

About the Lowitja Institute

The Lowitja Institute is the only research organisation in Australia with a **sole focus on the health and wellbeing of Australia's First Peoples**. The voice of Aboriginal and Torres Strait Islander people informs all our activities, whether we're conducting community-based research or setting our strategic direction.

Named in honour of our **Patron, Dr Lowitja O'Donoghue AC CBE DSG**, our organisation works under the direction of a skills-based Board made up of a majority of Aboriginal and Torres Strait Islander members and led by an independent

Aboriginal Chairperson. The principle of **strong Aboriginal and Torres Strait Islander leadership** at all levels of research and innovation is central to our identity.

We are committed to maintaining the **traditions of research excellence and collaborative endeavour** established over many years by our two predecessor Cooperative Research Centres (1997–2009). The Institute, launched in 2010, currently hosts the CRC for Aboriginal and Torres Strait Islander Health (CRCATSIH) through to June 2014.

Implementing and Communicating our Research

We have developed a research program that promotes **high-quality research** through increased Aboriginal and Torres Strait Islander control of the research agenda and our key partnerships. We are also fostering a new generation of Aboriginal and Torres Strait Islander health researchers through our scholarship program and our focus on capacity development.

Partnerships are our strength. By bringing together Aboriginal and Torres Strait Islander people with world-leading researchers, policy makers and experts in cutting-edge service delivery, the Institute fosters the kind of collaborative research that is making a real difference to the health and wellbeing of Australia's First Peoples. At every stage of our research, we work with Aboriginal and Torres Strait Islander people and communities to set

priorities, refine the research and ensure that findings are put into practice.

This approach has earned us a reputation as **leaders in knowledge exchange**. For us this is a two-way process between Aboriginal and Torres Strait Islander people, researchers and the end-users of research, in which research can be used to influence policy and planning, as well as practice and systems.

Our research, now spanning **more than 15 years**, provides many examples of our track record of best practice in knowledge exchange. Overleaf we have set out one such knowledge exchange case study, mapping its journey from research concept through to implementing and communicating the findings of that research. For others, visit our website at: **www.lowitja.org.au/case-stories-researchers**.

Our Vision

To achieve equity in health outcomes for Aboriginal and Torres Strait Islander peoples.

Our Dreaming

As the National Institute for Aboriginal and Torres Strait Islander Health Research, with a sole focus on the health and wellbeing of Australia's First Peoples, we will:

- Ensure that Aboriginal and Torres Strait Islander peoples have a strong voice in all activities
- Bring together Aboriginal and Torres Strait Islander communities, health services, researchers, governments and policy makers to enable high-quality, collaborative health research that makes a difference
- Continue to develop world-leading Aboriginal and Torres Strait Islander health researchers
- Build on our record as national leaders in knowledge exchange and the translation of research findings into evidence-based practice and policy
- Work at the community, regional and national levels to improve health outcomes and set the research agenda
- Work with our extensive networks to be the pre-eminent source of evidence and expertise in Aboriginal and Torres Strait Islander health research.

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Our regional offices are in Darwin, Adelaide and Brisbane. For more information about the Lowitja Institute, go to:

www.lowitja.org.au



Aboriginal [and Torres Strait Islander] individuals and organisations must be fully involved – not just consulted – in the initiation, design and implementation of the research the Lowitja Institute undertakes... The Institute must disseminate its research findings widely – not just to other researchers, but to health practitioners, the corporate sector, governments, politicians of all persuasions, and to the public.

Dr Lowitja O'Donoghue AC CBE DSG
The Lowitja Institute launch | February 2010



Incorporating the Cooperative Research Centre for Aboriginal and Torres Strait Islander Health



Research to improve cancer outcomes in Aboriginal and Torres Strait Islander people

The Lowitja Institute is a key supporter of research into cancer among Aboriginal and Torres Strait Islander people.

Although cancer is the second leading cause of death (19%) for Australia's First Peoples, it rarely features as a specific concern in health policies and strategy documents because they experience cancer at a lower rate than other Australians. However, those with it have a significantly higher mortality rate in the first two years after diagnosis.

The recent award of \$2.5 million in funding to establish the first-ever Centre of Research Excellence (CRE) solely devoted to improving outcomes for Aboriginal and Torres Strait Islander people affected by cancer is one of the direct results of the Institute's work in this area. Known formally as the CRE in Discovering Indigenous Strategies to Improve Cancer Outcomes via Engagement, Research Translation and Training (DISCOVER-TT), the new organisation has been funded for five years by the NHMRC.



Incorporating the Cooperative Research Centre for Aboriginal and Torres Strait Islander Health



July 2010

Comprehensive review published

Cancer Australia publishes a commissioned study *Aboriginal and Torres Strait Islander Cancer Control*, which reports on the current status of Aboriginal and Torres Strait Islander cancer control initiatives and cancer research. This project, carried out by Cancer Council SA, provides a snapshot of the state of services, available data, and priorities and gaps in research and service provision. The report finds, among other things, that: 'It is important that the disparity in cancer morbidity and mortality experienced by Aboriginal and Torres Strait Islander people be addressed by identifying effective and culturally appropriate cancer control measures.'

January to April 2011

CRE project team formed

A collaborative group of researchers, practitioners and other key stakeholders forms to drive the development of the CRE proposal under the leadership of prominent Aboriginal cancer researcher, Associate Professor Gail Garvey. The team includes researchers and community health representatives from the Menzies School of Health Research, the NSW Cancer Council, QIMR, Griffith University, the Aboriginal Health Council of South Australia and the Combined Universities Centre for Rural Health in WA. The Lowitja Institute supports the group's work through funding the employment of an Aboriginal project officer, former CRC for Aboriginal Health scholarship recipient Lisa Whop, to coordinate the preparation of a CRE proposal. This three-month process results in a draft CRE proposal as well as helping build the skills of the project officer.

April 2012

Project team prepares for interview

In early 2012 the CRE proposal is submitted to the National Health and Medical Research Council (NHMRC), passes the first selection round and is shortlisted for interview. The Lowitja Institute hosts a second Quality Assurance Workshop to help prepare the CRE project team for the NHMRC interview. To ensure a third-party perspective, the workshop includes two experts on cancer in Aboriginal and Torres Strait Islander people who are not part of the project team.

December 2010

Lowitja Institute hosts Roundtable

To maximise the impact of current and future Aboriginal and Torres Strait Islander cancer research and the findings of the Cancer Australia report, the Lowitja Institute hosts the National Roundtable on Aboriginal and Torres Strait Islander Cancer with support from the Queensland Institute of Medical Research (QIMR). It brings together almost 50 leaders in cancer research, cancer control, health care providers, palliative care providers, Aboriginal and Torres Strait Islander cancer survivors, and education and training providers to the cancer control workforce. The Roundtable identifies a number of broad research priorities but its strongest message is the need for 'a nationally integrated approach where proposed research builds systematically on successive research initiatives'. Roundtable participants decided the best way to achieve this is to prepare a bid for a CRE focused on Aboriginal and Torres Strait Islander cancer.

March 2011

Lowitja Institute hosts QA workshop to refine CRE proposal

The Lowitja Institute hosts a Quality Assurance (QA) Workshop to further refine the draft CRE proposal. The workshop seeks feedback from a number of independent reviewers, representing relevant scientific, Aboriginal, government and other stakeholder perspectives. Reviewers are then brought together with the CRE project team to discuss their comments, and to work on implementing changes to improve the draft CRE proposal. Following the workshop the CRE proposal is refined and finalised.

August 2012

NHMRC awards CRE funding

The CRE proposal succeeds, with the NHMRC awarding \$2.5 million to establish the new CRE in Discovering Indigenous Strategies to Improve Cancer Outcomes via Engagement, Research Translation and Training (DISCOVER-TT). Led by Associate Professor Garvey – who is now also a Lowitja Institute Program Leader – the new CRE will be run for five years out of the Brisbane office of the Menzies School of Health Research. The Lowitja Institute is one of the key collaborators in the CRE, along with Cancer Council NSW, Griffith University, the University of Western Australia and the Queensland University of Technology.

Knowledge Exchange and Translation into Practice