



THE UNIVERSITY OF
MELBOURNE

Faculty of Medicine, Dentistry
and Health Sciences

Sharing Knowledge and Future Leaders – Indigenous Development





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Cover artwork by Kathrine Clarke.

Statement:

Tree of Knowledge by K. Clarke

Learning and sharing as a community, the tree of knowledge grows stronger arming us with a voice, strength and bravery to lead, enhancing the future for our mob.

This publication has been developed on Wurundjeri Country, upon which the University of Melbourne (Parkville campus) is built. The Faculty of Medicine, Dentistry and Health Sciences acknowledges the traditional custodians, the Wurundjeri people of the Kulin Nation, and we pay our respects to Wurundjeri community and Elders, past and present. We also pay our respects to all Indigenous nations upon whose land other campuses sit and where our students, staff and partners undertake teaching and learning, research and clinical activities, including those globally.

Content Warning

This publication does contain the names of Aboriginal and Torres Strait Islander people now deceased. It also contains links to sites that may use names and images of Aboriginal and Torres Strait Islander people now deceased. We apologise for any distress that may occur.

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MESSAGE FROM THE DEAN

Much has changed since the first known Aboriginal doctor Helen Milroy graduated from the University of Western Australia in 1983. Australian health and medical faculties like ours have seen significant improvements in Indigenous health curricula, greater numbers of Indigenous staff, stronger engagement with Indigenous communities and rising enrolments of Indigenous students.



Professor Shitij Kapur

At the University of Melbourne, significant advances over recent years have been aided by the 2010 adoption of our first *Reconciliation Action Plan (RAP)* and our commitment to the Aboriginal and Torres Strait Islander people of Australia to use our teaching and learning, research, resources and engagement expertise to make a sustained contribution to better health, education and living standards for Indigenous Australians.

The University released its third RAP in May 2018. Our plans are now deeply embedded in our business planning and operations at both an institutional and academic divisions level, and we have seen Indigenous student and staff numbers increase by 93 per cent and 296 per cent respectively.

At a Faculty level, our *Strategic Plan 2018–2023* builds on the RAP and seeks to expand opportunities for Indigenous participation in study and academic pursuits, and the training of the next generation of Indigenous health professionals and academics. Over the next five years, we will continue to increase Indigenous representation within Faculty leadership to provide

the necessary expertise to support and grow our Indigenous research and teaching portfolio. We are also expanding programs that support the enrolment and graduation of Indigenous students while advancing our existing training and development programs for emerging and established Indigenous leaders.

The Faculty's inaugural Associate Dean (Indigenous) Professor Shaun Ewen is now the University's Pro-Vice Chancellor (Indigenous) while remaining in his role as the Foundation Director of the Melbourne Poche Centre for Indigenous Health.

We have been delighted to welcome Professor Sandra Eades as our new Associate Dean (Indigenous).

Professor Eades is renowned for her work in paediatric and perinatal epidemiology and, in addition to her Associate Dean role, she leads a new Centre for Research Excellence for Aboriginal Child and Adolescent Health.

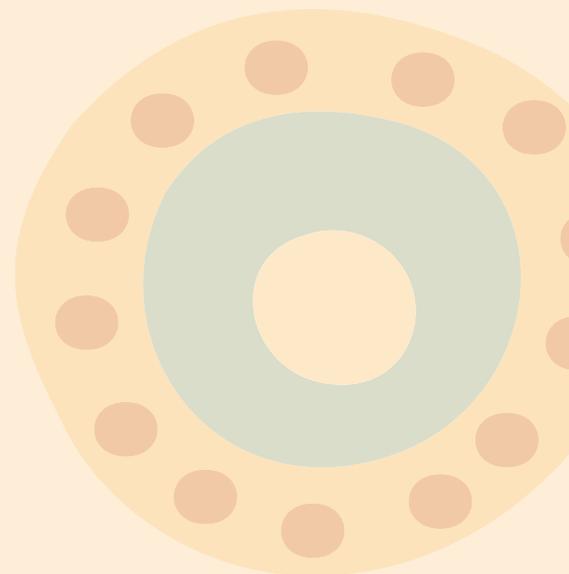
These senior appointments complement the ground-breaking work of the Faculty's Indigenous Studies Unit, led by the University's Associate Provost, Professor Marcia Langton AM, and the progress being made by the Melbourne Poche Centre for Indigenous Health, the Indigenous Health Equity Unit, the Indigenous Eye Health Research Group, Leaders in Indigenous Medical Education Network, Rural Health Academic Centre, Culturally Inclusive Rural Health Care Research Group, and individual Indigenous staff in various teaching and research positions.

Indigenous participation and perspectives in health and medicine not only benefit the wellbeing of Aboriginal and Torres Strait Islander people, but strengthens Australian health systems overall. Indigenous students and graduates accelerate change – bringing

unique approaches, perspectives and life experiences to health and healthcare. This improves the curriculum that is taught, raises the quality of clinical care offered, deepens the research interests pursued, broadens community involvements, and results in better policies and practices.

In this report you will see our efforts to support and encourage excellence for Indigenous students, teachers and researchers. Their stories and achievements are impressive and heartening. They show us how much can be achieved, and how much more needs to be done.

Professor Shitij Kapur
Dean, Faculty of Medicine,
Dentistry and Health Sciences
Assistant Vice-Chancellor (Health)



MESSAGE FROM ASSOCIATE DEAN (INDIGENOUS)

I have welcomed the opportunity to join the Faculty of Medicine, Dentistry and Health Sciences as Associate Dean (Indigenous), taking over from Professor Shaun Ewen and Shawana Andrews who have provided outstanding leadership over recent years.

In recent times, the Faculty has seen much change. As a result, it has emerged with a strong and powerful vision for Indigenous health and development. The Faculty has renewed its priorities with a new strategic plan in which Indigenous development plays a central role. In addition, the University has launched its third and most ambitious *Reconciliation Action Plan (RAP) 2018–2022*.

Strong University-wide leadership of Indigenous education initiatives is critical to the work we continue to strive to do at the Faculty. Professor Shaun Ewen has moved into the inaugural Pro Vice-Chancellor (Indigenous) role, and Professor Marcia Langton has been appointed as the University's first Associate Provost.

My substantial research and teaching role is within the Melbourne School of Population and Global Health. I join other Indigenous health researchers at the School, including Professors Marcia Langton and Hugh Taylor.

My team and I, including Research Fellows Bridgette McNamara and Lina Gubhaju, bring a wealth of Indigenous health research experience. We have made significant contributions to the epidemiology of Indigenous child health in Australia, prevention of cardiovascular and related diseases and national leadership in Indigenous health research.

At CRE REACH, our research includes the Defying the Odds Study. The project is designed to identify ways of reducing deaths and illnesses among Aboriginal infants and children, using population-level linked health data from multigenerational Aboriginal families in Western Australia.

The Next Generation: Youth Wellbeing Study is a project to assess the health and wellbeing of Aboriginal and Torres Strait Islander adolescents and youth from central Australia, New South Wales and Western Australia. The aim is to help close the gap in Aboriginal health and disadvantage.

Dementia and cognitive decline are also emerging concerns and the Aboriginal Dementia Prevention Study will be undertaken in Western Australia in partnership to test the effectiveness of an Aboriginal health worker led dementia/cognitive decline prevention program.

The program incorporates diet, physical activity and smoking cessation to reduce the risk of cognitive decline among Aboriginal adults.

As Senior Lecturer in Indigenous Health, Shawana Andrews will support me in my role as Associate Dean (Indigenous), particularly in terms of teaching and learning and Indigenous community engagement.



Professor Sandra Eades



Professor Sandra Eades

I look forward to ongoing work with other key Indigenous health staff across the Faculty including Warwick Padgham in the Melbourne Centre for Poche Centre, Alister Thorpe in the Melbourne School of Population and Global Health and Dr Ngaree Blow in the Melbourne Medical School. We are focused on expanding and supporting growth in our Indigenous workforce.

In parallel, we anticipate growth in our Indigenous student numbers. Over the next decade the Faculty is poised to benefit from the contribution of Indigenous staff and students across the breadth of our work.

Investing in Indigenous leadership is one of four pillars in our new RAP and it is a priority for our Faculty. This translates into a quality Indigenous-driven knowledge economy for our staff and students to thrive in. It is an economy that our communities can engage with and benefit from.

The aspiration of future Indigenous leaders is also of paramount importance and this, among other areas of strategic importance to Indigenous higher education and health, are showcased throughout this report.

Professor Sandra Eades
Associate Dean (Indigenous)
Professor at the Centre for Epidemiology and Biostatistics, Melbourne School of Population and Global Health



MESSAGE FROM INDIGENOUS DEVELOPMENT TEAM

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As a Faculty, we have worked collectively towards sustainable, targeted approaches to increase our Indigenous workforce and student recruitment and graduation. The Faculty's diversity of expertise and knowledge has broadened by increasing our Indigenous academic leadership. This in turn offers a more diverse research, teaching and learning environment to inspire and enhance our PhD and graduate students' experience.



Kristi Roberts

We also welcome an increase in our student recruitment and graduation. In 2018, we commenced the inaugural Ngurra-Jarraddjak Indigenous Graduate Study Options Program to introduce prospective health career pathways for first and second year undergraduate Indigenous students. We had students participate from across Australia, sharing their experience while building a larger network of our future Indigenous workforce.

Recently, we have created the Indigenous Learning and Teaching Community of Practice. The initiative has been led by Shawana Andrews and Professor Marilys Guillemain and under their guidance will see more Indigenous knowledges and perspectives implemented into MDHS courses.

Reconnecting with Indigenous MDHS alumni to engage with the Faculty Indigenous staff, students and research institutes is also a priority. Alumni events, such as one we hosted in the bush medicine exhibition, contribute to part of our strategic plan for Indigenous development, specifically to develop an Indigenous outreach engagement strategy to reconnect with Indigenous alumni and local Indigenous communities. This strengthens bonds and provides opportunities to develop networking and mentoring relationships with industry leaders, researchers and professionals.

It is also valuable for current students to hear back from past alumni who are now working within mainstream and community grass-roots organisations

A focus for the future is to continue building local and international partnerships to enrich and expand the expertise of our emerging and established Indigenous leaders, from students to staff and partners. Both the Melbourne Poche Centre for Indigenous Health and the Leaders in Indigenous Medical Education (LIME) have established, and continue to foster, relationships locally and internationally. A snapshot of the work featured with our partners is highlighted in this publication.

The Indigenous development team thank our colleagues, students and Elders throughout the Faculty for their ongoing support and insight. We are delighted to share some of our recent successes with you in this report.

Kristi Roberts
Manager,
MDHS Indigenous Development

Josh Cubillo
Manager,
MDHS Indigenous Programs



Josh Cubillo

COMMUNITY ELDERLS: 'AN EXTRAORDINARY ACT OF GENEROSITY'

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L to R: Professor Shaun Ewen with Uncle Kevin Coombs OAM

For many years, Elders, traditional owners and leaders have given time, advice, guidance and valued insight to the Faculty.

“For most of their lifetime, Aboriginal people have been excluded from the knowledge economy and from higher education. So, contributing to universities that have historically excluded Aboriginal people is an extraordinary act of generosity by the Elders that engage with us,” says Professor Shaun Ewen, Pro-Vice Chancellor (Indigenous).

In 1999, the Faculty of Medicine, Dentistry and Health Sciences became home to the VicHealth Koori Health Group – later renamed Onemda. This was the start of an enduring connection between the University, the Faculty and some of Victoria’s most respected Elders, traditional owners and community leaders. While Onemda closed its doors in 2016, its work continues within the Faculty with the valued support of Elders and Indigenous community leaders.

“It has been very important that the Elders have been willing to advise, guide and to provide context and leadership. Their involvement gives our students and researchers a better understanding of how their health practice sits in relation to the health of their own patients and within the whole health landscape of the country,” says Liz Brentnall, Engagement Manager at the Faculty.

“Many Elders have been generous in speaking to students about how they can be most effective when working with Indigenous peoples. Their advice on elements of the curriculum has also been critical, as has their support in collaborating with Indigenous communities.”

“Aspiring to keep family, community, culture and country central to health, we value the life experience and perspective of Elders.”

Professor Sandra Eades,
Associate Dean (Indigenous)

One of the many Elders who have guided the Faculty so far is Uncle Kevin Coombs OAM. Uncle Kevin has been a member of the Strategic Advisory Committee of the Melbourne Poche Centre for Indigenous Health. A Wotjobaluk Elder, in 2016, he received the University of Melbourne Award in recognition of his significant contribution to Aboriginal health teaching and learning.

“Uncle Kevin Coombs was very involved in teaching medical students at a time when nobody was interested in Indigenous health. He was patient and statesman-like and ensured the Faculty became more interested in Indigenous health. His leadership highlighted that the Faculty has a role to play in Indigenous health, and Indigenous communities have a role to play in teaching our students,” says Ms Brentnall.

Aunty Joy Murphy Wandin AO was a patron of Onemda and is a senior Wurundjeri Elder who has supported the Melbourne Poche Centre for Indigenous Health since its inception. She is a mentor for the recently launched Indigenous health research program at the Doherty Institute and has given the Welcome to Country greeting to many distinguished University visitors.

In 2002, Aunty Joy received the Victorian Aboriginal Women’s Award for her support of Aboriginal issues. In 2006, she was made an Officer of the Order of Australia in recognition of ‘her service to the community, particularly the Aborigines, through significant contributions in the fields of social justice, land rights, equal opportunity and reconciliation’.

Pat Anderson AO, Chairperson of the Lowitja Institute, is also a staunch supporter of the Faculty. She is renowned for her work in community development, policy formation and research ethics, and she has been instrumental in transforming the landscape of Aboriginal health research. From a time where researchers decided what research would



Yorta Yorta Elder Aunty Faye Lynam delivers the Welcome to Country at the 20th anniversary celebrations of the Department of Rural Health in Shepparton

Aunty Joan Vickery OAM was a Gunditjamarra woman from the western district of Victoria who contributed to the health of Indigenous communities for more than 40 years. She was a founding member of the Koorie Diabetes Service and Ngwala Willumbong Cooperative that provides specialist alcohol and drug rehabilitation. She was a board

member of the Victorian Aboriginal Health Service, the Victorian Aboriginal Child Care Agency, the Aboriginal Advancement League, the Koorie Heritage Trust Ltd and the Victorian Aboriginal Community Controlled Health Organisation

“Aunty Joan Vickery saw the University’s Indigenous agenda grow enormously over 20 years,” says Professor Shaun Ewen.

“She was fearless in her criticism and support, recognised the value of Aboriginal perspectives in health and she held the Faculty to account in terms of how it did its work. Her legacy is a reminder of the importance of engaging with community members in the work that is being done.”

Aunty Joan Vickery passed away in September 2018.

be done and how it would be done, Aunty Pat encouraged the development of a roundtable process to highlight research priorities with community, research and policy-makers, to work collaboratively and build the skills of Aboriginal and Torres Strait Islander people.

“Deep engagement with the Elders makes us unique as a university,” says Professor Ewen.

“Their presence provides a learning environment and a university environment that you will not find in many places in the world.”

NGURRA-JARRADDJAK INDIGENOUS GRADUATE STUDY OPTIONS PROGRAM

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Josh Cubillo is leading a new program developed by the University of Melbourne to continue to increase the number of Indigenous students progressing to postgraduate studies.

The Ngurra-Jarraddjak Study and Career Options Program, launched in 2018, ensures students who want to move beyond undergraduate level have the right prerequisites to get into the postgraduate course of their choice. Ngurra-Jarraddjak is the local Wurundjeri word for 'healthy'.

"Family comes first for Indigenous students and that can sometimes take you away from study. University can become an afterthought. But I think universities are becoming more aware of this and more culturally sensitive which ensures student success," says Mr Cubillo, MDHS Indigenous Programs Manager.

"A lot of undergraduate students here at the University of Melbourne are arts based. If they are interested in coming to the Faculty of Medicine, Dentistry and Health Sciences, it's important they know the prerequisites early."

The Ngurra-Jarraddjak Study and Career Options Program recently hosted 14 first and second year students. Ami Diop, a participant from the University of Queensland, said the highlight of the week was the opportunity to meet the Faculty's course coordinators: "I really enjoyed the three-minute sales pitches given by the course coordinators. It was an easy and effective way of hearing about the different fields of study and the informal conversations we had after the session was helpful. The session actually helped me in deciding what I will study next."

The week-long program saw students stay at Trinity College and allowed them to visit various institutions across the Melbourne Biomedical Precinct such as the Victorian Aboriginal Health Service

(VAHS), St Vincent's Hospital, and the Doherty and Walter and Eliza Hall Institutes. Students also heard from a breadth of inspiring speakers including Professors Sandra Eades and Marcia Langton AM.

The Ngurra-Jarraddjak Study and Career Options program is open to Indigenous undergraduate students from across Australia and will run every year, emulating the recent successes of the engineering and business faculties Indigenous gateway programs.

The initiative delivers on an Indigenous Development commitment made in the Faculty's strategic plan *Beyond 2018* by offering a 'gateway' program into graduate coursework in health and biomedical sciences. The program complements and builds on the success of the Melbourne Poche Centre's Indigenous PhD Familiarisation Program.

The value of the Ngurra-Jarraddjak program for students was reflected in their feedback. As second-year Bachelor of Science student Harrison Burgin wrote: "The program has really opened my eyes to the diversity of postgraduate degrees as well as job opportunities available to me. It was also heartening to meet so many like-minded peers and Indigenous professionals and academics in the health fields."





“I really enjoyed the three-minute sales pitches given by the course coordinators. It was an easy and effective way of hearing about the different fields of study and the informal conversations we had after the session was helpful. The session actually helped me in deciding what I will study next.”



University of Melbourne staff with participants from the Ngurra-Jarradjak Study and Career Options Program

HEALTH SCIENCES PHD CANDIDATES

The Faculty has made a commitment to increase Indigenous student recruitment targets. As part of this commitment, the Faculty has supported initiatives that provide flexibility, innovation and a realistic approach to the challenges of recruitment and retention of Indigenous students.

Kylie Dowse

Kylie Dowse will spend three years exploring and studying Aboriginal community responses to family violence.

A Saltwater woman based in NSW, she has spent 18 years working in family violence as part of national and statebased peak bodies and advocacy groups.

“My hope in undertaking a PhD is to make visible Aboriginal skills and knowledges in responding to family violence that might then be shared across communities.

I’d been working from a narrative framework in the family violence sector. My main concern was the rights and wellbeing of women and children and working with men who’ve used violence in a relationship.

I have wonderful images in my mind from the first event in the Masters program. I walked into the classroom to see First Nations people from all over the world – a lot of friendships were made. I spoke to a woman working with refugees in Mexico and heard how she was innovating in her work. Our complex nation has a range of responses to family violence. If we take on colonised responses to family violence, they are never going to fit.

The Masters got me thinking about how we can respond in ways that match our context. Now I’m pursuing a PhD looking at Aboriginal community responses to family violence. The big goal after that is to reveal Aboriginal knowledges that can be shared across communities and to set up our own systems with responses of love, care and respect. I always thought university was an inflexible institution, but this kind of program is a gamechanger for Aboriginal education. It positions Aboriginal people as capable and having skills that are valued.”

Anthony Newcastle

Anthony Newcastle is originally from the Northern Territory – his mother’s country is Wadeye and his father’s country is Jingali. He runs his own facilitative engagement company – Natjul, which uses theatre, drama and story-telling to help people engage with topics that are difficult to talk about in their community or organisation. His professional experience also extends to working as a counsellor, group facilitator and a manager of dispute resolution.

“Like a lot of young people, all I saw for my future was working on the roads, out bush, like my Dad and uncles. When I left school, one of my uncles got me a job with the Survey and Land Information Group.

Teams of about three or four of us packed up the 4x4 truck and headed off anywhere in the Northern Territory for a week to a month at a time. On most trips we hardly saw another person for days or a week. I remember watching the sun’s late afternoon rays turning the Devils Marbles dark orange, and camping along the Finke River – one of the world’s oldest river systems.

For around the past 20 years, I’ve lived in Brisbane with my family. I never contemplated getting a diploma in counselling and working with a counselling service. Nor did I think I’d find my way to complete a Masters Degree in Narrative Therapy and Community Work with the Dulwich Centre and the University of Melbourne.

I have always been interested in ways to engage with people, particularly around the challenges that confront their lives.

I’m now 17 years into my business and my interest continues to be developing an alternative approach to community

development and community building. A Masters and now a PhD are part of that journey for me.

Now here I am, studying for a PhD and exploring ways to create safer communities by local people becoming more empowered with social emotional wellbeing, by way of an action research study. That achievement could not have been further from the mind of that young man climbing an outback Northern Territory mountain in the summer heat all those years ago.”

Shawana Andrews

In combination with her role as a senior lecturer in Aboriginal Health, Shawana Andrews is a PhD candidate in the Department of Social Work.

She is extending on her work on family violence in the department through her PhD. Ms Andrews will explore the role cultural practice can play in supporting Aboriginal women in the context of family violence.

“I am hoping this work will contribute to giving Aboriginal women a voice in the conversation about family violence,” says Ms Andrews.



Jacynta Krakouer

The Melbourne School of Health Sciences is welcoming an increasing number of Indigenous PhD students. Vanessa Davis, Christian Woodward, Jacynta Krakouer, Shawana Andrews, Kylie Dowse and Anthony Newcastle are hoping their PhD studies will expand their research and expertise.



L to R: Shawana Andrews, Christian Woodward, Kylie Dowse, Anthony Newcastle and Vanessa Davis

MASTERS OF NARRATIVE THERAPY AND COMMUNITY WORK

The Masters of Narrative Therapy and Community Work takes a respectful, non-blaming approach to counselling and community work and is helping students to deliver sensitive healthcare.

Narrative therapy is used globally by social workers, psychologists, community development workers, nurses, teachers, doctors and other health professionals.

The Department of Social Work at the University of Melbourne has worked with the Dulwich Centre in Adelaide to develop this world-first specialist postgraduate qualification. Designed in collaboration with Aboriginal organisations and communities.

In 2017 four of the graduates were Aboriginal graduates who achieved first class honours. The University of Melbourne students were invited to give the valedictory speech and delivered it together. Three of those students – Anthony Newcastle, Kylie Dowse and Vanessa Davis – are now doing PhDs.

“To see them standing at the podium was very powerful – it gave a sense of what this collaboration between The Dulwich Centre and the University of Melbourne is making possible. Mutually, we are creating something that we couldn’t have imagined,” says David Denborough, Co- Director at the Dulwich Centre.

NEW INDIGENOUS LEARNING AND TEACHING INITIATIVES



Shawana Andrews

Recently, the Faculty was successful in gaining funding through the University's Learning and Teaching Initiatives Grants for a Faculty-wide Indigenous curriculum project.

Led by Shawana Andrews, Alister Thorpe and Ngaree Blow, a group of teaching and learning academics representing all Faculty schools worked to conceptualise the Indigenous Knowledge Systems and Health – A Flipped Classroom Curriculum project.

This project will begin in 2019. It will introduce Indigenous knowledges as a significant and foundational element for understanding Indigenous health to learning and teaching across the Faculty. It seeks to shift the paradigm from learning about Indigenous health to challenging students to learn from Indigenous people and to critically engage with Indigenous knowledges.

The project will develop a curriculum package using the flipped classroom model. In Indigenous health teaching, much time is devoted to Indigenous terminology, concepts, theories and knowledges that are fundamental to understanding clinical and research interactions. A flipped classroom approach allows for deeper inquiry and more innovative teaching during face-to-face classes. This package will provide wide reach across the Faculty in identified subjects across all disciplines.

The Faculty, through its strategic plan *Beyond 2018*, aims to further build, strengthen and support this team and has recently initiated an Indigenous Teaching and Learning Community of Practice. Led by Professors Sandra Eades and Marilys Guillemain, the Faculty's Associate Deans of Indigenous Development and Learning and Teaching respectively, the initiative aims to build a robust, respectful and collaborative community of practice to support the Indigenous health teaching across our programs.

Indigenous Curriculum Framework for Health Sciences

The development of an Indigenous curriculum framework within the Melbourne School of Health Sciences ensures students are learning about Indigenous health from day one.

"Rather than teaching in a vacuum and fitting in a lecture here and there across a course that doesn't speak to the rest of curriculum, we've built a framework. It develops a narrative for students around Indigenous health from their first year of study."

Ms Andrews has led the development of the Many Ways Learning – Indigenous Curriculum Framework. Launched during National Reconciliation Week in 2017, it offers an indigenised lens to Indigenous health teaching across the School.

The framework has taken about five years to develop and recently Ms Andrews started working with each department within the Melbourne School of Health Sciences to begin implementation. She has been awarded a University Teaching Award for Excellence and Innovation in Indigenous Education and has a clinical background in social work and public health. Ms Andrews has also worked in paediatric health and mental health for many years prior to joining the University of Melbourne.

She has a very clear vision for the Faculty – to offer the very best Indigenous health curriculum and to attract and retain Indigenous students from Australia and other First Nation peoples from overseas. The Indigenous development framework is part of that vision.

"Now the hard work starts in terms of building content with each department, and working out what content fits in where, who we can bring in to teach and

which communities we might engage with,” says Ms Andrews.

“We are also looking at where we can take students out of the classroom. We’ve previously been to Melbourne Museum and the Bunjilaka exhibition and that talks to aspects of the curriculum such as respect for Indigenous culture,

understanding Indigenous communities and talking about truth telling in history.”

The framework also supports a strength-based approach to teaching and learning, recognising that Aboriginal culture can be protective, and that this emphasis can be used positively in healthcare.

“We are bringing in content areas in the curriculum around reflective practice and teaching students that if you become a good reflective practitioner whether in nursing or social work or physiotherapy, that will make you a better practitioner and bring benefits if you want a good clinical engagement with your patients,” says Ms Andrews.



L to R: Shawana Andrews, Alister Thorpe, Dr Ngaree Blow and Kristy Cooper

MELBOURNE POCHE CENTRE FOR INDIGENOUS HEALTH

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Professor Shaun Ewen

Since it was founded in 2014, the Melbourne Poche Centre for Indigenous Health has provided training and development programs for emerging and established Indigenous leaders. It is one of six centres located at five universities across Australia.

Collectively, each centre contributes to the national Poche Indigenous Health Network, which was established through the generosity of philanthropists and Indigenous health advocates Mr Greg Poche AO and his wife Ms Kay Van Norton Poche.

Led by Pro Vice-Chancellor (Indigenous) and Foundation Director Professor Shaun Ewen, the aim of the Poche Centres is simple but complex: 'To help close the gap in life expectancy and achieve health equality for Aboriginal and Torres

Strait Islander people.' Respecting local communities and supporting collaboration and self determination is fundamental to achieving this goal.

As part of the Faculty of Medicine, Dentistry and Health Sciences, the Melbourne Poche Centre provides support and opportunities for graduates, emerging leaders and established leaders in health to grow their influence, network and mobilise an agenda for change in their field of health practice.

The Melbourne Poche Leadership Fellows Program supports the development of emerging Indigenous leaders in academic, policy, clinical and research roles in higher education institutions, government, health delivery and the community sector. In a partnership with King's College London, leadership fellows can undertake modules in Melbourne and London.

The program is designed for early career health professionals and focuses on growing networks, nurturing collaboration and participants gaining awareness of their own leadership potential.

Program Fellow Raelene Nixon gained valuable insight into leadership, power, influence, agency and change.

"The Program brought together emerging and established leaders from around the nation with a particular focus on building the capacity and skills of leadership in our communities," says Ms Nixon.

"It was a great opportunity to identify my strengths and weaknesses and although I found it challenging to step out of my comfort zone at times, it was a great environment to challenge myself. [The Program] also helped me identify some of the things that were holding me back and come up with some strategies to work through them."

PHD FAMILIARISATION PROGRAM AT THE POCHE CENTRE



Warwick Padgham

The annual PhD Familiarisation Program organised by Melbourne Poche Centre for Indigenous Health allows prospective Indigenous PhD students to explore their research ideas and gain a clearer understanding of what a doctorate involves.

“It’s a way to open the door to the University, to see what it is like, what support is available and talk to experts about their ideas ... the ultimate goal is for them to enrol in a PhD here but if they enrol in a PhD somewhere else, we see that as a success as well,” says Warwick Padgham, Manager of Indigenous Student Programs at the Poche Centre.

Now in its fifth year, the program engages prospective Indigenous PhD students from across Australia .

Participants engage in workshops and networking opportunities and talk with some of Australia’s leading Indigenous and non-Indigenous researchers.

The workshops are dedicated to understanding what a PhD involves for each participant, and includes topics such as application and grant writing, research skills development and plenty of opportunities to flesh out research proposal ideas.

“During each program there’s a lot of interaction with Indigenous researchers and current students across the University, and the program showcases the breadth of Indigenous research happening here,” says Mr Padgham.

“By clarifying what students want to do, they leave with a much better understanding of the milestones that have to be achieved. Generally, their research ideas and questions change after discussion in workshops and while they talk with experts in their field of interest.”

Mr Padgham says opportunities for Indigenous researchers at the University of Melbourne are increasing and, with a higher number of undergraduate students completing their studies, the number of future researchers across the country will grow. He believes encouraging those students to follow through with a PhD, providing the initial support they need, is a strength of the PhD Familiarisation Program and of the Poche Centre.

“Indigenous researchers working on Indigenous topics have a much better cultural understanding of how to work with community and how to lead projects with Indigenous people outside the institution. But we also want to see Indigenous researchers across all sectors, demonstrating leadership and creating change across all communities.”

POCHE FELLOWS LEADERSHIP PROGRAM

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Registered nurse Banok Rind

Banok Rind is a Yamatji-Badimia woman from the Geraldton and Mount Magnet area of Western Australia. She is a registered nurse currently working at St Vincent’s Public Hospital in Melbourne and is Deputy Executive Officer for the Koorie Youth Council. Banok took part in the Melbourne Poche Leadership Fellows Program in 2018, an initiative designed to encourage Indigenous researchers to recognise their leadership potential.

Coming from a background of Aboriginal health, I thought it was valuable to network and meet other black fella leaders working in the Aboriginal health space.

The conversations we had during the program changed my perspective and gave me insight into leadership and how we view leadership as Aboriginal and Torres Strait Islander people. I gained perspectives on how I can utilise my leadership skills and incorporate that into Aboriginal health and the work I do every day.

Visits to London and Oxford meant looking at different types of leadership from across the globe. Being in a colonial setting while doing this was challenging but it reminded me why I do what I do for my people and for my family. During those visits I also recognised that our people have come so far.

These programs aren’t just about networking or leadership or workforce development. They’re about one person coming from a particular community, gaining skills and knowledge, taking that back into community, passing it on and

those community members then wanting to upskill—that’s where I see education and health gaps being closed.

Following the program, in my day-to-day life, I look at how I can incorporate my perspective of leadership into the work I do with young Aboriginal people living in Victoria. To me, that is about having conversations that have impact and that create change, as opposed to raising your voice and not having any impact. Change and impact happen with respectful conversation.

LEADERS IN INDIGENOUS MEDICAL EDUCATION (LIME) NETWORK

The purpose of the Leaders in Indigenous Medical Education (LIME) Network is to promote and support effective teaching and learning about Indigenous health in medical education and to support the successful participation of Indigenous people in medical education programs.

The LIME Network works across Australia and New Zealand and provides its members with resources to accelerate good practice approaches to Indigenous health education. It also provides opportunities for collaboration on research, curriculum development and implementation, and Indigenous student recruitment and graduation initiatives. The Network is a project of Medical Deans Australia and New Zealand, is funded by the Australian Government Department of Health and hosted by the University of Melbourne.

Since 2008, the program has been at the forefront of innovation in implementing strategies to improve Indigenous health outcomes by better educating medical professionals and increasing the numbers of Indigenous doctors. Its achievements have been recognised through awards including the ASPIRE Award for Social Accountability from the Association for Medical Education in Europe.

Indigenous health is emerging as a discipline in its own right and evidence-based approaches to education, recruitment and graduation are growing a strong foundation and contributing to the professionalisation of Indigenous health in medicine health professions more broadly. The growing numbers of Indigenous medical students and doctors is testament to the work occurring in the field.

While there are improvements, there is still a long way to go to ensure Indigenous health remains a core part of the medical curriculum across all schools and in clinical teaching environments.

Improving the graduation rates and completion times of Indigenous medical students is also critical if we are to achieve population parity in the profession.

The LIME Network continues to contribute to improve practices across medical schools by encouraging networking, collaboration and sharing across institutions, and is currently extending the scope of its work to Specialist Medical Colleges.



DENTAL CARE IN THE NORTHERN TERRITORY

The Melbourne Dental School's partnership with Miwatj Health in East Arnhem Land is improving local oral health and giving Bachelor of Oral Health students valuable hands-on experience.



Professor Juile Satur

“Students often say: ‘I really got to understand the social barriers to health for Aboriginal peoples in remote communities,” says Professor Juile Satur, Head of Oral Health at Melbourne Dental School.

Before fermentable carbohydrates and sugars entered the Indigenous diet, Aboriginal and Torres Strait Islanders enjoyed good oral health. But the twentieth century brought changes, to a point where the mean number of decayed or missing teeth among Australia’s Indigenous children is almost double that

of non-Indigenous children. After the age of 15, decay rates triple.

Statistics like these have encouraged Melbourne Dental School to partner with an Aboriginal community-controlled health service based in Nhulunbuy in East Arnhem Land – part of the University of Melbourne’s collaboration with the Yothu Yindi Foundation.

The partnership focuses on building community-led oral health projects, services, oral health promotion and research centred on local needs.

“The University brings expertise, but the design and implementation of the programs comes from Miwatj. Two-way learning means Yolngu people have increased control over their oral health,” says Professor Satur.

“We want to build services and health promotion interventions on local expertise. So, as part of our newly drafted Oral Health Plan for the region, one of our aims is to develop oral health champions in the remote communities to help coordinate services and programs and to involve people in those services.”



L to R: Students Caitlin Wilkie and Laura James

In 2017, four Bachelor of Oral Health students spent six weeks in Nhulunbuy, assisting the Miwatj team with screening and toothbrushing programs in schools. They learned firsthand about the challenges of providing health services in remote communities and about the sociology of oral health among Aboriginal

people. More students will travel to East Arnhem Land this year.

“It’s a fantastic opportunity to do something that will make a difference – not just for dental treatment today but for the dental health of communities longer term,” says Dr Satur.

“These are some of the most disadvantaged communities in Australia and that’s a shameful thing in a first world country. If we can help treat and reduce oral disease and develop a workforce positively skewed to addressing these issues in partnership with Indigenous people – that would be great.”



Simone Stenner

Simone Stenner, Bachelor of Oral Health student

After attending an undergraduate camp for Indigenous students offered by Murrup Barak Melbourne Institute for Indigenous Development, dental assistant Simone Stenner made the decision to enrol in the Bachelor of Oral Health at the University of Melbourne.

“The camp was a great start – to have a supportive environment and meet other Indigenous students while getting to know the University and city,” says Ms Stenner.

“Being a mature aged student and not having many in my family who have completed university degrees, enrolling in the Bachelor of Oral Health was a big step. I previously studied a year of business in my hometown in Queensland. That was a good experience and gave me the confidence to apply for the course that I aspired to study, even if it meant relocating interstate”.

While working as a dental assistant for four years, Ms Stenner forged strong relationships with oral hygienists and oral health therapists who encouraged her to pursue further study.

“I especially enjoyed working in pre-orthodontics with kids which involved a holistic approach incorporating education as well as the practical dental assistant skills. Working directly with children was the most fulfilling part of my job,” says Ms Stenner.

While studying at the University of Melbourne, Ms Stenner says she wants to get the most out of the student experience including a possible exchange to an Aboriginal community. Upon graduation, she’d like to work as an oral health therapist.

“I like the possibility of owning my own practice and teaming up with a dentist to provide a kid-friendly service. Or working in an educational facility or even through the University. The course can open up more opportunities, which I’m excited about.”

DUNGALA KAIELA RESEARCH FELLOWS



L to R: Tui Crumpen, Karyn Ferguson and Raelene Nixon

The Dungala Kaiela Foundation is committed to improving the wellbeing of Indigenous families and communities in Victoria, particularly in the Goulburn Valley. A partnership with MDHS is supporting three Research Fellows who are making a difference in their communities.

When the Dungala Kaiela Foundation began in May 2008, its aim was to improve the lives of Indigenous families through social, educational, economic, health and cultural initiatives. The Foundation has become an effective and respected part of the communities it serves and supports.

Karyn Ferguson, Raelene Nixon and Tui Crumpen are Dungala Kaiela Research Fellows with the Poche Centre for Indigenous Research who are also working within their communities to improve the health and wellbeing of local people.

‘Dungala’ is the Yorta Yorta word for the Murray River and ‘Kaiela’ is the Yorta Yorta word for the local Goulburn River.

In 2014, the three women were the first Indigenous students to graduate from the University’s Masters of Health Social Science.

Ms Crumpen has been in Shepparton for more than 20 years and previously completed a Master of Health Social Sciences before embarking on a PhD. She has run projects for Rumbalara Football and Netball Club and worked for the Department of Sustainability and Environment.

“I read Indigenous health policy and hear community conversations and they are quite different. The way Indigenous people view their health and the way it is talked about in the mainstream are quite different,” says Ms Crumpen.

“I have been lucky to be part of some great health programs run by the community and I have seen fantastic outcomes, but mainstream conversations are all about disadvantage and deficit. The communities I work with are proactive, strong and innovative. I hope we can get a better understanding of how to formulate policy that it can be aligned to meet the diverse needs we have as Indigenous people and that is aligned to the way community wants to do their business.”

Karyn Ferguson’s PhD project aims to accurately measure Aboriginal maternal, infant and childhood health outcomes and the disparity between Aboriginal and non-Aboriginal populations in the Goulburn Murray Region. Ms Ferguson grew up in Mooroopna, central Victoria and still lives in the Goulburn Murray area with her family.

When she began working with the Rumbalara Birthing Program after

completing high school, it triggered her interest in working with women and babies. She places great value on being able to remain in her local community.

“I love to focus on my community and on issues beneficial to them. I’m interested in how the social determinants of health, especially continual racism and exclusion, affect local Indigenous people, and the history of health and healthcare in my area,” says Ms Ferguson.

Raelene Nixon belongs to the Gungarri people of south west Queensland but she has lived on Yorta Yorta country for nearly 20 years. Ms Nixon worked for federal government in the welfare sector for 11 years before leaving to work in the Aboriginal community. She has worked in women’s and maternal health, education, community development, governance and research.

Her PhD is a local initiative of the Kaiela Institute.

“It will explore the concept of prosperity on country and how the Goulburn Murray region can work at repositioning the social, cultural and economic value of Indigenous people,” says Ms Nixon.

MASTERS BY COURSEWORK

Ashley Paxton is completing a Master of (Clinical) Psychology and Kathryn Sullivan is studying a Master of Social Work. Both Indigenous students, they share their thoughts on their experiences at the University of Melbourne.



Ashley Paxton

“In a general and therapeutic setting, I believe I can build trust and rapport with young people and work with them to develop resilience, in turn counteracting some of the grim statistics surrounding Indigenous health.”

Ashley Paxton spent four years interning in the world of human resources before realising it was not the right career fit for her.

“I had a great mentor, but I spent a lot of time behind a computer. There wasn’t enough people interaction and I like to talk!”

Ms Paxton grew up in Melbourne’s south-eastern suburbs. Her mother was proud of their Indigenous heritage and instilled these values in Ms Paxton.

She had an influential high school teacher who founded the Kingston Koorie Mob, and was a descendant of



Kathryn Sullivan

poet and activist Oodgeroo Noonuccal. Through those connections, Ms Paxton became a mentor to younger Aboriginal students. She later worked for the Australian Indigenous Mentoring Experience.

Ms Paxton reported numerous challenges in pursuing her educational and career goals.

“I dreamed of going to Monash University but was told to look at other universities that were more ‘realistic’.”

Ms Paxton is now completing her final year of study and is the recipient of an esteemed scholarship awarded by the Australian Psychological Society. She is completing her Master’s thesis in Aboriginal and Torres Strait Islander Social and Emotional Wellbeing and is involved with Orygen’s Reconciliation Action Plan working group.

“My long-term goal is to work as a clinician with Aboriginal and/or Torres Strait Islander youth – I believe as a demographic we are strong, resilient and community-minded.”

After graduating in Media and Creative Arts, Kathryn Sullivan enrolled in a Victorian Public Service graduate program. She joined the Koori Justice Unit and this experience led to a Master of Social Work.

“I saw Aboriginal women in the Victorian Public Service who’d completed a Master of Social Work, and I thought ‘Why can’t I do that?’”

During her time with the Koori Justice Unit, Ms Sullivan observed a Taskforce 1000 presentation – a program that investigated 1000 child protection cases.

“For me, hearing those stories cemented the idea that more could have been done. But a lack of Indigenous people working in the field increased the likelihood of things not being done. I always wanted to be a social worker. If you are going to give your energy and life to something, it makes sense to feel you’ve made a meaningful contribution,” she says.

Ms Sullivan works part-time as a case manager for young Aboriginal women facing life barriers and wants to become a social worker within a hospital.

“You can make a profound impact on someone’s life at a time when they are at a crisis point. It’s a rich opportunity to be a source of comfort and strength.”

ALUMNI



Dr Lyndon Ormond-Parker

As an ARC Indigenous Research Fellow, Dr Lyndon Ormond-Parker has preserved a wealth of culturally significant and endangered audio-visual archives.

“I am keen to see that any audio-visual recordings of Aboriginal peoples’ language, history and culture is preserved into the future. Some of those languages are less and less spoken and if we don’t preserve them, they die out. We won’t be able to recover them,” says Dr Ormond-Parker.

It was the largest audio-visual collection ever brought to the Australian Institute of Aboriginal and Torres Strait Islander Studies. Dr Lyndon Ormond-Parker counted more than 500 mini-DV tapes and 700 VHS tapes belonging to the Wadeye community in the Northern Territory.

Much of the collection was recorded in Murrinh Patha, the language of the Wadeye community, and the tapes hold culturally valuable recordings of their language, social history, sporting life and health education. Working with local organisations including the Thamarrurr Development Corporation and the Kanamkek-Yile Ngala Museum, Dr Ormond-Parker helped steer a digitisation project that saw the older tapes preserved so they can be transmitted to current and future generations.

“We also worked to help establish a narrowcast digital TV broadcasting system in the community of Wadeye – it broadcasts in a 5km radius. Essentially, the project has repurposed videos to be re-broadcast locally,” explains Dr Ormond-Parker.

The development of a new culture precinct in Wadeye was kick-started by

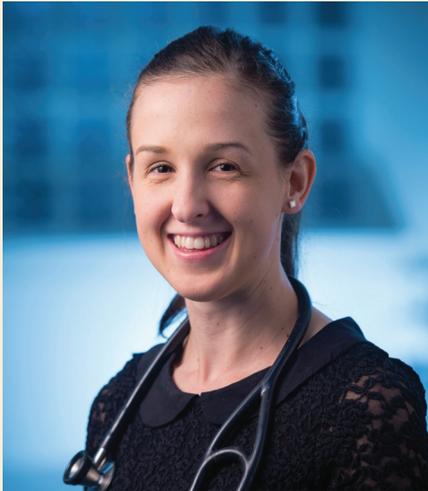
the University of Melbourne architecture Bower Studio students in the June 2017 – they worked with a local team in establishing a Media Box, a facility that includes a broadcasting space with seating, stage and projection screen.

Dr Ormond-Parker was born in Darwin and has spent his academic and professional life in the field of archival studies, the conservation of Aboriginal and Torres Strait Islander heritage, medical anthropology, cultural heritage, information technology and the history of the collection of Aboriginal and Torres Strait Islander human remains and repatriation to communities.

Dr Ormond-Parker also has expertise in broadband and modern technology and databases and collection management, preservation and access. In late 2017, he received an Australian Research Council grant to investigate world’s best practice for long-term storage of digital and analogue audio-visual cultural materials to assist in the preservation of Indigenous languages and culture.

“I feel that research isn’t just about traditional outputs like publishing articles,” he says.

“There can be other impacts like assisting the community to establish a TV broadcast, so they can access their cultural history, heritage and languages, and trialling new and innovative technologies that contribute to community wellbeing. Cultural heritage is considered part of an individual’s wellbeing and I’m very interested to be working in the intersection between cultural materials, cultural heritage, language and how this can impact on health and wellbeing.”



Dr Tara Purcell

“When I was younger I remember my nan was often unwell. I wanted to help in some way. This sparked my interest in health and medicine,” says Dr Tara Purcell who has juggled a Master of Public Health, motherhood and a career in medicine. Completing a PhD is also part of her plan when the time is right.

Dr Purcell’s family are from the Healesville area, but she spent most of her childhood growing up in Melbourne’s north eastern suburbs. Her maternal grandmother was a key figure in Dr Purcell’s life and although she passed away when Dr Purcell was young, she continues to have an influence.

“I have many wonderful memories of spending time with my nan and chatting around her kitchen table. However, I also remember my nan often going in and out of hospital. She died when she was young, and that loss and experience had a significant impact on me,” says Dr Purcell.

After high school, Dr Purcell studied Exercise and Sports Science and went on to the University of Melbourne to study Medicine and a Master of Public Health.

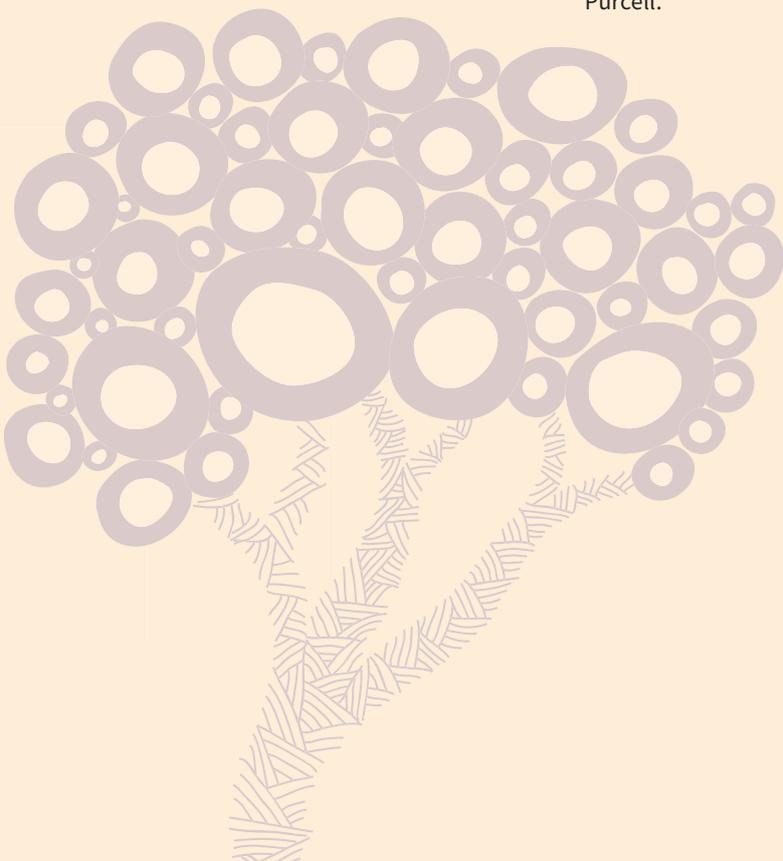
“Studying medicine was a fantastic experience. It was very overwhelming at times due to the volume of work. I found it very helpful to break the course down and to set myself small goals,” says Dr Purcell.

“I approached each assessment one step at a time. I was also very fortunate to have a wonderful cohort of friends and strong support from my family.

“The Master of Public Health provided a great insight into broader influences on health and has led to my interest in public health medicine.”

Dr Purcell completed her internship with Austin Health in 2016 and took leave to have her second child during her residency year at Monash Health.

Currently, Dr Purcell is undertaking advanced training in public health. “I’m enjoying the opportunity to learn from mentors, colleagues and members of the community.”





Dr Graham Gee

Dr Graham Gee was a mature age student when he began a Master of Clinical Psychology, then studied a PhD at the University. He is now Senior Psychologist and Clinical Coordinator at the Victorian Aboriginal Health Service (VAHS).

Born in Darwin, Dr Gee's father comes from a large Aboriginal Chinese family. His grandfather Walter Lew-Fatt was born near Belyuen, a small Aboriginal community just outside Darwin, and his great-grandmother was born on the Barkly Tablelands. His mother's family is of Celtic-Australian heritage.

He began his working life as a physical education teacher in Scotland and the UK while travelling, and later in northern NSW and remote Aboriginal communities in the Northern Territory.

"During the time I spent in remote communities as a school teacher, it struck me how important mental health, resilience, and social and emotional being are in strengthening communities," he says.

"I gradually realised that what interested me most about my job was having meaningful conversations with people about their lives, how to overcome difficulties and challenges and recover from adversity."

When Dr Gee's wife began studying nursing in Melbourne, they moved to Victoria and he started studying psychology at the University. He started working at the VAHS as a dual-diagnosis

counsellor while completing a Masters in Psychology. In 2016, he became the first person in his family with a PhD. His doctoral research focused on resilience and recovery from trauma among Aboriginal help-seeking clients.

"I saw the need for some culturally-designed mental health and wellbeing instruments that would help us understand the key factors that predicted better post-trauma outcomes among clients using our service," he says.

Dr Gee developed the Aboriginal Resilience and Recovery Questionnaire (ARRQ) after reviewing the international resilience literature and conducting focus groups with fellow Aboriginal practitioners.

The ARRQ asks clients about resilience and recovery factors along with questions on cultural identity, cultural practices and how connected people feel to their community, family, kin and partners. He found that the more personal, relationship, community and cultural resilience resources a client can draw upon, the lower their reports of post-traumatic stress disorder, depression and drug and alcohol use. They also report higher levels of empowerment and healing.

Dr Gee is now using his PhD research to support the development of Aboriginal community-designed programs that focus on building resilience and empowerment.



He was a founding board member of the Aboriginal and Torres Strait Islander Healing Foundation, and sits on the Commonwealth Million Minds Mental Health Research Mission Advisory Panel, that will invest \$125 million over nine years for improving diagnoses, treatment and recovery, with Aboriginal and Torres Strait Islander mental health as a key priority.

Dr Gee is also part of a team awarded a four-year NHMRC grant to investigate how to break inter-generational trauma by supporting Indigenous parents who've experienced trauma themselves.

“Left unaddressed, the impacts of complex trauma can influence peoples’ capacity to parent and affect the next generation. We’re co-designing with communities to develop culturally grounded tools, assessment processes and therapeutic strategies that will support parents in healing from the effects of any unresolved complex trauma.

“I’m very privileged to be involved in this kind of work. I get to listen to what is meaningful in overcoming challenges for local communities and think about how to support local processes of empowerment”, says Dr Gee.

“If the research strengthens the capacity of Aboriginal and Torres Strait Islander services to support peoples’ experiences around healing and recovery, then I feel I’ve made a bit of a difference.”

TEDDY BEAR HOSPITAL VISITS THE VICTORIAN ABORIGINAL HEALTH SERVICE

Teddy bears helped break down barriers and pass on important health lifestyle messages to children and families at the Victorian Aboriginal Health Service (VAHS).



L to R: Shawana Andrews, Sian Andrews, Margaret Davidson (Women's and Children's Program Team Leader from the Victorian Aboriginal Health Service), Maya Andrews, Dr Ngaree Blow and Amail Andrews

The Teddy Bear Hospital is a regular community engagement program at MDHS that involves volunteer students from across the Faculty.

The aim is to familiarise children and their families with a healthcare setting and to overcome any fears they may have about visiting a hospital or health professional through the non-threatening situation of giving a child's teddy bear a 'health check'.

For the first time, in October 2018 the Teddy Bear Hospital joined forces with the Victorian Aboriginal Health

Service (VAHS). Over 40 MDHS students presented around 45 Indigenous pre-schoolers with teddy bears. The children, with their families and carers, went to the dental clinic, met teddy doctors in the consulting rooms, and had eye checks in the optometry rooms.

During the event, Professor Paul Monagle and Linda Browne from the Melbourne Medical School supported the students.

"For students, the Teddy Bear Hospital is a great way of teaching multi-disciplinary collaboration and real world communication skills. With this particular

event with VAHS, there was a great opportunity for students to understand the issues associated with Aboriginal health," says Professor Monagle.

"For the children and their families, VAHS felt this was a good model for them to say, 'This is a good way of doing healthcare and it's not that scary'. It encourages children and families to experience healthcare in a non-threatening and fun way. That's important because the more relaxed children are around us, and the more they are willing to talk to us, the more we can help them.

“Many Aboriginal families have been disenfranchised by western healthcare models because of their experiences in the past. Reinforcing that this was a community-controlled health service, and we were there in a non-threatening way was an important message.”

Before the event, students attended a cultural safety training program run by University of Melbourne Indigenous health academics, Shawana Andrews and Dr Ngaree Blow.

“The cultural safety program covered the background of Aboriginal health in Australia, the role of a community-controlled health service and what to consider when dealing with people who come from culturally diverse backgrounds, specifically Aboriginal and Torres Strait Islanders,” says Professor Monagle.

The Teddy Bear Hospital was a success for everyone involved and opportunities will be explored to repeat the program with VAHS and with other Aboriginal

Community Controlled Health Organisations around Victoria.

“VAHS told us that parents felt it was a positive event and that it increased the parents’ view of the supportive nature of the community available for them at VAHS. We are indebted to VAHS’s support, in particular Margie Davidson, coordinator of the maternal and child health program, who fed back that this was one of the best health education activities they’d ever run for their children.”



Staff and students at the Teddy Bear Hospital

IMPROVING INDIGENOUS HEALTH: MELBOURNE ACADEMIC CENTRE FOR HEALTH (MACH)

The MACH is a network of 18 of Victoria's leading healthcare providers, medical research institutes and the University of Melbourne. It is one of nine Advanced Health Research and Translation Centres in Australia and is committed to leading initiatives that deliver transformative and sustainable change and improvements within the health sector.



Professor Marcia Langton speaks at the Hearing Our Voices conference

Supporting Indigenous health research is one important area of the Centre's work and in 2018 an Indigenous health mapping project was launched to identify research areas and to foster collaboration between researchers. The mapping project was initiated by Professor Sandra Eades and Associate Professor Elif Ekinci.

"Sandra and Elif wanted to start a local MACH network group to bring together people with a commitment to Indigenous health research. The idea was to foster

collaboration and to ensure that research priorities aligned with community needs and concerns," says Heather Whipp, lead Project Officer on MACH's Indigenous health work.

The mapping project found a diverse array of Indigenous health research across the MACH network including: eye health; maternal and child health; ageing and dementia; acute stroke care; cardiovascular disease; infectious diseases; healing through gathering;

Indigenous knowledge systems; policy evaluation; and Indigenous health workforce development research.

"The map raises the profile of Indigenous health research across the MACH network while fostering collaboration. There is an opportunity to scale up research that is successful and transferable across locations. We want to support that," says Ms Whipp.

Cardiologist and Associate Professor Luke Burchill – a Yorta Yorta/Dja Dja Wurrung man – and Professor Eades are the two MACH representatives who sit on the Australian Health Research Alliance (AHRA) Indigenous Research Network and Capacity Building subcommittee.

In that role, Associate Professor Burchill provides a Victorian lens to the enablers and barriers to Indigenous health research, especially for Indigenous researchers. Associate Professor Burchill and Professor Eades work with this group to develop national priorities for MACH and other centres across Australia.

Associate Professor Burchill also chairs the MACH Indigenous Health Subcommittee, which includes Professor Eades, Associate Professor Ekinci representing Austin Health, Professor Stephanie Brown from the Murdoch Children's Research Institute, and other prominent Indigenous health researchers from across the MACH network. As Chair, Associate Professor Burchill helps drive research priorities across the network, leads research and capacity building projects funded by the MACH, and encourages collaboration between partners.

In November 2018, MACH organised a one-day conference to further promote Indigenous health. Entitled 'Hearing Our Voices: The Importance of Community Engagement and Innovation in Indigenous Health Research', the event brought together Indigenous and non-Indigenous researchers and students.

"It provided a forum for voices to be heard, achievements to be celebrated and collaborations to form," says Ms Whipps.

The University's Learning Environments team produced a video project at the conference to highlight voices and experiences of people who contribute to Indigenous health. The conference also hosted a section called Deadly Yarns where students, health workers and Indigenous health researchers and service providers delivered five-minute talks about their research, in both traditional academic as well as more narrative formats.



Associate Professor Luke Burchill

PARTNER INITIATIVES

The Faculty has forged a series of significant partnerships to support research and development for Indigenous health professionals, and to enhance Indigenous health.



L to R: Professor Katherine Kedzierska and Associate Professor Steven Tong

Hospitals, community health centres, medical research institutes and government departments all underpin the Faculty's partnerships. The Faculty's strategic plan *Beyond 2018* places a firm focus on engagement and continued collaboration with partners. In coming years, those partnerships will become even more fundamental to the Faculty's work.

Focusing on Indigenous health, the Faculty has enduring partnerships with the Victorian Aboriginal Child Care Agency (VACCA), Department of Health and Human Services, Doherty Institute, Walter and Eliza Hall Institute (WEHI) and LIME Network.

Peter Doherty Institute of Infection and Immunity

When the Doherty Institute was launched in 2014, Aunty Joy Murphy Wandin, a respected Wurundjeri elder, asked a key question. 'What will this Institute do to improve the health of Aboriginal people?'

That question has become a focus of the work of the Institute – a partnership between the University of Melbourne and the Royal Melbourne Hospital.

The Institute aims to help reduce the unacceptable burden of infectious disease on Aboriginal and Torres Strait Islander Australians, while training the next generation of Indigenous researchers specialising in infection and immunity.

In 2018, the Institute launched a new PhD scholarship – the Yiaga Ngarnga Scholarship for Infection and Immunity (Doctorate) is awarded to Indigenous Australian graduates who have demonstrated excellence in the area of immunology or infectious disease. The Wurundjeri Council named the scholarship, which means 'to seek meaning and understanding'.

Successful candidates receive a \$105,000 scholarship for 3.5 years, up to \$20,000 per year for expenses, mentoring and leadership development support from the Melbourne Poche Centre for Indigenous Development.

Associate Professor Steven Tong is an infectious diseases clinician who spent 10 years working in Darwin. His research has focused on infections that affect Indigenous Australians, including hepatitis B, skin infections and rheumatic heart disease.

"Hepatitis B is common in Indigenous populations around the world. It causes downstream disease like chronic liver failure and liver cancer and rates are five or six times higher in Aboriginal people," he explains.

"The type of Hepatitis B found in Aboriginal Australians is different from anywhere else in the world and we want to understand the natural history of infection with this type of Hepatitis B and how it impacts on the vaccine we have available."

Professor Katherine Kedzierska is a laboratory head in the Department of Microbiology and Immunology at the Doherty Institute. She is studying the impact of influenza viruses on Indigenous populations.

"Influenza viruses are relatively new to Indigenous populations and when there is a pandemic virus, such as Spanish flu or swine influenza, Indigenous populations especially have significant morbidity and mortality," says Professor Kedzierska.

"We are recruiting a cohort of Indigenous volunteers to try and understand why Indigenous people have prolonged influenza and high risk of dying from influenza."

Walter and Eliza Hall Institute

Dr Rob James

At the WEHI, Dr Rob James is an Indigenous clinician researcher in the Population Health and Immunity Division based within the Mueller Laboratory with Professor Ivo Mueller, a malaria specialist.

Dr James' research is located in the Solomon Islands in the Guadalcanal Plains – an oil plantation area that is swampy, flat and has high rainfall. He describes it as a 'malaria hotspot'. He has a research base at the Good Samaritan Hospital in Tetere and a team that includes nurses and microscopists in Honiara attached to the Ministry of Health and Medical Services.

Dr James oversees a project focusing on the efficacy of two commonly-used malaria medicines – artemisinin combination therapies (ACTs) used in tandem with a medicine called primaquine.

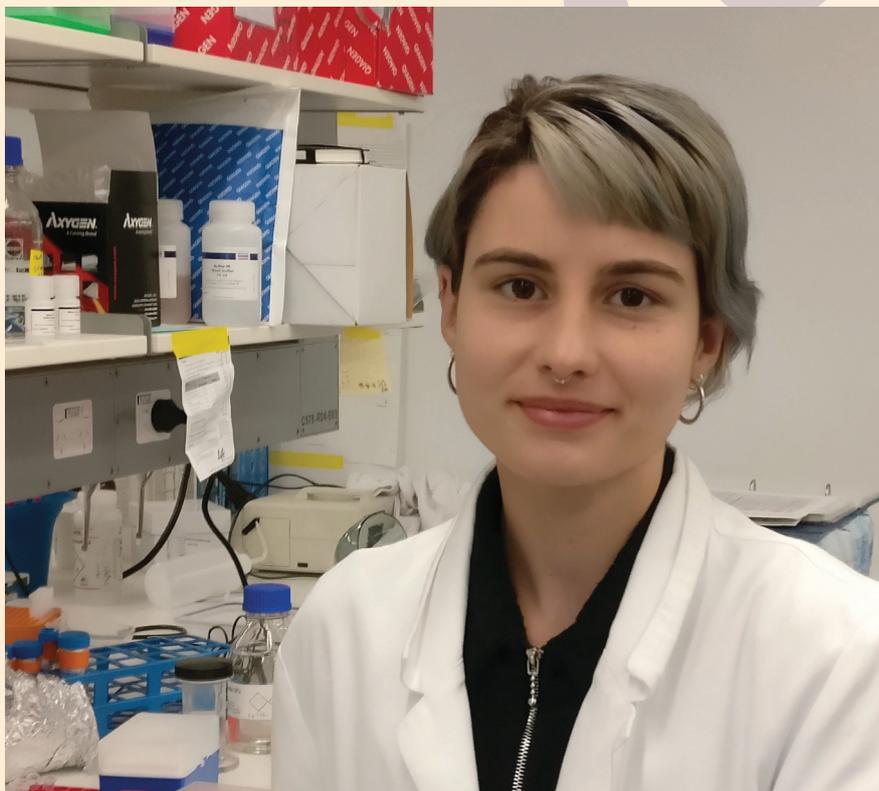
Coartem, one of the ACTs, is the frontline medicine prescribed by the World Health Organization to treat malaria in the western Pacific. Dr James is investigating whether there may be a drug interaction between coartem and primaquine that inhibits the action of primaquine, and so affects its ability to treat malaria.

“Primaquine is the only medicine on the market known to radically cure a type of malaria that is endemic to many countries, particularly the Western Pacific like Vanuatu, Fiji, Solomon Islands and Papua New Guinea,” he says.

“To successfully cure someone of malaria you need to give them a course of primaquine and an ACT drug like coartem but we are investigating whether another medicine may be superior.”

“There are very few people working in breast cancer prevention specifically for Indigenous populations, and this is an area I would like to be able to contribute to.”

Rachel Joyce



Rachel Joyce

Rachel Joyce

Also at WEHI, Rachel Joyce is an Indigenous PhD student whose thesis is focused on identifying perturbed molecular pathways in the cells-of-origin of BRCA1- mutant ovarian and BRCA2- mutant breast cancer to inform targeted cancer prevention strategies.

Ms Joyce works in the Breast Cancer Laboratory – co-led by molecular and cell biologist Professor Jane Visvader and clinician-scientist Professor Geoffrey Lindeman. Professors Visvader and Lindeman are renowned for their landmark breast stem cell discoveries that have resulted in a new framework for understanding how breast cancers arise and how they could be treated or prevented. Recently, the researchers and their team have identified candidate cells that give rise to breast cancer in women who carry a faulty BRCA1 gene, and found that an existing medication for osteoporosis could potentially provide a non-surgical option for breast cancer prevention in these women.

“Women who harbour mutations in the BRCA1 or BRCA2 genes are at a high risk of developing breast or ovarian cancer. Current prevention strategies for these women include mastectomies and/or surgery to remove the ovaries and fallopian tubes, and these are highly

invasive and irreversible procedures. Through my research, I want to contribute to finding prevention and treatment options beyond surgery,” says Ms Joyce.

Ms Joyce, who first joined WEHI as an honours student after completing a Bachelor of Biomedicine at the University of Melbourne, is inspired by the twin focus of discovery and translational science encouraged at the medical research institute.

“Being able to work with samples of breast tissue donated by women carrying these faulty genes reveals so much about the culprit cells and helps keep patients front of mind for me,” she says.

In a later stage of her career, Ms Joyce says she would be interested in further investigating the factors contributing to breast and ovarian cancer susceptibility and genesis in certain populations – particularly Indigenous Australians.

“There are very few people working in breast cancer prevention specifically for Indigenous populations, and this is an area I would like to be able to contribute to.”

For now though, there is much to keep this talented young researcher busy in the Melbourne Biomedical Precinct.

PUTTING HEALTHCARE IN CONTEXT

Physiotherapy students are taking healthcare to the community at Bubup Wilam, an Aboriginal child and family centre in Melbourne's northern suburbs.



L to R: Dr Louisa Remedios and Tamara Clements

Physiotherapy students are taking healthcare to the community at Bubup Wilam, an Aboriginal child and family centre in Melbourne's northern suburbs.

"Bubup Wilam is a welcoming space. The children are thriving, they have a strong sense of their culture and they understand the value and strength of that culture" says Dr Louisa Remedios, Director of Teaching and Learning in the Department of Physiotherapy.

Bubup Wilam's community includes a mostly Aboriginal staff, 70 Aboriginal children between the ages of six months and four-years-old and their families.

Each year since 2013, three or four students spent two semesters at Bubup Wilam as a capstone project in the Doctor of Physiotherapy program.

"They learn about the values and priorities of that community, do a health needs analysis to find out what the health priorities are and then design a health promotion project to meet those needs," says Dr Remedios.

"In educating themselves, they educate the entire student cohort about the community and their experience."

Previous student groups looked at healthy eating and, with the help of staff, children and families, developed a culturally appropriate healthy recipe book.

"When people think of physiotherapy they may think of massage or a neck rub but physiotherapy treats patients with stroke, brain damage and lung conditions and the biggest growing area is health promotion and working at community level," says Tamara Clements, physiotherapy lecturer at the University.

"Students may begin the subject and think they're going to be the physio for the Hawthorn Football Club. Through experiences like Bubup Wilam, we introduce them to other aspects of the practice."

Joanne Bolton also supports community engagement in the physiotherapy department and says it has definite

benefits for students and the Bubup Wilam children and families.

"They become part of the community and feel they're doing something positive that matters and that will last. They have to build sustainability into their project, so it can be handed over to the community to maintain and run."

Dr Remedios says community engagement helps students recognise that in their working lives they will see diverse clients. The project also builds skills in designing and evaluating powerful and effective health promotion activities.

"They learn how a community lives and operates, they learn about limitations and how that shapes what you do. They learn how to manage resources and how to problem solve and they learn that in a very engaging and welcoming space."

INDIGENOUS GRADUATE STUDENT ASSOCIATION

The Indigenous Graduate Student Association (IGSA) is dedicated to supporting the growing number of graduate students at the University of Melbourne. Over the past decade, the number of Indigenous students choosing post-graduate studies – both coursework and research-based – has risen steadily. IGSA’s role is to support and advocate for those students, and ensure their needs and concerns are adequately met during their time on campus.



L to R: Josh Cubillo and Kiernan Ironfield

IGSA was formed by a small group of Aboriginal and Torres Strait Islander students in March 2009. Recently reinvigorated, the association aims have remained unchanged and include fostering the communication of research ideas and enhancing collaboration between Indigenous graduate students and non-Indigenous students interested in Aboriginal and Torres Strait Islander research.

Engaging with Indigenous undergraduate students interested in further study, hosting events that strengthen bonds within the Indigenous graduate

community, and providing academic and professional development opportunities for graduate students also lie at the heart of the association. IGSA also liaises with the University about the Reconciliation Action Plan (RAP).

Josh Cubillo and Kiernan Ironfield have recently become co-chairs of IGSA, taking over from former co-chairs Emily Munro-Harrison, Teina Te Hemara and Maddee Clarke.

“It’s an exciting time to take on this leadership position and build on the supportive community that Emily, Teina

and Maddee helped foster,” says Mr Cubillo, Indigenous Development Project Officer at the University of Melbourne.

Former co-chair Emily Munro-Harrison was first aware of the association while studying a Masters of Environment.

“I saw what IGSA was doing to promote the work and research of Indigenous graduate students. It creates a space, community and a sense of belonging,” says Ms Munro-Harrison.

Now in her final year of a PhD, Ms Munro-Harrison is researching the experience of young Aboriginal and Torres Strait Islander people in Melbourne and their connection to identity, community and culture and the relation to health and wellbeing. She has also worked in Indigenous health evaluation and with a health service program investigating the experiences of Aboriginal girls perpetrating violence and becoming enmeshed in the justice system.

Law student Teina Te Hemara also enjoyed her time as IGSA co-chair.

“Going through higher education as an Indigenous student can be challenging – you may be the only Indigenous student in the classroom,” says Ms Te Hemara.

“Speaking personally as a law student, it can be a challenge when you learn about the acquisition of Australia and there may be no Indigenous perspective, or if you’re a medical student there may not be much time spent on Indigenous health. It’s important to have somewhere to talk to other people who understand that and IGSA is that place.”

ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH CONFERENCE

Leah Lindrea-Morrison is a Yorta Yorta woman with a background in employment, aged care and health who supports and advocates for Aboriginal and Torres Strait Islander people.

Ms Lindrea-Morrison has taken a lead role in organising an annual health conference to facilitate the exchange of information on key issues in Aboriginal and Torres Strait Islander people's health and wellbeing. The event provides a forum for the presentation of cutting-edge program initiatives and research findings in health and wellbeing by Aboriginal and Torres Strait Islander health practitioners.

"The conference logo represents the journey of people coming together from many directions to yarn about Aboriginal health. It recognises that Aboriginal and Torres Strait Islander health is everyone's business and that it is a journey shared and supported by First Nations people," says Ms Lindrea-Morrison, Aboriginal Partnerships and Community Engagement Officer at the Department of Rural Health, MDHS, who is based in Shepparton.

The Aboriginal and Torres Strait Islander health conference has been held in Shepparton annually, but in 2018, the

event was held in the larger Victorian town of Ballarat. When in Shepparton, the event was called Ngar-wu Wanyarra, Yorta Yorta for 'listen and act', and in Ballarat the event's name became Yanikan-werritj, which means 'everyone's journey' in the Wadawurrung language. It attracted keynote speakers, Professor Kerry Arabena, Chair for Indigenous Health and Director of the Indigenous Health Equity Unit and Executive Director, First 1000 Days Australia, and Nova Peris OAM OLY, former athlete and politician.

Professor Tom Calma, Chancellor at the University of Canberra, discussed the Close the Gap campaign and the Federal Government's response, while Professor Sandra Eades highlighted Aboriginal child health data linkage and the Defying the Odds study that aims to identify ways of reducing deaths and illnesses among Aboriginal infants and children.

Themes at the conference ranged from mental health, children and family, and clinical care pathways to cancer

screening, closing the gap and culturally appropriate care.

"More than 170 people registered for the event. This included people at senior executive level, academics, the Department of Health and Human Services, hospital and community health workers, medical and allied health students, GPs, educators, and people from community health organisations," says Ms Lindrea-Morrison.

"We hope the conference builds momentum towards reconciliation and helps close the gap between Aboriginal and Torres Strait Islander health and that of the wider population. The more people know about and talk about Aboriginal and Torres Strait Islander health, the more we can work together to improve health outcomes for Australia's First Nations people."



L to R: Professors Tom Calma, Kerry Arabena and Sandra Eades



L to R: Professor Lisa Bourke, Director, Department of Rural Health; Leah Lindrea-Morrison; Nova Peris OAM OLY; and Angela McLeod, Manager, Department of Rural Health

INDIGENOUS DATA SOVEREIGNTY PROJECT

“Indigenous data sovereignty means the ability and capacity of Indigenous people to locally manage their data with respect to collection, ownership, consent, preservation, access, analysis and reporting” says Professor Marcia Langton AM, Chair of Indigenous Studies and Associate Provost.



Professor Marcia Langton

In October 2017, the University of Melbourne with the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS) hosted an Indigenous Data Sovereignty Symposium. An aim of the event was to initiate a nationwide Data Sovereignty Network. The network will empower Indigenous organisations and communities to take advantage of developments in data science and maximise the use of their data resources for community benefit.

Professor Langton, a convenor of the symposium, says it is important that local Indigenous communities are empowered to decide their own local data priorities, including how their data is utilised. She says a sustainable network will take the Indigenous data agenda forward.

“We hope that through this network working collaboratively, Indigenous Data Sovereignty will provide advances for local Indigenous communities, confirming the rights of Indigenous people to govern their own data to inform development, allocate resources and set future goals and objectives for themselves,” she says.

Dr Kristen Smith, Research Fellow with the Indigenous Studies Unit at the University, says the network aims to have groups of experts, such as epidemiologists, health statisticians and those working in employment and education, located across multiple interested universities nationally.

“The network will enable access to people who can potentially do capacity building and development work and to promote what data and evidence can do for communities. Data sovereignty has a bottom up approach so, for example, if a local community in South Australia recognise issues in child health or nutrition, they can contact the network and find experts in the region who can

talk about what is happening on the ground, bring in programs and evaluate them.”

The Maranguka Justice Reinvestment Project is an example of data sovereignty working effectively. It highlights the benefits of community collected data for young people passing through the justice system in Bourke, NSW. The data is used to help reduce the likelihood of young Indigenous people reoffending.

Skye Bullen, the Community Data Manager for the project, describes it as “the first major community and data driven justice reinvestment initiative in Australia.”

A shared measurement framework has been developed to monitor performance, track progress towards outcomes and learn what is and is not working.

Data has been collected on types of offending, diversion, bail, sentencing, days and times offences were being committed, and reoffending rates. Data was also collected on the community’s outcomes in early life, education, employment, housing, child safety and healthcare.

The shared measurement framework provides community members a platform to define their needs and supports working group members’ ability to learn and understand behaviour based on data collected. A dashboard shares real time data and working groups receive regular reports.

Early achievements of the project include fewer police cautions and warnings – dropping from 300 to three. There has been a 30 per cent drop in driving offences, a 37 per cent reduction in domestic violence and a 25 per cent rise in education engagement for the majority of at risk young people attending the Our Place Program.

THE ART OF HEALING EXHIBITION

The Art of Healing: Australian Indigenous Bush Medicine, was a major exhibition at the University's Medical History Museum in 2018. In 2019-2020 the exhibition is travelling to King's College London and the Museum of Medical History, Charité-Universitätsmedizin Berlin. It explores the enduring presence and evolution of Indigenous medicine and presents, through contemporary art, examples from many communities.



Dr Jacqueline Healy pictured alongside *Bush Medicine: a collaboration by women from Wirramanu (Balgo), 2018*

The exhibition showcases traditional healing as a thriving practice informed by the past, and an intrinsic part of the lives of many Indigenous people.

Dr Jacqueline Healy, Senior Curator at the University's Medical History Museum and Henry Forman Atkinson Dental Museum, spent two years preparing the exhibition with help from Indigenous communities around Australia.

"The rich knowledge of bush medicine

and healing practice is part of the past, present and future – it's part of a continuum," says Dr Healy.

"The vision of this exhibition is to show the extraordinary diversity of Australian Indigenous culture."

Artists include Gija Elder Shirley Purdie, who has researched and illustrated the bush medicine of her region near Warmun in the Kimberley. A major triptych from Victorian Aboriginal artist Treahna Hamm

that shows ancestral Yorta Yorta women collecting bush medicine along the bank of *dhungala* (the Murray River), was also featured.

Kathrine Clarke, an artist who previously worked for the University's Student Success Team, created a series of five paintings that show various plants used for bush medicine in Victoria.

Judith Inkamala from Hermannsburg in Central Australia was commissioned to

create a bush medicine pot that depicts a scene revealing how bush medicines are prepared.

Other artworks exemplified traditional Indigenous remedies. In the Kimberley, the bark of the blood wood tree is boiled and drunk as a tonic to help cure cancer, and tablets made of mud from the dried mud flats on Sturt River, an area called Luga, are chewed to help treat an upset stomach. Tiwi Islands artist Irene Mungatopi's etching revealed how green plums are used to treat toothache. The power of the Maparns Ngangkari – traditional men and women healers – are represented through artworks such as paintings of country and baskets.

“The display of artworks and objects opens a window on to the precious legacy of Aboriginal healing traditions, with their unique values, beauty and power. Images are used by healers to focus the patient's attention on ancestral

power and the proper state of balance between the spiritual and the mundane, to achieve social order. Displaying art depicting the design world and ways of seeing traditional healers validates these ancient traditions and shows us creative ways to maintain these vulnerable and threatened bodies of knowledge and practice,” says Professor Marcia Langton AM, Associate Provost.

Professor Langton spoke in depth about bush medicine and traditional healing practices in her Dean's Lecture, 'The Power of the Ngangkari', scheduled to coincide with 2018 NAIDOC Week. Professor Langton, who is patron of the Alice Springs based community organisation Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council (NPYWC) was joined on stage for a Q&A session by Ngangkari Maringka Burton, Tinpulya Mervyn and Betty Muffler, and Angela Lynch, Manager of the Ngangkari Program, all from the NPYWC.

“The display of artworks and objects opens a window on to the precious legacy of Aboriginal healing traditions, with their unique values, beauty and power.”



L to R: Rene Kulitja and Pantjiti Imitjala Lewis are Ngangkari (traditional healers) from Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council in Alice Springs and traditional owners of Uluru. They traveled to London in 2019 to launch the exhibition at King's College. Pictured here with a work by Ilawanti Ungkutjuru Ken, Tjupurrula wilitja: bird nest basket, 2017.



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