerp. The NHMRC Centre for Research Excellence in Immunisation has four streams of research on immunisation in: the frail elderly; maternal and neonatal; Aboriginal and Torres Strait Islanders; and traveller, migrant and refugee immunisation issues. The CRE held national workshops in migrant and refugee immunisation in 2013, and elderly immunisation in 2014.

www.creimmunisation.com.au

THE ARM NETWORK

The ARM network mobilises experienced public health professionals with skills in field epidemiology, applied public health and outbreak response to provide coordinated and high quality surge response capacity in the event of global, regional or cross-jurisdictional infectious diseases emergencies. ARM provides a focal point for identification, selection and referral of suitably skilled Australians to be deployed through WHO’s GOARN, RedR, and other agencies. ARM is supported by UNSW, ANU and The Burnet Institute and UNSW. The current model is that ARM partners tap into their own professional networks of public health students and graduates of FETPs or other relevant programs to provide surge capacity when required. However, any organisation or individual with relevant expertise can apply to join ARM. Members of ARM are linked through a private network, where deployment opportunities are posted. They review CVs, select suitable candidates and refer them through established deployment mechanisms such as GOARN and RedR. Deployees must comply with the requirements of these organisations. In addition, ARM will use on-line screening modules to ensure minimum field epidemiology capability, and to further improve the monitors the quality of Australian professionals deployed to regional infectious disease responses. The network was launched in June 2014 and has deployed members to several international epidemics already and has over 100 members. SPHCM is also a member of WHO’s Global Outbreak Alert Network. www.arm.org.au

Dr Tony Stewart, Prof Raina MacIntyre and A/Prof Martyn Kirk, Co-directors & Foundation Partners of the ARM Network
I am thrilled to be working as an academic at the School of Public Health and Community Medicine (SPHCM). During my PhD at SPHCM I developed strong bonds with the academic staff through collaborative research into surveillance system strengthening in Papua New Guinea, and through teaching on various infectious disease courses. I have been fortunate to be supported and mentored by Professor Raina MacIntyre, and other highly experienced public health and information technology experts from UNSW, Professors Anthony Zwi and Pradeep Ray. In many ways, it was an easy decision to continue involvement with teaching and research at SPHCM, where I had experienced such a stimulating and supportive learning environment.

I am passionate about international health work and SPHCM engages with the Asia-Pacific and globally as a leader in research that has impact for vulnerable populations. The environment is highly supportive of staff and students wishing to make a difference in international health.

My work as SPHCM has been intense and varied. I have been on a rapid learning curve in terms of educational theory and practice as well as with coming up to speed with the tools that SPHCM uses to deliver its courses. I am currently developing new course material for the Outbreak course as well as for the Infectious Diseases Intelligence course, both of which I will co-convene. I have been mentored by Professor MacIntyre to administer the ARM network. ARM Network was formed by a group of alumni of the ANU Master of Applied Epidemiology (MAE) Program, Australia’s only Field Epidemiology Training Program (FETP), in response to a gap in Australia’s national and international response capacity for infectious diseases emergencies. The ARM network mobilises experienced public health professionals with skills in field epidemiology, applied public health and outbreak response to provide coordinated and high quality surge response capacity in the event of global, regional or cross-jurisdictional infectious diseases emergencies through organisations like the Global Outbreak Alert and Response Network of the World Health Organization (WHO). One of the more intense and challenging experiences working for SPHCM was when I was deployed as an epidemiologist to Kono District, Sierra Leone, to provide technical support to the district health authorities for the Ebola outbreak response.

My training here at SPHCM has made an enormous difference to my teaching and to my work in international health. SPHCM provided me with outstanding technical supervision as well as opportunities to be supported in areas where I wanted to expand my capacities. The courses available to students provide really sound grounding in many disciplines within the field of public health.

I am passionate about how information and communication technology (ICT) can be harnessed for improved outbreak detection. I am currently investigating how routine national health information systems can be used to strengthen disease surveillance systems in resource limited settings, including through use of geographic information system data. In July I will be participating in Epi-Hack in Rio in Brazil, which aims to bring together epidemiologists and ICT specialists from around the world to develop open-source mobile applications that can be used for disease outbreak detection in the context of mass gatherings such as Olympic games or World Cup Soccer.
GlobalHealth @ UNSW aims to promote, through teaching and research, the use of evidence and best public health practice, to enhance countries’ capacity in health policy development. We host a biennial Global Health Conference and encourage research collaborations in the Faculty of Medicine, with other UNSW researchers and with researchers in developing countries. We engage in research collaboration and conduct education and training.

**Key areas of expertise**
- Infectious diseases
- HIV
- Maternal, child and reproductive health
- Non-communicable diseases and control of risk factors including Tobacco Control
- Health promotion
- Health, human rights and development
- Human resources management and development
- Health policy, planning and strategy development
- Health systems financing
- Economic evaluation of complex Interventions
- Development and health
- Public health in emergencies
- Migrant and refugee health

**Collaborative Partnerships – Where we work**
GlobalHealth@UNSW members work in many low and middle-income areas, including the Asia-Pacific region (Solomon Islands, Fiji, Papua New Guinea and Cook Islands), South East Asia and the Mekong (Lao, Vietnam, Cambodia, Malaysia and Thailand) and have growing partnerships in Africa and in fragile states (Timor-Leste, Nepal, Myanmar, Sri Lanka and parts of Indonesia). We have a commitment to development principles, which is evident in long-term relationships with partners in a number of countries including the Solomon Islands, Timor-Leste, Vietnam and Cambodia. The health economics and financing group also have long standing researcher partners in Sub Saharan Africa including Nigeria, Cameroon and Kenya.

**International HIV Research Group**

**Key publications**

**PROJECTS**
- Behavioural Surveillance of Risk Groups in Papua New Guinea as part of the Tingim Laip program 2012-2013 (Cardno Emerging Markets).
- What makes for good and effective leadership in Papua New

- Population size estimation of Female Sex Workers, Men who have Sex with Men and People who use Drugs (including people who inject drugs) in Timor-Leste. June 2014-December 2014 collaboration with ASHM organisation: Global Fund administered through the Ministry of Health of Timor-Leste.

- Co-Investigation, Mobility and HIV Risk across the Indonesia/PNG Border, ARC Linkage project.

**PUBLICATION HIGHLIGHTS**


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**PROFESSOR HEATHER WORTH**

I have over 25 years of research experience and have been working in the area of HIV since 1994. For the last five years my research has been primarily in the area of HIV social and behavioural research in Asia and the Pacific, with a focus on gender, sexuality and global HIV. I run the International HIV Research Group, IHRG, which is based at the School of Public Health and Community Medicine which delivers a program of international research and research training. We conduct HIV social research that provides scientific evidence to guide the international HIV response. Our aim is to strengthen the capacity of academic institutions and individuals to conduct outstanding research into HIV-related issues globally. This encompasses projects in Papua New Guinea, the Pacific, Indonesia, and Timor Leste. This program of research and training is carried out in partnership with a number of universities and research centres, and we now have MOAs with six universities and research centres in the region.

I teach Applied Research Methods for Public Health. This is a great course that students really enjoy as it is practical and of benefit to those contemplating a PhD or doing research after finishing their MPH.

I am the Director of the Global Health@UNSW International Program, School of Public Health and Community Medicine. I work at a global level with an emphasis on the challenges facing low and middle-income countries.

In September 2013 I was appointed the Chair of the Human Research Ethics Committee. This is an important part of the University’s work. Since my appointment we have introduced a number of new processes and have reduced the time researchers have to wait until they obtain ethical approval for their research.
**Trends in non-communicable disease risk factors and premature mortality in Pacific Island countries and predictive modelling of effects of inaction and control interventions**

_Team Leader: Professor Richard Taylor_  
_**Key Staff:** Dr Stephen Morrell, Sophia Lin and Christine Linhart_

**Synopsis:**
Non-communicable diseases (NCDs) are a major cause of illness and premature adult mortality (disease burden) in many Pacific Island Countries (PICs). This research relates to trends over time in NCD risk factors in PICs from available data, and trends in NCD premature mortality and effects on life expectancy. Implications for future NCD morbidity/mortality from various NCD control interventions or lack of action will be estimated using predictive statistical modelling of time trends in NCD risk factors and mortality. This will enable countries and donors to better allocate funds for NCD control and provide estimates of the consequences of intervention or inaction.

The International NCD Surveillance and Research Group is involved in research, teaching and service aimed at prevention and control of the major NCDs. We conduct research into the causes, prevention and control of morbidity and premature mortality from cardiovascular diseases, diabetes, cancers and chronic obstructive lung disease. This provides essential strategic information needed for design, implementation and evaluation of effective and cost-effective interventions at a population level to reduce morbidity and premature mortality from these illnesses. The main geographic areas of focus have been Pacific Island states, Australia and New Zealand, and comparisons with other countries. The research focus is on tracking trends in NCD risk factors and premature mortality (by cause) at a population level, determining the effects of NCD premature mortality on trends in overall mortality and life expectancy, relating changes in risk factors to changes in mortality, and modelling likely effects of various types of population interventions on premature mortality and morbidity. Research is funded through successful research grant applications and consultancy contracts.

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**An assessment of equity in health care financing in Timor Leste and Fiji**

_Team Leader: Associate Professor Virginia Wiseman_  
_**Key Staff:** A/Prof Andrew Hayen, Prof Stephen Jan, Dr Augustine Asante, Prof Joao Martins, Dr Wayne Irava, Ms Jennifer Price and Mrs Christina Rofe_

**Synopsis:**
Many developing countries are exploring how to move towards universal coverage through an equitable health financing system. Designing and evaluating strategies to achieve this requires evidence on the current distribution of the burden of health care financing and benefits from the delivery of health care. This study will provide such evidence by working with local researchers and institutions in Timor Leste and Fiji. These findings will help the countries move towards universal coverage and to address AusAID’s strategic goal of improving access to health care.

Our group is quickly gaining international recognition through its recent successes in competitive grant funding and its high-ranking publications. Our use of rigorous study designs, including randomised trials and mixed-methods approaches have contributed to this success. We also invest significant resources into maintaining and developing strong links with academics and policy makers responsible for leading the transformation of health systems in their own countries. There has only been limited investment in this field in the past and we feel there currently exists an exciting opportunity to provide quality evidence on how to improve the way health care is delivered and financed in low and middle income countries responsible for leading the transformation of health systems in their own countries. There has only been limited investment in this field in the past and we feel there currently exists an exciting opportunity to provide quality evidence on how to improve the way health care is delivered and financed in low and middle income countries.

For more information on Health Economics and Financing for Developing Countries: sphcm.med.unsw.edu.au/shift
Recent publication highlights


- Chandler CI, Mangham L, Njei AN, Achonduh O, Mbacham WF, Wiseman V. (2012) ‘As a clinician, you are not managing lab results, you are managing the patient’: how the enactment of malaria at health facilities in Cameroon compares with new WHO guidelines for the use of malaria’, Social Science and Medicine, 74(10): 1528-1535.


International NCD Surveillance and Research Group

Prof Richard Taylor, Dr Stephen Morrell, Sophia Lin and Christine Linhart

The International NCD Surveillance and Research Group is involved in research, teaching and service aimed at prevention and control of the major NCDs. They conduct research into the causes, prevention and control of morbidity and premature mortality from cardiovascular diseases, diabetes, cancers and chronic obstructive lung disease. The Group has designed and runs an annual Masters-level short course on ‘Global NCD Control: Population Approaches’.

Recent publication highlights


On 27 May, 2014 SPHCM together with the Public Health Association of Australia organised a symposium to discuss the public health issues of Australia’s asylum seeker program and their relationship to human rights. It brought together academics, health practitioners, policy-makers and those with hands-on experience in detention centres.

The opening speaker was Emeritus Professor Gillian Triggs, President of the Australian Human Rights Commission. Other speakers included Dr Karen Zwi Conjoint Associate Professor, School of Women’s and Children’s Health, UNSW Medicine, Conjoint Associate Professor Karen Zwi, School of Women’s and Children’s Health, UNSW Medicine, Dr John-Paul Sanggaran Former Christmas Island Medical Officer, Co-author Letter of Concern published by The Guardian. There was also a panel discussion surrounding the issues of Human Rights and Asylum Seeker Detention. In addition to the speakers the panel was also joined by Michael Moore Former Australian politician and health academic, Chief Executive Officer of the Public Health Association of Australia (PHAA), Mark Isaacs Case Manager, Asylum Seeker Settlement Agency, Dr Ann Clarke Former Manus Island Detention Centre Professor Mark Harris Foundation Professor of General Practice and Executive Director of the Centre for Primary Health Care and Equity, UNSW Medicine.

The offshore detention of asylum seekers poses risks to their health and wellbeing, particularly in relation to mental health outcomes. Seeking asylum is a right, enshrined in the Refugee Convention, and, while they are detained, access to timely and appropriate healthcare for asylum seekers should be assured under the International Covenant on Economic, Social and Cultural Rights (ICESCR), which Australia has ratified. Ending offshore detention is critical to improving the health and wellbeing of asylum seekers and, for this reason, we call on the Australian Federal Government to progressively bring an end to this practice, stop the detention of children and immediately prioritise an improvement in access to healthcare and living conditions for asylum seekers who are detained in the meanwhile.

“There is no such thing as a bogus asylum seeker or an illegal asylum seeker. Everybody has a right to seek asylum in another country” (UNHCR)
I lead the ‘Health economics and financing in developing countries’ research programme at SPHCM. At the heart of our research is a commitment to strengthening the health systems of developing countries and ensuring that resources are not wasted, and those who need health services get them – not only those who can pay for them. We currently have a number of exciting new research projects underway including 3 studies evaluating equity in health systems financing in Fiji, Timor Leste and Cambodia. These are funded through grants totalling A$2 million from DFAT and the Australian Research Council. We are also part of a team recently awarded A$6.7 million to evaluate point-of-care testing and treatment of sexually transmitted infections to improve pregnancy outcomes in Papua New Guinea. The study is funded under the Joint Global Health Trials initiative, established by the UK Department for International Development, the Medical Research Council UK and the Wellcome Trust.

It is only in the past 5 years that I have begun working in the Asia-Pacific region. Prior to this I spent 15 years conducting research in Sub Saharan Africa, focussing on malaria control. One of my earliest grants came from the Gates Malaria Partnership and was a study investigating the determinants of demand for malaria treatment and prevention in Tanzania and The Gambia. This was followed by a number of cost-effectiveness analyses of malaria treatment and prevention programmes in Togo, Malawi and Kenya. In 2009 colleagues and I were awarded A$1.1 million from the ACT Consortium (funded by the Bill & Melinda Gates Foundation) to undertake an impact evaluation of interventions to support the introduction of malaria Rapid Diagnostic Tests in Cameroon and Nigeria. In 2013 I was also part of a team that received funding from the National Institute of Health in the United States to evaluate the cost-effectiveness and efficacy of long-lasting microbial larvicides in malaria control in western Kenya highlands.

Looking even further back, I began my training as a health economist in 1994 at the Centre for Health Economics, Research and Evaluation at Westmead Hospital. After that I joined Professor Gavin Mooney’s team at the University of Sydney where I worked on the financing of indigenous health for 4 years. Professor Mooney also supervised my PhD on the use of community preferences to inform priority setting in health care which I completed in 2004. In 2001, I joined the London School of Hygiene and Tropical Medicine (LSHTM) where I began to focus on low and middle income countries. In 2013, I joined SPHCM at UNSW as an Associate Professor of Health Economics. I have begun building a health economics and health systems research programme to improve access, affordability and quality of health services for the poor. I continue to also work in the Department of Global Health and Development at LSHTM.

My research focuses on 3 broad topics:

- The financing of health care in low and middle income countries. I am interested in assessing the equity and efficiency impact of different financing arrangements and co-direct short courses in health economics and financing for local and international aid agencies and governments.

- The evaluation of complex health system interventions. Our trials and economic evaluations of behaviour change interventions to support malaria testing in West Africa have recently been featured in the Lancet Global Health.

- Promoting the use of economic evidence in decision making especially through the development of recommendations and guidelines.

To this end, I have been on advisory committees of the Institute of Medicine and the Global Fund and I am a long-term member of the Gates Funded Consortium on Malaria Drug Delivery.

Teaching is another important part of my work and something I enjoy immensely. I have taught introductory and advanced health economics at the graduate and post graduate level. I have also designed a number of blended learning programmes in health economics for international agencies such as UNICEF. I am co-editor of Health Policy and Planning, a leading journal in health policy and health systems research in low and middle income countries, produced by Oxford University Press.
Our aim
Policy-makers must have access to the best possible research and analysis to ensure their health investments save as many lives as possible. We are a group of health economists who work in partnership with other scientists and policy-makers to improve the way health care is delivered and financed in low and middle-income countries. We work across the globe in a variety of contexts: in low-income countries (Cambodia, Kenya), middle-income countries (Fiji, Cameroon, Nigeria, Ghana, Papua New Guinea, Indonesia) and post-conflict (Timor-Leste) to build stronger health systems.

Our projects

• Sustainable Health Financing in Fiji and Timor-Leste (Shift Study): 2013-2016
• A cost-effectiveness analysis of provider interventions to improve health worker practice in providing treatment for uncomplicated malaria in Nigeria (REACT Study)
• A system wide analysis of health financing equity in Cambodia
• Efficacy and cost-effectiveness of long-lasting microbial larvicides for malaria mosquito control
• A cost-effectiveness analysis of provider interventions to improve health worker practice in providing treatment for uncomplicated malaria in Cameroon.

We undertake evaluations of interventions to change the way health care providers, patients and communities respond to a health problem. We also evaluate the introduction of new health care technologies and interventions. These are typically trial-based studies with cost-effectiveness as a key outcome. We also evaluate different ways of financing and paying for health care. Many people in low and middle-income countries do not receive care when they need it or endure catastrophic costs and loss of income as a result of seeking care.

We generate high quality evidence on how developing countries can make greatest use of their available resources while minimising the burden on the poor. We believe that there is no ‘one size fits all’ approach. All health systems have their own unique set of goals and challenges. We design and implement research studies driven by the countries themselves, a necessary pre-condition for translating research in policy change.

Photos: Left – Sisca registrations in full swing courtesy of Dr Augustine Asante, Middle – A/Prof Andrew Hayen, Prof Virginia Wiseman, Dr Augustine Asante, Christina Rofe, Repon Paul, Right – Fiji village courtesy of Dr Catherine Spooner
I graduated in Medicine from the University of Sydney, trained as a physician and completed the course on Tropical Medicine and Hygiene at the London School. I then commenced public health research investigating diabetes and cardiovascular disease in Pacific Island countries, while based at Monash University in Melbourne and was Epidemiologist at the South Pacific Commission (SPC) located in Noumea (New Caledonia) during the 1980s. From 1990 - 2004 I was at the School of Public Health at the University of Sydney and launched the Master of International Public Health (MIPH) at University of Sydney in 2000. I was a Professor of International Health at University of Queensland (UQ) in 2005-08, and commenced at University of NSW, School of Public Health and Community Medicine, in 2009. I am currently Professor of Public and International Health, a Coordinator of the Master of International Public Health Program and I’m involved in several international research studies, including mortality and cause of death, and control of NCD in Pacific Island Countries, and in several national research studies, including Indigenous mortality assessment. I have over 400 publications, many addressing the epidemiological transition and non-communicable disease (NCD) epidemiology and control, particularly cardiovascular disease, cancer and diabetes, in the international context. I am the course convenor of the Masters elective courses: Tropical Disease Control and Global Non-Communicable Disease (NCD): Population Approaches; and Head of the International NCD Surveillance and Research Group within SPHCM.

The International NCD Surveillance and Research Group is involved in research, teaching and service aimed at prevention and control of the major NCDs. The group conducts research into the causes, prevention and control of morbidity and premature mortality from cardiovascular diseases, diabetes, cancers and chronic obstructive lung disease. This provides essential strategic information needed for design, implementation and evaluation of effective and cost-effective interventions at a population level to reduce morbidity and premature mortality from these illnesses. The main geographic areas of focus have been Pacific Island states, Australia and New Zealand, and comparisions with other countries. The research focus is on tracking trends in NCD risk factors and premature mortality (by cause) at a population level, determining the effects of NCD premature mortality on trends in overall mortality and life expectancy, relating changes in risk factors to changes in mortality, and modelling likely effects of various types of population interventions on premature mortality and morbidity. Research is funded through successful research grant applications and consultancy contracts.

Non-communicable diseases (NCDs) in Pacific Island countries. NCDs are a major cause of illness and premature adult mortality (disease burden) in many Pacific Island Countries (PICs). This research relates to trends over time in NCD risk factors in PICs from available data and trends in NCD premature mortality and effects on life expectancy. Implications for future NCD morbidity/mortality from various NCD control interventions or lack of action will be estimated using predictive statistical modelling of time trends in NCD risk factors and mortality. This will enable countries and donors to better allocate funds for NCD control and provide estimates of the consequences of intervention or inaction. This research is funded by an Australian Development Research Award Scheme (ADRAS) through the Department of Foreign Affairs and Trade (DFAT).

Evaluation of population mammography screening. BreastScreen Aotearoa (BSA) is the national breast screening programme in New Zealand which aims to reduce cancer mortality through early diagnosis. The current research project funded through the Ministry of Health is a population study to evaluate the effects of national mammography screening on mortality from breast cancer in New Zealand. The studies include separate analyses for Maori, Pacific and Other women where numbers permit. The research involves national linkage of the New Zealand mammographic screening registers, the cancer register and the death register.
Professor Mohammad Yunus, Nobel Laureate (Peace) from Bangladesh, created the idea of ‘Social Business’ to solve the global social problems in health, education and poverty. Transforming poor and marginalised communities through research into social business and health is the aim of a new agreement between UNSW and Professor Yunus.

Professor Yunus was awarded the Nobel Peace Prize in 2006 and the US Presidential Medal for Freedom in 2009 for his work as the founder of Grameen Bank. Grameen Bank provides small, low-interest loans to the poor in Bangladesh as a means to lift people out of poverty. This model of ‘microfinance’ has been replicated around the world.

Professor Yunus and UNSW Deputy Vice-Chancellor Les Field signed a Memorandum of Understanding (MOU) at a ceremony in Sydney on Friday, 10 October, 2014 to set up a Yunus Social Business Health Hub at the School of Public Health and Community Medicine (SPHCM) in UNSW. Under the MOU, School of Public Health and Community Medicine will collaborate with the Yunus Centre, established by the Nobel laureate, to improve health outcomes for poor communities in Australia, Asia and the Pacific. "This exciting partnership will focus on research into the development of innovative approaches to making healthcare available and affordable for those who are left out," said Professor Yunus.

Professor Field said the agreement represented the beginning of an ongoing relationship between the University and the Yunus Centre, which aims to promote social business as a means to reduce poverty. "This agreement will enhance UNSW's research strengths in the area of global health and improve understanding of the impact of poverty on health, and health on poverty," Professor Field said. "It will foster the formation of research networks and collaboration, the sharing of knowledge, and training and development opportunities."

The Yunus Social Business Centres (YSBC) serves as a global hub for Professor Yunus's global engagement and operates as a technology centre, research and development group that enables social businesses to grow into effective, problem-solving enterprises in health, education and renewable energy. There are 21 YSBCs in 18 countries around the world. The UNSW Yunus Social Business Health Hub (YSBHH) located within the School of Public Health and Community Medicine at UNSW Medicine will have a focus on E-health and social aspects of health in the developing world.

The hub is now part of a global network of university-based Yunus research centres mainly in Health. Professor Siaw-Teng Liaw and Professor Richard Taylor are co-directors of the hub, and Dr Bayzidur Rahman is the assistant director. Dr Mahfuz Ashraf is a research fellow.

Co-director Professor Teng Liaw is an international leader in E-health. Co-director Professor Richard Taylor leads the International Public Health Program at UNSW. The strengths in international health, public health, E-health and health promotion at SPHCM will contribute to a new kind of YSBHH, the likes of which have not been seen before. The proposed work program of the YSBHH at UNSW aligns well with the UNSW strategic priorities of global impact and social engagement.
Staff at the School are leading or involved in projects on earlier diagnosis and improved care of chronic obstructive pulmonary disease (COPD), updating a systematic review of interventions for care of chronic disease in primary health care, teamwork for chronic disease in general practice, advance care planning, improved blood pressure care, collaboration between general practitioners and allied health professionals, quality use of preventer medicines in asthma, improved care of atrial fibrillation to prevent stroke and better access for Aboriginal people to mainstream services. All of these projects address health conditions of high prevalence and impact where improved care in the community has the potential for important health benefit for the population. The work on COPD has led to two publications in the Medical Journal of Australia, one of which was awarded the 2013 MJA prize for excellence in general practice research. This paper showed that a partnership between a nurse and general practitioner could improve the quality of care of COPD in the community. Subsequent work on detection and early intervention for COPD has demonstrated the utility of a questionnaire to identify people with high likelihood of having the disease. This work, led by Dr Anthony Stanley resulted in two publications in the journal Primary Care Respiratory Medicine. Through the word of PhD student Sameera Ansari the group is also developing and implementing an intervention to improve COPD self-management in the context of multi-morbidity.

Prevention, including intervention of risk factors for chronic disease

Nicholas Zwar and Robyn Richmond have completed a major project (Quit in General Practice) in collaboration with colleagues at University of Western Sydney, University of Melbourne and the Australian National University to develop and test the role of general practice nurses to provide smoking cessation advice. This project tested a new
Primary health care informatics

Professor Teng Liaw, Director of the General Practice Unit based at Fairfield Hospital, has been developing a stream of work in health informatics. The GP Unit is an academic general practice of SPHCM and South West Sydney Local Health District (SWSLHD). It is an integral part of the UNSW Centre for Primary Health Care and Equity (CPHCE) and works closely with the UNSW Centre for Health Informatics, Australian Institute of Health Innovation, Asia Pacific ubiquitous Healthcare Research Centre and the Ingham Institute for Applied Medical Research. The research focus of the GP Unit is the integrated care of patients with chronic disease, with an emphasis on cross-cultural and Aboriginal health. This is underpinned by a NHMRC-funded project to evaluate a multifaceted program to embed cultural respect in general practice.

The PHC Informatics stream is built on two research programs: the electronic Practice Based Research Network (ePBRN) and the Centre for Research Excellence (CRE) in informatics and eHealth. The CRE program is focused on Consumer Health Informatics and safety of clinical information systems. The ePBRN is the underpinning community laboratory and data repository to support the primary health care informatics research program.

The ePBRN has evolved from a data extraction and record linkage program to include a research infrastructure that underpins an integrated health neighbourhood (IHN) to enable integrated health services research. The IHN comprises a “medical home” and its referral network, including the local hospital. The archetype is the Fairfield IHN, consisting of the Fairfield Hospital and its ambulatory care and outreach services, and surrounding community health services, primary care and general practice services. This has been developed and has conducted a project, with funding from HCF, to develop a predictive model for admission of patients with diabetes in the Fairfield IHN.

The ePBRN is organised as a network of IHNs to facilitate longitudinal studies of integrated health care. The core principle is that the local IHN is the logical unit of integrated health care across the primary-secondary care continuum. Organised in this manner, the ePBRN becomes a platform for health services research and research training with a focus on the use of routinely collected in electronic health records (EHR) from multiple sources. EHR-based research necessitates a sound understanding of mixed-methods and realist approaches to the implementation and evaluation of complex interventions and the importance of good quality routinely collected data. Researchers from primary and secondary care will be empowered to conduct cohort studies, clinical trials, quality improvement audits and comparative effectiveness research cost-efficiently.

There is an active group of PhD students researching topics such as: community readiness to adopt mHealth, predicting risks of developing coronary artery disease from EHRs, big data analytics in the management of bowel cancer, social network interventions in obesity and GP education in autism spectrum disorders.

Advance Care Planning in the Australian Primary Care Context

Dr Joel Rhee Prof Nicholas Zwar and Prof Lynn Kemp have been conducting research to examine the role of Advance Care Planning (ACP) in the Australian primary care context. ACP is a process through which people, in consultation with their family, friends and health professionals, make decisions about their future care in the event of them losing their decision-making capacity.

Their research has provided important evidence to inform the development of an approach to ACP suitable for implementation in the Australian primary care setting which addresses the various problems and barriers that have been identified and takes advantage of the strengths of primary care such as continuity of care and strong doctor-patient relationships.

This novel approach to ACP is now being pilot tested in several general practices in eastern Sydney with funding from the RACGP / HCF foundation and in collaboration with colleagues from HammondCare and the South Eastern Sydney Local Health District. The findings of the pilot will inform a future large scale RCT of ACP in the primary care setting.
Dr Joel Jin-Oh Rhee is a Senior Lecturer in Primary Care at the School of Public Health and Community Medicine in UNSW. He graduated from UNSW Medicine program with First Class Honours before obtaining the Fellowship of the Royal Australian College of General Practitioners (FRACGP). As part of his general practice training he completed an academic registrar term at the General Practice Unit at Fairfield Hospital under the supervision of Prof Nicholas Zwar and Dr Sanjyot Vagholkar. He conducted an important study that provided important information about the attitudes and barriers to general practitioners’ involvement in the provision of end of life care.

In keeping with his clinical and research interests in Primary Palliative Care, Joel’s PhD examined the role of Advance Care Planning in the Australian primary care setting. He was supervised by Prof Nicholas Zwar and Prof Lynn Kemp and supported by the NHMRC PhD fellowship and research funding from GPSynergy and the NSW Primary Health Care Researcher Development Program. Four peer-reviewed publications arose from the thesis and he has recently been awarded funding from the RACGP and HCF foundation to develop and pilot test an innovative model of ACP that could be applied in the Australian general practice context.

Joel has also recently completed a cluster randomised controlled trial examining the accuracy of GPs predicting the death of their patients together with Prof Geoffrey Mitchell from the University of Queensland and A/Prof Josephine Clayton from HammondCare Palliative and Supportive Care Services. The findings of this work, which is supported by a grant from the Primary Care Collaborative Cancer Clinical Trials Group (PC4) and the RACGP, is expected to inform a future application for an NHMRC project grant to conduct a large randomized controlled trial examining the effectiveness of a primary care-based end-of-life care planning program.

Joel has also been involved in other research studies and research student supervision not only in the end-of-life care arena, but other areas including sexual health, eHealth and postgraduate medical education.

Joel contributes his expertise in Advance Care Planning and Primary Palliative Care by sitting on various advisory panels for the Federal Government Department of Health, the RACGP, Medicare Locals and other organisations. He also is an executive committee member of the International Primary Palliative Care Network (IPPCN), and a member of the Scientific Working Group 3 (Palliative Care) of PC4 (Primary Care Collaborative Cancer Clinical Trials Group). He has been an invited speaker to a number of international and national conferences on Advance Care Planning.

In addition to his research activities, Joel has substantial teaching responsibilities at UNSW. He is the co-convenor of Phase 3 and covenor of the Primary Care course in the BMed/MD Program. He also teaches in other parts of the program and makes contributions to postgraduate coursework teaching at the SPHCM.

Together with other members of the Primary Care team, he has led the introduction of blended learning into the Primary Care course, and has been involved in the development of a number of other innovative teaching strategies including the use of Script Concordance Test as a teaching tool. He is leading a team that aims to develop a blended learning approach to supervisor training (BLAST project) at UNSW. This project is funded by an Innovation Grant from UNSW Learning and Teaching and funding from the Department of Health through the Faculty of Medicine.

His desire for a scholarly approach to teaching has led him to complete the Graduate Certificate in University Learning and Teaching. His contribution to teaching has been recognised through the 2011 School of Public Health & Community Medicine Alan Hodgkinson Award for Excellence in Teaching and the 2013 UNSW Medicine Award for Outstanding Contributions to Student Learning.

Joel maintains an active clinical practice as a general practitioner at the HammondCare Centre for Positive Ageing and Care. Here he provides care for residents of the four residential aged care homes as well as retirees living in independent living units.
Indigenous Youth Social and Emotional Wellbeing

Dr Pat Anderson AO, Chairperson of the Lowitja Institute, launched the Indigenous Youth Social and Emotional Wellbeing: Reviewing and Extending the Evidence for Policy and Practice report at SPHCM’s 5th Annual Research Symposium. Among its outputs, the three-year research funded by the Department of Health and Ageing, distilled Critical Success Factors from six case studies with services supporting Aboriginal and Torres Strait Islander young people. These Critical Success Factors reflect how services bring about strengths-based healing and empowerment as well as greater effectiveness and sustainability in illness-focused prevention, treatment, management and rehabilitation. The Critical Success factors are vital in the design and implementation of programs and policy in the area of social and emotional wellbeing.

Focus on empowerment and social support in prison

Muru Marri has been researching and advocating Aboriginal perspectives towards one of...
Australia’s greatest social and public health concerns – the ongoing over-representation of Aboriginal and Torres Strait Islander people in prisons. Muru Marri Lecturer Megan Williams’ Connective Services doctoral research closely explored the role of Aboriginal service providers, Elders and family members in providing throughcare support to reduce risks for reincarceration, death and poor health and wellbeing.

Muru Marri also conducted formative evaluations of three Commonwealth-funded Returning Home, Back to Community from Custodial Care throughcare pilot programs. The Returning Home evaluations used the Critical Success Factor tools along with Muru Marri’s Ngaa-bi-Nya Evaluation Framework for program planning, continuous quality assessment and evaluation.

Focus on healing in the context of the Stolen Generations

Muru Marri continued to work with the Kinchela Boys Home Aboriginal Corporation to assist their meeting of strategic objectives to support members of the Stolen Generations. The establishment of the Kinchela Boys Home Healing Centre is one of the important outcomes for the men. Muru Marri is supporting this by leading strategic literature reviews, assisting in the establishment of an evaluation framework and providing input into research translation, evaluation, and writing.

In 2014, Muru Marri also collaborated with the Aboriginal and Torres Strait Islander Healing Foundation and healing program coordinators around the country to document current practice and evidence in relation to collective healing programs for Stolen Generations. This collaboration produced a community-friendly document, A resource for Collective Healing for Members of the Stolen Generations.

Focus on Ageing and Dementia

Muru Marri was a research partner with the NHMRC-funded Koori Growing Old Well Study from 2009-2013. One of Muru Marri’s PhD students, Rachelle Arkles, completed her PhD as a sub-study of this Study in late 2014. She has since graduated. The title of her PhD was: ‘Between Shadow and Light’: A hermeneutic inquiry of Aboriginal families’ meaningful world of caring, ageing and dementia.

Our research students

Muru Marri facilitated unprecedented growth in postgraduate student numbers. During 2013-2014, two PhD students submitted, one enrolled and one had a final review. A further five students enrolled and two graduated from the Future Health Leaders Program Professional Doctorate in Applied Public Health (DrPH). Also, two students enrolled in the Master of Philosophy (MPhil) and two

Independent Learning Project scholars completed.

In 2014, Muru Marri reinvigorated its Critical Friends Circle learning community to support emerging and ongoing Aboriginal health researcher development, with support of an Office of Learning and Teaching mini-grant.

Learning and teaching

Our approach and courses

Muru Marri’s approach to learning and teaching motivates and inspires students to learn deeply. Our students find themselves opened up to a new world of thinking not only critically, but also appreciatively about themselves, about Aboriginal health and wellbeing and about the environments within which we live and work.

Muru Marri offers two postgraduate electives, which are also core courses for the Aboriginal health specialisation stream. Both are delivered externally and involve a mix of face-to-face and online experiences, innovative assessments and comprehensive resources:

- PHCM9630 Public Health Perspectives of Indigenous Health
- PHCM9632 Indigenous Health and Wellbeing Across the Lifespan

Dr Pat Anderson AO, Chairperson of the Lowitja Institute, launched the Indigenous Youth Social and Emotional Wellbeing: Reviewing and Extending the Evidence for Policy and Practice report at SPHCM’s 5th Annual Research Symposium.
Muru Marri has a further specialised elective in professional health practice with Aboriginal and Torres Strait Islander people:

- PHCM9634 Case Studies in Aboriginal and Torres Strait Islander Health

Muru Marri also leads SPHCM’s teaching on the complex challenges related to environmental health and climate change through:

- PHCM9612 Environmental Health

This elective, which is delivered both internally and externally, incorporates innovative, in-depth learning approaches to bring to light the complex and urgent local, national and global environmental challenges we face and ways to work together address these challenges.

Muru Marri is an active participant in the design and delivery of Aboriginal health content in the undergraduate medicine program and contributes a variety of lectures and tutorials to courses across UNSW.

**Highlights**

- Received the UNSW Vice Chancellor’s Award for Teaching Excellence for Programs that Enhance Learning in 2014.
- Six Aboriginal students were awarded postgraduate qualifications – the highest number to graduate from the Faculty of Medicine at one time.

"Studying with the Muru Marri Unit transformed my postgraduate studies from an academic pursuit into a life-changing experience ... it is the belief in myself, instilled by the Muru Marri Team, which has allowed my development to create ripples of positive change in my professional and personal domains." (MPH Student)

11 Aboriginal and Torres Strait Islander students were supported by the Shalom Gamarada Scholarship Program, with many of whom Muru Marri Director Professor Lisa Jackson Pulver is a mentor.

**Supporting Aboriginal services**

In addition to organisations already mentioned above, Muru Marri represented UNSW on a broad range of international and domestic advisory committees, and contributed to numerous services, including Doctors for the Environment Australia, The Climate and Health Alliance, Leaders in Indigenous Medical Education, ANTaR, National Sorry Day Committee, Filling the Gap Indigenous Dental Program, Gamarada Indigenous Healing and Life Training, Oolong House, Waminda Women’s Program, The Lillian Howell Project, Metropolitan Aboriginal Youth and Family Services, Adelaide, Ngala Nanga Mai pARenT Group Program and the South Coast Medical Service Aboriginal Corporation.

**Conference participation**

Muru Marri has maximised opportunities to share its work by presenting at seminars, workshops and national and international conferences, including the International Group on Indigenous Health Measurement, Vancouver, Canada; Australian Primary Health Care Research Institute, Knowledge Exchange Forum, Canberra; Annual Conference of the Climate and Health Alliance, Sydney; American Statistical Association, Joint Statistical Meetings, Montreal, Canada; Healing History: overcoming racism, seeking equity, building community, Caux, Switzerland; Council of Academic Public Health Institutions of Australia,
Melbourne; National Aboriginal Health Conference, Cairns; Blacktown Community Conference: The Third Sector, Blacktown; and The Mental Health Services Conference (TheMHS), Melbourne.

Exemplary service

In other examples of service to SPHCM and UNSW Australia, as well as the Aboriginal community during 2013-14, Professor Lisa Jackson Pulver served on the Scientific Resource Group on Equity and Health Analysis and Research, World Health Organization; the Steering Committee of the International Health Measurement Group; the Australian Statistics Advisory Council; the Advisory Group on Aboriginal and Torres Strait Islander Statistics, the Indigenous Technical Panel and the Australian Health Survey Reference Group at the Australian Bureau of Statistics. She also served as Deputy Chairperson of the National Advisory Group Aboriginal and Torres Strait Islander Health Information and Data and the Health Performance Council of South Australia. Lisa served on the board of the Lowitja Institute and the Inner West Medicare Local, as a Governing Council Member of the Southern NSW Local Health Network and as an honorary consultant to Australian Indigenous HealthInfoNet.

In 2014, Lisa was Scientist in Residence at SBS. In health education, Lisa is a member of the Australian Medical Council. She sits on the Medical Deans Indigenous Health Expert Advisory Panel and has represented the Dean of UNSW Medicine in the Leaders in Indigenous Medical Education Steering Committee since its inception.

Lisa is a highly sought after speaker and in 2014, delivered the Ngunnawal Oration at the University of Canberra, as well as talks during NAIDOC Week 2014 at St Vincent's Hospital Darlinghurst, to the Department of Prime Minister and Cabinet and the Office of the Chief of Air Force, Air Force Headquarters.

She spoke at ANZAC functions on the role and importance of Service to Country. She appeared on the ABC’s Big Ideas and SBS’s Awaken ‘Black is Beautiful’ episode, was interviewed by Phillip Adams for Late Night Live, Margaret Throsby for the Midday program on Classic FM, for Conversations with Richard Fidler and for the City of Sydney’s Oral History Project.

Selected publications

The School of Public Health and Community Medicine has several groups of social scientists and health researchers undertaking social research on health. Our approaches range from social epidemiology to ethnography and developing contemporary social theory. Areas of specialisation include social studies of public health, social determinants of health, health promotion, culture and gender, sexual health, mental health, food and alcohol consumption, the quality and safety of health care, community engagement, and teamwork and leadership in health care. This research involves partnerships with a diverse range of communities locally and internationally and collaborations with researchers around Australia and overseas. Social researchers in the School include Dr Anne Bunde-Birouste, Dr Bridget Haire, Dr Lesley Halliday, Dr Rose Leontini, Dr Sally Nathan, Dr Husna Razee, Professor Juliet Richters, Dr Niamh Stephenson, Dr Joanne Travaglia, Lois Meyer, Associate Professor Jan Ritchie, Dr Alison Rutherford and Dr Adrienne Withall. In addition, a strong cohort of PhD students, research staff and masters coursework students comes to social research via our core and elective teaching in the MPH, MHM and MIPH. We also collaborate with SPHCM researchers in Global Health, Indigenous Health, Infectious Diseases and the International HIV Research Group.

**KEY RESEARCH AREAS**

**Social cohesion and community engagement research**

*Dr Anne Bunde-Birouste, Dr Sally Nathan*

Football United is a community-based action research and intervention program in health promotion. Dr Nathan and Dr Bunde-Birouste were the lead chief investigators together with Associate Professor Lynn Kemp on Social Cohesion through Football, an ARC Linkage Project that investigated Football United’s implementation and its impacts on participants’ health and wellbeing and on social inclusion and cohesion.

- Nathan, S., Kemp, LA., Bunde-Birouste, AW., Mackenzie, J., et al., 2013, *“We wouldn’t of made friends if we didn’t come to football united”: the impacts of a football program on young people’s peer, prosocial and cross-cultural relationships*, BMC Public Health, 13(1), 1–16.

**Sexuality and sexual health in Australia and overseas**

*Professor Juliet Richters, Dr Alison Rutherford, Dr Sally Nathan, Dr Patrick Rawstorne*

We conduct research on sexuality and research on sexual health interventions locally, nationally and internationally. Professor Richters leads the Second Australian Study of Health and Relationships, a large NHMRC-funded national telephone survey of the sexual behaviour, attitudes and sexual health of more than 20,000 people (see box). Professor Richters and Dr Rutherford have an ARC Linkage Grant with Family Planning New South Wales, Contraception Understandings and Experiences of Australian Women, which explores women’s attitudes towards and experiences of fertility control in relation to their sexual lives. More than 90 in-depth interviews have been carried out, with additional interviews by medical research students with young women beginning contraception (Brylie Frost) and Asian students (Cilinia Kwon).
PhD candidate Michelle O’Connor, with supervisors Dr Rawstorne and Dr Razee, is conducting the Fiji Adolescent Sexual and Reproductive Health and Wellbeing Study, which uses a mixed method approach to explore the enablers, barriers and ways to improve adolescents’ sexual and reproductive health and wellbeing. The results will enable the identification of gaps between adolescents’ sexual and reproductive behaviour, understandings and health needs on the one hand and existing realities in Fiji on the other.

Alcohol use and harm minimisation among Australian university students

Dr Rose Leontini

Together with colleagues in Queensland, NSW and Victoria, and industry partners, Dr Leontini is working on an ARC Linkage Project led by Professor Toni Schofield at the University of Sydney. Drawing on social and behavioural sciences, the project examines alcohol use among college- and non-college-based university students in NSW and Victoria to identify barriers and opportunities for harm minimisation. Unlike previous studies, it focuses on the combination of the social dynamics of students’ alcohol use, their understandings of harm minimisation, what they themselves do to achieve it, and the approaches adopted by universities, university colleges and state health authorities to reduce the fallout from students’ heavy drinking.

Social studies of public health surveillance and interventions

Dr Niamh Stephenson

This research focus examines how public health reaches out into people’s everyday lives and how people’s creative uptake of health messages force responses on the part of public health. Dr Stephenson currently holds two ARC Discovery Projects on this topic. One, Pandemic Influenza: People, Policy, Science (with Dr Mark Davis, Monash University) examines gaps between public concerns about pandemic influenza and Australian preparedness efforts. The second, Ultrasound, Embodiment and Abortion: An Analysis of Foetal Imaging and the Ethics of the Selective Termination of Pregnancy (with Dr Catherine Mills, Monash University), considers how the increasingly routine use of ultrasound in pregnancy is affecting women’s experiences of pregnancy and contemporary public debates about termination.

Dr Stephenson also has a book forthcoming (co-authored with Emeritus Professor Susan Kippax) on how the global response to HIV is shaping international public health efforts more generally.


Health care and health promotion for vulnerable groups

A/Prof Joanne Travaglia, Dr Husna Razee, Dr Sally Nathan, Dr Patrick Rawstorne, A/Prof Andrew Hayen, Dr Adrienne Withall

This research examines situational and structural factors that affect the provision of health promotion and the quality and safety of health care for vulnerable groups including the elderly, youth, women, people with disabilities, Indigenous people, refugees and immigrants, overseas students, people from lower socio-economic backgrounds, homeless people, geographically and socially isolated individuals and other vulnerable groups. Dr Travaglia is currently working on a number of projects with Professor Jeffrey Braithwaite in the Australian Institute of Health Innovation and Dr Nathan on the development of management skills for nurses, on indicators of a healthy clinical environment, and on models of consumer engagement.

Led by Dr Nathan, a team of researchers in the School together with the Ted Noffs Foundation and academics from the Centre for Social Research in Health and the School of Social Sciences hold an ARC Linkage Grant, Young People in a Treatment and Support Program, to do vital research to understand the pathways of vulnerable adolescents and the role of the Ted Noffs Program for Adolescent Life Management in assisting young people to get their lives back on track.

Dr Razee is working with PhD candidate Dr Nahla Hariri to explore the barriers and facilitators to accessing primary mental health care by women in Mecca, Saudi Arabia. She is also working with Professor Jan Ritchie and PhD candidate Dr Shanti Raman on a project to improve perinatal outcomes in urban India.

- Raman, S, Srinivasan, K, Kurpad, A, Ritchie, J, & Razee, H, 2014, ‘“Nothing special, everything is maamuli”: socio-cultural practices and family influences shaping...
Dr Adrienne Withall is a Chief Investigator on the INSPIRED study, which is funded by the NHMRC, and is the first comprehensive study on younger onset dementia in Australia. Since most people who develop memory and related disorders are elderly, the experiences and needs of people developing these conditions in their 30s, 40s or 50s, as well as their support network, are not well understood. In particular, we are seeking to better understand vulnerable groups such as people with intellectual disability and dementia, HIV-associated neurocognitive disorder, dementia due to head injury, and cognitive changes associated with alcohol and substance abuse. Dr Withall is also working with a PhD candidate, Monica Cations, to understand risk factors for younger onset dementia.


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Community participation in health services

Dr Sally Nathan, Dr Husna Razee

Having community representatives involved in health services can influence the way hospitals and health programs meet the needs of the community. In Australia, important research led by Dr Nathan has resulted in a number of key publications in the academic and consumer literature and keynote addresses at major conferences, challenging the way health services view and support community participation.


Dr Razee, together with Professor Anthony Zwi and PhD candidate Koliitha Wickramage, is studying community participation as practised and understood at the primary health care level in the implementation of non-communicable disease prevention and management in Sri Lanka. Using in-depth interviews, group interviews and applied ethnography, the study explores the knowledge, experiences and commitment of primary health care workers, health administrators and policy makers. Two short training films were developed from case studies profiled in the study as awareness raising tools.

Also in Sir Lanka, PhD candidate Albie Sharpe worked with supervision from Dr Razee and Professor Zwi on a project using a human security evaluation as a participatory, holistic, multi-sectoral, multi-level and ethical evaluation method. It was used to examine the outcomes of a Japanese non-communicable disease prevention project in Sri Lanka and results from health promotion groups formed during the intervention. The evaluation developed tools to identify and monitor the broader social (human security) outcomes of the intervention.

However, while the tools showed significant linkages between the intervention and identifiable social outcomes, they were not suitable for identification of program limitations and weaknesses. Findings have been presented at conferences in Oxford and Istanbul.
Using and understanding health experiences to improve patient care

Dr Lesley Halliday, Dr Adrienne Withall

This research examines attitudes towards, knowledge about, and experiences of health and health care, from the viewpoint of patients (illness, treatment and care) and health professionals (health care delivery, systems, policy and leadership).

Dr Halliday is currently an associate investigator on several projects determining the diagnosis, treatment, management, outcomes and experiences of women with pregnancy complications including gestational breast cancer, in collaboration with the Perinatal and Reproductive Epidemiology Research Unit. In addition, Dr Halliday works closely with Associate Professor Ian Kerridge (University of Sydney and Royal North Shore Hospital) to develop research into fertility and pregnancy challenges after treatment for haematological malignancy. Further research in this area has been conducted as a partnership between Dr Withall and Professor Brian Draper (Aged Care Psychiatry at Prince of Wales Hospital and the Dementia Collaborative Research Centre) and A/Professor Nicholas Lintzeris, A/Professor Apo Demirkol and Dr Mark Montebello (Langton Centre, Drug and Alcohol Services, South Eastern Sydney Local Health District). This partnership was established to examine care pathways and health service needs of the growing clinical cohort of older people presenting with drug and/or alcohol abuse. Two studies were funded by grants from the NSW Health Office of Mental Health and Drug and Alcohol. Other aspects of this research include examining challenges for health professionals servicing this group as well as their training needs, and understanding barriers and enablers to care for clients with comorbid cognitive impairment and alcohol/substance abuse.

Innovative policy and strategic directions in the ‘land of happiness’

Dr Anne Bunde-Birouste, Dr Husna Razee

In May 2013, Dr Bunde-Birouste and Dr Razee were invited by the Ministry of Health in the Himalayan kingdom of Bhutan and the World Health Organization (WHO) to serve as consultants and technical advisors for the development of the National Health Promotion Strategic Plan for Bhutan 2013 to 2023. The pair worked collaboratively with WHO, the United Nations Children’s Fund (UNICEF) and members from a number of Bhutanese Ministries along with local stakeholders to develop what was to be first of its kind in the history of the health system of Bhutan.

The strategic plan document provides policy makers, health promoters, educators and other stakeholders with a broad strategic framework for development and strengthening of health promotion within the health sector and sectors across government, private and civil society organisations over the period 2013 to 2023. This strategic plan for Bhutan provides directions for the development of health promotion within the health sector and other government and private sectors and the civil society organisations. The plan is based on epidemiological evidence of the current health situation in Bhutan, best practice and principles in health promotion, and findings from the key stakeholders.

The invitation to take on this landmark work was a strong statement of recognition of the strength of the Health Promotion program at SPHCM, and the significant expertise and experience of its convenors, as reflected in glowing comments from WHO and the Government of Bhutan.
Background

The Football United action research program is one of the SPHCM’s flagship programs. Founded in 2006 by Anne Bunde-Birouste (Convenor of Health Promotion) during her doctoral research, it began with a mission to build opportunities for young people from disadvantaged and diverse backgrounds and their communities for belonging, racial harmony, community cohesion and youth development using the power of football (soccer).

The program involves a complex, multi-level sport for development (S4D) intervention that uses the medium of football (soccer) to promote individual wellbeing, social inclusion and cohesion in disadvantaged communities. Football United has become a leader both nationally and internationally, being the only program in Australia and one of the few internationally with robust research noting quantifiable improvements in the lives of individuals and their communities. Over the past eight years, the team at Football United UNSW has established strong knowledge, experience and research expertise in the field of using sport for social development and change. Diverse publications highlighting learning from within the program are highlighted in the Social Research section of this biennial report.

In Australia Football United now operates in three out of seven states in Australia – New South Wales, South Australia, and in the Australian Capital Territory. Internationally the program team is engaged with numerous international networks including FIFA, Streetfootballworld, Laureus Sport for Good, United Nations Organisation for Sport for Development and Peace and other Sport for Social Change groups across all regions of the world, leading the way in using football to contribute to community and social cohesion, and capacity building for culturally and linguistically diverse people and their communities. The program’s founder, Dr Anne Bunde-Birouste is regularly invited across the world to engage, consult, speak about this rapidly growing area of development and social impact.

Contributing to Health and Well-being in Myanmar

Recognising the Football United’s significant achievements, the UNSW International Department awarded the SPHCM-Football United with a seed grant to address development gaps in Myanmar through the S4D approach.
Football United’s project officer, Dr Tun Shwe, led the development of an initial collaborative program with Myanmar Red Cross and 3 universities in Myanmar. Dr Shwe’s extensive public health and community development experiences and his professional and personal network in Myanmar became a vital element of the further development of Football United in Myanmar. Within a year, the Myanmar Red Cross and 3 universities became in-country implementing partners, with Myanmar Football Federation, UNAIDS, Myanmar Departments of Education, Health and Social Welfare and British Council Myanmar joining as collaborating partners for football-based youth and community development project and a football-based HIV prevention project. These activities were funded jointly by grants from the Asian Football Development Project, Asian Development Bank, UNAIDS, the Asian Football Confederation and English Premier League.

Football United’s multi-sectoral approach in Myanmar involves collaboration in a coalition of not-for-profit organizations, companies, charity foundation, government agencies, universities and local community partners on a common objective. Partnership development, institutional development, youth-led football-based development program and community mobilisation using football’s social power for health promotion such as HIV prevention are key elements of the programmatic approach.

After the two-year initial development phase, Football United organised an international ‘Football for Health and Development’ seminar in December, 2014, hosted by Dagon University in Yangon. The seminar was recognised as a milestone in the country’s development initiatives for the successful advocacy to the nation’s ministries, academia, development actors and football industries about sport for social change movement, its ideology and methodology. Currently Football United is working with several agencies and ministries for further development of the program in order to expand the scope of work to include a holistic approach that encompasses promotion of healthy lifestyle, nutrition, adolescent health, school mental health and disaster risk reduction.

**Assuring Sustainability through a Social Enterprise Approach**

Football United’s Leadership and Lifeskills for youth program was developed with engagement of student interns from the SPHCM and Faculty of Medicine ILP students from 2010 to 2012. After two years of piloting and revision, Football United engaged with the Rugby Youth Foundation to marry its Leadership and Lifeskills in Football program with a social enterprise approach, using sport as the vehicle to engage and develop disadvantaged youth. The resulting Creating Chances program was finalised in 2013 and launched in 2014.

**FIFA World Cup Festival for Hope, 2014**

Football United youth were invited to represented Australia at the international ‘Football for Hope’ Festival, which took place during the 2014 FIFA World Cup in Rio de Janeiro, Brazil. The festival initiative was introduced by FIFA in 2010 to bring youth active in the arena of sport for development together for two weeks of capacity building workshops and fair play games. The Festival is the second of its kind. Football United was also engaged in the inaugural ‘Football for Hope’ Festival held in South Africa in 2010. The ‘Football for Hope’ Festivals are designed to encourage exchange and inter-cultural dialogue between participating delegations as well as with local grassroots organisations. Football United’s delegation consisted of 3 staff and 6 youth from the local high school programs in which the organisation is active.

**Future Directions**

Football United continues to provide significant community engagement, student development opportunities through research opportunities, post-graduate areas of study, and field placements. A comprehensive and industry-leading Monitoring and Evaluation (M & E) program, that will continue to build the credibility, validation and impact measurement, is in development. Future areas of research will examine the social enterprise approach, the role that youth mentoring can have in preventing school and community disengagement, and the impact and effectiveness of the S4D approach internationally.
Juliet Richters joined the School of Public Health and Community Medicine in 2007 as associate professor in sexual health and was promoted to professor in 2014. Juliet has worked in academic research into sexual behaviour, especially for HIV prevention, since 1988. Before that she worked as an editor and manager in consumer publications, wine and food, dictionaries, family planning and general publishing. She has always been interested in applying scientific method to studying sex, a topic that makes many people less than logical—whether they are keen on sex or would rather not hear about it. Although she has an arts background in languages, linguistics and philosophy, Juliet found her niche later via women’s health, specifically in social epidemiology.

Juliet’s research has included national and local surveys of sexual behaviour and attitudes, and also in-depth interview studies and theoretical work on the sociology of sexual practice. Topics include contraception and family planning, condom use, circumcision, casual sex, various sexual practices, and prevention of HIV and other sexually transmissible infections. Population groups studied include gay men, backpackers, university students and other young people, prisoners, the general public, and women in contact with the gay and lesbian community. In 2013–2014 Juliet led two major research projects: the NHMRC-funded Second Australian Study of Health and Relationships (ASHR); and an ARC linkage study with Family Planning NSW.

The Australian Study of Health and Relationships (ASHR) is our most important study of sexual and reproductive health. Conducted once a decade, it provides a snapshot of the sexual health and well-being of the Australian population and provides information essential for the development of policy and the delivery of sexual and reproductive health programs across Australia. The study involves over 20,000 people interviewed by telephone.

The ARC Linkage study with Family Planning New South Wales involves looking at women’s understandings and experiences of contraception in relation to their sexual lives, using in-depth interviews with over 90 women across New South Wales.

Juliet has taught communication and research skills, epidemiology, sociology of health, qualitative research, women’s health and social aspects of sexual health at master’s level in public health. In 2013 she set up and taught a new elective on advanced social and behavioural epidemiology. Some people ask ‘But are you quant or qual?’ Her answer is that you need both—without qualitative research to unpack what people mean when they say and do things, and how they understand the questions we ask them, quantitative survey researchers can find themselves collecting junk data.

Juliet is determined to have some spare time beyond work in 2015. She is a keen cook and loves music, especially chamber music and opera.
The Faculty of Medicine at UNSW continues its sustained contribution to the development of inspirational healthcare leaders in healthcare systems around the world. Our students and alumni can be found in government Ministries and Departments, in primary, secondary and tertiary healthcare services, in public and population health units, across the public, private and NGOs sectors, in both developed and developing countries.

Health systems and services are complex entities, formal structures and loose networks at the same time. Managers and leaders who work within them have to function within environments that are both constantly changing and steeped in century old traditions. With increased government and or stakeholder oversight and control, a shifting regulatory environment, emerging workforce demands at a time of global workforce shortages, rapid increases in the number of patients with chronic and complex conditions, and universal financial shortfalls, the already complex professional world of healthcare managers is becoming increasingly more so.

Open to increased public and media scrutiny in the aftermath of major patient safety scandals, the spotlight firmly on the role of strong healthcare leaders as the enablers of either highly positive or disastrously dysfunctional workplace cultures. Effective leadership and management are at the core of effective healthcare delivery, and modern healthcare leaders need to know how to deal with the demands of new technologies, identify and utilise multiple data, information and knowledge sources, identify and prevent threats to, and enhance, the quality and safety of care, build capacity and manage the performance of individual staff and teams, and respond to sharp demographic changes which are shaping both client and staff profiles.

The health leadership and management program in SPHCM is the oldest and largest program of its type in Australia. The program has close links to the WHO and other key national and international NGOs, and provides students with the opportunity to undertake courses, internships and research both in Australia and internationally. Our dual degree programs, including the MPH/MHM, MIPH/MHM, and the MHM/MBA degree (with SRM University in India), open up new pathways to advanced management and leadership practice development. These dual degree provide a value-added approach to post graduate education. For students already in management and leadership positions they open up the opportunity to undertake electives in highly relevant specialist courses including advanced economic evaluation, applied research methods, community development and health impact assessments, as well as the chance to study in highly specialised fields such as disaster, aged or laboratory management. For students in public health programs, the dual degree provides an opportunity for career progression, by providing them with the additional skills required to manage both people and resources.

Whether in primary, community, tertiary or aged care, generalist or specialist services, in private or the public sectors, there has never been a greater need to identify and facilitate effective and inspiring leadership and management in the health field. Evidence based practice in the clinical field is well established. The need for evidence based policy making and evidence based management are both growing fields, and ones to which Health Leadership and Management@UNSW will make a significant contribution in coming years.
## RESEARCH GRANTS 2013 – 2014

<table>
<thead>
<tr>
<th>Research Project Title</th>
<th>Granting Organisation</th>
<th>Researcher(s)</th>
<th>Years</th>
<th>Total Value</th>
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<tr>
<td>A cluster randomised clinical trial of masks as source control worn by infectious patients for the prevention of nosocomial respiratory infection</td>
<td>University of New South Wales/ Goldstar-NHMRC</td>
<td>Prof Raina MacIntyre – CI Anita Heywood, Bayzidur Rahman, Holly Seale, Joanne Travaglia</td>
<td>2013</td>
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<td>A community case-control study examining environmental and lifestyle risk factors for younger onset dementia</td>
<td>Alzheimer's Australia Dementia Research Foundation Dementia Grants Program</td>
<td>Dr Adrienne Withall – CI Monica Cations, Brian Draper</td>
<td>2014-2017</td>
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<td>A critical analysis of disability in Aboriginal and Torres Strait Islander communities – Scholarship for Scott Avery</td>
<td>CRC for Aboriginal and Torres Strait Islander Health – Lowitja Institute</td>
<td>Dr Joanne Travaglia – CI Scott Avery, Lisa Jackson Pulver</td>
<td>2014-2017</td>
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<td>A pilot study of a systematic patient-centred and practice nurse coordinated model of ACP in Australian general practice</td>
<td>Royal Australian College of General Practitioners/HCF Research Foundation-RACGP Research Grant</td>
<td>Dr Joel Jin-Oh Rhee – CI</td>
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<td>An assessment of equity in health care financing in Timor Leste and Fiji</td>
<td>Australian Agency for International Development Research Awards Scheme</td>
<td>A/Prof Virginia Wiseman – CI Augustine Asante, Andrew Hayen</td>
<td>2013-2016</td>
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<td>Applied research in the prevention and control of infections in the hospital setting</td>
<td>National Health &amp; Medical Research Council/Training Fellowships</td>
<td>Dr Holly Seale – CI</td>
<td>2011-2015</td>
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<tr>
<td>Applied research in the prevention and control of infections in the hospital setting</td>
<td>National Health &amp; Medical Research Council/Training Fellowships</td>
<td>Dr Holly Seale – CI</td>
<td>2011-2015</td>
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<td>Assessing the impact of acellular vaccines on B. Pertussis genotype evolution: using modelling to close evidence gaps and inform policy</td>
<td>University of New South Wales/ Goldstar-NHMRC</td>
<td>Dr James Wood – CI Ruiting Lan, Mark Tanaka</td>
<td>2014</td>
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<td>Can death from chronic life-limiting illnesses be predicted in Australian General Practice?</td>
<td>Royal Australian College of General Practitioners/Primary Care Collaborative Cancer Clinical Trials Group (PC4) Research Grant</td>
<td>Dr Joel Jin-Oh Rhee – CI</td>
<td>2012-2015</td>
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<td>Centre of Research Excellence in Infectious Diseases Modelling to Inform Public Health Policy</td>
<td>University of Melbourne/NHMRC Centres of Research Excellence Shared Grant</td>
<td>Dr James Wood – CI Nicholas Geard, Kathryn Glass, James McGaw, Jodie McVernon, Emma McBryde, Geoffrey Mercer</td>
<td>2014-2019</td>
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<td>Contraception understandings and experiences of Australian women</td>
<td>Australian Research Council/ Linkage Project</td>
<td>Prof Juliet Richters – CI Alexandre Barratt, Deborah Bateson, Ann Brassil, Alison Rutherford</td>
<td>2011-2014</td>
<td>$215,388</td>
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<td>Contraception understandings and experiences of Australian women</td>
<td>Family Planning NSW/ARC Linkage Project Industry Partner Contribution</td>
<td>Prof Juliet Richters – CI Alexandre Barratt, Deborah Bateson, Ann Brassil, Alison Rutherford</td>
<td>2011-2014</td>
<td>$43,078</td>
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<td>Defining Limitations On Meta- Analysis Validity and Reporting: Explorations with Simulation Studies</td>
<td>University of New South Wales/ Goldstar-NHMRC</td>
<td>Prof Marissa Lassere – CI Kent Johnson</td>
<td>2014</td>
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<td>Enhancing diabetes self management among disadvantaged groups using a brief self regulatory intervention in primary care</td>
<td>Diabetes Australia Research Trust, Awards and Research Grants Scheme</td>
<td>A/Prof Rohan Jayasuriya – CI Mark Harris</td>
<td>2014-2015</td>
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CI - Chief Investigator
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<tr>
<th>Research Project Title</th>
<th>Granting Organisation</th>
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<th>Total Value</th>
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<tr>
<td>Establishment of a biostatistical unit for UNSW Medicine</td>
<td>University of New South Wales/ Major Research Equipment and Infrastructure Initiative (MREII)</td>
<td>A/Prof Andrew Hayen – CI Michael Grimm, Mark Harris, Adam Jaffe, Marissa Lassere, Raina MacIntyre, Jeremy Wilson, Heather Worth, Nicholas Zwar</td>
<td>2014</td>
<td>$387,905</td>
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<td>Evaluating the Guideline Enhancement Tool (GET): an innovative clinical training tool to enhance the use of Hypertension Guidelines in General Practice</td>
<td>National Heart Foundation of Australia/Vanguard Grants</td>
<td>Dr Chinthaka Balasooriya – CI Boaz Shulruf, Nicholas Zwar</td>
<td>2014-2015</td>
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<td>Evaluation of a financial incentive to improve the use of preventive medicines by people with asthma</td>
<td>National Health &amp; Medical Research Council, Partnership Projects</td>
<td>Prof Nicholas Zwar – CI Michele Goldman, Aine Heaney, Jinu Ge Jacob, Stephen Jan, Guy Marks, Helen Reddel, Libby Roughhead</td>
<td>2014-2016</td>
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<td>Evaluation of a financial incentive to improve the use of preventive medicines by people with asthma</td>
<td>National Prescribing Service / NHMRC Partnership Project Industry Partner Contribution</td>
<td>Prof Nicholas Zwar – CI Michele Goldman, Aine Heaney, Jinu Ge Jacob, Stephen Jan, Guy Marks, Helen Reddel, Libby Roughhead</td>
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<td>Evaluation of a financial incentive to improve the use of preventive medicines by people with asthma</td>
<td>Asthma Australia &amp; NHMRC Partnership Project Industry Partner Contribution</td>
<td>Prof Nicholas Zwar – CI Michele Goldman, Aine Heaney, Jinu Ge Jacob, Stephen Jan, Guy Marks, Helen Reddel, Libby Roughhead</td>
<td>2014-2016</td>
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<td>Evaluation of the Defence Indigenous Entry Programs</td>
<td>Department of Defence, Commonwealth Government</td>
<td>A/Prof M Haswell-Elkins – CI Sarah Gaskin, Marcia Grand Ortega, Jayna McCalman, Andrew Searles</td>
<td>2014-2016</td>
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<td>Exploring clinical governance in rural and remote primary health care - PhD Scholarship for Ruyamuro Kwedza</td>
<td>Australian Centre for Health Services Innovation</td>
<td>Prof Nicholas Zwar – CI Jinu Ge Jacob, Ruyamuro Kwedza</td>
<td>2014-2015</td>
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<td>Follow-up of Healthy Lifestyles Intervention for Cardiovascular Disease among People with a Psychotic Disorder</td>
<td>University of Newcastle/NHMRC Project Grant Shared Grant</td>
<td>Prof Robyn Richmond – CI Amanda Baker, David Castle, Frances Kay-Lambkin</td>
<td>2011-2014</td>
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<td>HCP ELIOT-Mastering and maintaining the correct use of inhaler devices: how easy is it?</td>
<td>Woolcock Institute of Medical Research/Contract Research</td>
<td>Prof Nicholas Zwar – CI</td>
<td>2014-2015</td>
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<td>Healthy lifestyle intervention among people with psychotic disorders focusing on smoking cessation</td>
<td>Department of Health and Ageing</td>
<td>Prof Robyn Richmond – CI Fran Hyslop</td>
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<td>Healthy Lifestyle Intervention for People with Psychotic Disorders focusing on Smoking Cessation</td>
<td>Health Administration Corporation/ State Government Contract</td>
<td>Prof Robyn Richmond – CI</td>
<td>2012-2014</td>
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<td>Immunisation in under studied and special risk populations: closing the gap in knowledge through a multidisciplinary approach</td>
<td>National Health &amp; Medical Research Council/Centres of Research Excellence</td>
<td>Prof Raina MacIntyre – CI Philippe Beutels, Robert Booy, Dominic Dwyer, John Kaldor, Julie-Anne Leask, Kristine Macartney, Barend Marais, Peter McIntyre, Robert Menzies, Christopher Poulos, Rachel Skinner, James Wood</td>
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<td>Intelligent Meta-Analysis Models: Dealing With Heterogeneity</td>
<td>University of New South Wales/ Goldstar-NHMRC</td>
<td>Prof Nichole Dominique – CI Ken Johnson, Marissa Lassere</td>
<td>2013</td>
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<td>Investigating the trends in non-communicable disease risk factors and premature mortality in Pacific Island countries and how best to allocate funds for control (Fiji, Samoa, Tuvalu)</td>
<td>Australian Agency for International Development Research Awards Scheme</td>
<td>Prof Richard Taylor – CI</td>
<td>2013-2016</td>
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<td>Research Project Title</td>
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<td>Large scale studies to inform and guide public health policy</td>
<td>National Health &amp; Medical Research Council, Career Development Fellowship</td>
<td>A/Prof Bette Liu – CI</td>
<td>2014-2017</td>
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<td>Linkage of the Australian Childhood Immunisation Register (ACIR) and State-Based Registers to Evaluate and Inform Australia’s Immunisation Program</td>
<td>Telethon Institute for Child Health Research/NCRIS Population Health Research Network Proof of Concept Collaboration</td>
<td>Dr Heather Gidding – CI</td>
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<td>Mobility and HIV risk across the Papua New Guinea/Indonesia border</td>
<td>Australian Research Council/Linkage Project</td>
<td>Prof Heather Worth – CI</td>
<td>2011-2015</td>
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<td>Mobility and HIV risk across the Papua New Guinea/Indonesia border</td>
<td>Komisi Penanggulangan AIDS (Papua)/ARC Linkage Industry Partner Collaboration</td>
<td>Prof Heather Worth – CI</td>
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<td>Mobility and HIV risk across the Papua New Guinea/Indonesia border</td>
<td>National AIDS Council (PNG)/ARC Linkage Project Industry Partner Contribution</td>
<td>Prof Heather Worth – CI</td>
<td>2011-2014</td>
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<td>Models to inform prevention and control of emerging infectious diseases in real time</td>
<td>University of New South Wales/Goldstar-NHMRC</td>
<td>Prof Raina MacIntyre – CI</td>
<td>2014</td>
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<td>Older Peoples Air Pollution Study</td>
<td>NHMRC Centre for Air quality and health Research and evaluation (CAR)/Seed Funding</td>
<td>Prof Bin B Jalaludin – CI</td>
<td>2012-2014</td>
<td>$10,000</td>
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<td>Patient acceptability and attitudes to receiving alcohol use enquiry from general practitioners</td>
<td>Royal Australian College of General Practitioners/Family Medical Care, Education and Research Grants</td>
<td>Dr Michael Tam – CI</td>
<td>2014-2016</td>
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<td>Population-based data linkage and modelling studies to evaluate and inform Australia’s immunisation program</td>
<td>National Health &amp; Medical Research Council, Early Career Fellowships</td>
<td>Dr Heather Gidding – CI</td>
<td>2013-2016</td>
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<td>Population-based data linkage and modelling studies to evaluate and inform Australia’s immunisation program</td>
<td>National Health &amp; Medical Research Council, Early Career Fellowships</td>
<td>Dr Heather Gidding – CI</td>
<td>2013-2016</td>
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<td>Population-based record linkage study of the impact of chlamydia infection on reproductive health in women</td>
<td>National Health &amp; Medical Research Council/Project Grant</td>
<td>A/Prof Bette Liu – CI Basil Donovan, Rebecca Guy, Jane Hocking, John Kaldor, Donna Mak, Salli-Anne Pearson, David Preen, Christine Roberts, Louise Stewart, Handan Wand, James Ward</td>
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<td>Positive life pathways for vulnerable adolescents: The role of a life management program approach</td>
<td>Australian Research Council Linkage Project</td>
<td>Dr Sally Nathan – CI Eileen Baldry, Joanne Bryant, Mark Ferry, Andrew Hayen, Patrick Rawstorne</td>
<td>2014-2017</td>
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<td>Positive life pathways for vulnerable adolescents: The role of a life management program approach</td>
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<td>Dr Sally Nathan – CI Eileen Baldry, Joanne Bryant, Mark Ferry, Andrew Hayen, Patrick Rawstorne</td>
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<td>Post-implementation economic evaluation of childhood vaccination programs</td>
<td>Australian Research Council Linkage Project</td>
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<td>Post-implementation economic evaluation of childhood vaccination programs</td>
<td>The Sydney Children’s Hospitals Network/ARC Linkage Project Industry Partner Contribution</td>
<td>A/Prof Anthony Newall – CI Philippe Beutels, Peter McIntyre, Robert Menzies, Robert, James Wood</td>
<td>2013-2015</td>
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<td>Research Project Title</td>
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<td>Providing the evidence to guide adult immunisation strategies: a novel approach using a...</td>
<td>National Health &amp; Medical Research Council Project Grant</td>
<td>A/Prof Bette Liu – CI Emily Banks, Anita Heywood, John Kaldor, Raina MacIntyre, Peter McIntyre, David Muscatello, Anthony Newall</td>
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<td>Reclaimed Water is viewed as an acceptable alternative water for augmenting drinking water supplies</td>
<td>Australian Water Recycling Centre of Excellence/Research Project</td>
<td>Dr James Wood – CI</td>
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<td>Returning home, back to community from custodial care</td>
<td>Australian National University &amp; Department of Health and Ageing</td>
<td>A/Prof M Haswell-Elkins – CI Marcia Grand Ortega</td>
<td>2013-2014</td>
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<td>Risky Business: a qualitative investigation into HIV risk and vulnerability among sex workers in three Pacific countries</td>
<td>Australian Research Council/Discovery Project</td>
<td>Prof Heather Worth – CI Christina Rofe</td>
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<td>Scoping Study for a KBHAC Healing Centre</td>
<td>Kinchela Boys Home Aboriginal Corporation Research Grant</td>
<td>A/Prof M Haswell-Elkins – CI Marcia Grand Ortega</td>
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<td>Second Australian Study of Health and Relationships</td>
<td>National Health &amp; Medical Research Council Project Grant</td>
<td>A/Prof Juliet Richters – CI Richard De Visser, Chris Rissel, Judy Simpson</td>
<td>2013-2015</td>
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<td>Second Australian Study of Health and relationships Inner Sydney Male Oversample</td>
<td>NSW Health/NGO Grants Program</td>
<td>A/Prof Juliet Richters – CI Andrew Grulich</td>
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<td>Tingim Laip Phase 2</td>
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<td>Dr Angela Kelly – CI Patrick Rawstorne</td>
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<td>Travellers visiting friends and relatives: new approaches to understanding and reducing infectious disease risks</td>
<td>Australian Research Council/Discovery Project</td>
<td>Prof Raina MacIntyre – CI Anita Heywood, Holly Seale, Mohamud Sheikh, Mitchell Smith, Heather Worth, Nicholas Zwar</td>
<td>2012-2015</td>
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<td>Travellers visiting friends and relatives: new approaches to understanding and reducing infectious disease – Scholarship for Bradley Forssman</td>
<td>National Health &amp; Medical Research Council/Postgraduate Scholarship</td>
<td>Dr Holly Seale – CI Bradley Forssman</td>
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<td>Ultrasound, embodiment and abortion: An analysis of foetal imaging and the ethics of the selective termination of pregnancy</td>
<td>Monash University/ARC Discovery Project Shared Grant</td>
<td>Dr Niamh Stephenson – CI Catherine Mills</td>
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<td>Understanding the impact of social, economic and geographic disadvantage on the health of Australians in mid - later life: what are the opportunities for prevention?</td>
<td>University of Sydney/NHMRC Strategic Research Shared Grant</td>
<td>Prof Bin B Jalaludin – CI Mark Harris</td>
<td>2011-2014</td>
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<td>Using a biosocial approach to advance pandemic influenza control</td>
<td>Monash University/ARC Discovery Project Shared Grant</td>
<td>Dr Niamh Stephenson – CI Mark Davis, Paul Flowers</td>
<td>2011-2014</td>
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<td>Vaccine Preventable Diseases in adults aged 45 and above in Australia. Postgraduate Scholarship for Ms Amalie Dyda</td>
<td>National Health &amp; Medical Research Council, Postgraduate Scholarship</td>
<td>A/Prof Bette Liu – CI Amelia Dyda, John Kaldor, Raina MacIntyre</td>
<td>2014-2016</td>
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<td>What makes for good leadership in Papua New Guinea's response to HIV?</td>
<td>ABT JTA Pty Ltd/AusAID Subcontract</td>
<td>Prof Heather Worth – CI Christina Rofe</td>
<td>2011-2014</td>
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<td>YOD environmental and lifestyle risk factors</td>
<td>National Health &amp; Medical Research Council, Dementia Collaborative Research Centre</td>
<td>Dr Adrienne Withall – CI</td>
<td>2013-2015</td>
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Annual Research Conferences

Dreaming up the future of Aboriginal and Torres Strait Islander Public Health

The fifth Annual Research Symposium on "Dreaming up the future of Aboriginal and Torres Strait Islander Public Health" was held on Friday, 11 October 2013 at The John Niland Scientia Building, Kensington Campus, UNSW. The conference showcased the most exciting elements in Indigenous research from the School of Public Health and Community Medicine and its affiliated Research Centres: The Centre for Primary Health Care and Equity; The Kirby Institute; and The National Drug and Alcohol Research Centre, which together contribute to leadership setting the population health and health services research agenda in Australia.

Closing the gap requires tangible products such as Muru Marr’s report on the social and emotional wellbeing of Aboriginal and Torres Strait Islander youth to help those in government identify were they can help, where they need to change and where they need stop and listen. Closing the gap means allowing community to help define measures of import and evaluate success. We need new research tools and frameworks that will provide a common language between community experience and research. We need to hear all voices and find the common threads. These revelations are what come from a thoughtful and provocative forum for listening, sharing, and contemplation about global issues experienced by local communities. This is public health at its best.’

Advances in Public Health and Health Services Research at UNSW

The sixth Annual Symposium on "Advances in Public Health and Health Services Research at UNSW" was held on Thursday, 4 September 2014 at the John Niland Scientia Building, Kensington Campus, UNSW. The conference showcased the most exciting elements in infectious disease research from UNSW Medicine, including the School of Public Health and Community Medicine, The Centre for Primary Health Care and Equity, The Kirby Institute and The National Drug and Alcohol Research Centre.

The program included a focus on malaria, emerging infections, sexually transmitted infections, vulnerable populations, translation and policy, epidemiology and modelling, global infectious disease, risk behaviours and infections including presentations (poster and talks) by academics and postgraduate research students from the School and Centres.

The day also included a lively debate featuring our keynote speaker and senior UNSW academics who argued the topic ‘Planning for emerging epidemics is a waste of time’. An afternoon methods session featuring data linkage was followed by an interactive Q&A session. The event concluded with an awards ceremony accompanied by drinks and canapés.
The healthcare field is changing rapidly as systems and services grappling with changing population, disease profile and workforce demographics. The quadruple aim of healthcare, that is improving: patients’ and clients’ experience of care; the health of populations; the value and reducing the costs of care; and the working life (and therefore recruitment and retention) of healthcare staff and professionals requires a new breed of healthcare professionals and managers, individuals capable of predicting and responding to emerging service demands, the ongoing pressures of delivering effective, efficient, equitable and safe healthcare, all within a resource constrained environment.

On the eve of the 60th anniversary of the UNSW health management program (in 2016), the School of Public Health and Community Medicine continues to pride itself in its seminal role as an Australian and international leader in healthcare services, management and leadership research and development. An integral part of that role is our collaboration with our key stakeholders, including industry partners, service providers, government departments and ministries, professional bodies, students and alumni. The result has been a judicious expansion of our course and program offerings, which ensure our students are up to date with the latest research and best practice in their fields.

The UNSW Health Workforce Programs are built directly on the School’s strengths in health management, public health and international public health, as well as specialisations in emerging areas such as health economic evaluation, laboratory and aged care management, and disaster response, amongst many other new and exciting fields. The aim of the programs are to developing the capabilities of health professionals, staff, managers, policy makers and researchers at every stage and level of their career and across all types of health systems and services.
This program is aimed at practitioners in the health and related fields, including aged and disability care. The Practitioner Up-Skilling Program draws on our existing Graduate Certificate (Grad Cert), and Graduate Diploma (Grad Dip) programs and our extensive Summer School courses. This program provides an entry point for practitioners wanting to develop capabilities around specific issues or topics (for example infection control, healthcare economics or disaster response), and is designed for individuals who have only a short period of time in which to develop their skills, or who are returning to study, and do not yet wish to commit to a full Master’s degree.

Students undertaking the Grad Cert or Grad Dip programs commence in Semester 1 or 2. These students must pass the same entry requirements as the Masters’ program, and undertake all course assessments. Our Summer School courses (offered annually from mid-November to mid-December) are open both to students enrolled in SPHCM programs, as well as to anyone with health or associated backgrounds who wish to do a course as a matter of interest. Full details of the Summer School are available in the relevant section of this report.

Early to mid-career professionals are encouraged to consider the second tier of the UNSW Health Workforce Programs. These Masters programs are directed at individuals who are looking for more specific career advancement, either as a way of entering a new field of healthcare or to formalise and extend their current knowledge. Professionals entering at this level undertake our Masters by coursework or Masters by research degrees (see relevant report section for further details). Coursework programs include the Master of Public Health (MPH), Master of International Public Health (MIPH), and Master of Health Management (MHM), as well as our increasing popular programs - the dual degrees (MPH/ MIPH, MPH/MHM, MIPH/MHM).

These programs have a local and international reputation for their up to date, research based content, relevance to current and emerging workplace challenges, and the strong emphasis the School places on innovative approaches to adult and online education. Students enroll in either face-to-face (internal) or distance (external) mode, with external mode including courses conducted via workshops and interactive, online learning. Students who successfully completed courses as part of the Grad Cert, Grad Dip or Summer School (and passed all required assignments), were able to have up to four courses credited if they subsequently applied to undertake a Master’s degree with the School.
FUTURE HEALTH LEADERS (PROFESSIONAL DOCTORATE) PROGRAM

One of the School’s most exciting new programs is the Future Health Leaders Professional Doctorate which commenced in 2013. This program was one of the first of its kind internationally and is highly regarded both locally and globally, and attracting applicants from China, India and North America as well as from across Australia. It represents the vision of FHL Director Raina MacIntyre, who conceived and initiated the program, to make research relevant to the workplace.

This program is unique in a number of ways. Firstly, it recognizes and supports the advancement of practitioner researchers, helping individuals to develop the capabilities required to identify, analyse and create solutions to some of the healthcare field’s immediate as well as long term problems. Secondly, candidates undertake research projects within their own workplaces, enabling them to maintain a concerted focus on their research and to build their knowledge of the healthcare system, adding value to both their organisations and to the fields of public health and health services research more broadly. The program requires a commitment from both the candidates and the employers, who agree to support students’ attendance at induction and training workshops. This benefits employers as they are able to retain talent as they nurture and ‘grow their own’ leaders to the next level of expertise while they continue to work full-time. Places on the DrPH are highly sought after but limited. Eligible candidates are selected through a formal application and interview process. Finally, the program is built on a cohort model. Candidates learn within a cohort and do coursework together with their cohort, building networks and developing professional and research partnerships.

The program has been a great success, with the third intake of students commencing in 2015, and the first graduates expected in 2016.

When I discovered the Future Health Leaders program at UNSW I saw an opportunity to bring my commitment to quality research and my professional career together. The beauty of the DrPh program is that my work IS my research and my research IS my work.

Rebecca Tinning 2013 Future Health Leader Cohort

Our future health leaders in 2014 - Q station

SENIOR HEALTH EXECUTIVES PROGRAM

The aim of this program is to provide advanced health management and leadership designed specifically for senior health care executives. The program brings together Senior Faculty with health leaders who have to deal with the ‘wicked problems’ that lie at the heart of many of the difficulties facing healthcare services both in Australia and internationally. The School has a long history of providing short courses to international guests on public health and health management issues. In the past these have been short term one off programs, but more recently they have included longer term partnerships and or extended programs, with local and international organisations.

The Senior Health Executive Program is intended to challenge current practice and enhance leadership skills. Executive education brings the benefit of our international reputation in health management to both local and international students. The delivery of the program reflects our commitment to innovative approaches to workplace learning and development, and is grounded in our commitment to translational research, transdisciplinary practice and implementation science.
Re-engineering Primary Care for Privately Insured Patients with chronic disease in Australia to reduce utilisation

Supervisors: Professor Nick Zwar and Associate Professor Andrew Hayen

HEAD OF UTILISATION MANAGEMENT AT MEDIBANK PRIVATE

I have always loved research – further education brings great depth to the work I do and opens up many new opportunities. I completed and MA in Media Studies in 2001 and while working in health communications for the health insurer AHM completed an MPH in Health Promotion in 2007. After completing this MPH I was able to capitalise on my skills and move into health promotion, health services development and strategy roles at Medibank Private.

However my studies were always something I did in my “spare time” and although they contributed to the quality of my work in the private sector I was aware that there was a chasm between industry and academia.

When I discovered the Future Health Leaders program at UNSW I saw an opportunity to bring my commitment to quality research and my professional career together. The beauty of the DrPh program is that my work IS my research and my research IS my work.

I am currently the Head of Utilisation Management at Medibank Private and with support from my supervisory team both at UNSW and at Medibank have the good fortune to be developing evidence based programs to help keep our members well and out of hospital.

It is a challenge balancing the commercial needs of industry with the robust academic rigour of higher research. However with the DrPh program I believe UNSW is forging a middle ground and I am bringing my academic and work colleagues along with me for the journey.

My message to newly commencing students is to be innovative. Enrolling in the DrPH program means that you are taking on a new attitude to your professional and academic career and this will involve a great deal of “thinking outside of the box”.

Student Profile: Rebecca Tinning

Future Health Leaders – DrPh Program
2013-2014 has been another period of growth for the postgraduate coursework programs at the School. The School has continued to expand its specialisations and the courses available to students across the three programs: Public Health, International Public Health, and Health Management and the associated dual degrees. During 2013-2014, a new specialisation, Health Economic Evaluation, was added to the suite of specialisations available in the Master of Public Health program. In 2013 and 2014, five new elective courses were added to the diverse range of courses already offered in our programs. These included Immunisation Policy and Practice, Advanced Social and Behavioural Epidemiology, Management of Aged Care Programs and Services, Management of Laboratory Services and Global Non-Communicable Disease: population approaches.

The number of students enrolled in postgraduate coursework programs has grown by 34% from 624 in 2012 to 835 in 2014. Enrolments in our dual Masters programs have increased significantly from 186 in 2012 to 262 in 2014, a 40% increase in enrolments. Our Graduate Summer School has also been an area of growth, with the development of a range of popular new courses. Combined Masters Programs are a major area of growth for the school and there has been strong demand for these dual degree programs by both local and international students, as evidenced by the increase in enrolments from 16 students in 2008 to 262 students in 2014. We offer combined programs of Master of Public Health and Health Management; Master of International Public Health and Health Management; and Master of International Public Health and Public Health. The combined degrees have been designed to prepare public health practitioners for senior roles in public health and health management. Employers and students value the combination of the Master of Public Health degree (MPH) or Master of International Public Health (MIPH) and the Master Health Management degree (MHM) because public health involves management of disease control, health promotion and clinical services in populations as well as the professionals and staff engaged in these activities, and health management draws on public health knowledge and skills relating to local and international health population level health issues affecting the planning and delivery of services, including the impact of infectious diseases and disasters. The dual program Master of International Public Health / Master of Public Health (MIPH/MPH) equips students to work in a range of settings and contexts to manage and improve disease control and health promotion at a population level including reducing the impact of infectious diseases and disasters in resource-constrained settings. The dual program extends the range of available elective courses which allows students to develop greater depth and breadth in public health knowledge and skills.

While studying with us, students actively engage in comprehensive, highly challenging and currently relevant courses that are developed and taught by public health and health services management content experts who are supported by professional education consultants. For students aiming to pursue a career in public health, international public health or health
addition to the already varied suite of course offerings. The newest courses include: Bioterrorism & Intelligence, Non-communicable Disease, Infectious Diseases Intelligence, Infection Prevention & Control, Immunisation Policy and Practice, and Health Economics & Finance for Developing Countries. Existing courses offered as international health electives, such as Tropical Disease Control and, Health Aspects of Emergencies, Conflict and Disasters, remain popular with students in the international health program as well as those enrolled in the public health and health management programs who may choose these courses as general electives.

The Master of Public Health program has been offered by the School since 1989 and remains one of the largest in Australia. Students can choose to enrol in the general degree or combine this with either a Master of Health Management or Master of International Health. Alternatively, they can enrol in the Master of Public Health in one of six areas of specialisation: Health Promotion; Primary Health Care; International Health; Infectious Disease Epidemiology & Control; Aboriginal Health and Wellbeing and Health Economic Evaluation. All public health program options have proven to be popular with students with a total of 462 enrolled across all Public Health programs, 193 of whom were enrolled a combined Masters degree (an increase of 35% from 2012).

The Muru Marri Indigenous Health Unit has continued to provide teaching excellent in Indigenous health. In 2014, the contributions to teaching of the Muru Marri Indigenous Health Unit were officially recognised through a Vice-Chancellors Award for Teaching Excellence for programs that enhance learning to the Muru Marri Unit. The Aboriginal Health and Wellbeing specialisation includes two stream-defining courses: Aboriginal
Health and Wellbeing Across the Lifespan and Public Health Perspectives in Indigenous Health, as well as Case Studies in Aboriginal Health. These courses are richly rewarding for our students and staff and have attracted both Aboriginal and Torres Strait Islander students and non-Indigenous students. Aboriginal and Torres Strait Islander student enrolments have increased from 1 to 2 between 2008 and 2011, to 6 to 8 between 2012 and 2014.

The range of courses offered in public health has increased with new courses in Immunisation Policy and Practice, Advanced Social and Behavioural Epidemiology Management of Aged Care Programs and Services and Global Non-Communicable Disease: population approaches. The new course Management of Laboratory Services was developed for the Graduate Summer School.

The Master of Health Management was the first degree of its type in Australia and has evolved for nearly 60 years. It retains its pre-eminent position in the field and is accredited by the Australasian College of Health Services Management (ACHSM) and endorsed by the Royal Australasian College of Medical Administrators (RACMA). The program continues to grow, both on its own, and more recently through the School’s dual degrees which are becoming increasingly popular. Total enrolments across all Health Management programs were 178 in 2013 and 192 in 2014, including 176 students enrolled dual degree programs MPH/ MHM or MIPH/ MHM in 2013 which increased to 206 in 2014.

The major focus of the Health Management Program is to support health practitioners in their desire to take on the role of health managers and leaders in Australia and Internationally. In order to facilitate this process, the Health Management Program has consulted widely with its key stakeholders, including health departments and services, accrediting bodies, professional organisations, community organisations, consumers and consumer organisations, researchers, Faculty, Conjoint Faculty, students and alumni. As a result of this input, and the vision of the Head of School Professor MacIntyre and the Dean of the Faculty, Professor Smith, the Health Management program has expanded over the last two years. New models of education are currently under development or being piloted, including a professional doctorate, executive education and programs which will eventually reach out to India and China.

The Management Program has also recently commenced a period of sustained review of its content and focus in line with University, professional and Government requirements and expectations. The last review was held in the mid 2000s and much has changed in terms of the expectations and demands placed on healthcare managers. Whatever the improvements to be made to the program, its overall aim will remain the same – to support and enable students to develop the capabilities required to meet the challenges faced by all healthcare managers irrespective of location or type of service, that of ensuring the provision of accessible, appropriate, effective, efficient, high quality and safe healthcare.

We are fortunate to have a team of Education Consultants in the School who help ensure continual course review and revision across all of our programs, and support academic staff in developing innovative course materials and teaching technologies. Each course has a Moodle website, which supports online learning for local students and those who choose to study by distance mode, further increasing flexibility for students.

Staff in our associated Institutes and Units, including the Muru Marri Indigenous Health Unit, the Centre for Primary Health Care and Equity (CPHCE), and the Kirby Institute provide important expertise by teaching courses in Indigenous health and wellbeing, primary health care and equity, health leadership and management, HIV/AIDS and international health. This contributes significantly to the richness, depth and diversity of our programs to prepare students to work or conduct research in key health fields.
## Student Numbers

### COURSEWORK PROGRAMS

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<tr>
<th>Program</th>
<th>Number of Students</th>
<th>Number of Graduates</th>
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<td>Master of International Public Health &amp; Master of Health Management</td>
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### RESEARCH PROGRAMS

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<td>Master of Health Administration</td>
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<td>Master of Health Professions Education by Research</td>
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<tr>
<td>Master of Community Medicine</td>
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<tr>
<td>Master of Philosophy</td>
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The Internship Program provides a small number of high achieving students enrolled in the Master of Health Management, Master of Public Health or International Public Health degree (including dual degree) programs at the University, with the opportunity to gain real-world experience in a relevant health organisation through a workplace internship of 6 weeks duration. UNSW is the first university to provide an internship with coursework programs.

The purpose of these placements is for students to gain:

- a capacity to contribute to, and work within, a workplace setting relevant to their studies
- an opportunity to engage in professional and other networks
- an appreciation of and respect for diversity
- an understanding of translation of academic knowledge into practice

During the course, interns have an opportunity to make valuable contributions to organisational initiatives that may involve areas such as policy, planning, and evaluation, or the preparation, appraisal, or implementation of health related projects. The activities and the focus of the internship placement are relevant to the organisation and student and can be either project or normal operations-based.

Nineteen students have successfully completed the program in a range of domestic and international placements (2013/2014) including:

- Fred Hollows Foundation
- Cancer Council – NSW
- The Sax Institute
- Fitness Australia
- SRM Department of Community Medicine, Chennai India
- Secretariat of the Pacific Community (SPC), New Caledonia
- World Health Organization, Regional Office for South-East Asia, Delhi, India

Due to the popularity of the program, the number and scope of placements has increased to include placements in other Australian states and expanded opportunities in the Asia/Pacific region. Many of the SPHCM interns are looking to transition into the public health workforce and see the internship program as the first opportunity to experience the work opportunities that are available to them. The following quotes illustrate the value that students have placed on the program:

"I am currently studying a Master of International Public Health (MIPH) and Master of Public Health (MPH). I have significant experience working clinically in health, but public health is a new area for me. I enrolled in the internship program as I thought it would provide an amazing opportunity to consolidate knowledge I had learnt in the MIPH/MPH program, with practical experience. The opportunity to undertake the internship in India appealed to me, as this would expose me to a different culture and environment than I was used to – something I think is necessary to truly understand the term ‘international public health’."

Alison Kerr, Master of International Public Health / Master of Public Health (Dual Degree)

"During my coursework I did an internship at the policy and advocacy unit of the Cancer Council, NSW. The internship experience and the fact that cancer is the leading cause of mortality and morbidty in Mongolia, inspired me to initiate a similar non-governmental organisation. I established a local NGO called the "National Cancer Council of Mongolia". This NGO provides information and advice to cancer patients and their families as well as giving information to the community on how to prevent cancer."

Tsetsegtsakhun Batmunkh, Master of Health Management/Master of Public Health

"I was initially drawn to the internship program by the high calibre placements on offer. I was placed with the Emergency and Humanitarian Action Unit, South East Asia Regional Office, World Health Organization, New Delhi, India. I also wanted to fully realise the Master of Public Health stream I had enrolled in (International Health) with some practical developing world experience. The internship program was a perfect way to blend my global health aspirations with practical and academic work – the internship counted as six units of credit towards my MPH”.

Aditya Vyas, Master of Public Health (International Health Specialisation)
As an international student with the working experience in public health sector of Mongolia I decided to enrol in the internship program to obtain hands-on experience in Australian work environment, enhance professional development and integrate academic knowledge and skills in work settings.

I was placed at the Policy and Advocacy Unit of the Cancer Council for three months. The workplace environment in Woolloomooloo office was such a friendly and supportive, that I extended my stay for two months as a volunteer. I have been involved in undertaking a review of national and international peer-reviewed literature, and other evidence sources, about psychosocial oncology services and provide to CCNSW a report that includes recommendations about a model of psychosocial oncology care in NSW cancer services and highlights potential advocacy issues.

I enjoyed different activities organized by Workplace wellness committee, such as walking challenge, multicultural cooking event and workplace meditation courses.

Working at the Cancer Council helped me to understand the issues related with cancer in a broader aspects and understand how strong research based evidences can support policy and advocacy. I have had an invaluable opportunity to learn from leaders in public health policies, learn workplace culture and broaden my horizons in a way I could never have imagined. The most rewarding thing about my internship is that it helped me to realize the area I would like to focus in my future career.

The internship experience and the fact that cancer is the leading cause of mortality and morbidity in Mongolia, inspired me to initiate similar non-governmental organization. I established the local NGO named “National Cancer Council of Mongolia” with the aim to support cancer patients, their families and provide information to the community about the ways to prevent cancer.

I would definitely encourage students to utilize all possibilities to expand their knowledge and recommend the internship program. It is a way to engage with Australian workplace, make connections, gain work-related skills that employer’s value and most importantly, increase your employment options after graduation.

Communications and experience, I obtained during my internship at Cancer Council together with the knowledge from SPHCM course helped me to join World Health Organization in Mongolia. Furthermore, my internship experience will assist me to strengthen non-government organizations role in tackling health inequities among cancer patients in my home country.
We decided to enroll in the internship program to acquire professional experience, knowledge and skills to enhance our studies and future careers in public health. We both appreciate the value of experience gained outside the classroom and believed that the internship presented an ideal opportunity to gain this experience. We found two aspects of the internship particularly rewarding:

1. The opportunity to interact with local communities was valuable on personal and professional levels. We visited a number of urban and rural villages as part of the Department’s regular medical outreach and research activities and spoke with local people about their health related behaviours and beliefs. We were also able to visit a number of unique communities including a gypsy settlement, a leprosy colony and a remote Scheduled Tribe village.

2. During our internship, the Department went to great lengths to ensure that we were exposed to most aspects of the Indian healthcare system. This included visiting primary health centres under the National Rural Health Mission, secondary level centres including a rural mission hospital, a government district hospital and, lastly, tertiary level centres including SRM Hospital and Christian Medical College Hospital in Vellore. We also had the opportunity to visit the National Siddha Institute in Chennai, where a traditional form of Tamil medicine is practiced. During each of these visits we were able to speak with staff about the day-to-day functioning of the facilities and strengths and weaknesses of the services.

The internship will assist us in our future careers by providing us with key transferable skills and insights. In terms of transferable skills, we developed:

- Cultural competence, in both the workplace and the field. We learnt about different social norms and expectations and the importance of being tolerant and adaptable.
- Key research skills including defining relevant research questions, identifying research populations, developing questionnaire, and data management and analysis.
- Self directed learning including negotiating goals and deadlines with workplace supervisors.
- Team work skills including the ability to work with a variety of colleagues including SRM faculty, SRM postgraduate students, SRM undergraduate medical students and medical staff in the various health facilities we visited. In such diverse groups, we learnt that clear and assertive communication, active listening and politeness are essential.

In terms of insights, we gained an understanding of:

- Key health issues in India and the key challenges currently facing India and Tamil Nadu in particular, the healthcare system in India and its strengths and weaknesses.
- The social and cultural practices that form the context of health and healthcare and the social determinants of health.
- Medical and public health education in India and how this influences the functioning of the healthcare system.
The SPHCM Graduate Summer School has grown in strength and size over recent years, with new course offerings provided every year. It has become an exciting meeting place, a place where students and practitioners gather, discuss and explore some of the most important and intriguing current challenges in healthcare, including disaster and emergency responses, healthcare economics, primary healthcare, the management of chronic and complex diseases and more recently the management of specialist services including aged care and laboratories.

A unique aspect of Summer School is that although the majority of students are SPHCM postgraduates they are frequently joined by students and practitioners from around Australia or around the world. In any of the individual courses offered by the SPHCM, our students may be working closely with students from other Faculties or even other Universities, in addition to a range of healthcare practitioners, managers and policy makers, studying to extend their expertise or develop further skills in specialist areas.

Over recent years, Summer School courses are conducted in ‘block mode’ (usually between two to five days), with a range of courses offered each year between mid-November to mid-December. From 2016 online courses are also planned. This results in a highly interactive and intensive period of study, which allows participants to absorb themselves in their chosen area while drawing on their existing professional and personal experience and field knowledge.

Summer School courses provide a framework for advanced study in many areas of public health, international public health and health management. Courses are available in the fields of: disasters and emergency responses; primary healthcare; communicable and non-communicable diseases; management of aged care and laboratory services; community development and population health, including health inequalities and health impact assessment; infectious diseases; and healthcare economics and modelling. All the courses offered can be taken for postgraduate degree credit by both domestic and international students, or as a standalone unit, as credit courses for individuals who may wish to utilise the units for credit towards future studies at SPHCM, or even as non-credit workshops for individuals with an interest in specific topic areas. For participants undertaking the program for coursework credit, the workshops are usually followed by coursework to be completed over an eight week period.

Over the last two years, Summer School courses have been expanded to now include:
SPHCM’s Master of Health Management was the first degree of its type in Australia. It retains its pre- eminent position in the field and is accredited by the Australasian College of Health Services Management (ACHSM) and endorsed by the Royal Australasian College of Medical Administrators (RACMA). The program continues to grow, both on its own, and more recently through the School’s dual degrees which are becoming increasingly popular. The suite of offerings now include the MHM, MHM Extension, MPH/MHM, the MIPH/MHM, the new MPH/MHM (Economic Evaluation), the Grad Dip and Grad Cert in HM.

The popularity of health management is evident in its enrolments, with an 84% increase in the number of students between 2009 (217 individuals) and 2014 (400 individuals) undertaking our programs.

The major focus of the Health Management Program is to increase health practitioners capabilities to take on the role of health managers and leaders across Australia and Internationally. In order to facilitate this process, the Health Management Program has consulted widely with, and listened intently to, its key stakeholders, including health departments and ministries, health, aged care and disability services, accrediting bodies, professional organisations, community organisations, consumers and consumer organisations, researchers, Faculty, Conjoint, students and alumni. As a result of this input the program has expanded in the number of courses available to students, and via the introduction of a new economic evaluation specialisation. New approaches to adult education, including the introduction of blended learning and the development of the first Massive Online Open Course on health leadership are underway.

Whatever the improvements to be made to the program, and such improvements will continue as long as we seek and incorporate feedback from our stakeholders, the overall aim of the SPHCM health management program will remain the same: to support and enable students to develop the capabilities required to meet the challenges faced by all healthcare managers and leaders in ensuring the provision of accessible, appropriate, effective, efficient, high quality and safe healthcare.
The school offers a range of Higher Degrees by Research (HDR) programs designed to meet a wide range of student needs. These include research only degrees (PhD and Masters by Research), combined coursework and research degrees (Master of Philosophy) and a Professional Doctorate in Public Health (DrPH), which is undertaken as part of the Future Health Leaders Program. Research students in the School are involved in a range of research areas including the flagship areas of Global Health, Infectious Diseases, Primary Health Care, Indigenous Health and Social Research. The PhD in Medical Education program provides the opportunity for candidates undertake an in-depth exploration of research priorities in medical education. The Future Health Leaders Program, in which candidates enroll in a DrPH, is offered to a limited number of successful applicants each year, in partnership with suitable health workplaces.

The School has a growing body of candidates enrolled in HDR programs. In 2013, a total of 21 HDR candidates graduated. There were 49 new enrolments in postgraduate research degrees in the School (23 PhD candidates, 12 DrPH candidates, 8 Masters by Research candidates, 6 Masters of Philosophy candidates). This represented a net gain of 27 students, resulting in a total of 175 research degree students in 2013 enrolled in the School.

New enrolments continued in 2014, with 45 new candidates (28 PhD, 2 Masters by Research, 12 DrPH, and 3 Masters of Philosophy candidates). A total of 20 research degree students graduated (16 PhD graduates, 1 MD graduate and 3 DrPH graduates). Overall, there was a net gain of 2 candidates, resulting in a total of 177 HDR candidates enrolled in the School.

Our HDR candidates represent a diversity of experience both professionally and culturally. Alongside candidates from all parts of Australia, New Zealand, India and China, the School has attracted candidates from nations as diverse as Sri Lanka, Hong Kong, Singapore, Italy, United Kingdom, Cambodia, Ireland, Germany, Saudi Arabia, South Africa, Iran, Vietnam, Uganda, USA, Poland, Netherlands, Bangladesh, Myanmar, Japan, Lebanon, Pakistan, Vietnam, Chile, Sweden, Taiwan, Brazil, Solomon islands, Tanzania and Tonga. The wealth of knowledge and experience from different cultural contexts contributes to the richness of the SPHCM community.

All candidates are guided through their studies by supervisors and co-supervisors, who are academics either within the School; its affiliated Centres or conjoint staff members. These supervisors contribute enormous effort and support, and ensure rigour in guiding students to completion. A thorough review process, which includes an independent panel, provides students with a regular opportunity to receive constructive feedback from academics and practitioners in the field outside their immediate supervisory team. Almost all the staff and many conjoint staff provide this additional input to maintain the high quality of candidates’ research and to ensure on time completion. In addition to their academic supervisors, DrPH candidates are also guided by their workplace supervisors, who form part of the supervisory team.

HDR students continue to get opportunities to present their research at the School’s regular research symposia which showcase research from SPHCM and its affiliated research Centres. In 2013, 4 students presented on a range of topics on Aboriginal and Torres Strait Islander Public Health. The 2014 annual research symposium focused on public health aspects of infectious diseases, 4 students presented on
a range of topics including malaria, emerging infections, sexually transmitted infections, vulnerable populations, translation and policy, epidemiology and modelling, global infectious disease, risk behaviours and infections.

The Research Degree Committee of the school is made up of key stakeholders and staff members. This committee is chaired by Prof Robyn Richmond and provides policy direction, advice and support to research students and their supervisors. Our research candidates and supervisors are supported by a Postgraduate Coordinating team. In 2013 this team consisted of two postgraduate coordinators (Prof Robyn Richmond and A/Prof Rohan Jayasuriya), a Research Student Support Officer, and a separate Student Support Officer for the DrPH program. With the increase in the number of higher degree research students in 2014, the team was expanded to include three postgraduate coordinators and a senior PGC. This team is led by the senior Postgraduate Coordinator, Prof Robyn Richmond who is the Director of the Postgraduate Research Degree programs in the School of Public Health and Community Medicine. There are three Postgraduate Coordinators (PGCs): Dr Husna Razee who is responsible for admissions, scholarships and progress reviews; Dr Chinthaka Balasooriya who is responsible for the examination process and transfers to PhDs, and Dr Siranda Torvaldsen who is responsible for the DrPH program. The PGC team liaises closely with the Faculty of Medicine Higher Degree Committee and the Graduate Research School regarding student issues and policy. Ms Catherine Webster held the position of Research Student Support Officer, while Ms Abela Mahimbo assisted the DrPH candidates. The school coordinates activities to encourage networking within the HDR candidates, and to facilitate interaction between staff and HDR candidates.

"I have had excellent academic training from School of Public Health and Community Medicine in successfully completing the Master in Public Health (MPH) in 2009 and Doctor of Philosophy (PhD) in 2015. I enjoyed great support from my supervisors and we co-authored more than 15 papers in peer-reviewed journals from 2012-2015, including five as first author from the PhD thesis. I was awarded a “Dean’s list” citation from the Faculty of Medicine in 2013. Since the completion of my PhD, I am working as Postdoctoral Research Fellow in the School."

Aabbr Chughtai accepting his award from the Dean of Medicine, Prof Peter Smith

"I thoroughly enjoyed my time as a PhD candidate within the SPHCM. The PhD journey is a challenging experience but for me it was made easier by the excellent supervisory and administrative support I received. I was also actively encouraged to develop my research skills beyond my thesis, including presenting at national and international conferences and working in both a Research Assistant and teaching capacity within the School. These experiences have provided me with a strong foundation for a career in public health and I feel incredibly fortunate to have been a part of this program."

Ranmalie Jayasinha

"Undertaking the DrPH program at UNSW enabled me to work collaboratively with many talented public health practitioners and researchers on a range of applied studies. I learnt a tremendous amount from these experiences and am grateful for the opportunity. Completing the degree has provided me with the confidence and abilities to further my career in public health. I am currently employed by the NSW Ministry of Health as a senior epidemiologist in the field of Aboriginal health research and evaluation; I feel lucky to be working in an area that I feel passionate about”.

Dr Aaron Cashmore at graduation
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<th>PhD Students</th>
<th>Research Area</th>
<th>Supervisor(s)</th>
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<tr>
<td>Alice Munro</td>
<td>Reducing alcohol and drug related harm in rural Aboriginal communities</td>
<td>Anthony Shakeshaft &amp; Melissa Haswell-Elkins</td>
<td>Public Health and Community Medicine</td>
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<tr>
<td>Amalie Dyda</td>
<td>Vaccine preventable disease in older Australian adults</td>
<td>Bette Liu, Raina MacIntyre &amp; John Kaldor</td>
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<td>Amina Razzaq</td>
<td>Understanding constraints in the Fijian health system to the prevention of mother to child transmission of HIV (PMTCT) services in Suva</td>
<td>Heather Worth &amp; Joanne Travaglia</td>
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<td>Anna Mikolaizak</td>
<td>Fit to be left at home: a new model of care to safely assess, intervene and prevent further falls and fall related injury in older people who call an ambulance as a result of a fall</td>
<td>Jacqueline Close &amp; Joanne Travaglia</td>
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<td>Anna Williams</td>
<td>Integrating self-management plans with primary care management: building a predictive model of patient-provider care congruence</td>
<td>Mark Harris &amp; Patricia Bazeley</td>
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<td>Ranmalie Jayasingha</td>
<td>Beyond ‘insiders on the outside’: identity constructions and wellbeing of Australian born young people of New Zealand descent living in Sydney</td>
<td>Joanne Travaglia, Anne Bunde-Birouste &amp; Judith Motion</td>
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<td>Biana Hoban</td>
<td>Medication use and associated risks in chronic non-cancer pain patients prescribed opioids</td>
<td>Louise Degenhardt, Briony Larance, Suzanne Nielsen &amp; Natasa Gisev</td>
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<td>Carina Hickling</td>
<td>Capacity building, organisational development and aid effectiveness: building capacity to respond to emergencies focusing on sexual and reproductive health in East Southeast Asia and the Pacific</td>
<td>Jan Ritchie &amp; Anna Whelan</td>
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<td>Catherine Sharp</td>
<td>Preventing pressure injuries in residents with dementia</td>
<td>Mary-Louise McLaws, Robin Turner &amp; Johanna Westbrook</td>
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<td>Chhorvoin Om</td>
<td>Translation of policies from high-to-low resourced setting to address irrational antibiotic use</td>
<td>Mary-Louise McLaws, Ellen Baron &amp; Jim McLaughlin</td>
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<td>Christine Linhart</td>
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<td>Richard Taylor &amp; Stephen Morrell</td>
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<td>Diana Arachi</td>
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<td>Siaw-Teng Liaw &amp; Pradeep Ray</td>
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<td>Edward Reis</td>
<td>HIV and human rights</td>
<td>Heather Worth &amp; Patrick Rawstorne</td>
<td>HIVSRC Consortium Scholarship</td>
</tr>
<tr>
<td>Fatema Khatun</td>
<td>An Assessment of Community Readiness for mHealth in Rural Bangladesh</td>
<td>Siaw-Teng Liaw, Anita Heywood, Pradeep Ray &amp; Abbas Bhuiya</td>
<td>ADS 2007 contract</td>
</tr>
<tr>
<td>Fiona Haigh</td>
<td>From advocacy to action: Utilising Health Impact Assessment as a tool to realise the right to health</td>
<td>Lynn Kemp &amp; Patricia Bazeley</td>
<td>NHMRC Biomed &amp; Public Health Priority</td>
</tr>
<tr>
<td>Freda Pitaka</td>
<td>Adolescent pregnancy in the Solomon Islands: Identifying the demographic and social characteristics of adolescent mothers and their birth outcomes</td>
<td>Patrick Rawstorne, Alison Rutherford &amp; Graham Roberts</td>
<td>ADS 2007 contract</td>
</tr>
<tr>
<td>Hamish Robertson</td>
<td>The Geography of Alzheimer’s Disease</td>
<td>Andrew Hayen, Andrew Georgiou &amp; Julie Johnson</td>
<td>Australian Postgraduate Award</td>
</tr>
<tr>
<td>Ingrid Aneman</td>
<td>The burden and prevention of Clostridium difficile infections (CDI) in the Australian hospital setting: Setting the scene for the introduction of a new vaccine</td>
<td>Holly Seale &amp; Raina MacIntyre</td>
<td>Public Health and Community Medicine</td>
</tr>
<tr>
<td>Jed Horner</td>
<td>A consuming ‘threat’: the materialisation and negotiation of ‘immigrant tuberculosis’ in Sydney, NSW</td>
<td>James Wood</td>
<td>Australian Postgraduate Award</td>
</tr>
<tr>
<td>Joel Rhee</td>
<td>A study of Advance Care Planning (ACP) in the Australian Primary Care Context</td>
<td>Nicholas Zwar &amp; Lynn Kemp</td>
<td>NHMRC Medical Postgraduate</td>
</tr>
<tr>
<td>Kaniz Fatema</td>
<td>A study on the Prediction of Cardiovascular Diseases in Bangladeshi Population</td>
<td>Bayzidur Rahman &amp; Nicholas Zwar</td>
<td>Australian Postgraduate Award</td>
</tr>
<tr>
<td>Name</td>
<td>Title</td>
<td>Authors</td>
<td>Funding</td>
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<td>Karen McMillan</td>
<td>HIV prevention for sex workers in the Pacific</td>
<td>Heather Worth &amp; Patrick Rawstorne</td>
<td>Australian Postgraduate</td>
</tr>
<tr>
<td>Kumiyo Inoue</td>
<td>Contraception understandings and experiences of Australian women</td>
<td>Juliet Richters &amp; Patrick Rawstorne</td>
<td>Public Health and Community Medicine</td>
</tr>
<tr>
<td>Louise Shaw</td>
<td>An application of the safe system approach to cycling safety: A cohort study of NSW cyclists</td>
<td>Roslyn Poulos, Julie Hatfield &amp; Christopher Rissel</td>
<td>Australian Postgraduate</td>
</tr>
<tr>
<td>Matthew Begun</td>
<td>Individual based models for assessing the impact of case-based interventions on Tuberculosis</td>
<td>Anthony Newall, James Wood &amp; Guy Marks</td>
<td>Australian Postgraduate</td>
</tr>
<tr>
<td>Melanie Anderson</td>
<td>Study of urban Aboriginal housing and its relationship to health</td>
<td>Anna Williamson &amp; Sally Redman AO</td>
<td>NHMRC Postgraduate</td>
</tr>
<tr>
<td>Monica Cations</td>
<td>A community case-control study examining environmental and lifestyle risk factors for younger onset dementia</td>
<td>Adrienne Withall &amp; Brian Draper</td>
<td>Public Health and Community Medicine</td>
</tr>
<tr>
<td>Monitha Pinidiyapathirage</td>
<td>Studies in gestational diabetes in Sri Lanka: progression to impaired glucose regulation and efficacy of a behavioural intervention</td>
<td>Rohan Jayasuriya, Ngai Wah Cheung &amp; Vanessa Rose</td>
<td>Australian Postgraduate</td>
</tr>
<tr>
<td>Nicole Mealing</td>
<td>Statistical approaches to the evaluation of the impact of vaccination programs</td>
<td>Andrew Hayen &amp; Anthony Newall</td>
<td>Australian Postgraduate</td>
</tr>
<tr>
<td>Nouhad El-Haddad</td>
<td>The influence of culture, language and religion on health literacy for weight management in primary health care services in disadvantaged communities</td>
<td>Mark Harris, Catherine Spooner &amp; Nighat Faruqi</td>
<td>Public Health and Community Medicine</td>
</tr>
<tr>
<td>Patti Shih</td>
<td>The role of religion and faith-based organisations in addressing HIV in Papua New Guinea (PNG)</td>
<td>Heather Worth &amp; Joanne Travaglia</td>
<td>Australian Postgraduate</td>
</tr>
<tr>
<td>Rajneesh Kaur</td>
<td>Improving hand hygiene (HH) compliance and its clinical implications in medical students</td>
<td>Holly Seale &amp; Husna Razee</td>
<td>Australian Postgraduate</td>
</tr>
<tr>
<td>Sarah Gaskin</td>
<td>Empowerment to measure program and service needs and outcomes</td>
<td>Melissa Haswell-Elkins, Anthony Shakeshaft &amp; Lisa Jackson Pulver</td>
<td>Australian Postgraduate</td>
</tr>
<tr>
<td>Sharon Salmon</td>
<td>Improving hand hygiene compliance and its clinical implications in a sample of health care facilities across Viet Nam</td>
<td>Mary-Louise McLaws</td>
<td>ARC-School of Public Health Scholarships &amp; UNSW Medicine</td>
</tr>
<tr>
<td>Shona Dutton</td>
<td>Quantifying physical activity behaviour in a primary care setting - an instrument for measuring physical activity change in general practise</td>
<td>Sarah Dennis &amp; Mark Harris</td>
<td>Public Health and Community Medicine</td>
</tr>
<tr>
<td>Susan Clarke</td>
<td>A cluster-randomised controlled trial of community education to prevent the development of chronic suppurative otitis media in children in Jumla Nepal</td>
<td>Robyn Richmond &amp; Heather Worth</td>
<td>Public Health and Community Medicine</td>
</tr>
<tr>
<td>Trinidad Valenzuela Arteaga</td>
<td>Understanding and improving adherence to Exercise-based fall prevention interventions in older adults</td>
<td>Kim Delbaere, Stephen Lord, Husna Razee</td>
<td>Tuition Fee Scholarship</td>
</tr>
</tbody>
</table>
School of Public Health Lunchtime Seminars

From February to November the School of Public Health and Community Medicine hosts general research seminars designed to showcase important research in public health. Held three times a month, these seminars cover topics from International health, infectious disease, health promotion and Indigenous health. The seminars are designed for a broad public health audience that includes not only the school but associated centres throughout the medical faculty, the wider university and other organisations such as the NSW Ministry of Health. Convened by Dr James Wood, the seminars feature a mix of invited speakers, school research staff and late-stage PhD candidates. Highlights in the last two years include presentations by A/Prof Virginia Wiseman on Malaria interventions in Cameroon and Prof Basil Donovan on the early impacts of HPV vaccination.

Quantitative Research Methodology Seminars

Monthly morning seminars on qualitative research methodology have been run by Dr Sally Nathan in the last two years. These seminars give staff, postgraduate researchers and conjoint staff as well as staff from associated Research Centres and Hospitals the opportunity to discuss conceptual and practical issues of doing qualitative and mixed-method research in health. On average 10-20 people have attended each session and many welcome the interaction with other qualitative researchers across disciplines. Some sessions have consisted of participants sharing their setbacks, experiences and expertise on topics such as approaches to analysis, ethnography, writing for more positivist audiences, rigour in qualitative research and doing research on sensitive issues with vulnerable communities as well as often addressing philosophical concepts in qualitative approaches. Other sessions have involved a guest speaker focussed on his or her research, leading discussion, giving practical methodological guidance and encouraging problem-solving and sharing of experiences in the group. The email list for the attendees also acted as a means of dissemination of useful ideas, links and articles for example ‘how-to’ papers on methodology, and training sessions for qualitative analysis software.

Qualitative Research Methodology Seminars

The School runs a monthly research seminar on quantitative research methods. The seminars feature hour long talks from disciplines such as epidemiology, biostatistics, mathematical modelling, health economics and related areas. Speakers come from UNSW Medicine, School of Mathematics and Statistics, NSW Ministry of Health, the NSW Cancer council and other National and International institutions. The seminars have been convened by Dr Bayzidur Rahman since 2010, and jointly with A/Prof Andrew Hayen since 2012. Highlights in 2013 include, A/Professor Freddy Sitas from the NSW Cancer Council on the CLEAR study, Professor Tuan V. Nguyen on Bayesian Evaluation of Research Findings, Dr Michael Klompas form the Harvard University on Automated public health surveillance and Professor Sahotra Sarkar from the University of Texas on Optimization Model for Disease Intervention.
The school makes a significant contribution to teaching within the postgraduate program, medicine program and general education programs. The design and delivery of these programs is informed by a scholarly approach to learning and teaching. This process is facilitated by close interaction between staff with content expertise and educational expertise. This approach has resulted in a range of educational innovations.

SPHCM has a commitment to curriculum, teaching and assessment practices underpinned by constructive alignment and inquiry based learning. This ensures a clear rationale and framework for guiding the continued academic excellence in the design of curriculum, learning strategies and assessments across the undergraduate and postgraduate programs. The core principles that inform our practice are:

- Rigorous evidence informed learning and teaching strategies
- Student-centred learning strategies
- Nexus of research and teaching
- Inquiry based learning for promoting deep learning and engagement
- Scenario based learning and authentic learning and assessment that fosters professional capacities for real-world practice
- Continuous evaluation processes for ensuring academic excellence
- Reflexive practice by academics on their teaching for strengthening own strategies
- Emphasis on academic integrity
- Commitment to engaging in scholarship of learning and teaching

**Academic excellence in Postgraduate programs**

SPHCM postgraduate learning and teaching is grounded in inquiry-based learning (Jenkins, Breen, Lindsay & Brew 2003) and the use of authentic cases and examples drawn from the real world. Students are encouraged to contribute to discussions and peer-learning activities drawing on their own experiences in health related settings whether they are interacting in class or online. Through this approach students gain a strong understanding of a multiplicity of health contexts, challenges and approaches from local and international perspectives and also develop a network of professional relationships.

There is a strong nexus between research and teaching within the design and delivery of the courses. Relevant current research informs the content within courses and academics draw on their own research where relevant. Students are encouraged to engage with current research literature and dilemmas, and develop their critical thinking and writing for evidence informed practice. Across the programs students are encouraged to contribute to discussions and peer-learning activities drawing on their own experiences in health related settings whether they are interacting in class or online. Through this approach students gain a strong understanding of a multiplicity of health contexts, challenges and approaches from local and international perspectives and also develop a network of professional relationships.

(Adapted from Healey and Jenkins 2009)
to engage in all four quadrants of research informed practices as part of the inquiry based learning as in this diagram.

Dual mode and online and blended learning

The School has continued to build on its history and recognition within the University of leading in the delivery of flexible online courses and blended learning in postgraduate provision. It occupies a well-deserved reputation for the academic quality and effectiveness of its postgraduate programs. These are all offered in dual mode using innovative and evidence informed online and blended learning strategies. This is reflected in the increasing numbers of students attracted to the postgraduate programs consonant with our commitment to academically rigorous and meaningful learning experiences whatever our modes of delivery.

Innovative approaches

A number of evidence informed learning and teaching innovations have been introduced. These have been selected to optimise online learning and teaching strategies to meet the diverse needs of our expanding postgraduate student numbers and large external student cohorts.

The integration of innovations using emerging educational technologies is focused on providing an effective learning environment through connecting students to peers and course convenors, fostering meaningful dialogue, and supporting interaction and communication within a course. Throughout our approach is a commitment to enhancing the quality of students’ learning experiences by applying pedagogically sound, technologically innovative and research driven approaches to our postgraduate learning and teaching.

Innovative approaches have included the use of vodcasts of lectures using the UNSW Echo360 system and access to enrichment resources such as videos from real-world scenarios and global examples from the field. A significant development in 2013-2014 was the introduction of real-time webinars, as well as piloting the use of blogs and wikis in a small number of courses.

Webinars

In 2014 the School introduced real-time webinars using Blackboard Collaborate in a number of its courses. The webinars have provided an opportunity for convenor-led synchronous online tutorials with our external students. The embedded video and voice features have allowed real-time connection and engagement amongst external students and the opportunity for course convenors to provide similar experiences to on-campus tutorials. Informal external student feedback was very positive. Students noted the important role webinars played in feeling connected to peers and the School as well as the opportunity to ask questions and discuss ideas in a different way to text based online discussion forums. The success of the webinars is leading to wider use across the School’s postgraduate courses. A small research project is planned on the efficacy of webinars in the external postgraduate learner experience for 2015-2016 to provide an evidence base for informing their specific use within our postgraduate programs.

Blogs

Online Blogs were introduced to the Qualitative Research Methods course on a trial basis in 2014 to help develop students’ reflexivity skills, address individual learning needs and to build confidence of shy students to actively contribute to class discussions. The initial trial showed improvement in student confidence and reflexivity skills. FGD on the use of the Blog revealed that students found this “a good way to solidify thoughts in class”. A more formal evaluation of the Blog is planned for 2016.

Assessment

SPHCM conducted a systematic review of the assessments in its postgraduate programs in 2012-2013 as part of the university wide project to enhance program quality, efficiency and coherence in assessment strategies. The SPHCM outcomes were published in Improving Assessment in Higher Education (2013). The project found evidence of a high level of constructive alignment between SPHCM course learning outcomes and assessment methods. It also found a pleasingly diverse range of assessment methods across the Masters programs and strong emphasis on authentic real world assessments and a strong level of student satisfaction with course assessments.
The project identified that an area for improvement was student feedback on assessments for enhancing their experience. In response SPHCM undertook a coherent and concerted approach to strengthen this area principally through the use of online rubrics and Grademark. The School was one of the first in the University to adopt the embedded online Grademark tool. The Senior Research Fellow Teaching and Learning and the Program Directors trialed the software and developed an assessment schemata which has been utilized by a number of courses throughout the School and across the Faculty and the University. The Schemata addresses assessment criteria for a specific assignment, as well more generic UNSW and SPHCM graduate skills, such as providing supporting evidence for an argument. The use of Rubrics and Grademark has supported academics in providing students with feedback in an efficient, timely and consistent way.


Academic excellence in Medical Education

The school makes a significant contribution to the discipline of Medical Education and makes a high quality contribution to learning and teaching within the Medicine Program.

Research and innovation in Medical Education

The Medical Education group at the school is engaged in a range of educational research activities. Key amongst these is a project that has developed and evaluated an educational instrument to enhance the use of clinical practice guidelines. This project received Category 1 research grant funding from the National Heart Foundation of Australia:


This work has provided a unique insight into factors that influence clinical decision-making.

The school is responsible for the PhD program in Medical Education. Candidates enrolled in this program have developed educational innovations that have received high level recognition. A key innovation amongst these is the development of an educational instrument to better prepare medical graduates for internship. This work received an ANZAHPE award, a UNSW Innovation award, and in 2014 the team received further funding to develop an iPad app to facilitate the use of this instrument within clinical settings.


Training in Medical Education Research

As a follow up to this work, another doctoral candidate is developing an educational instrument to promote the competencies required to effectively learn within collaborative learning environments. This instrument is currently being trialed and is likely to be increasingly useful as the faculty moves towards blended learning.
short-term fellowship to develop an innovative research method:


This has led to further requests for training in medical educational research, and is likely to lead to the development of a formal program in educational innovation.

Evidence-based approaches to developing teamwork skills in medical students

Academics at the school have major responsibility for the Teamwork capability, which is one of eight graduate capabilities of the Medicine program. A systematic approach has been adopted to enhance the development of this capability. This approach was informed by a research project funded by a strategic learning and teaching grant. A key feature of this approach was a student-led process to identify strategies that were likely to be effective:


The project led to the development of a suite of assessment methods to guide the development of the relevant competencies. These are now embedded within the Medicine Program.

Scholarly approach to embedding Public Health principles within Phase 1 Medicine courses

The School has contributed to ensuring a focus on the discipline of Public Health and Community Medicine in Phase 1 of the Medicine Program by developing a Public Health Curriculum Framework and embedding Public Health principles within a range of learning activities. This was driven by a scholarly approach that was informed by a review of best practice literature, and tailored to suit the UNSW program by systematically seeking input from staff and students.

Another innovative learning activity to embed public health principles was the use of “Public Health Dilemmas” in Phase 2 Society and Health course. This involves presenting students with a controversial question reflecting current public health debates in public forums and media. These questions are linked to the weekly curriculum themes and students are required to state their position on the relevant issue and justify their stand.

Innovations in blended learning

SPHCM has developed a number of innovative blended learning activities, targeting students and teachers. An example of the former is in the Phase 3 Primary Care course where a blended learning package consisting of six eLearning modules and two campus lectures allows students to develop their skills in managing cardiovascular risk factors and in assessing and managing difficult patient presentations. An example of the latter is the BLAST (Blended Learning Approach to Supervisor Training) project, funded by a UNSW Learning and Teaching Innovations Grant. This project aims to develop a series of modular blended learning modules that could be used not only by SPHCM or UNSW Medicine, but by other disciplines within UNSW, for workplace supervisor development and training.

Leadership in academic development

SPHCM academics play a significant role in leading educational innovation, mentoring staff and conducting staff development activities. Our academics have been invited to lead seminars at international conferences and at UNSW learning and teaching fora:

Xanthe Lawson comes from a background in adult education and was working in the TAFE sector before undertaking a master of arts majoring in e-learning at the University of Technology, Sydney. This degree provided Xanthe with an in-depth understanding of the theoretical frameworks associated with online learning and introduced her to the field of instructional design.

After graduating, Xanthe sought to enhance her technical skills. She undertook the Moodle Course Creator Certificate and became one of only approximately 50 people to complete this high level certification in Australia. Xanthe then worked for a private company developing and delivering Moodle training, and designing Moodle courses for government and non-government organisations.

Xanthe has been the Educational Designer for the School of Public Health and Community Medicine since mid-2013. During this time she has been integral to transitioning courses from the Blackboard learning management system to Moodle and improving the user experience in Moodle through a consistent and logical interface design.

In 2014 Xanthe was awarded an SPHCM prize for ‘Support for Teaching Outcomes’ and a Dean’s Award for professional and technical staff.

Xanthe works collaboratively with the academics to introduce innovative learning technologies to enhance the learning experience for students studying face-to-face and fully online. She has encouraged the take-up of webinars to allow course convenors to connect with distance students in real time and answer questions and explain concepts, and also to allow students to connect with each other and online group projects. She has also overseen the introduction of wikis for collaborative writing online and the use of blogs for the development of semester-long reflective practice.

The School enabled Xanthe to develop her videoing skills since starting two years ago so she is now integral to the production of learning and teaching videos and promotional videos for School courses and events. These can be used to create media-rich learning environments that help develop the social presence of course convenors online as well providing ‘virtual tours’ of places of interest to students that are offsite, such as the Kirketon Road Centre and the Langton Centre.

In 2014 Xanthe helped the School win two Learning and Teaching Innovation grants. The first is a grant to produce a number of multimedia, interactive, self-paced modules to develop the capacity of students in evidence-informed academic practice. The second is an online module for tutors to build their capacity in giving quality feedback to students.

‘I really love my job. It’s such an exciting time to be involved in educational design. We have so many tools at our finger-tips to create engaging, interactive, adaptive and media-rich learning environments, we haven’t even scratched the surface yet.’
The School plays a major role in fostering student learning in public health, the community context of medical care, and primary care, throughout the UNSW Medicine program. The guiding principle adopted by the School is a holistic approach to health care, recognising that health occurs within a socioecological context, and further that the majority of medical care occurs in the community. It is therefore vital that graduates of UNSW Medicine develop clinically relevant competencies in public health, as well as community and population medicine.

As the Program comprises of integrated courses, students learn public health and community medicine content and concepts within all courses, from years one to six. Academics from the School are directly involved with various types of learning activities including lectures, tutorials, clinical workshops, clinical supervision, and facilitation of scenario group sessions. In addition they are involved in, or provide assistance for, student assessment, curriculum development, clinical supervisor education and support and academic administration. SPHCM academics play a significant leadership role in the Medicine program, by convening Phase 2, co-convening Phase 3 and by conducting staff development activities across the three Phases.

Courses

Three key courses/terms within the Medicine Program are convened by the School and have a strong public health and community medicine focus. These are described below:

**Society and Health – Phase 1**

Society and Health is one of eight courses within Phase 1 (Years 1 & 2) of the Medicine Program. The themes of this course are social determinants of health and disease; measuring health status; health care systems; and improving health by public health approaches. Major public health concepts covered in this course include disease epidemiology, prevention of infectious diseases, immunisation, public health policies, social justice, disease stigma, inequity and inequality, and the history of public health. Additional public health concepts are integrated through each of the other courses in Phase 1.

**Society and Health – Phase 2**

This is one of six terms within Phase 2 (Years 3 & 4) of the Medicine Program and builds upon the themes covered in Society and Health during Phase 1. Over six weeks, students explore and gain a deeper understanding of population health through experience in community health settings, with a direct emphasis of its application to clinical practice. Students are provided learning opportunities to enable them to integrate knowledge of the social determinants of health with patient assessment and management. In addition, they learn how to critically evaluate the way a health system balances differing priorities when providing health care on a population level, as well as developing skills in teamwork, ethical and reflective practice within the context of community health care.

**Primary Care – Phase 3**

Primary Care is one of ten courses within Phase 3 (Years 5 & 6) of the Medicine Program. Students spend eight weeks in one or more urban and/or rural general practice clinics under the supervision of experienced GP preceptors. They are expected to participate in the clinical activities of the practice and take responsibility as a member of the practice team.

Interactive campus learning activities at the beginning of the term provide an overview of General Practice as a medical discipline, and provide a framework for students develop their consultation skills, clinical reasoning, interpersonal communication, and clinical management. These are supplemented by blended learning activities that focus on cardiovascular risk factor management and the assessment and management of difficult patient presentations.
Cross-course curriculum themes

Ethics

The School contributes heavily to student learning in medical ethics. Ethics teaching is integrated throughout all three Phases of Program, and into associated courses such as the pre-admission Indigenous students course; clinical transitions course; and bridging students course. The School assists with ethics teaching in all of these arenas, with particular contributions towards teaching of general bioethics concepts; specific topics such as public health ethics, medical professionalism and clinical ethics; curriculum development; and ethics assessment. The School also provide Ethics Officer support to the Medicine Program.

Indigenous health

The Muru Marri Indigenous Health Unit at the School provides invaluable support in developing medical student learning in Aboriginal and Torres Strait Islander health throughout the Program. The Unit is involved in developing learning materials, curriculum development, direct teaching of medical students, as well as consulting and advising on improvements in the Program's cultural appropriateness and sensitivity.

Independent Learning Projects

The Independent Learning Project (ILP) provides UNSW medical students with a period of in-depth study that engenders an approach to medicine that is constantly questioning and self-critical. The ILP aims to promote lifelong learning patterns and skills which will enable them to approach future medical challenges in their careers with a rigor and depth not possible without a detailed knowledge of the formal processes of research, literature appraisal, data collection, analysis and presentation.

The School is actively involved each year in the supervision of a cohort of students undertaking their ILP. Moreover, it has also key staff involved in research training and mentoring programs for ILP students across the Medicine Faculty.

Research in learning and teaching

The Medical Education Group engages in a range of research projects that explore various aspects of learning and teaching. In the 2013-14 period these results in publications of two book chapters, five peer reviewed journal articles, two invited commentaries and were the subject of five conference presentations. Grants for these projects were received from the Heart Foundation Australia and Health Workforce Australia.

The Medical Education Group at the School has initiated a number of important activities to enhance student learning of public health and community medicine content and concepts, and to better integrate this learning across courses and phases. These initiatives are detailed in the section titled ‘Academic Excellence in Learning and Teaching’.

SPHCM contribution to the General Education Program

General Education courses aim to complement the more specialised learning undertaken in a student’s chosen field of undergraduate study and contribute to the flexibility which graduates are increasingly required to demonstrate in the workplace.

The School is the largest provider of General Education Courses within the Faculty of Medicine. The existing courses provided in 2013-14 were:

- Concepts of Physical Activity, Exercise & Health
- Managing Media
- Health and Power in an Internet Age

During 2013-14 the courses on Managing Media and Health and Power in the Internet Age were reviewed and updated. As well as this two new General Education Courses were developed.

- Nutrition and Health. This course aims to help students become familiar with the basic science of human nutrition and enable them to critique the modern nutrition environment.
- Principles of Health Education & Behaviour Change. This course was developed and approved to be offered for the first time in semester 1 2015. The aims of this course are to enable students to: gain an understanding of theories and models of behaviour change, develop core knowledge of health communication and health literacy, learn different social and cultural perspectives on the meaning of health, develop core knowledge of health education including its principles and concepts, and gain skills and strategies that impact health behavioural change.
Professor Yunus and UNSW Deputy Vice-Chancellor Les Field signed a Memorandum of Understanding (MOU) at a ceremony in Sydney. Transforming poor and marginalised communities through research into social business and health is the aim of a new agreement between UNSW and Nobel peace laureate Professor Muhammad Yunus. Under the MOU, UNSW’s School of Public Health and Community Medicine will collaborate with the Yunus Centre, established by the Nobel laureate, to improve health outcomes for poor communities in Australia, Asia and the Pacific.

Professor Yunus was awarded the Nobel Peace Prize in 2006 and the US Presidential Medal for Freedom in 2009 for his work as the founder of Grameen Bank. Grameen Bank provides small, low-interest loans to the poor in Bangladesh as a means to lift people out of poverty. This model of ‘microfinance’ has been replicated around the world.

Industry links

International and local engagement is important to UNSW and the School of Public Health and Community Medicine. In order to foster and sustain linkages with partners we establish a Memorandum of Understanding (MOU). Linkages are also developed through agreements, letters of intent and letters of support. The School values these links and the aim of these is to nurture the formation of research networks and collaboration, the sharing of knowledge, and training and development opportunities.

Research

- International Centre for Diarrhoeal Disease Research
- Myanmar Red Cross Society
- Myanmar Maternal and Child Welfare Association
- Faculty of Public Health, Mahidol University
- Centre for HIV prevention and Research - University of Nairobi
- SRM University Chennai India
- Ted Noffs Foundation
- The East Timor National University
- Yunus Centre

Teaching

- GP Synergy Ltd
- Medvarsity-Apollo Hospitals Hyderabad
- Myanmar Red Cross Society
- The East Timor National University

Student Agreements

- International Centre for Diarrhoeal Disease Research
- Medvarsity-Apollo Hospitals Hyderabad
- Faculty of Public Health, Mahidol University
- Centre for HIV prevention and Research - University of Nairobi
- SRM University Chennai India


Di Giusto, E. and Rawstone, P. R. (2013) ‘Is it really crystal clear that using methamphetamine (or other recreational drugs) causes people to engage in unsafe sex?’, *Sexual Health*, 10(2), 133-137.


Ewing, M., Read, P., Knight, V., Morgan, S., Hanlon, M., McDonald, A., McLver, R., Wright, S. and McNulty, A. (2013) ‘Do callers to the NSW Sexual Health Infoline attend the services they are referred to?’, *Sexual Health*, 10(6), 530-532.


**SPHCM HERDC PUBLICATIONS 2014**


Davis, M., Flowers, P. and Stephenson, N. (2014) "We had to do what we thought was right at the time": retrospective discourse on the 2009 H1N1 pandemic in the UK', Sociology of Health & Illness, 36(3), 369-382.


Biennial Report 2013-2014
Our People
STUDENT AWARDS

The Australian Medical Association Prize For General Practice:
Best aggregate mark from course and phase assessments in Primary Care in Phase 3
Jia (Jenny) Liu (2013)
Amy Chur-Yee Liu (2014)

The Muru Marri Aboriginal Undergraduate Merit Prize:
Exemplary performance in the Medical School at UNSW
Laura Fitzgerald (2014)

The Hunt And Hunt Health Law 1 Prize:
Best performance in PHCM9331 Ethics and Law by a student in Australia, in the Master of Health Management or Master of Public Health program
Sarah Louise Barter (2013)
Alexandra Scott (2014)

The School of Public Health and Community Medicine Prize:
Best performance by a student enrolled in postgraduate coursework Masters program at the School of Public Health and Community Medicine
Susanne Alexandra Devlin (2013)
Julia Kennedy (2014)

The Muru Marri Aboriginal Merit Prize:
Recipient for 2013 – This Muru Marri merit award is for the first time given to an institution, the Aboriginal Medical Service Western Sydney (AMS) in recognition of their committed leadership in Population Health. In particular, leadership in the growing of six public health professionals over the past three years, each of whom has successfully graduated from UNSW in November 2013
Recipient for 2014 – Best performance in the Public Health impact of a published, peer reviewed paper on Indigenous Health
Bronwen Phillips and Mark Harris

The John Hirshman Prize In Public Health:
Best overall performance in the Master of Public Health program
Susanne Devlin (2013)

The John Hirshman International Health Prize:
Best performance in PHCM9605 International Health
Edward Winn-Dix (2013)

Sixth Annual Research Symposium:
Best student poster displayed
Syed Azim (2013)
Abrar Chungtai (2014)
SPHCM Awards

Overall school prize recognising outstanding service to SPHCM:
Prof Lisa Jackson Pulver (2013)
A/Prof Andrew Hayen (2014)

Support for Research Outcomes:
Christina Rofe (2013)
Elizabeth Kpozehouen (2014)

Support for Teaching Outcomes:
Xanthe Lawson (2013)
Phillip Raponi (2014)

Excellence in Customer Service:
Vanessa Green (2013)
Ravit Danielli Vlandis (2014)

UNSW Medicine Awards

Award for Outstanding Contributions to Student Learning:
A/Prof Joanne Travaglia (2013)
Dr Joel Rhee (2013)
Dr Winston Lo (2014)

Dean's Rising Star Awards:
Dr Megan Williams (2013)
Dr Bayzidur Rahman (2014)
Dr Sally Nathan (2014)

Dean's List:
Louise Maher (2013)
Abrar Ahmad Chughtai (2013)
Surabhi Liyanage (2013)
Rajneesh Kaur (2014)

Dean's Awards for Professional and Technical Staff:
Christine Rousselis (2013)
Xanthe Lawson (2014)
Christina Rofe (2014)

The Aileen Plant Memorial Prize in Infectious Disease Epidemiology

Ms Dorothy Machalek, PhD candidate, The Kirby Institute (2013)
Dr Hammad Ali, The Kirby Institute (2014)

Top left: Professor Raina MacIntyre receives Peter Baume Health Impact Prize from Emeritus Professor Peter Baume AC

In 2014 Professor Raina MacIntyre was awarded the National Immunisation Achievement Award from The Public Health Association of Australia to honour and recognise her outstanding research in the field of immunisation / vaccine preventable diseases. This Award is the Association’s pre-eminent prize in the field of immunisation and vaccine preventable diseases. Professor MacIntyre received this award at the PHAA 14th National Immunisation Conference in Melbourne.

Associate Professor Bette Liu was awarded one of the National Health and Medical Research Council’s (NHMRC) top prizes for excellence for having the highest ranked Career Development Fellowship (Population Health Level I) for 2013. The National Health and Medical Research Council acknowledged the recipients of its Research Excellence Awards at a ceremony in Canberra, with the prizes being presented by Federal Minister for Health Peter Dutton.
SPHCM People

HEAD OF SCHOOL
Professor Raina MacIntyre

PROGRAM DIRECTORS AND SPHCM EXECUTIVE 2013-2014
Dr Chinthaka Balasooriya (Assistant Director, Undergraduate)
A/Professor Andrew Hayes (MDP Director and Associate Dean, Postgraduate Coursework for UNSW Medicine)
Dr Anita Heywood (MDP Assistant Director)
Professor Raina MacIntyre (UNSW Future Health Leaders Program Director)
Ms Sally Nathan (ILP Coordinator)
Mr Phillip Raponi (Student Services Manager)
Dr Patrick Rawstorne (MDP Assistant Director)
Prof Robyn Richmond (MDP Postgraduate Research Degree Program)
Ms Anil Singh-Prakash (Executive Officer and Manager)
Professor Richard Taylor (MDP Director)
Dr Sirantha Torvaldsen (UNSW FHL Coordinator)
A/Professor Joanne Travaglia (MDP Director and Summer School Director)
Professor Nick Zwar (Undergraduate Program Director and Presiding Member for UNSW Medicine)

PROFESSOR
Professor Lisa Jackson Pulver AM
Professor Siaw-Peng Liaw
Professor Mary-Louise McLaws
Professor Robyn Richmond

Professor Juliet Richters
Professor Richard Taylor
Professor Heather Worth
Professor Nick Zwar

ASSOCIATE PROFESSOR
A/Professor Melissa Haswell
A/Professor Andrew Hayes
A/Professor David Haslop
A/Professor Rohan Jayasuriya
A/Professor Bette Liu
A/Professor Anthony Newall
A/Professor Roslyn Poulos
A/Professor Joanne Travaglia
A/Professor Virginia Wiseman

SENIOR LECTURER
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Dr Anne Bunde-Birouste
Kevin Forde
Dr Anita Heywood
Dr Reece Hinchcliff
Dr Winston Lo
Dr David Muscatello
Dr Sally Nathan
Dr Md Baqizidur Rahman
Dr Patrick Rawstorne
Dr Joel Rhee
Dr Alex Rosewell
Dr Holly Seale
Dr Mohammed Sheikh
Dr Niamh Stephenson
Dr Robin Turner
Dr Sirantha Torvaldsen
Dr Adrienne Withall
Dr James Wood

LECTURER
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Dr Mahfuz Ashraf
Sally Fitzpatrick
Dr Lesley Halliday
Dr Hassan Hosseinzadeh
Dr Rose Leontini
Dr Padmanesan Narasimhan

Christine Linhart
Dr Husna Razeen
Dr Rebecca Reynolds
Dr Michael Tan
Dr Megan Williams

SENIOR VISITING FELLOW
Dr Philippe Beutels
Dr John Dewdney

VISITING FELLOW
Dr Zoie Wilkins-Wong

POST DOCTORAL FELLOW
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Dr Prakash Paudel
Dr Josephine Reyes

VISITING SENIOR LECTURER
Dr Ilse Blignault

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Professor Adrian Bauman
Professor Anthony Blinkhorn
Professor John Daly
Dr Christine Duffield
Professor Mark Ferson
Professor Bin Jalaludin
Professor Lynn Kemp
Professor Marissa Lassere
Professor Glenda Lawrence
Professor Tuan Ngugen
Professor Christopher Poulos
Professor George Rubin
Professor Don Smith

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A/Professor Andrew Cole
A/Professor Abdullah Demirkol
A/Professor Michelle Gayer
A/Professor Peter Gonski
A/Professor Robert Hall
A/Professor Meredith Makeham
A/Professor Suzanne McKenzie
A/Professor Anna McNulty
A/Professor Peter Smerdely

HONORARY ASSOCIATE PROFESSOR
A/Professor Jan Ritchie

HONORARY SENIOR LECTURER
Dr David Thomas

HONORARY VISITING FELLOW
Peter Trebilco OAM
CONJOINT SENIOR LECTURER
Rosemary Aldrich
Dr David Allen
Leah Bloomfield
Dr Greg Bowling
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Dr Rachel Burdon
Dr Kerr Chant
Dr Nicholas Collins
Dr Angela Dawson
Dr Kim Delbaere
Anne Eastwood
Dr Stella Engel
Dr H John Fardy
Dr Frank Formby
Dr Paul Freeman
Dr Susan Furber
Dr Judit Gonczi
Igal Augarten
Dr K Suresh Badami
Roger Blackmore
Dr Sangeetha Bobba
Dr Andrew Bonney
Dr Rohan Bopage
Dr Desiree Broughtwood
Dr Jeremy Bunker
Joan Burns
Dr Christopher Carmody
Dr Joseph Casamento
Dr Aaron Cashmore
Christie Chamberlain
David Chiew
Dr Philip Conroy
Dr Wendy Cox
Dr Helen Cramb
Margaret Cunningham
Dr Jan Maree Davis
Dr Kahn Diep
Dr Francis Donoghoe
Dr Peter Edwards
Dr Ian Elder
Dr Jacques Ette
Dr Matthew Gardiner
Dr Cedric Gemenis
Dr Akbar Ghani
Andrew Gow
Dr Vinod Gojal
Dr Jan Gratton
Natalie Grove
Dr Stephen Hampton
Dr Scott Hannan
Dr Andrew Hardy
Dr Lara Harvey

CONJOINT LECTURER
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Dr Ian Adair
Dr Sunil Adusumilli
Dr James Atkin
Dr Ali Ajam
Dr Christopher An
Dr Huy An
Dr Paul Annett
Dr Francisco Antonio
Dr Soheyl Aran
Igal Augarten
Dr K Suresh Badami
Roger Blackmore
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Dr Scott Hannan
Dr Andrew Hardy
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Elizabeth Kpozehouen
Aye Moe
Jennifer Price

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Tessalonica Ho
Fran Hyslop
Sarah Jacob
Flora Lau
Xanthe Lawson
Shereen Matthews
Nina Milic
Olivia Rajit
Phillip Raponi
Christina Rofe
Christine Roussetis
Michelle Sams
Tun Aung Shwe
Anil Singh-Prakash
Michaela Turner
Our Students
Sharon Salmon

In 1998, when I completed a Bachelor of Nursing in Sydney Australia I never dreamt that I would undertake an MPH and then complete a PhD on infection control in Vietnam.

In 2005, post MPH exhaustion, I left the comforts of Australia and took leave from my work in NSW Public Health to head to Vinh, Vietnam as an Australian Youth Ambassador for Development (AYAD) for 8 months. Now 10 years later, (and still in Asia), I am privileged to write and publish about a country that I now call my second home.

After extending and completing my AYAD assignment, many opportunities opened for me to delve deeper into the world of Infection Control in the developing country context including positions held with CARE Vietnam and later World Health Organization (WHO) both regional and Vietnam country office.

Deeply excited and privileged to work with WHO Vietnam as the technical officer for Infection Control I decided to eventually leave this post to pursue full-time PhD work to gain expert research knowledge so that my contribution to global public health was complimented with a strong academic foundation.

I chose UNSW SPHCM for its globally recognised academic excellence. Importantly, I wanted to have the opportunity to work with Prof Mary-Louise McLaws who has a profound understanding of infection control and epidemiology in the resource-limited context and shares my passion for health equality.

My PhD is done through publication and specifically addresses barriers and facilitators for hand hygiene compliance in Vietnam which address concerns and issues revealed in Vietnam that are also applicable to the other similar countries.

Since commencing my PhD in 2010, I have moved from Vietnam to Singapore where I currently live and work. My PhD has helped me to manage the infection control team in a large teaching hospital and has helped me to contribute and author a number of research publications. I continue to be closely engaged with WHO and have participated in three Ebola outbreak response missions in Liberia. My work and passion for globally outbreak response has always been support by my supervisor and we even expanded my PhD to incorporate my experiences in resource-limited countries to emphasise the importance of novel infection control interventions.

I have always embraced my PhD as a journey; it has never hindered me but pushed me to greater aspirations. Now, as I am in my final steps, I constantly reflect and draw breath at how far I have come. I realise my biggest life and academic lesson was how to question and debate the label ‘one-size fits all’ and understand that perseverance is interwoven with patience and being technically astute.

For those of you considering undertaking a PhD my practical advice: work on a topic that is close to your core; choose a supervisor that shares your passion and respects your knowledge (as limited or broad as it may be). Importantly, don’t do it just for the ‘Doctor’ title … you will miss out on fantastic learning journey of a lifetime! Finally, live life with no regrets and don’t be one of the many people who say to us current PhD students: “I was going to do my PhD”! Thank you for this eye-opening, unforgettable rollercoaster ride Prof McLaws!

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Since I worked in a street clinic of Kolkotta as a baccalaureate graduate, I have been driven by a passion for both discovering the world and giving my bit to make it fairer. Strongly believing that individual and population health is crafted by social and political circumstances as much as by genes and microbes, I embarked on a professional journey that saw me becoming a medical doctor in Geneva, Switzerland, where I specialised in internal medicine followed by a course in tropical diseases and international health in Bangkok, Thailand. Upon returning to Europe, I worked in a teaching hospital as a GP serving vulnerable groups of population such as homeless and undocumented immigrants. Years of clinical practice taught me that there were patterns of diseases and of health behaviour among different social and cultural groups and that medicine as a tool for alleviating human suffering, was often poorly efficient. Change had to come from more proximal interventions and indeed, doctors were diseases specialists rather than health specialists. I had thus to change perspective.

Selecting a public health education program was not an easy task with so many universities competing for students. I narrowed my search criteria to institutions providing a wide range of learning opportunities in different fields, delivering degrees that combined different tracks and giving students the opportunity to develop their own research project for their thesis. While Australia seemed way too far, the appeal of living by the sea in Sydney after so many years spent in an Alpine country and the quality of life for a family of four like ours won the decision. So we packed and moved for a two-year stay, settling down in Coogee, a fantastic family-friendly place just minutes from the Kensington campus.

Even though I enjoyed some courses more than others during my combined MPH/MIPH program, the courses were excellent eye-openers about how improving and understanding public health had become a global challenge, particularly considering the number of perspectives and methodologies that could be applied. The best surprise was to lose my medical certainties about health and to broaden my understanding by discovering new fields of knowledge such as sociology, political sciences, anthropology and psychology. Indeed, the strength of UNSW is to bring together professionals, students and academics alike, from different fields and to create circumstances in which knowledges communicate and merge. The highlight of my course was my project about family management of HIV in Papua New Guinea, where Dr Angela Kelly, my mentor, introduced me to qualitative research and to this fascinating country.

Learning to think differently obviously became a serious challenge to overcome. I had the chance to have enough time to read a lot, debate with new friends, explore and think, a luxury doctors frequently only dream of. Indeed, engaging with people from all around the world was among the best surprises this program brought and at the end of the day, friendship will maybe remain longer than pure knowledge.

Well, since then, I’ve returned to working as a GP with homeless and undocumented immigrants and I completed my PhD. Having reached a good academic position at home, it opened new perspectives, notably in research and I am using my new skills developed during the MPH/MIPH program. I wish all newcomers will have as much chances and pleasure I have had. And don’t forget, when your brain reach ebullition point, walk down Coogee Bay Road to the beach and have a swim.
Ned Winn-Dix

I had been working in sexual and reproductive health for two years when I decided to start a Master of International Public Health. I had already worked in Nigeria and also did three months through a volunteer position (with the Australian Youth Ambassadors for Development) in Tonga. I felt that although I was gaining good on-the-ground experience, I had little idea of the broader ideas and motivations of the health and development field. I had heard excellent things about UNSW’s program, and their research teams, and their MIPH offered me the flexibility to complete my studies while I remained in Tonga – which was very important to me.

I think what I learned during my MIPH is the importance of not losing sight of why you do what you do. When you work on the ground you can see the individual effects of service provision, the difference you can make in people’s lives, but it is only looking at population level data that you really comprehend the enormous aggregate changes that this work has wrought. In my field, I remember looking at the increase in contraceptive usage over the past 60 years and marvelling at what social, environmental and economic effects this change has brought in so many parts of the world. Those large scale effects continue to motivate me today.

The most challenging thing about my studies was finding the right courses to do. I think its really important to look at both the sequence (there are some courses with prerequisites) and the content of the courses, and find out as much as you can prior to enrolling. Ask lecturers, friends, read up, because what you choose will often push you in directions that are hard to change later. I wish that I had spent more time doing epidemiology – which, if you’re reading this, is amazing – but by the time I knew this I was already locked in to other subjects. It’s not to say that the MIPH isn’t a brilliantly flexible course – it is – but that careful planning is so important.

But the MIPH is not just about planning, you can also find pleasure in it. The moments in my course when I came home after a long and manic day in the clinic and was able to sit down on my porch and read some journal articles were immensely enjoyable. The articles put perspective on the work I was doing and allowed me to learn from experts on better ways of operating. I was given the opportunity to really interrogate the evolution of family planning as a development field, and to work out where I would like to sit in this field, and the ability to articulate my personal commitment to this field was instrumental in getting me my dream job.

My message to newly commencing students is: don’t write the same old essays, lecturers get bored reading them. You’ll have plenty of time to write boilerplate reports once you start working. Engage you brain now and you may come up with a new way of looking at things, or you may realise that there is a good reason for doing things the usual way. Either realisation is worthwhile.
As a medical doctor with a university degree in Psychology, I would often encounter situations which made me question the social aspect of medicine. While I enjoyed seeing patients, I was at the same time frustrated that some of the cases that I saw should not have been there in the first place. They presented with illnesses that are easily treatable or even preventable if only basic services were available in the rural areas from where they came. It was not an easy decision to deviate from a traditional clinical career progression and explore other possibilities. Having worked on neglected tropical diseases, communicable disease outbreaks, environmental health and humanitarian/disaster response, I found myself on the path of public health – a path that I grew to love and found that I was well-suited to.

I undertook the double degree of Master of International Public Health and Master of Health Management at the University of New South Wales. I chose UNSW for three reasons. First was UNSW’s ranking and reputation among the Group of Eight – this gave me confidence and excitement to prove myself and be counted amongst its prestigious alumni. Second was the uniqueness of the double program offered – an opportunity not available at any other Australian university with the right mix of core subjects and choice electives which aligned with my personal interests and career objectives. Lastly was the funding of such studies – I am a recipient of the Australia Awards which offers full scholarship support to partner developing countries such as the Philippines, and UNSW is fortunately one of the eligible universities for the said scholarship.

Public health concepts aside, perhaps the most important thing I have learned in my studies is to never be afraid to express your own (well-informed) voice. Too often I saw colleagues who are quiet and reserved in class only to learn after speaking to them that they actually have so much to contribute. This also led me to the realisation that the most important learning resources in UNSW are your own classmates. There is no substitute for the wealth of first-hand experience from fellow healthcare workers who dealt with a particular issue in their own unique settings.

The most challenging aspect of studying in UNSW is that you have absolutely no excuse not to learn. You have your classmates as valuable resources, lecturers and professors who make themselves available for consultation and the library with an almost overwhelming access to full journal articles. However, you must learn to guide yourself and focus your energy on the one thing that matters most, and that is to always keep the end beneficiary, the health and well-being of the underserved, first and foremost.

The thing I have enjoyed most is the lively exchange of ideas in small group settings. Conflicting but well-grounded opinions are always healthy to listen to. I have learned that tension is an essential component that sparks creativity and brings to light a third option or approach that may not have been apparent had there been no conflict. Of course, one should always be respectful and strive that such situations have a meaningful closure.

My message to newly commencing students is three words: ask, act, and appreciate. Ask questions if you do not understand. The ability to ask meaningful questions only arises after reading and understanding, often realising that you may end up with even more questions than when you started. Act on what you have learned. It doesn’t have to be a large-scale social movement; it can be as simple as a change in your own values and behavior which eventually leads to an enduring effect throughout your professional journey. Appreciate your time with UNSW. I am proud to say that more than just having one-time classmates, I am blessed with lifelong friends with whom I have shared amazing memories and experiences to last a lifetime.

Allison Gocotano (left) – warehouse inventory update during the recovery and rehabilitation operations post-Typhoon Haiyan in the Eastern Visayas Region, Philippines. He was the Team Lead for the WHO Tacloban Field Office. Photo credits: WHO/F Guerrero
SPHCM Education Programs

POSTGRADUATE COURSEWORK PROGRAMS

■ Master of Public Health
■ Master of International Public Health
■ Master of Health Management
■ Master of Infectious Diseases Intelligence

DUAL DEGREES

■ 1.5 and 2 year dual degrees available in Public Health / Health Management / International Public Health

SPECIALISATIONS

■ Aboriginal Health and Wellbeing
■ Health Economic Evaluation
■ Health Promotion
■ Infectious Diseases Epidemiology and Control
■ International Health
■ Primary Health Care
■ Public Security
■ Quantitative Research Methods
■ Social Research

POSTGRADUATE RESEARCH PROGRAMS

■ PhD
■ Professional Doctorate - Future Health Leaders Program
■ Masters by Research
■ Master of Philosophy