The SPHCM welcomes its inaugural cohort of UNSW Future Health Leaders. This unique program seeks to make academia relevant to the health workplace in a partnership model.

The program is based on applied research, done while working in the health sector, and using a scholarly approach to addressing problems and issues relevant to the workplace. Candidates do intensive coursework and complete a research thesis based on their professional practice. The selection panel had a difficult task selecting just 15 from a list of outstanding applicants, all senior health professionals from Australia and overseas.

All 15 Future Health Leaders are now full-time DrPH or MPhil candidates, in addition to their various professional roles. The SPHCM held an orientation workshop from August 12 – 16 which included sessions on health leadership, applied public health research, Aboriginal and Torres Strait Islander health, the media and health economics.

One day was held off campus, at the Old Quarantine Station at North Head. This was a particularly enjoyable day, which combined an epidemiology workshop and a tour which included many interesting historical facts.

The orientation week provided opportunities for peer-to-peer learning and bonding, as well as engaging with SPHCM faculty. These 15 candidates bring a breadth and depth of expertise and diverse perspectives from across the health sector, which is part of the learning experience of the program.

We hope candidates will have a deeper understanding of different perspectives in the health sector which will enrich their own professional practice. Here is some brief background information on each candidate.

### 2013 Future Health Leaders

1. **Tope Adepoyibi**

Tope is an international public health practitioner and trained laboratory scientist with 14 years experience. Her work focuses on both communicable and non-communicable diseases, and she is a tuberculosis (TB) technical expert. In her present role, she serves as a senior TB technical officer at PATH (Program for Appropriate Technology

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for Health) in Washington DC. She provides technical leadership on various projects, focusing on TB/diabetes, laboratory strengthening and the introduction of new diagnostic technologies to PATH’s TB programs in India, Mexico, the Democratic Republic of Congo, Ethiopia and Tanzania. Prior to joining PATH, Tope both implemented and provided technical support to communicable and non-communicable disease public health programs in Papua New Guinea, Jamaica and rural Australia. Before embarking on her public health career, she served as a laboratory scientist in both Australia and the United Kingdom. Tope earned her MIPH in International Public Health from the University of Sydney, and a BSc in microbiology and biotechnology from the Queensland University of Technology. She was born in Darwin to Nigerian parents.

2. Kimina Andersen
Kimina is both Aboriginal and Torres Strait Islander, her maternal heritage is Wuthathi from Cape York and Damley Island in the Torres Strait, and her paternal heritage is Wakka Wakka from the South Burnett region near Cherbourg outside Brisbane. She is a social worker with more than 20 years experience in the field of Aboriginal and Torres Strait Islander social and emotional wellbeing, and mental health. Kimina has worked in both the community controlled and public sector. She is currently the coordinator for indigenous forensic mental health with Queensland’s Forensic Mental Health Service (QFMHS). She was a co-investigator on Australia’s largest study of the mental health of Aboriginal and Torres Strait Islander People in Custody, “Inside Out”. Kimina’s responsibilities with the QFMHS include clinical and research activities as well as the strategic planning and development of indigenous forensic services to build cultural capability within the service. She has a social justice focus and is keen to ensure that community members who come into contact with mental health and criminal justice systems receive appropriate and culturally sensitive care.

3. Julie Dixon
Julie is the director, planning and population health, for South Eastern Sydney Local Health District. This portfolio includes leading strategy and health service planning for the district and managing population health services that include HIV, sexual health and hepatitis C services, delivering prevention, treatment and care; health promotion, public health and falls prevention programs and activities. Julie is a registered general nurse from the United Kingdom, and has a Bachelor of Arts with first class honours in Psychology from UNSW. Julie has worked for more than 25 years in the NSW public health system where she has been employed as a nurse, in research, and in population health and primary health care. For the past 8 years she has held senior management roles in planning and population health, and is passionate about reducing health inequities.

4. Peter Dunphy
Peter is the operations director and assistant general manager of the Work Health and Safety Division, WorkCover NSW. He manages service delivery of the frontline services of over 300 regional work health and safety staff across 20 offices state-wide. Peter brings to the role over 20 years of experience and service to industry, workers and the NSW community in the field of public health and safety.

Peter is the chair of the heads of asbestos coordination authorities working group which has recently developed a whole-of-Government State-wide asbestos plan, endorsed by the NSW Government. Peter also chairs WorkCover’s demolition and asbestos consultative committee and is the chair and New South Wales Government’s representative on the national asbestos education committee. The asbestos education committee has recently commenced an innovative public awareness campaign for home renovators which includes “Betty” the asbestos house, a national web-based resource and celebrity home renovator ambassadors.

Peter has a strong commitment to continuous education, holding a Bachelor of Science (Environmental Health and Pollution) from Griffith University and more recently gained a Master of Public Policy (Honours) and a Master of Urban and Regional Planning from the University of Sydney, where he has twice been
awarded the Dean’s Award for outstanding academic achievement in both 2008 and 2009.

5. Geraldine Dyer
Geraldine is a child & adolescent psychiatrist and currently working primarily in remote Indigenous communities in Far North Queensland and the Torres Strait. She has a particular interest in Indigenous mental health, public health and creative ways of promoting recovery.

6. Neeraj Gill
Neeraj is the director of mental health, Darling Downs Health Service, Qld and senior lecturer, Rural Clinical School, University of Queensland. He completed his MBBS and MD Psychiatry in India and worked there as a psychiatrist before moving to Australia in 2002. He received his Fellowship of Royal Australian and New Zealand College of Psychiatrists (FRANZCP) in 2006.

Neeraj’s current work commitments include health service management and clinical governance, direct clinical care as well as teaching and research. His research interests include rural and Indigenous mental health, suicide prevention and physical/psychiatric co-morbidities. At some stage in the future, he would like to work in developing countries in the field of mental health promotion and suicide prevention.

7. Emily Harper
Emily has worked in a variety of roles within the ACT health sector.

She is currently working with ACT Health in Canberra as manager of the office of the Chief Health Officer with responsibility for a variety of policy areas including obesity prevention, gene technology and anatomy and transplantation policy. She has previously worked as a nurse, a public health microbiologist and a communicable disease surveillance officer. Emily received a Master of Public Health from the University of Newcastle in 2009, a Graduate Certificate in Clinical Epidemiology from the University of Newcastle in 2008 and completed a Bachelor of Forensic Studies (Forensic Science) degree at the University of Canberra in 2006. Her current research interests include chronic disease prevention (with a particular focus on obesity), public health economics, communicable disease control and ethics.

8. Marlene Kong
Marlene is an Aboriginal medical doctor from the Worimi people of Port Stephens. She is currently an advanced trainee in the Faculty of Public Health Medicine at the Royal Australasian College of Physicians. She is employed by the NSW Ministry of Health, occupying a Commonwealth specialist training program position.

Her past experience includes working as a GP in many places across Australia including Darwin, the Hunter region, Port Stephens, Coonamble, Woolgoolga, Nambucca Heads, Weipa, Ravenshoe, Port Hedland, Central Australia (Yuelamu, Papunya, Docker River, Yulara), and in Launceston. Marlene has also worked overseas including South Sudan and Sierra Leone with a humanitarian organisation during 2003 and 2004.

Marlene studied medicine at the University of Sydney and has done her International Master of Public Health at the Hebrew University of Jerusalem. Her public health training has so far included placements in Wallsend, Broken Hill and her current one at the public health unit in Randwick. Returning frequently to her home country in Port Stephens, Marlene finds connecting to her family important in keeping her well grounded.

9. Stephanie Marion-Landais
Stephanie has nine years experience in sexual health and HIV research, program and policy development. Currently in her second year with ACT Health in Canberra, she is working as a senior policy officer responsible for sexual health and blood borne virus policy. Prior to joining ACT Health, Stephanie worked in Namibia as the deputy coordinator/strategic information advisor for the United States’ President’s Emergency Plan for AIDS Relief (PEPFAR) program. She has also spent four years in Rwanda as a program officer of an HIV/family planning non-governmental organisation, and as a research associate for several clinical studies including Rwanda’s first HIV vaccine trial. Her current research interests include new technologies in HIV prevention and viral hepatitis prevention in correctional settings. She received a Master of Public Health from the University of Michigan.
in 2005, a bachelor’s degree in philosophy from the Catholic University of America in 2001, and she speaks both English and French.

10. Julie McEniery

Julie’s clinical role is as a paediatric intensive care specialist and she works at the Royal Children’s Hospital in Brisbane. Julie’s MPH dissertation was a review of in-hospital paediatric mortality in Queensland in 2001 and this remains her greatest public health and research interest. Other roles include chairing the Queensland statewide child and youth clinical network, chairing the Queensland Paediatric Quality Council, and national examiner for the CICM and RACP colleges.

11. Alan McLean

Alan is currently the operations manager for the SA Ambulance Service’s Emergency Operations Centre which is the command and control centre for all ambulance operations within SA. He has over 35 years experience in pre-hospital emergency care as an intensive care paramedic. As well as Alan’s clinical background he has over 10 years experience in health management including clinical safety and quality, risk management, staff health and OHS. He is a fellow of the Australasian College of Health Service Management, as well as a state branch councillor of the College and a director of the Australasian College for Infection Prevention and Control.

12. Dominic Morgan

Dominic is a career intensive care paramedic working with the Ambulance Service of New South Wales. He has undertaken a variety of roles over his career including clinical and senior management positions. His undergraduate degree is in health science and he subsequently studied a Master of Business Administration from Macquarie Graduate School of Management, graduating in 2001. In mid 2009, Dominic commenced as the CEO of Ambulance Tasmania and is now part of the Tasmanian Department of Health and Human Services departmental executive and is a board member of the Australasian Council of Ambulance Authorities and chair of their strategic business advisory committee. Apart from work (which seems to take up an inordinate amount of time) he enjoys staying fit and will be cycling through North Vietnam in September with people from his master’s group. Just goes to show cohorts can stick together.

13. Dea Thiele

Dea has immense board/senior management policy advocacy and policy development experience in policy and strategies that address the inequalities and inequities that exist in the health of Aboriginal peoples in Australia. Dea has a post graduate diploma in health management from the University of New England and a Masters in Public Health from the University of New South Wales. Dea also has had vast experience in advocating for the human rights of Aboriginal peoples through key United Nations (UN) mechanisms since 2005, in particular the UN permanent forum and the expert mechanism on the Rights of Indigenous Peoples (Geneva). Dea is on a number of boards including the Western Sydney Local Health District and the Deerubbin Local Aboriginal Land Council and has also been a member of the Australasian College of Health Service Management and the Australian Institute of Company Directors. Dea currently works at the Aboriginal Medical Service, Western Sydney as the regional co-ordinator for the AMS’s population health unit, which also includes leading the healthy lifestyles team and co-ordinating the research hub at the AMS.

14. Rebecca Tinning

Rebecca is a strategy manager at Medibank Private. She completed a Master of Public Health at UNSW and a Master of Arts in Media Studies from Concordia University in Montreal Canada. Rebecca has more than ten years experience in the health sector- specialising in health communication and promotion; health policy and services development. Her current areas of interest include mental health reform, care coordination and aged care.

15. Michael Wang

Michael has a Master of Health and Health Care Management and is from Shanghai RenJi Hospital affiliated to Shanghai Jiao Tong University, School of Medicine, which is a general tertiary hospital with 170 years history and 2,050 beds.

He is the deputy manager of the president’s office, with the working experience of research and development department, clinical management department, risk management department and asset management department, supervising and coordinating general management among the hospital under the direct lead of the president of the hospital. He has completed four research programs as program leader since 2007, and currently is leading a research program about evaluation indicators of medical material suppliers in tertiary hospitals.

Calls for applications to commence Semester 2 2014 will be made in early 2014. See our website for more information:

www.sphcm.med.unsw.edu.au/future-students/postgraduate-research/professional-doctorate
A new research study recently published in the prestigious journal *Heart*, led by Professor Raina MacIntyre, who is head of the School of Public Health and Community Medicine, found that influenza vaccine seems to almost halve the risk of heart attacks in middle aged people. Those aged 50 to 64 are not currently routinely included in national flu vaccination programs, but the findings prompted the Australian authors to call for further exploration of extending the schedule. Although people with medical risk factors are indicated for influenza vaccination, uptake rates are poor for targeted vaccination populations.

"Extending the flu vaccination program to 50 to 64 year olds has been a policy debate in the past, but not considered to be cost effective. However, prevention of cardiovascular disease wasn’t taken into consideration in such estimates," says lead author of the research, Prof Raina MacIntyre.

Cardiovascular disease is the leading cause of death globally and in Australia, and causes a great deal of illness in older adults. The authors studied the association of influenza and flu vaccination with heart attacks over three winter seasons in Sydney, from 2008 to 2010, using a prospective case-control design. The research found over 12 per cent of people admitted with heart attacks had influenza, which had not been diagnosed or recognised in hospital. Therefore, influenza may be an unrecognised precipitant of heart attacks.

A recent respiratory infection was more common among those patients who had had a heart attack and doubled the risk. "We found influenza vaccination protected significantly against heart attacks," says Professor MacIntyre, who noted it decreased the risk by 45 per cent. "The influenza vaccination rate in patients with heart attack was low."

These findings build on a substantial previous body of work by many other researchers that shows an association between influenza and heart disease, but which has not properly informed policy decisions, which tend to only consider prevention of influenza and its direct complications. Previous research indicates that infections such as flu might increase the propensity of blood to clot and prompt an inflammatory response in arteries that are already diseased, so sparking the development of an acute blockage that results in a heart attack.

The authors have called for more awareness of the link among GPs and cardiologists. "Even if we didn’t vaccinate everyone over 50 years of age, influenza vaccination of people with a first heart attack could also have a significant impact, with high rates of subsequent acute coronary events in such patients. Doctors should consider vaccination of heart attack patients before hospital discharge and GPs could consider it for those who show other risks associated with heart disease," says Prof MacIntyre.

The paper is available by open access online at: heart.bmj.com/content/early/2013/08/06/heartjnl-2013-304320.long
In late June 2013, the Kenya Research Team from the School of Public Health and Community Medicine, UNSW, visited the Shalom City Internally Displaced Persons (IDP) Camp in Rongai, in Kenya’s picturesque Rift Valley. The Shalom IDP camp is home to 444 families displaced as a result of the horrific post-election violence which occurred in Kenya in 2007 and 2008. Five years on, many are still trying to re-establish their lives and provide a better future for their children.

The 2013 Kenya Research Team comprised Prof Robyn Richmond, A/Prof Heather Worth and Dr Holly Seale and included two medical students completing their Independent Learning Project and BSc (Med) (Hons), and four Master of Public Health students. The research focussed on collecting data on nutrition, food security and cardiovascular risk factors among the men, and reproductive health and antenatal care among the women. The data were collected using surveys, physical measures and in-depth interviews.

The trip to Kenya provided a supervised, valuable learning experience for students in conducting research in a low-income country. Masters of Public Health students enrolled in the independent study course, *Health needs assessment among vulnerable people in Kenya*, participated in an intensive workshop prior to the trip to Kenya and seminars while on location and on their return. Students spent over a week in Kenya collecting data and gained experience in a range of research methods and the complexities of conducting research in a resource poor setting.

**Innovative method of recruitment to the study**

Respondent driven sampling was used to recruit participants. Five men were initially identified as the “seeds” by the camp chief on the basis of their wide social network within the IDP camp. These seeds were each provided with three coupons to recruit other participants through a chain referral process. New recruits to the study were provided with three more coupons to distribute among men in the camp. Each man who presented with a coupon was eligible to receive 50 shillings.

**Study outcomes**

During the week in Kenya, we were able to undertake 19 interviews with women from the camp, 15 interviews with men from the camp and to recruit 252 participants into the quantitative study. Based on the data collected, we aim to develop a report which will be sent to the local health departments.

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**THE KENYAN EXPERIENCE**

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**Top Photo:** Prof Elizabeth Ngugi from the University of Nairobi talking to the men of the IDP camp about HIV and safe sex using condoms.

**Bottom Left Photo:** The Kenya Research Team 2013. Pictured Left to Right: Varun Bhoopathy, Paola Garcia, Dr Holly Seale, A/Prof Heather Worth, Prof Robyn Richmond, Lauren Middlebrook, Audrey Maag, Kamal Singh, and Dr Zubair Hasan.
and a series of journal papers. The students are currently involved with the data analysis and will be co-authors on the study outputs.

The Kenya Research Team had the opportunity to engage with the Shalom community in Rongai. An official welcoming ceremony was conducted with the local Member of Legislative Council, 4 District Public Health Officers and various community leaders who expressed their welcome and gratitude on behalf of the community. There was much dancing and singing by the community and their chiefs. The Kenya Research Team gave their own rendition of “We still call Australia home” exhibiting hitherto unforeseen qualities in addition to their academic ones. The community and dignitaries found the singing by the Kenya Research Team extremely amusing. A video of our singing is available to anyone interested in spotting musical talent! We were able to give back to the community by offering a seminar by Professor Elizabeth Ngugi from the University of Nairobi who provided valuable information regarding prevention of HIV and the importance of safe sex and use of condoms. The School of Public Health and Community Medicine, UNSW, has established a Memorandum of Understanding with the University of Nairobi through Prof Ngugi, and look forward to working more actively with her in collaborative research in 2014.

An unexpected outcome of the trip was that the Kenya Research Team met many senior members of the local government including the Deputy Governor of the Nakuru region, the local member of the Legislative Parliamentary Assembly, several members of the Office of the President and the National Director of the Internally Displaced Persons Camps in Kenya. All officials will receive a report on the findings of the study.

The medical and MPH students who took part in this experience conducting research in a low income country found it to be “an incredible learning opportunity” and strongly “encourage other medical and MPH students to take the opportunity to be part of next year’s research team”.

New specialisation in Health Economic Evaluation

These days it is essential for people working in senior positions in healthcare to have an understanding of economics and finance. In recognition of this need the School of Public Health and Community Medicine is now offering a Master of Public Health in Health Economic Evaluation. This specialisation provides students with an understanding of the use and purpose of economic analyses in healthcare and the required skills to apply economic evaluation to assess the costs and benefits of healthcare programs. Economic evaluation is an important tool to help decision makers obtain value for money in healthcare spending choices. Health economics is a dynamic and growing field which attracts interest from governments and industry, yet there is a substantial shortage of health economic expertise in Australia. The two stream-defining courses provide a strong grounding in the principles of health economics and the techniques of economic evaluation in healthcare. The recommended electives allow students to further develop the quantitative and research skills required to conduct economic evaluations and/or a deeper understanding of financial, policy and budget management in the healthcare sector.

The name of the specialisation is reflected on the testamur and students graduate with a Master of Public Health in Health Economic Evaluation. The program is aimed at public health students and professionals interested in learning the skills required to apply and/or understand health economic evaluations in their future careers and those wishing to begin the transition to a career in health economics in the healthcare sector. This program can be taken either full-time or part-time. Courses are offered internally on campus with face-to-face teaching, or externally by distance mode using a combination of intensive workshops and online teaching.

For further information contact:
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or download the brochure from:
www.sphcm.med.unsw.edu.au/future-students/postgraduate-coursework/public-health-specialisations
Student Travel Fellowship

Dr Abrar Ahmad Chughtai received a travel fellowship to attend Options for the Control of Influenza conference (Option VIII) in Cape Town South Africa from 5-10 September 2013. Dr Chughtai is a PhD student from Pakistan studying at SPHCM and the topic of his thesis is "Face masks in the protection of healthcare workers (HCWs) in resource poor settings".

Option VIII is the largest international conference devoted exclusively to influenza, covering every imaginable topic from basic science to health care policy. The Options meeting fosters a multi-disciplinary and international approach allowing the free exchange of ideas between healthcare agencies, clinical institutions, academia and industry to discuss, debate and mitigate influenza prevention, control, diagnosis and treatment.

Abrar presented research findings related to his PhD at the conference. Two of his abstracts were approved for presentation in the conference.

The aims of the first study were to examine available policies and guidelines around the use of masks and respirators in HCWs and to describe areas of consistency between guidelines, as well as gaps in the recommendations, with reference to the WHO and the CDC guidelines.

Abrar analysed publicly available policies and guidelines related to mask and respirator use for prevention of spread of influenza, SARS and TB. Guidelines from the WHO, the CDC, three high-income countries and six low/ middle-income countries were selected for this analysis. This study has been published in the BMC Research Notes.

The second study examined the evidence around the efficacy of cloth masks and discussed the use of cloth masks as a mode of protection from infections for HCWs.

Abrar also reviewed various approaches which had been implemented to try and improve the effectiveness of cloth masks e.g. fabric type, mask design and face fit. This study has been accepted for publication in the International Journal of Infection Control.

Let’s hear from you

We would like to keep in touch with former staff and students of the School. Please send your contributions to the editor Kevin Forde: k.forde@unsw.edu.au or Assistant Editor Ravit Danieli-Vlandis r.danieli-vlandis@unsw.edu.au

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