



the
Lowitja
Institute
Aboriginal and Torres Strait
Islander Health CRC

The Lowitja Institute
Aboriginal and Torres Strait Islander Health CRC

ANNUAL REPORT 2017–18



Australian Government
**Department of Industry,
Innovation and Science**

Business
Cooperative Research
Centres Programme

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CEO's Certification

I hereby certify that the information provided to the Department of Industry, Innovation and Science by the Lowitja Institute Aboriginal and Torres Strait Islander Health CRC in:

- The written annual report for the 2017–18 financial year;
- The CRC's Online milestone tables for the 2017–18 financial year;
- The CRC's Online financial tables for the 2017–18 financial year; and
- The CRC's Online MDQ for the 2017–18 financial year.

is accurate and provides a true and fair view of the matters reported on therein.

I certify that the Commonwealth Funding and Participant Contributions were applied for the Activities of the CRC as specified in the Funding Agreement and that Commonwealth Funding has been expended only for the Activities and otherwise in accordance with this Agreement.

I certify that the CRC has met its obligations in relation to the treatment of intellectual property.

I certify that the chair of the board meets the requirements of independence set out in the Funding Agreement and that the majority of board members are independent of the CRC's research providers.

I certify that the CRC has adhered to the requirements for proper use of the CRC Program Branding, publicity and support as specified in the Funding Agreement.

I am aware that giving false or misleading information is a serious offence and could lead to prosecution under the Criminal Code 1995.

SIGNATURE:

NAME: Romlie Mokak

POSITION: CEO, The Lowitja Institute Aboriginal and Torres Strait Islander Health CRC

DATE: 31 October 2018

1. Executive Summary

1.1 Achievements

1.1.1 Research and collaboration

The Institute appointed a Director of Research, Dr Sanchia Shibasaki, in November 2017.

During 2017–18, the Lowitja Institute CRC research team focussed primarily on:

- Further refinement of our research governance processes
- Strengthening Program Committees for each of our three research programs
- Progression of research activity commenced in 2015
- Identification of further commissioning of work under the three research programs including identification of initial priority areas and establishment of new research activity
- Progression of capacity building of the Aboriginal and Torres Strait Islander health research workforce through a scholarship program
- Strategic engagement in high priority knowledge translation projects
- Utilisation of communication channels for effective dissemination of research and knowledge translation projects, including social media
- Twenty-three new projects were established in areas of workforce, families, Elders, disability, the health and wellbeing of young Aboriginal and Torres Strait Islander men, health care and biomedical science.
- The Service Integration for Aboriginal and Torres Strait Islander Early Childhood Development, which received seed funding from the Lowitja Institute CRC in 2016–17, was successful in its NHMRC funding application during this reporting period, being awarded \$836,500 for a project titled 'Building the Evidence Base of First 1000 Days Australia: An Evaluation of Implementation outcomes'. This project, led by SNAICC, under the auspice of the University of Melbourne, will investigate service integration initiatives targeted to respond to the early childhood development needs of Aboriginal and Torres Strait Islander children.

CRC Scholarship Project

The Institute has started implementing the Lowitja Institute CRC Alumni Project. The aims of the project are to:

- Describe the outcomes and impact associated with CRC scholarship investment from 1997 to 2017 in building Aboriginal and Torres Strait Islander research and workforce capacity, and
- Review the processes associated with supporting CRC scholarship alumni.

This project involves:

- Identifying CRC and Lowitja Institute scholarship holders
- Conducting a survey of scholarship holders (the survey would collect data relating to Lowitja Institute impact in terms of capacity development, workforce opportunities, career pathways, and additional information relating to the update of the two Lowitja Institute publications)
- Facilitating a workshop and Alumni dinner at the 2019 Lowitja Institute Conference, and

- Report outcomes as part of CRC exit strategy and other relevant documentation.

1.1.2 Commercialisation and utilisation

- We undertook an internal review on ethics to examine how HRECs contribute to and impede ethical health research involving Aboriginal and Torres Strait Islander people. Options from the review paper include offering educational workshop to develop HRECs' knowledge of guidelines and methods that support ethical research involving Aboriginal and Torres Strait Islander people.
- We provided the Council of Australian Governments (COAG) with a submission to inform the development of the Closing the Gap refresh.
- In August 2017, the Lowitja Institute provided the Commonwealth Department of Prime Minister and Cabinet with a submission on their Evaluation Framework for the Indigenous Advancement Strategy.
- The Lowitja Institute convened the Disability Research workshop held in October 2017, to discuss key research priorities for Aboriginal and Torres Strait Islander peoples with a disability.
- The Lowitja Institute CRC hosted two Participants Forum in its Melbourne offices, in November 2017 and in May 2018, to discuss activities and ongoing research, as well as strategic considerations for the organisation.
- Knowledge translation (KT) activities have expanded during 2017–18 by continuing the appointment of a dedicated knowledge translation manager, further refining our approach, and providing KT funding to research projects. This activity is vital as it enables us to create a direct link from community priorities, to evidence base, to policy development, then finally to monitoring and evaluation (see page 16).
- Progress is well underway for the second international Indigenous health and wellbeing conference to be held in Darwin in June 2019 (see page 16).
- The Institute continues to support the activities of the Literacy for Life Foundation. The Foundation uses an innovative, evidence-based, campaign approach that has been implemented in 30 countries and is now delivering results in Australia. So far, more than 170 students have graduated campaigns run in eight NSW communities and the organisation is working towards national expansion.
- The Chair, CEO and senior staff have given key speeches, seminars and keynote addresses (see page 19).
- Usage of Lit.search more than doubled in the reporting period to more than 20,000 instances. Lit.search is an online search tool that facilitates searches in PubMed for literature on Aboriginal and Torres Strait Islander health. Scholarships program.
- As reported in 2016–17, the Lowitja Institute CRC has worked towards developing business opportunities that will enable us to deliver public value when we transfer from the CRC Programme after June 2019, by leveraging on our research legitimacy and cultural authority. In this reporting period, and in response to a high degree of interest in quality policy research, we have started to develop Lowitja Consulting as the first of those potential activities. It is envisaged that Lowitja Consulting will undertake research, strategy and policy projects with governments, mainstream and Aboriginal and Torres Strait Islander organisations.
- In November 2017, we co-hosted the 6th NHMRC Research Translation Symposium. A record number of just under 400 delegates came together to learn from success stories and ways to maximise impact. Also, to hear insights from Aboriginal and Torres Strait

Islander people on ways that research can deliver real and measurable positive impacts (see pages 21 and 32).

- The Lowitja Institute was commissioned by the National Mental Health Commission to conduct research in Aboriginal and Torres Strait Islander mental health. The research aims were to identify the key risk and protective factors as they relate to Aboriginal and Torres Strait Islander peoples' experience of trauma and other identified factors, and, using that knowledge to improve the mental health of Aboriginal and Torres Strait Islander peoples. The final report was delivered in June 2018.
- We are a partner of the Partnership for Justice in Health, a partnership of health, legal and research organisations exploring the intersections between Aboriginal and Torres Strait Islander health outcomes and the justice system.
- We participated in a panel discussion at the Doherty Institute's inaugural Indigenous Health forum in September 2017 and continue to be a member of the Australian Indigenous HealthInfoNet Advisory Group.
- We continue to support the Family Wellbeing Program (FWB) as they develop the National Centre for Family Wellbeing (NCFWB) including the development of a business plan, policy brief, communication strategy and website. FWB is an effective social and emotional wellbeing program developed by and for Aboriginal people. We are also funding a project to define and develop funding models and mechanisms that can support FWB integration and implementation within early childhood family support programs.

1.1.3. Education and training

- The Lowitja Institute CRC is committed to developing a strong base of Aboriginal and Torres Strait Islander health researchers and has funded 13 scholarships to date (9 PhD, 4 Masters), plus an additional 10 postgraduate scholarships (7 PhD, 3 Masters) co-funded with Participants.
- Three scholarship holders completed their PhDs (2) and Masters (1) degrees during the reporting period (see p. 12).
- Associate Professor Ray Lovett, NHMRC Research Fellow with the Epidemiology for Policy and Practice group at the National Centre for Epidemiology and Population Health at the Australian National University was awarded the Lowitja Institute Research Leadership Award, a partnership with the Cranlana Programme established to recognise Aboriginal and Torres Strait Islander health research leadership and excellence.

1.2. Risks and impediments

Risk Management – Principles and guidelines (AS/NZS ISO 31000-2009) has been used as the benchmark in planning and implementing the risk management framework. The standard recommends that organisations should have a framework that integrates the process for managing risk into the organisation's overall governance, strategy and planning, management, reporting processes, policies, values and culture.

The major risks that the CRC faces are that a partner organisations may not deliver on their contracts and deliverables. To mitigate this risk the following actions have been take

- Establishing good communications with the partner and reinforcing expectations as per contract
- Closely monitoring all projects to ensure that they are meeting all their milestones.
- On delivery of the research project ensure that it meet all our professional standards

- Ensure that a Knowledge Translation activity is implemented to ensure that the research project met its goals.

1.3. Impacts

The Lowitja Institute CRC's work represents an integrated set of activity promoting research and implementation across policy, service delivery and community contexts. This incorporates research training and capacity development as well as developing knowledge exchange pathways with the education and workforce training sectors, and building on work of the previous CRCs.

2. Performance against activities

The Lowitja Institute CRC strives to achieve the best outcomes for Australia's First Peoples. Ensuring that our activities effectively address inequities in health outcomes for Aboriginal and Torres Strait Islander people is central to this effort. To this end, and building on the successes of previous CRCs, the Institute is identifying priorities, and developing research and knowledge exchange processes, to ensure that maximum value is created through its collaborative partnerships. These collaborations include Aboriginal and Torres Strait Islander organisations and communities, Participant organisations, and other research and policy partners.

To guide this effort, the Lowitja Institute CRC identified five key principles that underpin our approach to research:

1. Beneficence — to act for the benefit of Aboriginal and Torres Strait Islander people in the conduct of our research
2. Leadership — by Aboriginal and Torres Strait Islander people
3. Engagement — of research end users (Aboriginal and Torres Strait Islander organisations and communities, policymakers, other potential research users)
4. Development — of the Aboriginal and Torres Strait Islander research workforce, and
5. Measurement — of impact in improving Aboriginal and Torres Strait Islander peoples' health.

Research governance

The Lowitja Institute CRC's research governance structure has been developed to support the strategic development of, and priority setting for, a body of research most likely to contribute to positive impacts for Aboriginal and Torres Strait Islander peoples' health and wellbeing. The governance structure is consistent with the Institute's research principles of ensuring Aboriginal and Torres Strait Islander people, including those with expertise as potential research end users, participate in setting research priorities and guiding the direction of the work of the Institute.

Program Committees

Three Lowitja Institute CRC research programs committees, each headed by an Indigenous Chair, guided the research agenda:

Program 1 – Community capability and the social determinants of health was guided by Professor Kerry Arabena. Work through this program deepens our understanding of how individuals, children, families and communities can mitigate the negative impacts of the social determinants of health, and maximise the effectiveness of positive cultural, social, economic and environmental influences.

Program 2 – Needs and opportunities for the Aboriginal and Torres Strait Islander health workforce was guided by Professor Cindy Shannon. Work through this program is driven by the need to know how to better grow and sustain a health workforce to address Aboriginal and Torres Strait Islander health needs in all health services and systems.

Program 3 – Health policy and systems was guided by Dr Mark Wenitong. Work through this program will provide evidence on the broader health policy and system settings that are most effective in supporting improvements in Aboriginal and Torres Strait Islander health.

See also page 30, Table 7 – Research Program Committees.

Role of Program Committees

The role of each Program Committee is to provide the Institute with strategic advice on:

1. Development of each research program within the broad parameters described
2. Identification of research priorities within each research program, including
 - a. scoping specific topics and requesting that work, such as evidence reviews, be commissioned to assist with this
 - b. obtaining input from others should additional advice be required for priority setting or refinement of priorities
 - c. Identifying potential research projects and research questions
3. Quality assurance processes for program activities, including peer review of research activities
4. Building Aboriginal and Torres Strait Islander researcher capacity into the activities of the program.

2.1 Program activities

Program 1 – Community capability and the social determinants of health

Work continues on current projects (see www.lowitja.org.au/active-lowitja-institute-projects) and five new projects commenced under this program during the reporting period identified through call for research projects under the themes of *Strong Workforce*, *Strong Families* and *Strong Elders*.

Ref. nbr	Research activity
017-SF-005	<p>Developing a physical activity program for Aboriginal families with Machado Joseph Disease</p> <p>This project will develop a meaningful, feasible, evidence-informed physical activity program for individuals and families with Machado Joseph Disease (MJD). The program will be derived from the needs and priorities of Anindilyakwa people of the Groote Eylandt Archipelago, Northern Territory. The knowledge and experiences of families with MJD will be combined with knowledge from the Western scientific domain to enable families with MJD in the Top End to stay 'stronger for longer'.</p>

017-SE-015	<p>Sharing the wisdom of our Elders: Understanding and promoting healthy ageing with older Aboriginal Australians</p> <p>This project aims to document health, resilience, social connectedness and engagement with community and culture with a diverse group of older Aboriginal and Torres Strait Islander people who are ‘growing old well’; share Elders’ insights into the meaning of healthy ageing and stories of ‘growing old well’; and identify current services/programs and whether these align with the needs and expectations of the ageing Aboriginal and Torres Strait Islander population.</p>
017-SF-020	<p>Listening to Country: Exploring the value of acoustic ecology with Aboriginal and Torres Strait Islander women in prison</p> <p>The aim of ‘Listening to Country’ is to explore the value of acoustic ecology to promote cultural maintenance and wellbeing among Aboriginal and Torres Strait Islander women in prison. The researchers will collaborate with women in prison to produce a 1-hour immersive audio work based on field recordings of natural environments, and investigate its effects on their social and emotional wellbeing.</p>
017-G-031	<p>Scaling up Mayi Kuwayu – The National Study of Aboriginal and Torres Strait Islander Wellbeing</p> <p>The national longitudinal study of Aboriginal and Torres Strait Islander wellbeing (Mayi Kuwayu) is the first comprehensive study to look at how Aboriginal and Torres Strait Islander culture relates to health and wellbeing. This includes how connection to country, cultural practices, ritual, spirituality and language use impact health and wellbeing outcomes over time. Scaling up Mayi Kuwayu seeks to extend the already funded Mayi Kuwayu Study, and scale up recruitment Aboriginal and Torres Strait Islander peoples in remote areas.</p>
017-G-034	<p>Ngadhuri-nya (To care for): Intergenerational and educational influences on social, mental and emotional wellbeing of Aboriginal and Torres Strait Islander children and young people</p> <p>With half of all Aboriginal and Torres Strait Islander people under 21 years old, we have a pressing responsibility to implement preventative interventions to reverse worsening rates of wellbeing. This project will provide a rare intergenerational perspective on children’s social and emotional wellbeing, educational outcomes and criminal justice system involvement.</p>

In addition, five new projects commenced under this program during the reporting period identified through call for research projects under *Young Men’s Health*:

Ref. nbr	Research activity
017-YM-003	<p>Health literacy among young Aboriginal and Torres Strait Islander males in the Northern Territory: Understanding the intersections with gender and cultural identity</p> <p>The aim of this study is to understand the interplay between health literacy, gender and cultural identity among young Aboriginal and Torres Strait Islander males living in the Northern Territory. This will be examined in the context of participant life aspirations. Strategies and guidelines to inform program and policy responses in health, sport and recreation, education, justice, employment and community services contexts will be identified.</p>
017-YM-004	<p>Roles and Ritual: The Inala Wangarra Rites of Passage Ball Case Study</p> <p>Describe an existing urban Aboriginal and Torres Strait Islander ritual that celebrates the ‘coming of age’ of young Indigenous men and women (Rites of Passage Ball). Investigate the impact of ritual upon young Indigenous men’s social and emotional wellbeing and their role(s) within their family and community. Examine the expectations of urban Indigenous young men, exploring the varying ways in which they enact and challenge racialised, cultural and gender expectations.</p>

017-YM-005	<p>Valuing Aboriginal and Torres Strait Islander Young Men</p> <p>The principal research aim is to identify in what ways Aboriginal and Torres Strait Islander young men remain strong and resilient in the face of adversity in life (including intergenerational trauma).</p>
017-YM-006	<p>Tell My Story: Hearing from the Dads in the Indigenous Birthing in an Urban Setting (IBUS) Study</p> <p>This study has two aims: firstly, to explore Aboriginal and Torres Strait Islander men’s experiences, dreams, aspirations, needs and challenges during their partner’s pregnancy to 6 months post-natal, and secondly to identify their social, cultural and psychological strengths as a partner expecting a baby and as a father.</p>
017-YM-008	<p>Strong Dads Strong Futures</p> <p>The Strong Dads Strong Futures study will identify young Aboriginal and Torres Strait Islander males views to define parenting from their perspectives; to describe their perceptions, expectations and aspirations of successful parenting and caring for others; and, to hear how to strengthen their social and emotional wellbeing to enable their aspirations as future parents and in their family and community life roles.</p>

Three new projects under this program during the reporting period identified through call for research projects under *Aboriginal and Torres Strait Islander disability*:

Ref. nbr	Research activity
017-D-001	<p>Is the National Disability Insurance Scheme meeting the needs of Aboriginal and Torres Strait Islander people? Evaluating the roll-out in Queensland and the Northern Territory</p> <p>The National Disability Insurance Scheme (NDIS) represents a major change in the way the services and supports for people with disability are funded. It presents both tremendous opportunity yet significant challenges. Aboriginal and Torres Strait Islander people are disproportionately affected by disability and often not well served by mainstream services. This has led to strong advocacy and the development of culturally competent service models by community controlled and NGO sector to meet these needs.</p> <p>This project will examine the: Implementation of the NDIS Aboriginal and Torres Strait Islander engagement strategy; Interaction between the National Disability Agency (NDIA) staff, local area co-ordinators and Aboriginal Community Controlled Health Services (ACCHSs) and NGOs; Experiences of Aboriginal and Torres Strait Islander people in accessing the NDIS program, planning and receiving the supports/services through the program.</p>
017-D-002	<p>Yarning together: Developing a culturally secure rehabilitation approach for Aboriginal and Torres Strait Islander people after brain injury</p> <p>This research will work with Aboriginal and Torres Strait Islander people with an acquired communication disorder (ACD) following brain injury. It will (i) develop an understanding of their perceptions of rehabilitation services; and (ii) test the feasibility and acceptability of a culturally tailored model of rehabilitation delivered via one of two modes: face to face or using telehealth technology.</p>
017-D-004	<p>Wellbeing through cultural participation: An affirmative strategy for the inclusion of Aboriginal and Torres Strait Islander people with disability</p> <p>The aim of this project is to identify how cultural knowledge on participation by Aboriginal and Torres Strait Islander people with disability in their community strengthens their health and wellbeing, and translate the knowledge to support sector development for culturally-centred disability policy and practice.</p>

Knowledge translation plans of projects commenced in the previous period progressed as the work has evolved (see page 16).

Program 2 – Needs and opportunities for the Aboriginal and Torres Strait Islander health workforce

Work continues on current projects (see www.lowitja.org.au/active-lowitja-institute-projects).

During this reporting period, we continued progressing the development of knowledge translation plans of projects commenced in the previous period.

Four new research activities were established under the theme of *Strong Workforce*:

Ref. nbr	Research activity
017-SW-054	<p>Moving beyond the front line: A 20 year retrospective cohort study of career trajectories from the Indigenous Health Program at The University of Queensland</p> <p>This project will examine critical success factors for enabling Aboriginal and Torres Strait Islander leadership across the health system as demonstrated by alumni of the University of Queensland’s Indigenous Health Program (1994–2005) who today work in various leadership roles throughout the country.</p>
017-SW-022	<p>Working well: Tailoring a workforce development model to deliver sustained improvements in community controlled healthcare</p> <p>‘Working Well’ aims to develop evidence-informed, tailored workforce systems and processes to support sustained improvements in Aboriginal and Torres Strait Islander community-controlled primary healthcare service provision with a demonstration project at Gurriny Yealamucka Health Service (Gurriny), Yarrabah, Queensland.</p>
017-SW-053	<p>Aremele Arratye Mpwaretyeke – Doing it Right: Research knowledge generation and translation in Central Australia</p> <p>The overall aim of Doing It Right is to improve research knowledge exchange, generation and translation leading to Aboriginal community members, ACCHOs and their Board members having more control over health research, its outcomes and benefits in Central Australia.</p>
017-SW-057	<p>Understanding stress and staying strong in the Aboriginal and Torres Strait Islander health and human services workforce</p> <p>This project will draw on contemporary views and experiences of the national Aboriginal and Torres Strait Islander health and human services workforce to shed light on the nature of their working lives. The project will be guided by an Aboriginal Governance Panel and an Indigenous-led team of researchers. The overall aim is to determine best practice measurement of stress and staying strong in the Aboriginal and Torres Strait Islander workforce in order to generate a tailored instrument for use in future longitudinal studies.</p>

Program 3 – Health policy and systems

Work continues on current projects (see www.lowitja.org.au/active-lowitja-institute-projects).

During this reporting period, we continued progressing the development of Knowledge Translation plans of projects commenced in the previous period.

Six new research activities were established under the theme of *Strong Health Care and Strong Science*:

Ref. nbr	Research activity
017-G-048	<p>Meriba buay – ngalpan wakaythoemamay (We come together to think): Evaluating a Community of Practice for Torres Strait Islander health and wellbeing</p> <p>Meriba buay – ngalpan wakaythoemamay is an evaluation study that addresses community capability and the social determinants of health. The aims of the project include: Developing a sustainable model of knowledge translation for Torres Strait Islander peoples by implementing and evaluating a multi-disciplinary Community of Practice (CoP) that focusses on the social determinants of health and wellbeing; evaluating how a CoP model can best assist Torres Strait Islander researchers, communities and organisations to build high quality, decision-linked and relevant health research knowledge translation capability; and assessing the effectiveness of CoP activities in raising awareness of research outputs in the community.</p>
017-G-051	<p>First response: Integrating trauma-informed care for Aboriginal and Torres Strait Islander women experiencing violence within primary healthcare</p> <p>First Response aims to investigate how the primary healthcare workforce can be supported to integrate culturally safe trauma-informed care for Aboriginal and Torres Strait Islander women who have experienced violence. This project responds to recommendations for trauma-informed care within healthcare settings for women who have experienced violence, but also to women who have expressed a desire to seek support in healthcare settings rather than from the police or frontline services.</p>
017-G-028	<p>Healing the past by nurturing the future: Strengthening foundations for supporting Indigenous parents who have experienced complex childhood trauma</p> <p>This community-based participatory action research project aims to develop strong foundations for a National Health and Medical Research Council (NHMRC) funded project to co-design screening and support strategies for Aboriginal and Torres Strait Islander parents who have experienced complex trauma.</p>
017-SS-024	<p>Engaging Australia’s First Peoples in the development of ethics and protocols for a family-based microbiome study and social health history project</p> <p>The aim of this project is to establish Aboriginal and Torres Strait Islander engagement strategies, communication tools and ethics for a future First Peoples microbiome study and social health history project. Using in-depth interviews the project aims to identify First Peoples protocols for the ethical collection, storage and preservation of microbe sampling and epigenetic analysis related to multiple generations of First Peoples families.</p>
017-G-033	<p>Catching Some AIR – Asserting Indigenous information rights in renal disease</p> <p>To develop an Indigenous-led culturally appropriate 1) kidney disease management guideline (KHA-CARI Guideline), and 2) processes for Indigenous data governance within a binational kidney disease clinical quality registry (ANZDATA).</p>

017-G-052	<p>Discourse, Data and Deficit: Deconstructing the ‘Indigenous Health’ paradigm and its effects on Aboriginal and Torres Strait Islander peoples</p> <p>The 'Discourse, Data and Deficit' research grant aims to:</p> <ol style="list-style-type: none"> 1. Build the capacity of community based health organisations to argue for strength based program funding and to challenge constructions of deficit metrics in policy. 2. Identify and gain a deeper understanding of localised and community based discourses relating to health and wellbeing for Aboriginal and Torres Strait Islander peoples. 3. Identify and gain a deeper understanding of community, social and organisational perceptions on indicators and metrics concerning Aboriginal and Torres Strait Islander health and wellbeing. 4. Develop and empirically evaluate the impact of strength-based approaches on the statistical rigour of large-scale quantitative analyses. 5. Make recommendations of future actions for Aboriginal and Torres Strait Islander research and health policy settings. 6. To develop and submit an Australian Research Council grant on Discourses in Aboriginal and Torres Strait Islander health and wellbeing.
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3. Education and training

3.1 Scholarships update

Lowitja Institute CRC Scholarship Program

The Lowitja Institute CRC is committed to developing a strong base of Aboriginal and Torres Strait Islander health researchers. Current scholarship holders are listed in Table 10, Status of CRC Students (Scholarships) (see page 38). There were two PhD and one Masters degree completions during the reporting period (see below).

The Lowitja Institute CRC scholarship program provides an opportunity for Aboriginal and Torres Strait Islander students and workers to develop their health research skills and contribute to strengthening the Aboriginal and Torres Strait Islander health workforce. Funded research activities will also contribute to the Lowitja Institute CRC’s research evidence and ability to impact policies, programs, and practises that lead to positive change in the health and wellbeing of Aboriginal and Torres Strait Islander people.

Lowitja Institute CRC Scholarship holders are supported to undertake research that contributes to the Lowitja Institute CRC research agenda. A research activity funded by a Lowitja Institute CRC scholarship will contribute to a field of health research that falls within one or more of the Lowitja Institute CRC research program areas.

Co-funded scholarships

Co-funding scholarships enable the Lowitja Institute CRC to collaborate with Participants to provide additional scholarships for Aboriginal and Torres Strait Islander students and 10, including 7 PhDs, postgraduate scholarships have been established with Queensland University of Technology, La Trobe University, Edith Cowan University (The Neil Thomson Scholarship), The George Institute of Global Health, The University of Melbourne, Griffith University, the Australian National University, and the Menzies School of Health Research. One scholar from Queensland University of Technology withdrew in late December 2017.

3.1.1. Higher Degree Completions

Vicki Couzens, PhD, RMIT University

‘Kooramookyan-an Yakeeneeyt-an Kooweekoo-wee-yan, Vicki’s PhD project, examined the questions: How have Possum Skin Cloaks re-emerged as significant cultural icons of cultural regeneration and revitalisation in contemporary times? And, within this re-emergence: What impact can reviving age-old Aboriginal traditional practices have on the health and wellbeing of Aboriginal people and their communities?’

This project represents the first study to investigate, narrate and document, the technical and creative processes, and the health and wellbeing impact of revitalising the cultural practice of Possum Skin Cloak making. Vicki investigated this re-emergence across 75+ Aboriginal communities across south-eastern Australia over a 17 year history.

Findings show that the sustainability of this traditional practice is dependent on the sharing of cultural knowledge, of cultural and spiritual health and wellbeing, community development, and ethical engagement with Aboriginal and Torres Strait Islander communities. A model was developed to provide tools, teachings and resources. In her work, Vicki discusses the potential for this model to be adapted for use across a range of community and healthcare sector services such as crisis centres, Aboriginal women’s safe houses, social and mental wellbeing programs and so on. The model is intended to enable communities to continue cultural revitalisation practices into the future towards living legacy (© V. Couzens 2018)

Elizabeth Orr, PhD, La Trobe University

The over-representation of Aboriginal patients in hospitals across Australia is a strong indicator of health inequalities. Planned prevention strategies to address the social and cultural determinants of health will reduce health inequalities and associated hospitalisation rates in the longer term. Of equal importance is the current provision of culturally safe and effective care and support for Aboriginal patients in hospitals, and their families. This thesis presents a set of principles for good practice to guide the socio-cultural care and support of Aboriginal patients, drawn from the practice wisdom of Aboriginal Health Liaison Officers (AHLOs) and social workers (SWs).

An ethnographic action research methodology, informed by principles of Indigenous research and guided by an Aboriginal Critical Reference Group, constituted the study design. In-depth interviews were held with AHLOs, SWs and Aboriginal health policy and program informants. Separate focus groups verified the study themes and findings. A conceptual scaffold, built from the literature about Aboriginal health and social work practice with Aboriginal people, was a further point of reference for the thematic analysis of the narratives of practice.

Practice narratives about working with Aboriginal people across general, specialist, urban, and regional hospitals in Victoria were shared during the interviews. Focusing on self-reported strengths in the practice by AHLOs and social workers, principles for good practice with Aboriginal patients, their families, and their communities, were drawn together in the findings from the study. The diverse narratives of good practice confirmed that there is a specific sociocultural practice with Aboriginal people in hospitals across Victoria. Strategies for knowledge translation are discussed throughout the thesis and ideas for further research are highlighted in the conclusion.

Robert Monaghan, M. Public Health, Kirby Institute, UNSW

The aims of this study were to determine:

1. The uptake of Aboriginal Adult Health Check in NSW ACCHSs participating in a CQI program
2. What proportion of Aboriginal Adult Health Checks had a chlamydia test conducted as part of the check in NSW ACCHSs participating in a CQI program?
3. Did integration of chlamydia testing into Aboriginal Adult Health Check lead to an increase in the uptake of chlamydia testing overall?

Over the 4-year study period, the proportion of females aged 15–54 years who had an Aboriginal Adult Health Check in 12 months ranged from 37–56 per cent per year.

Of the Aboriginal Adult Health Checks conducted in females, the proportion which included a chlamydia test was low, ranging from 4.8–5.6 per cent per year. Overall and in each age group, there was no significant annual trend in the proportion of Aboriginal Adult Health Check in females, with a chlamydia test conducted as part of the check.

Among males, of the Aboriginal Adult Health Check conducted, the proportion which included a chlamydia test was also low, ranging from 2.76.5 per cent per year.

3.2. Other education and training support

3.2.1. Lowitja Institute CRC Awards

The Lowitja Institute conducts a number of awards, two of which were promoted during the reporting period:

- **The Lowitja Institute Research Leadership Award** is a partnership between the Cranlana Programme and the Lowitja Institute to offer this award that recognises Aboriginal and Torres Strait Islander health research leadership and excellence. The 2017–18 winner was Associate Professor Ray, NHMRC Research Fellow with the Epidemiology for Policy and Practice group at the National Centre for Epidemiology and Population Health at the Australian National University.
- We also conducted an open process for our *Tarrn Doon Nonin* Ethics Award which promotes and upholds respectful ethical practice in relation to Aboriginal and Torres Strait Islander health research. Unfortunately, no applications were received for this award.

In addition, the Institute offers three biennial awards, the next of which will be announced at the Lowitja Institute International Indigenous Health and Wellbeing Conference 2019:

- **The Lowitja Institute Outstanding Achievement in Indigenous Health and Wellbeing** for an individual who has made an outstanding contribution to the health and wellbeing of Aboriginal and Torres Strait Islander peoples, as nominated by the Lowitja Institute Board of Directors.
- **The Lowitja Institute Emerging Aboriginal and Torres Strait Islander Researcher Award** This award recognises excellence for Aboriginal and Torres Strait Islander researchers at the mid-career level and was awarded to Associate Professor Roxanne Bainbridge from James Cook University.
- **The Lowitja Institute Aboriginal and Torres Strait Islander Student Award** recognises excellence for Aboriginal and Torres Strait Islander researchers undertaking either

Masters or PhD study, awarded to Dr Lisa Whop from the Menzies School of Health Research.

3.2.1. Ethics Review

In March and April 2018, the Institute engaged Audrey Berdahl-Baldwin, as an intern through the University of Cambridge, to undertake an internal review on ethics. The final report for the Lowitja Institute was completed on 30 June 2018. The Report is a policy options paper that examines how HRECs contribute to and impede ethical health research involving Aboriginal and Torres Strait Islander people. The paper first proposes policy responses to HRECs and then considers courses of action the Lowitja Institute can take. We are currently considering the options from this report which include the following:

- Offer education workshops to develop HRECs' knowledge of guidelines and methods that support ethical research involving Aboriginal and Torres Strait Islander people.
- Fund Aboriginal and Torres Strait Islander HRECs.
- Advocate for policy reform surrounding HRECs.

4. SME engagement

4.1. Submissions

- The Lowitja Institute provided the Council of Australian Governments (COAG) with a submission to inform the development of the Closing the Gap refresh. This highlighted areas for further development challenges we see in implementing the refreshed Closing the Gap agenda as proposed, initiatives demanding greater leadership from COAG, and recommendations for moving forward. The submission called for further development of the language and narrative of the refresh and clarity on the architecture and the accountabilities to support accurate measurement of progress against targets. We also highlighted data collection and dissemination and de-centring Western systems and world views as a considerable challenge due to existing barriers, and therefore requiring prioritisation. Finally, we called for greater leadership from COAG on naming and addressing racism and providing support commensurate to evidenced need.

4.2. Seminars and workshops

- The Lowitja Institute convened the Disability Research workshop held in October 2017, to discuss key research priorities for Aboriginal and Torres Strait Islander peoples with a disability. The workshop comprised of people with lived experience of disability, as well as, policymakers, disability sector researchers and advocates. The aim for the day was to identify five key research questions to inform a call for research applications by the Lowitja Institute.
- Dr Sanchia Shibasaki, Director of Research, attended the NHMRC Workshop: Strengthening and growing capacity and capability in Aboriginal and Torres Strait Islander Health Researchers in Melbourne in May 2018, at The University of Melbourne Business School. She also attended the Canadian Knowledge Mobilization Forum as part of the Torres Strait Islander Researchers Community of Practice.

- Senior Research Officer, Dr Shayne Bellingham, attended the Science meets Parliament Event in Canberra in February 2018. Shayne met with the Hon Senator Patrick Dodson and discussed important issues around access to housing, employment, incarceration rates and how science can contribute to improving outcomes of Aboriginal and Torres Strait Islander people.

4.3. Participants Forum

The Lowitja Institute CRC hosted two Participants Forum in its Melbourne offices, in November 2017 and in May 2018, to discuss activities and ongoing research, as well as strategic considerations for the organisation.

In November 2017, Participants heard presentations from Dr Bill Fogarty on the reframing discourse and changing the narrative of Aboriginal and Torres Strait Islander health and wellbeing research, published in 2018 as the Deficit Discourse papers (see Appendix 1, Publications List, page 42). Participants also heard from Mr Scott Avery about his PhD work on critical analysis of disability in Aboriginal and Torres Strait Islander communities, and from Dr Anne Lowell and Professor Lawurrpa Maypilama about growing up children in two worlds: building Yolŋu skills, knowledge and priorities into early childhood assessment and support.

In May 2018, PhD Scholarship holder, Miss Emily Munro-Harrison presented on her thesis: Urban invisibility: Identities of young Aboriginal and Torres Strait Islander people in urban Victoria. In addition, the Lowitja Institute research team, Dr Shayne Bellingham, Ms Tahlia Eastman, Ms Jessie Motlik and Mr Alex Zurawski presented to Participants on the Lowitja Institute Alumni Project.

4.4. Knowledge Translation

The Lowitja Institute has further developed our knowledge translation (KT) activities during 2017–18 by continuing the appointment of a dedicated knowledge translation manager and further refining the Lowitja Institute's approach to KT. Our current practice defines KT as a series of strategic interactions that effectively connect research evidence to changes in policy and practice. KT enables us to create a direct link from community priorities, to evidence base, to policy development, then finally to monitoring and evaluation.

Recent articles from the Lowitja Institute on KT are:

- Why knowledge translation matters in Indigenous health published in the Medical Journal of Australia¹
- Turning research into action through knowledge translation, published in Health Voices: Journal of the Consumers Health Forum of Australia²

All our KT activities stem from our research principles that we will act for the benefit of Aboriginal and Torres Strait Islander leadership, engage research end-users, strengthen the Aboriginal and Torres Strait Islander research workforce, and measure impact.

Internally, we encourage and support a systematic approach to embedding KT across our current 40 plus research projects. This is done throughout the research design and also by providing additional funds to implement KT plans. The plan ensures that projects translate

¹ Smith, L. 2018. <https://www.doctorportal.com.au/mjainsight/2018/26/why-knowledge-translation-matters-in-aboriginal-and-torres-strait-islander-health/>

² Smith, L. 2018. <http://healthvoices.org.au/issues/april-2018/turning-research-action-knowledge-translation/>

research based on their key findings and their intended audiences. The steps that each KT plan covers is outlined below in Figure 1.

Figure 1: Lowitja Institute KT Plan – Steps



Externally, we engage in a series of strategic interactions that support organisations, policymakers, and communities to engage effectively. For example, we hold regular KT events and forums that give us an opportunity to highlight the work of the Institute to commission, coordinate, collaborate on, and translate research to inform future strategic decisions in policy development, service delivery and evaluation.

In May 2018, we held a KT forum in Canberra, presenting four of our funded research projects with direct relevance for policymakers, researchers, services, professionals. The projects focused on deficit discourse in Aboriginal and Torres Strait Islander health, on program evaluation and on service integration for early childhood development.³

Three projects presented at the forum were completed during the reporting period, with publications launched at the event:

- *An Evaluation Framework to Improve Aboriginal and Torres Strait Islander Health* by M. Kelaher, J. Luke, A. Ferdinand, D. Chamravi, S. Ewen & Y. Paradies. The report sets out a framework for the evaluation of policies, programs and services for Aboriginal and Torres Strait Islander people across Australia; presented by Professor Margaret Kelaher and Ms Fran Eades.
- *Deficit Discourse and Indigenous Health: How narrative framings of Aboriginal and Torres Strait Islander people are reproduced in policy* by W. Fogarty, H. Bulloch, S. McDonnell & M. Davis. This report explores ‘deficit discourse’ in Aboriginal and Torres Strait Islander health policy. ‘Discourse’, in this context, encompasses thought represented in written and spoken communication and/or expressed through practices; presented by Dr Hannah Bulloch and Mr Scott Gorringe.
- *Deficit Discourse and Strengths-based Approaches: Changing the Narrative of Aboriginal and Torres Strait Islander Health and Wellbeing* by W. Fogarty, M. Lovell, J. Lagenberg &

³ Information about the research featured in the forum, including publications, is available at: <https://www.lowitja.org.au/community-priorities-policy>

M-J. Heron. This report explores strengths-based approaches to shifting the deficit narrative in the Australian aboriginal and Torres Strait Islander health sector; ; presented by Dr Hannah Bulloch and Mr Scott Gorringe.

Professor Kerry Arabena also presented at the forum, reporting on progress of her current project on service integration for Aboriginal and Torres Strait Islander early childhood development. This project was subsequently successful in its NHMRC funding application, being awarded \$836,500 for a project titled 'Building the Evidence Base of First 1000 Days Australia: An Evaluation of Implementation outcomes'.

We also co-hosted the 6th NHMRC Symposium on Research with NHMRC. This was held in Brisbane from 14-15 November and attracted around 400 delegates from Australia and abroad, reflecting the strong interest in sharing knowledge about effective research processes and outcomes in Aboriginal and Torres Strait Islander health and wellbeing. Romlie Mokak, Leila Smith, and Professor Kerry Arabena facilitated a workshop at the Conference on ways to increase Aboriginal and Torres Strait Islander knowledges and expertise in the Research Translation processes. The Lowitja Institute developed a post-Symposium report that reflects the context, key themes and implications of the discussions from the Symposium.⁴

4.5. The Lowitja Institute International Indigenous Health and Wellbeing Conference 2019

The second Lowitja Institute International Indigenous Health and Wellbeing Conference will be held at the Darwin Convention Centre on 18-20 June. The theme for the Conference will be Thinking, Speaking, Being – First Nations solutions for global change.

This theme highlights to delegates and presenters to consider the global implications of their work, the role of First Nations people in leading change, explores what constitutes 'Indigenous solutions', and reflects the framing of the program around solutions. The Conference will also showcase indigenous ways of thinking and knowing in research, and ways of interacting and sharing knowledge (including the role of language in this). We hope to build on the success of our last conference which welcomed over 700 delegates from Australia and overseas.

We have employed an events coordinator, established three committees to oversee the design and coordination of the Conference, and engaged the assistance of a professional Conference Organiser.

4.6. Literacy for Life Foundation

The Lowitja Institute is a founding partner of Literacy for Life Foundation, an Aboriginal-led initiative aiming to lift adult literacy in Indigenous communities. An estimated 40 per cent of Aboriginal and Torres Strait Islander adults have minimal English literacy, a figure that rises to as high as 70 per cent in many remote areas. So long as these adult illiteracy rates exist, meaningful progress towards many *Closing the Gap* targets will be impossible.

The Foundation uses an innovative, evidence-based, campaign approach that has been implemented in 30 countries around the world and is now delivering results in Australia. So far more than 170 students have graduated campaigns run in eight NSW communities and the organisation is working towards national expansion.

Initially Lowitja Institute provided funding for a pilot of the Literacy for Life Foundation approach, building on the well documented links between literacy and improved health

⁴ The Symposium Report is available at: <https://www.lowitja.org.au/nhmrc-research-translation>

outcomes. Support was extended following the promising results achieved during pilot phase. The graduation rate of Literacy for Life Foundation students was five times higher than existing programs and the campaigns created a range of benefits across the community.

Building on this evidence base, the Lowitja Institute assisted the Foundation design and carry out a longitudinal study of individual and community impacts, with a focus on measuring improvements in areas such as health, education and community safety. This is an ongoing study funded by an ARC Linkage grant of which the Institute is a partner together with the University of New England, UNSW and the Literacy for Life Foundation.

The Literacy for Life Foundation's campaign approach relies on community ownership and control. It is driven by local leaders and delivered by local staff. Originally developed in Cuba, the method was designed to raise adult literacy levels quickly across a region.

4.7. Centre of Excellence Collaborations

The Lowitja Institute has partnered with two successful National Health and Medical Research Council (NHMRC) Centre of Research Excellence applications, aligning well with two of our programs: Social Determinants of Health, and Policy, and Systems Research.

- Centre of Research Excellence on Social Determinants of Health Equity: Policy research on the social determinants of health equity
- Centre of Research Excellence for Integrated Quality Improvement (CRE-IQI).

4.8. Speeches and seminars

- **The future is in your hands**; Lowitja Institute 20th Anniversary and launch of Changing the Narrative in Aboriginal and Torres Strait Islander Health Research; Dr Lowitja O'Donoghue; Canberra; 9 August 2017
- **The journey so far**; Lowitja Institute 20th Anniversary and launch of Changing the Narrative in Aboriginal and Torres Strait Islander Health Research; Ms Pat Anderson AO; Canberra; 9 August 2017
- **Our Hope for the Future: Voice. Treaty. Truth**; 2017 Vincent Lingiari Memorial Lecture; Ms Pat Anderson AO; Charles Darwin University, Darwin; 16 August 2017
- The Lowitja Institute, represented by Ms Leila Smith, was part of a panel discussion for The Doherty Institute's inaugural Indigenous Health forum on 6 September 2017.
- **Charles Perkins Address**; Indigenous Affairs and Public Administration: Can't We Do Better? The Australia and New Zealand School of Government and Department of the Prime Minister and Cabinet International Conference; Ms Leila Smith; Sydney; 9 October 2017
- **Keynote presentation; First 1000 Days Australia Summit**; Mr Romlie Mokak, Brisbane; 20 October 2017
- **Re-setting the relationship: why we need constitutional change**; Dr Charles Perkins AO Annual Memorial Oration; Ms Pat Anderson AO; Sydney; 27 October 2017
- **2017 NHMRC Research Translation Symposium co-hosted with the Lowitja Institute**; Closing Remarks; Mr Romlie Mokak; Brisbane; 15 November 2017
- **Reorienting our approach to Aboriginal health: Embracing the voice of Aboriginal people in leading change**; Mr Romlie Mokak & Ms Leila Smith, Wingara Aboriginal Health Seminar Series; Canberra, 26 February 2018

- **Keynote address; Close the Gap Vision 2020;** Mr Romlie Mokak; 16 March 2018
- **Address; Harmony Day, University of Melbourne Union;** Mr Romlie Mokak; Melbourne; 21 March 2018
- **Deficit Discourse research, 2018 BioMedVic Communications Professionals Forum,** Ms Cristina Lochert, 24 April 2018, Melbourne
- **Address to the World Health Organisations World Health Assembly** on the launch of its Indigenous Working, Mr Romlie Mokak and the Hon Ken Wyatt AM MP, Minister for Indigenous Health, 24 May 2018, Geneva (video)
- **First 1000 Days short course presentation,** Romlie Mokak, Melbourne, 10 April 2018
- **Presentation to the Australian Indigenous HealthInfoNet Melbourne Roundtable,** Romlie Mokak, 6 June 2018.

5. Commercialisation

- Lt.search is an online search tool that facilitates searches in PubMed for literature on Aboriginal and Torres Strait Islander health. This continues to be a particularly popular resource with some 18,049 unique views during the reporting period; this represents a significant increase in usage (from 9209 in the last period). [Lt.search](#) users can choose to look at all literature or one of 27 predetermined topics, and can refine each choice with keywords, publications dates, and a full text or citation option. PubMed is a global database that with more than 24 million citations for biomedical literature from MEDLINE, life science journals, and online books. Lt.search is available at www.lowitja.org.au/litsearch.
- Lowitja Institute CRC website content is a popular resource for numerous audiences with some 27,207 downloads of research and other material, an increase of 10 per cent. Some older publications continue to be particularly popular in tertiary courses, such as the Beyond Bandaid: Exploring the Underlying Social Determinants of Aboriginal Health I Health webpage, which received some 3,647 visits during the reporting period.

5.1. Lowitja Consulting

As reported in 2016–17, the Lowitja Institute CRC has worked towards developing business opportunities that will enable us to deliver public value when we transfer from the CRC Programme after June 2019, by leveraging on our research legitimacy and cultural authority. In this reporting period, and in response to a high degree of interest in quality policy research, we have started to develop Lowitja Consulting as the first of those potential activities.

It is envisaged that Lowitja Consulting will undertake research, strategy and policy projects with governments, mainstream and Aboriginal and Torres Strait Islander organisations. In doing this, we are ensuring that our approach and deliverables align with our principles of strengthening Aboriginal and Torres Strait Islander leadership and workforce, community beneficence, engaging end users, and measuring impact.

5.2. 6th NHMRC Research Translation Symposium co-hosted by The Lowitja Institute

The NHMRC 6th Research Translation Symposium co-hosted by the Lowitja Institute was held on 14–15 November 2017, on the lands of the Turrbal and Jagera peoples, at the Brisbane Convention Centre. A record number of just under 400 delegates came together and created a unique space for participants to learn from success stories and ways to maximise impact. Also, to hear insights from Aboriginal and Torres Strait Islander people on ways that research can deliver real and measurable positive impacts.

From the moving Welcome to Country and the opening speeches by the Hon Ken Wyatt AM MP, Minister for Indigenous Health, and Professor Ian Anderson AO, Deputy Secretary of the Department of Prime Minister and Cabinet, the Symposium demonstrated strong Aboriginal and Torres Strait Islander capability at every level.

The opening keynotes by Ms Donna Ah Chee, CEO of the Central Australian Aboriginal Congress and Mr John Paterson, CEO of Aboriginal Medical Services Alliance Northern Territory, outlined the innovative ways in which research is being delivered in collaboration with Aboriginal community controlled health organisations.

This philosophy of collaboration is one that the Lowitja Institute and the NHMRC also adopted as co-hosts for this Symposium. As CEOs, Mr Romlie Mokak and Professor Anne Kelso enabled their respective organisations to draw on their different approaches to learn from each other and disrupt existing frameworks for better outcomes.

This was also the overarching goal for the Symposium, to deliver benefit for our people by way of better outcomes and impact.

The collaboration acknowledged that the challenge for all of us, Aboriginal and Torres Strait Islander institutions, government, researchers and for communities, is to improve the systems and structures so the research and knowledge we generate can be successfully translated to positive changes at ground-level and right through to policy.

The Symposium also received a record number of abstracts—more than 200—assessed by a Scientific Committee made up of 18 Aboriginal and Torres Strait Islander researchers. Those abstracts populated an outstanding program for the two days.

In addition to the program, two statements were developed by Symposium delegates and supported by participants through a show of hands. The first statement called for the Commonwealth Government to support the Referendum Council's Uluru Statement in its entirety and put the creation of the Voice to Parliament to a referendum. The second statement, presented by Mr John Paterson and Ms Donna Ah Chee during their keynote presentation, called for the Commonwealth government to provide long term, sustainable funding for the Lowitja Institute. These statements were developed by Symposium delegates and supported by participants through a show of hands.

In her closing remarks, Professor Kelso spoke of the spirit of the Symposium—the spirit of sharing, of humility, of community, of family—as a standout, and highlighted Indigenous health research and researchers as leading the way to a better health system for all. She also acknowledged the important opportunity to address racism and how it continues to serve as a barrier to achieving healthy Indigenous communities across the globe. Finally, Professor Kelso put forward the NHMRC Roadmap 3 as a vehicle for achieving what needs to be celebrated in ten-years' time: fostering leadership by Aboriginal and Torres Strait Islander researchers, ensuring genuine community engagement, ensuring that Aboriginal and Torres Strait Islander ways of doing research and career trajectories are fully recognised and valued through NHMRC funding.

Mr Romlie Mokak closed by reflecting that the Indigenous-led Symposium was unique in the way it provided a solid space for deep and meaningful impact. He reminded delegates of Sir Mason Durie's emphasis on the importance of promoting and supporting research that focuses on solutions, and not just problems. Delegates were also reminded of Dr Carrie Bourassa's point that Indigenous peoples are the original scientists, have always undertaken scientific research, and that ethical Indigenous research and Indigenous knowledge translation are critical to Indigenous self-determination. Mr Mokak also emphasised the Lowitja Institute's commitment to working with the NHMRC to carry forward the outcomes of the Symposium.

A full report of the Symposium and resources such as videos and presentations are available at: www.lowitja.org.au/nhmrc-research-translation.

5.3. Journeys to Healing and Strong Wellbeing Project

The Lowitja Institute was commissioned by the National Mental Health Commission to conduct research in Aboriginal and Torres Strait Islander mental health. The research aims were to identify the key risk and protective factors as they relate to Aboriginal and Torres Strait Islander peoples' experience of trauma and other identified factors, and, using that knowledge to improve the mental health of Aboriginal and Torres Strait Islander peoples.

A Reference Group was established to oversee the project. The project also used qualitative data collection methods that drew on multiple sources to ensure that the approach built on previous research and reflected the knowledge and experience of key stakeholders while privileging Aboriginal and Torres Strait Islander voices. The research design included focus groups and semi-structured interviews held in Brisbane, Melbourne and Broome, as well as a stakeholder workshop in Canberra to test emerging themes and preliminary findings. Representatives from each of the three study locations were invited to the stakeholder workshop.

The purpose of the focus groups was to hear from Aboriginal and Torres Strait Islander people who have experienced the impacts of trauma to confirm understandings on how they experience good mental health and ways that trauma impacts on their lives. In addition to these focus groups, semi-structured interviews were held with members of the Aboriginal and Torres Strait Islander mental health workforce and experts from the mental health sector.

This research received ethics approval from the Australian Institute of Aboriginal and Torres Strait Islander Studies Human Research Ethics Committee, St Vincent's Hospital (Victoria) Human Research Ethics Committee, and the Western Australian Aboriginal Health Ethics Committee.

5.4. The Partnership for Justice in Health

The **Partnership for Justice in Health** comprises key health, legal and research Aboriginal and Torres Strait Islander and non-Indigenous organisations. They have come together to explore the intersections between the health of Australia's First Nations and the justice system. The Lowitja Institute is a founding member of the Partnership.

5.5. The Doherty Institute Indigenous Health forum

The Lowitja Institute was part of a panel discussion for **The Doherty Institute's** inaugural Indigenous Health forum on 6 September 2017. The objectives of the forum were to showcase and raise awareness of Aboriginal and Torres Strait Islander health research programs at the Doherty Institute, and deepen conversations with leaders in Indigenous health about how we can best partner with their communities. The Doherty Institute invited leaders in Aboriginal and Torres Strait Islander health from across Australia to share their insights on how they can grow their capacity as an Institute.

5.6. Australian Indigenous HealthInfoNet

The Lowitja Institute continues to be a member of the Australian Indigenous **HealthInfoNet** Advisory Group and attended the meeting on 13 September, and also the 20th Anniversary of the **HealthInfoNet** on the same day. Mr Romlie Mokak also presented to the HealthInfoNet's Melbourne roundtable on 6 June 2018.

5.7. Cranlana Programme

The Lowitja Institute CRC and the Cranlana Programme collaborated in the establishment of the Aboriginal and Torres Strait Islander Health Research Leadership and Excellence Award. The Award is a fully funded position in the [Cranlana Programme's Executive Colloquium](#), which is a unique development course for senior leaders from across the public, private and community sectors. The award recognises senior, established Aboriginal and/or Torres Strait Islander researchers who have made a significant contribution to their academic field. The 2017 winner of this award was Associate Professor Ray Lovett, NHMRC Research Fellow and Program Leader Aboriginal and Torres Strait Islander Health Epidemiology for Policy and Practice ANU College of Health and Medicine. Dr Lovett leads Mayi Kuwayu: The National Study of Aboriginal and Torres Strait Islander Wellbeing, funded by the NHMRC and the Lowitja Institute CRC [link <https://mkstudy.com.au>].

6. Intellectual property management

The Lowitja Institute CRC maintains the same intellectual property (IP) management principles as in our previous CRCs. We disseminate and promote knowledge and outputs of our research as widely as possible. Any IP the Lowitja Institute holds is usually in the form of publications that are produced by the Lowitja Institute from the research activities undertaken by the CRC. Of prime importance to the Lowitja Institute is the recognition and protection of Aboriginal and Torres Strait Islander IP generated through our research activities.

Our Research Funding Activity Agreements have identified IP schedules that will be negotiated at the time of entering into the funding agreement so that all parties are aware of the IP management arrangements before any research commences. The schedule will ensure that there is adherence to the National Principles of IP Management for publicly funded research.

The documents underlying our IP principles are: the *Lowitja Institute Intellectual Property Policy* and the *Aboriginal and Torres Strait Islander Knowledge and Cultural Protocols Policy*, both written in 2011.

As at the report date, the Lowitja Institute does not hold any patents and has not applied for any patents both within Australia or internationally. This reflects our decision to give end-users access to our research outputs at little or no cost.

7. Communications

Publications

Publications continue to be an important communications tool for the Institute and for the research teams we support. This year we published three new reports, a policy brief and a summary report (see Appendix 3).

The *Changing the Narrative* publication was a collaboration with AIATSIS, and, in a first for the Institute, we published a companion eBook along with the hard copy report. The eBook contains audio and video recordings of reflections on the establishment and growth of the Institute by individuals who were critical to its history, including our Patron, Dr Lowitja O'Donoghue.

All of our publications are available online and through RMITInformit and EBSCO internationally. During the reporting period, material was downloaded from our website more than 25,000 times.

Social media

Twitter continues to be our strongest social media platform and in this reporting period we grew to over 9000 followers. The Lowitja Institute is also expanding in other areas of social media, including growth for our Facebook and LinkedIn profiles.

We held three major events in this financial year – an anniversary event and launch of the *Changing the Narrative* report in August 2017, we co-hosted the NHMRC Research Translation Symposium in November 2017, and held a knowledge translation forum in May 2018. Social media engagement exceeded expectations for each event with the August 2017 event trending nationally; the #ResearchTranslation17 conversation gathering more than 41 million impressions on Twitter; and the forum achieving over 5 million impressions using the #ResearchIntoPolicy hashtag.

Videos

Video content is a great way to reach audiences around the world, and we have been working to produce a range of videos from our researchers and the Lowitja Institute team. This financial year we added 13 new videos to our public Vimeo channel (which had over 7000 views).

Website

In this reporting period we saw an increase in our website traffic, with more than 93,000 unique visits to the site. Our continuing Google AdWord grant accounted for 27% of the visits to our site. Visits to [Lit.search](#) doubled in this financial year, reaching more than 20,000.

The Lowitja Institute website was last updated in 2012, and since that time there have been significant changes in accessibility, functionality and design options for websites. The Institute is also changing as an organisation, so we're working on a new site which will evolve with us and make finding out about our work easier and more engaging.

Key media and campaigns

Engaging with our partners, collaborators and media outlets on news and campaigns is vital to communicating with our audiences. The timeline showcases our key media stories and campaigns for this reporting period.

August 2017

- **Anniversary celebration.** Changing the narrative: Indigenous people controlling Indigenous health, *The Wire*, 9 August 2017 <http://thewire.org.au/story/changing-narrative-indigenous-people-heading-indigenous-health/>

October 2017

- 'But I Didn't Mean It Like That!', *Girlfriend*, 18 October 2018 <https://www.girlfriend.com.au/racism-in-australia>
- Institute directors visit Walgett Medical Service, *Koori Mail*, 18 October 2017
- Pat Anderson on *The Point*, 31 October 2017 <https://www.sbs.com.au/ondemand/video/1074629187551/the-point-31-october>
- Indigenous Data Sovereignty: More than scholarship, it's a movement, *Croakey*, 29 October 2018 (Lowitja Institute sponsored reporting of University of Melbourne/AIATSIS Indigenous Data Sovereignty Symposium) <https://croakey.org/indigenous-data-sovereignty-more-than-scholarship-its-a-movement/>

November 2017

- 'Taking away basic rights of children': Calls for age of criminal responsibility be raised in Australia, *SBS News*, 22 November 2017 <https://www.sbs.com.au/news/taking-away-basic-rights-of-children-calls-for-age-of-criminal-responsibility-be-raised-in-australia>
- Stop "stacking your CVS" and ensure Indigenous communities lead research, *Croakey*, 21 November 2017 (Lowitja Institute sponsored reporting of **NHMRC Research Translation Symposium**) <https://croakey.org/category/croakey-news-and-projects/croakey-conference-news-service/researchtranslation17/>

January 2018

- How Australia is failing its Indigenous population, *CNN*, 29 January 2018 <https://edition.cnn.com/2018/01/26/asia/indigenous-australian-australia-day-statistics/index.html>

February 2018

- Romlie Mokak included as part of the *Close The Gap - 10 Year Review* social media campaign <https://www.humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/publications/close-gap-10-year-revie>

March 2018

- International Women's Day 2018: Celebrating women's leadership in health, World Health Organisation Western Pacific Region, March 2018 http://www.wpro.who.int/equity_social_determinants/2018-womens-day-ps/en/
- National Geographic apology: 'We were anticipated to be a dying race', *BBC News*, 17 March 2018 <https://www.bbc.com/news/amp/world-australia-43410584>

April 2018

- Black women taking leadership in Australia's health sector, *NITV*, 13 April 2018 <https://www.sbs.com.au/nitv/article/2018/04/12/black-women-taking-leadership-australias-health-sector>

May 2018

- A question of value: Time to redress the price of silence, Romlie Mokak in the Griffith Review, May 2018 <https://griffithreview.com/articles/a-question-of-value-price-of-silence-mokak/>
- Culturally Appropriate Health Research, *Speaking Out*, 6 May 2018 <http://www.abc.net.au/radio/sydney/programs/speakingout/romlie-mokak/9734352>
- Putting Aboriginal and Torres Strait Islander community priorities into policy: What will it take?, *Croakey*, 13 May 2018 (Lowitja Institute sponsored reporting of the Community priorities into policy knowledge translation forum) <https://croakey.org/putting-aboriginal-and-torres-strait-islander-community-priorities-into-policy-what-will-it-take/>
- The Deal: Leila Smith, Lowitja Institute, *The Australian*, 18 May 2018

- <https://www.theaustralian.com.au/business/the-deal-magazine/leila-smith-lowitja-institute/news-story/cbf8a786b430537d74a599a8bec93f1a?csp=0cf1f72175a0272e757aa559bbd8c541>
- Coming of age: What I know, Pat Anderson in Elle Magazine feature, May 2018
- Report: Change how we define Indigenous people, Koori Mail, 30 May 2018
- 31 May 2018 was #IHMayDay - A great BIG wrap of the news tweeted from the fifth annual IHMayDay, Croakey, 11 June 2018
<https://croakey.org/a-great-big-wrap-of-the-news-tweeted-from-the-fifth-annual-ihmayday/>

June 2018

- In the shadow of Terra Nullius, Pat Anderson featured in 3 part series for *Rear Vision*, June 2018 <http://www.abc.net.au/radionational/programs/rearvision/in-the-shadow-of-terra-nullius-part-1/9861316>

Background

Reportable	2016–17	2017–18
Website unique visitors	78678	93,097 (+18%)
Website page views	229287	268,067 (+17%)
Google ads impact	Approx. 20% of website sessions	Approx. 27% of website sessions
Downloads of resources	22,398	25,403 (+13%)
Lit.search (page views)	10400	20,987 (+102%)
Twitter followers	Approx. 6900	9,104 (+32%)
@LowitjaInstitut Twitter impressions		1085600
#ResearchTranslation17 Twitter impressions		41.961 million
#ResearchIntoPolicy		5.415 million
Facebook followers		276
LinkedIn followers		492
Org. video watches	849	Vimeo Total 4,499
eBulletin subscribers	3,083	3,546
eBulletin editions	21	25

Speeches and presentations

The communications team also supported the preparation of several speeches and seminars (p. 22) and presented to the 2018 BioMedVic Communications Professionals Forum on deficit discourse research (p.22).

8. Governance – Board, committees and key staff

The Lowitja Institute Aboriginal and Torres Strait Islander Health CRC is hosted by its managing agent, the National Institute for Aboriginal and Torres Strait Islander Health Research Limited, a company limited by guarantee and trading as the Lowitja Institute. The Institute is endorsed as a tax-exempt charity and public benevolent institution by the Australian Charities and Not-for-Profit Commission. There has been no change in operating structure during the reporting period. Company membership remained at twelve; see Table 1 below.

Table 1 – The Lowitja Institute membership

Member Name	Date Joined
Australian Institute of Aboriginal and Torres Strait Islander Studies	10/08/2009
Central Australian Aboriginal Congress Inc.	10/08/2009
Danila Dilba Health Service	10/08/2009
Flinders University	10/08/2009
Menzies School of Health Research	10/08/2009
QIMR Berghofer Medical Research Institute	10/08/2009
The University of Melbourne	10/08/2009
Australian Indigenous Doctors' Association Ltd.	26/06/2014
Congress of Aboriginal and Torres Strait Islander Nurses and Midwives	02/10/2014
Healing Foundation	28/11/2014
Indigenous Allied Health Australia	21/05/2015
National Aboriginal and Torres Strait Islander Health Worker Association	21/05/2015

8.1 The Lowitja Institute Board

The Lowitja Institute is governed by a skills based and representative Board of Directors. The Board is chaired by Ms Pat Anderson AO, an Alyawarre woman who is known nationally and internationally as a powerful advocate for the health of Australia's First Peoples. Ms Anderson has extensive experience in Aboriginal health, including community development, advocacy, policy formation and research ethics. In June 2014, Ms Anderson was appointed Officer of the Order of Australia for distinguished service to the Indigenous community as a social justice advocate, particularly through promoting improved health, educational and protection outcomes for children. She was awarded the Human Rights Medal 2016 by the Australian Human Rights Commission. Ms Anderson completed her term as Co-Chair of the Prime Minister's Referendum Council on 30 June 2017. During the reporting period, Ms Anderson was also appointed Chair of the Remote Area Health Corporation.

During the reporting period, other Institute directors included:

- Professor Peter Buckskin PSM, a Narungga man from the Yorke Peninsula and the Dean: Aboriginal Engagement and Strategic Projects at the University of South Australia

- Mr Selwyn Button, a Gungarri man from south-west Queensland and the Assistant Director-General (Indigenous Education), Department of Education, Training and Employment, Queensland
- Mr Adrian Carson, a Cobble Cobble/Wakka Wakka man is the Chief Executive Officer of the Institute for Urban Indigenous Health (IUIH) Ltd
- Mr Brendon Douglas, the Director of Research and Innovation at Charles Darwin University and an Executive Council member of the International Development Contractors Group
- Mr Ali Drummond, a qualified nurse of Torres Strait Islander descent and a Lecturer in the School of Nursing, Queensland University of Technology
- Dr Tamara Mackean, a descendant of the Waljen Peoples of Western Australia and a Senior Research Fellow Indigenous Health at the Southgate Institute for Health, Society and Equity, Flinders University
- Ms June Oscar AO, a Bunuba woman from Fitzroy Crossing is the Aboriginal and Torres Strait Islander Social Justice Commissioner
- Professor Fiona Stanley AC, Founding Director and Patron of the Telethon Kids Institute (formerly Telethon Institute for Child Health Research), Distinguished Research Professor at the University of Western Australia and Vice-Chancellor's Fellow at the University of Melbourne.

Table 2 – The Lowitja Institute Board of Directors

Name	Role and Term	Key Skills	Independent/Organisation	Meeting attendance
Ms Pat Anderson AO	Chair from October 2010	Aboriginal and Torres Strait Islander health, corporate governance, sectoral experience (community)	Independent	4/4
Professor Peter Buckskin PSM	Director from October 2010	Education/capacity development, corporate governance, research and development, sectoral experience	Independent	3/4
Mr Selwyn Button	Director from July 2013	Education/capacity development, Aboriginal and Torres Strait Islander health	Independent	4/4
Adrian Carson	Director from August 2017	Aboriginal and Torres Strait Islander health	Independent	1/3
Mr Brendon Douglas [leave of absence granted 1/5/18-31/8/18]	Director from December 2014	Finance, public/private investment, business development/legal/marketing	Charles Darwin University	3/3
Mr Ali Drummond	Director from November 2012	Aboriginal and Torres Strait Islander health	Queensland University of Technology	3/4
Dr Tamara Mackean	Director from December 2015	Aboriginal and Torres Strait Islander health	Flinders University	3/4
Ms June Oscar AO [leave of absence granted 1/1/18-30/6/18]	Director from May 2016	Aboriginal and Torres Strait Islander child health	Independent	1/2
Professor Fiona Stanley AC [leave of absence granted 1/1/18-30/6/18]	Director from May 2016	Maternal and child health, epidemiology and public health	Independent	1/4

Table 3 – Lowitja Institute Board of Directors meeting dates

Lowitja Institute Board of Directors Meeting Dates	Venue
28 September 2017	Walgett NSW
7 December 2017	Canberra
8 March 2018	Melbourne
14 June 2018	Ceduna SA

8.2 Committees

Finance and Audit Committee

The Finance and Audit Committee met three times during the 2017–18 financial year.

There are five members—three independents and two Directors:

- Ms Thelma Hutchinson (Independent member)
- Mr Dennis Clark (Independent member)
- Dr Kerry Bodle (Independent member)
- Mr Selwyn Button, Director
- Mr Brendon Douglas, Director.

The role of the Finance and Audit Committee is to advise the Board by reviewing:

- financial information that will be provided to the CRC Program, Essential Participants, Advisory Board or the public
- strategic financial plans, operating and capital budgets
- audit activities
- the system of internal controls, risk management and information
- investment management activities
- insurance coverage of significant risks and uncertainties.

Table 4 – Finance and Audit Committee membership

Name	Role and Term	Meeting Attendance
Dr Kerry Bodle	Independent Member	1/4
Mr Selwyn Button	Member	3/4
Mr Dennis Clark	Independent Member	4/4
Mr Brendon Douglas	Member	2/3
Ms Thelma Hutchinson	Independent Member	3/4

Table 5 – Finance and Audit Committee meetings

Meeting Dates	Venue
19 September 2017	Teleconference
27 November 2017	Teleconference
27 February 2018	Teleconference
7 June 2018	Teleconference

8.3 Key Staff

Table 6 – Key Staff

Name	Lowitja Institute CRC	Time Committed
Romlie Mokak	Chief Executive Officer	100%
Catherine Richards	Director, Corporate Services	100%
Mark Glazebrook (Dr)	Director, Innovation and Business Development	100%
Sanchia Shibasaki (Dr)	Director, Research	Appointed September 2017
Shayne Bellingham (Dr)	Senior Research Projects Officer	100%
Leila Smith	Knowledge Translation Manager	100%
Cristina Lochert	Communications Manager	100%

Table 7 – Research Program Committees

Name	Lowitja Institute CRC Program	Organisation
Professor Kerry Arabena, Chair	Social Determinants of Health	The University of Melbourne
Dr Ray Lovett	Social Determinants of Health	Australian National University
Dr Roxanne Bainbridge	Social Determinants of Health	James Cook University
Ms Suzanne Ingram	Social Determinants of Health	The George Institute for Global Health
Ms Vanessa Harris	Social Determinants of Health	Northern Territory Mental Health Coalition
Professor Adrian Miller	Social Determinants of Health	Griffith University
Professor Cindy Shannon, Chair	Health Workforce	The University of Queensland
Associate Professor Marion Kickett	Health Workforce	Curtin University
Dr Michael Wright	Health Workforce	Curtin University
Mr Scott Avery	Health Workforce	First People Disability Network
Ms Janine Mohamed	Health Workforce	Congress of Aboriginal and Torres Strait Islander Nurses and Midwives
Professor Roianne West	Health Workforce	Griffith University
Dr Mark Wenitong, Chair	Policy and Systems	Apunipima Cape York Health Council
Associate Professor Ted Wilkes	Policy and Systems	Curtin University
Dr Jill Guthrie	Policy and Systems	Australian National University
Dr Kim O'Donnell	Policy and Systems	Flinders University

9. Participants

In the third year of the Lowitja Institute CRC, there were nine Essential Participants and 13 Other Participants. All participants have been approved by the CRC Programme.

Two Participant forums were held to discuss the current work, future activities, and issues of governance and funding: on 23 November 2017 and on 2 May 2018 in Melbourne.

Table 8 – The Lowitja Institute CRC Participants

Participant's name	Participant type	ABN	Organisation type
Aboriginal Health Council of South Australia	Other	89 287 854 542	Industry
Aboriginal Medical Alliance of the Northern Territory (AMSANT)	Other	26 263 401 676	Industry
Australian Government Department of Health	Other	97 643 356 590	Australian Government
Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS)	Essential	62 020 533 641	Industry
Australian National University	Other	52 234 063 906	University
Central Australian Aboriginal Congress	Essential	76 210 591 710	Industry
Central Queensland University	Other	39 181 103 288	University
Charles Darwin University	Other	54 093 513 649	University
Curtin University	Other	99 143 842 569	University
Edith Cowan University	Essential	54 361 485 361	University
Flinders University	Essential	65 542 596 200	University
WA Department of Health	Other	28 684 750 332	Western Australia Government
Griffith University	Other	78 106 094 461	University
La Trobe University	Other	64 804 735 113	University
James Cook University	Essential	46 253 211 955	University
Menzies School of Health Research	Essential	70 413 542 847	University
Queensland University of Technology	Other	83 791 724 622	University
QIMR Berghofer Medical Research Institute	Essential	31 411 813 344	University
The George Institute for Global Health	Other	90 085 953 331	University
The University of Melbourne	Essential	84 002 705 224	University
The University of New South Wales	Essential	57 195 873 179	University
The University of Queensland	Other	63 942 912 684	University

10. Collaboration

10.1. 6th NHMRC Research Translation Symposium co-hosted by The Lowitja Institute

The Lowitja Institute CRC co-hosted the NHMRC 6th Research Translation Symposium in November 2017.

This collaboration enabled the two organisations to draw on their different approaches to learn from each other and disrupt existing frameworks for better outcomes for the health and wellbeing of Aboriginal and Torres Strait Islander people.

Please see report on page 21.

10.2. The Partnership for Justice in Health

The **Partnership for Justice in Health** comprises key health, legal and research Aboriginal and Torres Strait Islander and non-Indigenous organisations. They have come together to explore the intersections between the health of Australia's First Nations and the justice system. The Lowitja Institute is a founding member of the Partnership.

10.3. The Doherty Institute Indigenous Health forum

The Lowitja Institute was part of a panel discussion for **The Doherty Institute's** inaugural Indigenous Health forum on 6 September 2017. The objectives of the forum were to showcase and raise awareness of Aboriginal and Torres Strait Islander health research programs at the Doherty Institute, and deepen conversations with leaders in Indigenous health about how we can best partner with their communities. The Doherty Institute invited leaders in Aboriginal and Torres Strait Islander health from across Australia to share their insights on how they can grow their capacity as an Institute.

10.4. Australian Indigenous HealthInfoNet

The Lowitja Institute continues to be a member of the Australian Indigenous **HealthInfoNet** Advisory Group.

10.5 The Canada–Australia Indigenous Health and Wellness Working Group

The Working Group was established to progress initiatives from the Canada–Australia Roundtable on Indigenous Health and Wellness held in Canberra in December 2016. Lowitja Institute CRC CEP, Mr Romlie Mokak, and the High Commissioner of Canada, His Excellency Mr Paul Maddison, are acting co-Chairs, ensuring membership encompasses government, academic, community and public service perspectives. The Lowitja Institute provides secretariat for the collaboration.

The aim of the Working Group is to identify priorities related to Indigenous health and wellbeing for bi-national collaboration and action. The main priorities identified for collaboration and action are the need to genuinely address racism and to provide a platform for the voices of Indigenous youth, with two sub-groups established to focus on each of these priorities.

The primary focus of the racism sub-group is to develop a discussion paper to assist in the sharing of knowledge and strengthening of impact and to engage with diverse urban, rural and remote Indigenous communities in both countries. The paper also aims to influence bi-national action to address racism, as experienced by First Peoples of Canada and Australia.

The sub-group established to consider the voices of Indigenous youth will progress young people's priorities through an intersectional understanding of identity and experience. The aim is to represent a range of Indigenous youth perspectives, through the recruitment of youth from a diversity of locations, professional experiences, abilities and sexual and gender identities.

10.6. Cranlana Programme

The Lowitja Institute CRC and the Cranlana Programme collaborated in the establishment of the Aboriginal and Torres Strait Islander Health Research Leadership and Excellence Award. The Award is a fully funded position in the [Cranlana Programme's Executive Colloquium](#), which is a unique development course for senior leaders from across the public, private and community sectors. The award recognises senior, established Aboriginal and/or Torres Strait Islander researchers who have made a significant contribution to their academic field. The 2017 winner of this award was Associate Professor Ray Lovett, NHMRC Research Fellow and Program Leader Aboriginal and Torres Strait Islander Health Epidemiology for Policy and Practice ANU College of Health and Medicine. Dr Lovett leads Mayi Kuwayu: The National Study of Aboriginal and Torres Strait Islander Wellbeing, funded by the NHMRC and the Lowitja Institute CRC [link <https://mkstudy.com.au>].

11. Financial management

Considerable discussion has taken place at the Executive and Board level on the final year budget for the Lowitja Institute. The cash budget detailed in Table 11 (page 39) includes funds to cover all operational activities to 30 June, 2019. Currently, it is only anticipated that \$853,137 will be transferred to another organisation which is the Lowitja Institute (see Table 12, page 39). By March 2019, it will be known if any Activities will not be completed by the Lowitja Institute CRC by the end date of 30 June, 2019 and as such, requiring those unspent funds to be transferred to another entity to complete the contracted work of the Activity. New performance based contracts that detail the specific work to be completed will be entered into with any organisations, which have funds to complete Activity transferred to them. (Further details are provided in Table 12, page 39).

12. Additional Requirements

12.1 CRC future plans and transition arrangements

The Lowitja Institute has been awarded an \$8mil four-year contract (\$2mil per annum) by the Commonwealth Department of Health. This funding does not cover current activity, including commissioning of research, and the Institute is also seeking further funds.

12.2 Performance review

The Lowitja Institute does not have any outstanding items from the Performance Review.

12.3 Other activities

12.3.1. Interns

During the reporting period, we hosted three interns who each contributed to the work of the Lowitja Institute CRC and, in turn, reported benefit from their interaction with the organisation.

- **Ms Bronte Spiteri**, June–July 2017, joined the Lowitja Institute CRC during her first semester of a Master of Public Policy and Management, having applied through the Aurora Program. She also worked for a short time at the Institute after her internship. Ms Spiteri worked on various tasks including policy submissions, campaign strategies, stakeholder engagement plans, ethics applications, literature reviews, and workshop design and reporting. I also attended a number of forums. She is now working in the Aboriginal Affairs Policy Branch of the Victorian Department of Premier and Cabinet.
- **Ms Audrey Berdahl-Balwin**, March–April 2018, interned at the Lowitja Institute CRC through the work placement program of the University of Cambridge’s MPhil in Public Policy. During her time with the Institute, Audrey wrote an internal report on ethical health research involving Aboriginal and Torres Strait Islander people, focusing specifically on the role of Human Research Ethics Committees in the ethics process. She will return to the USA to study at the Harvard Law School to further deepen her capacity to understand and contribute to racial equity.
- **Mr Alex Zurawski**, January–March 2018, joined the Institute via the Aurora Program towards the end of a Development Studies degree. Among other tasks, Alex supported the development of the Institute’s submission to the Closing the Gap refresh discussion paper; prepared the Institute’s report on the 2017 NHMRC Research Translation Symposium co-hosted by the Lowitja Institute in November 2017; contributed to the Institute’s knowledge translation work; and provided secretariat support to international Indigenous health and wellness working groups. Alex has since joined the organisation as a Research Project Officer.

13. Wind-up Plan and Exit Report Requirements

13.1.1. Ceasing Operations

The Lowitja Institute will not be ceasing operations as it has an on-going funding contract with the Commonwealth Department of Health for 4 years commencing July 2019. The Wind-up plan for the Lowitja Institute CRC will be managed by the Chief Executive Officer and the Director of Corporate Services. This will ensure that all parts of the organisation will meet all the exit requirements for the Lowitja Institute CRC. The Director Corporate Services will take a lead role in these activities.

13.1.2 Governance and Management

The Lowitja Institute Board will continue to be the overarching governance authority for the CRC and the organisation supported by the Finance and Audit Committee and the Lowitja Institute senior management.

13.1.3 Contact details

The Director, Corporate Services – Catherine Richards is the main contact.

13.1.4 Activities status

Table 9: Activities Status

Outputs yet to be completed/milestones yet to be achieved	Expected status at end of agreement period (completed/terminated /transferred)	If transferred, organisation(s) responsible for ongoing activities after the agreement period
Output RP1: Community capability and the social determinants of health	Completed	Not applicable
Milestone:1.1.12 Reports on completion and development of 2 nd round activities implementation strategies received	Completed	Not applicable
Milestone:1.1.13 Completion of a minimum of two research activities from knowledge exchange activities on 2 nd round activities	Completed	Not applicable
Milestone:1.1.4 R1.1.14 Impact assessment and evaluation of activities completed	Completed	Not applicable
R1.3 Identification of methods for effective implementation of interventions of place based approaches in the social determinants of health.	Completed	Not applicable
1.3.13 Completion of a minimum of two 2 nd round activities	Completed	Not applicable
1.3.14 Completion, impact assessment and evaluation of activities	Completed	Not applicable
Output U1.1 First Year of implementation of the designed programs and initiatives	Completed	Not applicable

U1.1.5 First year of implementation of the designed programs and initiatives	Completed	Not applicable
Output R2.1 RP2: Needs and opportunities for the Aboriginal and Torres Strait Islander health workforce.	Completed	Not applicable
R2.1.6 Completion of a minimum of two activities	Completed	Not applicable
R2.1.7 Implementation of knowledge exchange of completed activities	Completed	Not applicable
R2.1.8 Impact assessment and evaluation of activities	Completed	Not applicable
Output R2.1 Building and measuring cultural competence in the health system including health workforce.	Completed	Not applicable
R2.1.6 Completion of a minimum of two activities	Completed	Not applicable
R2.1.7 Implementation of knowledge exchange of completed activities	Completed	Not applicable
R2.1.8 Impact assessment and evaluation of activities	Completed	Not applicable
Output R2.2 Building and measuring cultural competence in the health system including health workforce.	Completed	Not applicable
R2.2.6 Completion of a minimum of two activities	Completed	Not applicable
2.2.7 Development of summative knowledge transfer and implementation strategies resulting from evaluation	Completed	Not applicable
R2.2.8 Implementation of knowledge exchange completed	Completed	Not applicable
R2.2.9 Evaluation of completed activities and further activities required to address identified issues	Completed	Not applicable
Output R2.3 The identification of different ways to improve and extend career pathways for Aboriginal and Torres Strait Islander staff in the health system.	Completed	Not applicable
R3.1.8 Report on completion and development knowledge transfer of 1st round of activities	Completed	Not applicable
3.1.11 Report on completion and development of knowledge transfer for 2nd round of activities	Completed	Not applicable
3.1.12 Knowledge exchange activities on a minimum of two 2nd round activities completed	Completed	Not applicable
3.1.13 Impact assessment and evaluation of completed activities	Completed	Not applicable
Output R3.2 The Identification of optimal policy and funding arrangements which maximise organisational effectiveness (including	Completed	Not applicable

governance) in all health system components, including Aboriginal community controlled health services and other health care providers.		
R3.2.7 Progress reporting on 2nd round activities.	Completed	Not applicable
3.2.8 Preliminary review of 2nd round of activities	Completed	Not applicable
3.2.9 Completion of a minimum of one 1st round activities and development of summative knowledge transfer	Completed	Not applicable
3.2.10 completion and development of summative knowledge transfer and implementation strategies for a minimum of two 2nd round research outcomes	Completed	Not applicable
R3.2.12 Impact assessment of completed activities	Completed	Not applicable
Output U3.1 Enable end-users to work together to maximise the benefits in decision-making and policy planning. Outputs will enhance the utilisation of interventions developed in the current program and in Programs 1 and 2. It is likely that outputs will have influence beyond the administration of Aboriginal affairs.	Completed	Not applicable
U3.1.6 Potential end-users influenced by participation in project planning and implementation	Completed	Not applicable

Table 10 – Status of CRC students (Scholarships)

Name	Level	Project Title	Program	Institute	Start Date	Expected Finish Date
Margaret Harvey	PhD	Researching my island home – Navigating through the intersection of research and culture in the creation of live performance	1	AIATSIS	March 2014	March 2018
Emily Munro-Harrison	PhD	Urban Invisibility: Identities of young Aboriginal and Torres Strait Islander people in urban Victoria	1	UoM	January 2016	July 2018
Alister Thorpe	PhD	Engage–Exchange–Change: Strengthening Indigenous health research engagement, action, translation and impact	1	UoM	June 2016	Sept 2019
Vicki Couzens	PhD	<i>Koorramook Yakeeneeyt</i> (Possum Dreaming): Cloaks, cultural traditions and wellbeing in Aboriginal communities	1	AIATSIS	January 2016	January 2018 completed

Mathew West	PhD	Development of a targeted foot complications screening and intervention program for Aboriginal and Torres Strait Islander people	3	La Trobe	June 2016	June 2018
Suzanne Ingram	PhD	Communication needs of Indigenous people whose first language is English for culturally competent chronic disease health care	2	GIGH	November 2014	June 17
Tara Lewis	Masters	Culturally responsive methodology for the communication assessment of Australian Aboriginal children	1	UQ	January 2015	April 2018
Robert Monaghan	Masters	The role of management in improving sexual health service delivery in Aboriginal community controlled health services	1	UNSW	January 2015	January 2018 completed
Nicky Flynn	PhD	(De)constructing Attention Deficit Hyperactivity Disorder: The Aboriginal standpoint	3	FU	February 2015	March 2018
Stewart Sutherland	PhD	A Transnational Study: The effects of reconciliation on social and emotional wellbeing of people affected by past policies and practices of forced removal		AIATSIS	January 2014	January 2016 completed
Maree Meredith	PhD	Health promotion benefits of art centres in Anangu Pitjantjatjara Yankunytjatjara Lands		Flinders University	January 2015	June 2016 completed
Julieann Coombes	Master	What's next for Aboriginal and Torres Strait Islander children after a burn injury? What are the barriers to appropriate care?		The George Institute of Global Health	July 2014	July 2015 completed
Jane Pooley	Master	Developing a quality of life tool for the use in Aboriginal and Torres Strait Islander children with chronic disease		QUT	January 2015	June 2016 withdrawn
Scott Avery	PhD	A critical analysis of disability in Aboriginal and Torres Strait Islander communities	1	UNSW	November 2014	August 2017

Co-funded scholarships

Ten postgraduate scholarships, including 7 PhD scholarships, have been established with Queensland University of Technology, La Trobe University, Edith Cowan University (The Neil Thomson Scholarship), The George Institute of Global Health, The University of Melbourne, Griffith University, the Australian National University, and the Menzies School of Health Research. One scholar from Queensland University of Technology withdrew in late December 2017.

13.1.5. Financial Management and budget provisions

See section below, 13.1.6.

13.1.6. Final year prospective budget

Table 11: Cash Budget for Final Year of Operation 2018–19

	\$
Opening Balance	5,665,216
<i>Income</i>	
CRC Program	5,000,000
Expected Income	260,947
Total Income (Operating Balance + Income)	10,926,163
<i>Expenses</i>	
Employee Expenses	2,323,950
Project Expenses	4,872,136
Operating Expenses	532,139
Capital items	-
Total Expenses	7,728,225
Net Balance	3,197,938
Accrued Expenses	1,906,563
Transfers to new government grant funding	853,137

Budget notes

- Expected Income includes \$213,333 cash contributions from Participants and \$47,614 interest earned
- Project Expenses include all the scheduled payments in 2018-19 as per signed project contracts
- Operating Expenses include all re-current operating costs
- No capital items will be purchased during the final year
- Accrued Expenses include provisions of annual leave and other non-recurrent operating costs, which will be revised closely to reflex the expected employee entitlements and other liabilities in April 2019
- Transfers to new government grant funding – refer to notes for table 13

Table 12: Transfer to Participants or other organisation

Organisation Receiving Funds	Purpose	Transfer Amount
The Lowitja Institute	To undertake the final windup of the Lowitja Institute CRC 1 July 2019 to 31 October 2019	\$853,137
Total		\$853,137

The Lowitja Institute administers the Lowitja Institute CRC and will complete the windup of the Lowitja Institute CRC during the period 1 July, to 31 October, 2014. A budget for this four month period is detailed in Table 13.

Table 13: Operating Budget for period 1 July to 31 October 2019

	\$
Opening Balance	-
<i>Income</i>	
Transfer from CRC Program	853,137
Total Income (Operating Balance + Income)	853,137
<i>Expenses</i>	
Employee Expenses	461,185
Project Expenses	-
Operating Expenses	391,951
Capital items	-
Total Expenses	853,137
Net Balance	-

Budget notes

- Employee expenses include salaries and on-costs for employees to complete the windup and compliance reporting requirements of the CRC Program and their associated redundancy payments.
- Operating Expenses include the offices rent, legal, consultants to assist with windup issues, final audit fees, web redeployment and other operating costs such as advertising, postage, stationery, communications, IT and travels until 31 October 2019.

13.1.7. Management of intellectual property

See page 23.

13.1.8. Assets

The Lowitja Institute CRC does not own any assets valued at over \$50,000.

13.1.9. Taxation

The Lowitja Institute CRC is an unincorporated organisation which is administered by the Lowitja Institute as one of its programs of work. The CRC Program has a contract called the Commonwealth Agreement with the Lowitja Institute, which provides for the Institute to manage the CRC. The Lowitja Institute is structured as a company limited by guarantee and has been granted charity tax endorsement by the Australian Taxation office. As such, it is exempt from income tax on any income it receives or generates. The only taxation issues that impact on the Lowitja Institute are goods and services tax and fringe benefits tax. Budget provisions for both of these taxes have been included in the accrued expenses component of the final year cash budget. The provisions were determined after reviewing historical expenditure patterns and will be again reviewed in March 2019.

Appendix 1 – Publications list

Publications and reports for end-users

Published by the Lowitja Institute

Australian Institute of Aboriginal and Torres Strait Islander Studies & The Lowitja Institute 2017, Changing the Narrative in Aboriginal and Torres Strait Islander Health Research: Four Cooperative Research Centres and the Lowitja Institute: The story so far, The Lowitja Institute

Fogarty, W., Bulloch, H., McDonnell, S. & Davis, M. 2018, Deficit Discourse and Indigenous Health: How narrative framings of Aboriginal and Torres Strait Islander people are reproduced in policy, The Lowitja Institute

Fogarty, W., Lovell, M., Lagenberg, J. & Heron, M-J. 2018, Deficit Discourse and Strengths-based Approaches: Changing the Narrative of Aboriginal and Torres Strait Islander Health and Wellbeing, The Lowitja Institute

Fogarty, W., Lovell, M., Lagenberg, J. & Heron, M-J. 2018, Deficit Discourse and Aboriginal and Torres Strait Islander Health Policy: Summary Report, The Lowitja Institute

Kelaher, M., Luke, J., Ferdinand, A., Chamravi, D., Ewen, S. & Paradies, Y. 2018, An Evaluation Framework to Improve Aboriginal and Torres Strait Islander Health, The Lowitja Institute, Melbourne.

Kelaher, M., Luke, J., Ferdinand, A., Chamravi, D., Ewen, S. & Paradies, Y. 2018, Evaluation Frameworks to Improve Aboriginal and Torres Strait Islander Health: Policy Brief, The Lowitja Institute, Melbourne.

25 eBulletins

Journal Articles 2017–18

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Jones, R., Thurber, K.A., Chapman, J. on behalf of the Mayi Kuwayu Study Team, et al. 2018, Study protocol: Our Cultures Count, the Mayi Kuwayu Study, a national longitudinal study of Aboriginal and Torres Strait Islander wellbeing, *BMJ Open*, vol. 8:e023861, doi:10.1136/bmjopen-2018-023861.

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Salmon, M., Gilbert, R., Dance, P., et al. (in press), Defining the indefinable: Descriptors of Indigenous Peoples' Cultures and their links to Health and Wellbeing, *ANU Open Research*.

Racism: A barrier to lasting solutions, *The Health Advocate*, Issue 46, February 2018, pp. 26–27.

Appendix 2: Non-Participant Collaborators in Lowitja Institute CRC Activities

Organisation (non-Participant organisations)	Type of interaction / activity
Aboriginal Health, Northern and Central Adelaide Local Health Network	Research partner
Abstarr Consulting	Disability Workshop
Act for Kids	Research partner
Apunipima Cape York Health Council	Research partner
Australian Indigenous Health <i>InfoNet</i>	Research Partner
Australian Indigenous Doctors' Association	Conference Scientific Committee
Australian Institute of Tropical Health and Medicine	Research partner
Australian Nurse Partnership Program Support Service	Research partner
Batchelor College	Research partner
Batchelor Institute of Indigenous Tertiary Education	Research partner
Bond University	Research partner
Brisbane Women's Correctional Centre	Research partner
Canadian High Commission in Australia	Co-Chair, Canada–Australia Indigenous Health and Wellness Working Group
Central Coast Local Health Service	Research partner
Congress of Aboriginal and Torres Strait Islander Nurses and Midwives	Research Program Committee
Cranlana Programme	Research leadership award
Deakin University	Research partner
Department of Health, Northern Territory	Research partner
Education Queensland Transition Support Services	Research partner
First Peoples Disability Network	Research Program Committee
Genetic Health Queensland	Research partner
Genetic Services of Western Australia	Research partner
Gurriny Yealamucka Health Services Aboriginal Corporation, Yarrabah	Research partner
Inala Wangarra Inc	Research partner
Institute of Urban Indigenous Health	Research partner
Kidney Health Australia	Research Program Committee, Research partner
Kornar Winmil Yunti	Research partner
Literacy for Life Foundation	Research partner
Machado Joseph Disease Foundation	Research partner
Monash University	Research partner
Murdoch Children's Research Institute (MCRI)	Research partner
Murrimatters Ltd	Research partner
National Aboriginal Community Controlled Health Organisation	Research partner
National Centre for Indigenous Genomics (NCIG)	Research partner

National Centre for Epidemiology and Population Health (NCEPH)	Research partner
National Flexible Learning Services Youth & National Network	Research partner
National Health and Medical Research Council	Co-host 2017 NHMRC Research Translation Symposium
Nunyara Aboriginal Medical Service	Research partner
Office of Population Health Genomics, Dept of Health WA	Research partner
Office of the Chief Psychiatrist SA	Research partner
Orygen	Research partner
Port Lincoln Aboriginal Health Service	Research partner
Queensland Corrective Services	Research partner
Renal Advisory and Advocacy Committee	Research partner
Royal Darwin Hospital	Research partner
Secretariat of National Aboriginal and Islander Child Care (SNAICC)	Research partner
SenseMakers 4 Smarter Care Health Service	Research partner
Southgate Institute for Health Society & Equity	Research partner
Sunrise Health Service	Research partner
Synapse Australia Limited	Research partner
Telethon Institute	Research partner
University of Adelaide	Research partner
University of Wollongong	Research partner
Yalu Marngithinyaraw Indigenous Corporation	Research partner
Yaitya Purrana Indigenous Health Unit	Research partner
Wardliparingga Aboriginal Research Unit	Research partner
We Al-li Pty Ltd	Research partner
Victorian Aboriginal Community Controlled Health Organisation	Research partner
Victorian Aboriginal Health Service	Research partner
Victorian Clinical Genetic Services	Research partner
Walter & Eliza Hall Institute (WEHI)	Research partner
Women's and Children's Health Network	Research partner
Wontulp-Bi-Buya College	Research partner