

Annual Report

20.16



the
Lowitja
Institute

Australia's National Institute for Aboriginal and
Torres Strait Islander Health Research

Who We Are



The Lowitja Institute is Australia's national institute for Aboriginal and Torres Strait Islander health research.

It is an Aboriginal and Torres Strait Islander organisation working for the health and wellbeing of Australia's First Peoples through high impact quality research, knowledge translation, and by supporting a new generation of Aboriginal and Torres Strait Islander health researchers.

Established in January 2010, the Lowitja Institute operates on key principles of

Aboriginal and Torres Strait Islander control of the research agenda, a broader understanding of health that incorporates wellbeing, and the need for the work to have a clear and positive impact.

The Lowitja Institute hosts the Lowitja Institute Aboriginal and Torres Strait Islander Health CRC funded by the Cooperative Research Centres Programme of the Department of Industry, Innovation and Science.

The Lowitja Institute is a company limited by guarantee with the following membership:

Australian Indigenous Doctors' Association • Australian Institute of Aboriginal and Torres Strait Islander Studies • Central Australian Aboriginal Congress • Congress of Aboriginal and Torres Strait Islander Nurses and Midwives • Danila Dilba Health Service • Flinders University • Healing Foundation • Indigenous Allied Health Australia • Menzies School of Health Research • National Aboriginal and Torres Strait Islander Health Worker Association • QIMR Berghofer Medical Research Institute • The University of Melbourne

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Chairperson's Message



This is a time of great transformation for the Lowitja Institute as we implement the strategic plan developed in 2015. The transformational goal of that plan is a move away from sole reliance on government funding to the implementation of a funding structure that will secure our independent, enduring sustainability into the future. While self-reliance is key, we see the Australian Government as a primary investor in our work, work which more than ever focuses on the health and wellbeing of Australia's First Peoples.

In this task, I have been most ably supported by a highly expert Board of Directors committed to the success of the Lowitja Institute. This year we welcomed new Directors Dr Tamara Mackean, Ms June Oscar AO, Ms Robynne Quiggin and Professor Fiona Stanley AC. Mr Ali Drummond was re-elected for a further three-year term. I thank the Board for its guidance and support in the development of the strategic plan.

We have responded to the goals of the strategic plan with a new organisational structure that establishes, in addition to the Director, Research and Knowledge Translation position, two new senior executive roles: Director, Innovation and Business Development and Director, Corporate Services, which have been filled by Dr Mark Glazebrook and Ms Catherine Richards respectively. At the same time, we farewelled Mr David Morgan who was Chief Operating Officer since the establishment of the Lowitja Institute in January 2010 and thank him for his contribution to the evolution of this organisation.

As hosts of the Lowitja Institute Aboriginal and Torres Strait Islander Health CRC, we were pleased to receive, in December 2015, a positive review of our governance and programs by the CRC Advisory Committee, which noted our wish to be an independent, stand-alone entity with government funding. Delivering on the milestones of the Lowitja Institute CRC remains a key focus of our activities.

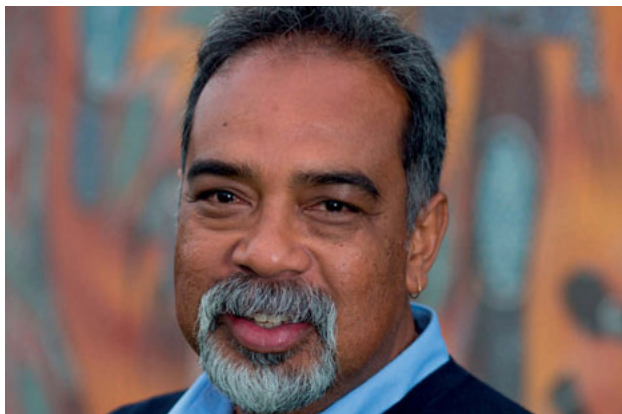
The expansion of our sphere of influence and networks has also been a key focus in this year's activities, with a particular emphasis on our international networks. While our purpose is to value the health and wellbeing of Australia's First Peoples, we extend that purpose to our Indigenous family around the world. It was therefore a great pleasure to launch in April 2016, together with the international medical journal, *The Lancet*, an article titled 'Indigenous and tribal peoples' health (*The Lancet*–Lowitja Institute Global Collaboration): A Population Study'. The report is a world-first study into the health and wellbeing of more than 154 million Indigenous and Tribal peoples (approximately half the world's Indigenous populations). It was launched by Professor Fiona Stanley AC and generously hosted by law firm Arnold Bloch Leibler in Melbourne, timed to coincide with the journal's publication in London.

In addition, we have also established the committee structure (organising, scientific and cultural) that will deliver our first international Indigenous health and wellbeing conference later in 2016 under the direction of CEO Mr Romlie Mokak as conference convenor.

It has been a busy year; a year that will, I am sure, be seen as pivotal in the history of this organisation as we put into effect our commitment to be an independent, strong, and enduring Aboriginal and Torres Strait Islander organisation delivering lasting positive impacts on the health and wellbeing of our peoples.

Pat Anderson AO
Chairperson

Chief Executive Officer's Report



The year's activities have largely focused on two key goals: delivering a high quality research program by the Lowitja Institute Aboriginal and Torres Strait Islander CRC (Lowitja Institute CRC) and transitioning the Lowitja Institute in accordance with our strategic plan.

We have strengthened the Lowitja Institute CRC governance with the appointment of Aboriginal and Torres Strait Islander expert committees to guide our three research programs. Their contribution is gratefully acknowledged, especially in the establishment of 14 highly targeted research activities. Projects completed during this reporting period but established during the CRC for Aboriginal and Torres Strait Islander Health (CRCATSIH) will make an important contribution to a better health system for Australia's First Peoples. Significantly, a December 2015 evaluation by Deloitte Access Economics identified a benefit to cost ratio of \$3.40 for every \$1 invested in CRCATSIH research programs.

A priority in our work is the growth of an Aboriginal and Torres Strait Islander health research workforce. This year, we awarded five PhD scholarships and established a co-funded scholarships program with our CRC participants. It has been particularly pleasing to see three of our scholars complete their PhD candidatures, to support the interest in health research of high school students, and to celebrate our senior research leaders with the inaugural Aboriginal and Torres Strait Islander Research Leadership Award in partnership with the Cranlana Programme.

We have significantly expanded our international networks through our global collaboration with

The Lancet (see page 12) and the establishment of the conference committees—with national and international membership—that will support our first international Indigenous health and wellbeing conference. In addition, we welcomed a Sami Parliament delegation, sharing information on the ethics of research in Indigenous communities, and hosted the pre-conference Indigenous researchers meeting of the 9th Health Services Research Association of Australia and New Zealand conference with delegates from Canada, the USA, Aotearoa/ New Zealand and Australia.

Our business plan was developed in response to our new strategic plan and an innovative agenda of business development commenced. In corporate terms, we understand the challenges of developing new skills in our workforce, identifying resources to encourage business growth, and optimising our unique contribution. This has to be completed by June 2019 to ensure the Institute's existence into the future.

As our business development strategy, work has commenced to translate our research and knowledge into widely available resources to support better and more lasting positive impacts on the health and wellbeing of our peoples. In particular, work has started to create an online design and evaluation tool called Resilas (see page 15) and four new business ventures were established: Lowitja Insight, Lowitja Standards, Lowitja Consulting and Lowitja Ventures (see page 27). These are businesses that will convert, expand and make available our research and knowledge translation expertise; will develop partnerships with service providers; will tap into our wider researcher and expert networks, and will tackle, through partnerships, some key health priorities for Aboriginal and Torres Strait Islander peoples.

As the CEO, I look back with satisfaction at a productive 2015–16 confident that we have laid the groundwork for the next stage of the Lowitja Institute, and confident that, with the support of our many partners, we can be an authoritative and collective voice making a significant positive contribution to the lives of Australia's First Peoples.

Romlie Mokak
Chief Executive Officer

2015–16 Highlights

Research and Knowledge Translation

Expert Aboriginal and Torres Strait Islander research program committees were appointed.



Cost-benefit analysis shows \$3.40

value created

for every \$1 invested.*



We received a positive review of our governance and programs by the CRC Advisory Committee.

\$3.6million was invested



in 14 Lowitja Institute CRC research projects to benefit remote communities, children, cultural wellbeing, adolescents, suicide prevention, gender equity, genetic health services and more.

2 national workshops

were convened to consult with Aboriginal and Torres Strait Islander experts on excellence in research and on systemic racism.

Projects established during CRCATSIH were completed, making an **important contribution to a better health system.**

Policy, Programs and Impact

14 PhD scholarships were awarded, some co-funded with 9 partners.



The Lancet–Lowitja Institute global collaboration,

a study of the health and social status of approximately half the world's Indigenous and Tribal populations, was launched.

International Indigenous Health and Wellbeing Conference planning committees were established with national and international membership.



A delegation of Norway's Sami Parliament visited us

to discuss ethics in Indigenous health research.



Policy, Programs and Impact

 **We hosted a HSRAANZ** pre-conference meeting** with Indigenous delegates from Canada, the USA, Aotearoa/New Zealand and Australia.

The inaugural Lowitja Institute Research Leadership Award

was awarded, in partnership with the Cranlana Programme.



We held the inaugural knowledge translation seminar, Translating Research into Action, showcasing what success looks like in communities.

We led a national continuous quality improvement project

with the Aboriginal and Torres Strait Islander community controlled health sector.

We contributed to a number of external committees,

such as CEO Mr Romlie Mokak's chairmanship of the National Health Leadership Forum that prepared the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan.

* Cooperative Research Centre for Aboriginal and Torres Strait Islander Health (2010–2014) research program evaluation by Deloitte Access Economics

** 9th Health Services Research Association of Australia and New Zealand

A Strong and Sustainable Organisation

Our transformational 2015 strategic plan is being implemented with the **goal of moving away from sole reliance on government funding.**

Four new business ventures

were established:



Lowitja
INSIGHT



Lowitja
CONSULTING



Lowitja
STANDARDS



Lowitja
VENTURES

Development of Resilas, an online research design and evaluation tool

to support better and lasting positive impacts, was advanced.



We welcomed new Directors

Dr Tamara Mackean, Ms June Oscar AO, Ms Robynne Quiggin and Professor Fiona Stanley AC to the Lowitja Institute Board.

A new organisational structure was established with three senior executive roles:

Director, Research and Knowledge Translation; Director, Innovation and Business Development; and Director, Corporate Services.

Research & Knowledge Translation



The Lowitja Institute 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, the Institute is identifying priorities, and developing research and knowledge translation 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 has identified five **key principles** that underpin our approach to research:

- 1. Beneficence – to act for the benefit of Aboriginal and Torres Strait Islander peoples in the conduct of our research**
- 2. Leadership by Aboriginal and Torres Strait Islander peoples**
- 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.**

At present, the research activities of the Lowitja Institute are identified and funded under the umbrella of the Lowitja Institute Aboriginal and Torres Strait Islander Health CRC (Lowitja Institute CRC). The work is conducted by our partner or Participant organisations (see page 29).

The Lowitja Institute'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.

The Lowitja Institute CRC research governance structure is represented in the diagram on the next page.

Program Committees

Three Lowitja Institute CRC research program committees, each headed by an Aboriginal and/or Torres Strait Islander Chair, guided the research agenda. The role of each Program Committee is to provide the Institute with strategic advice on research program development, identification of priorities, quality assurance, and building Aboriginal and Torres Strait Islander researcher capacity into research activities.

Program 1 – Community capability and the social determinants of health

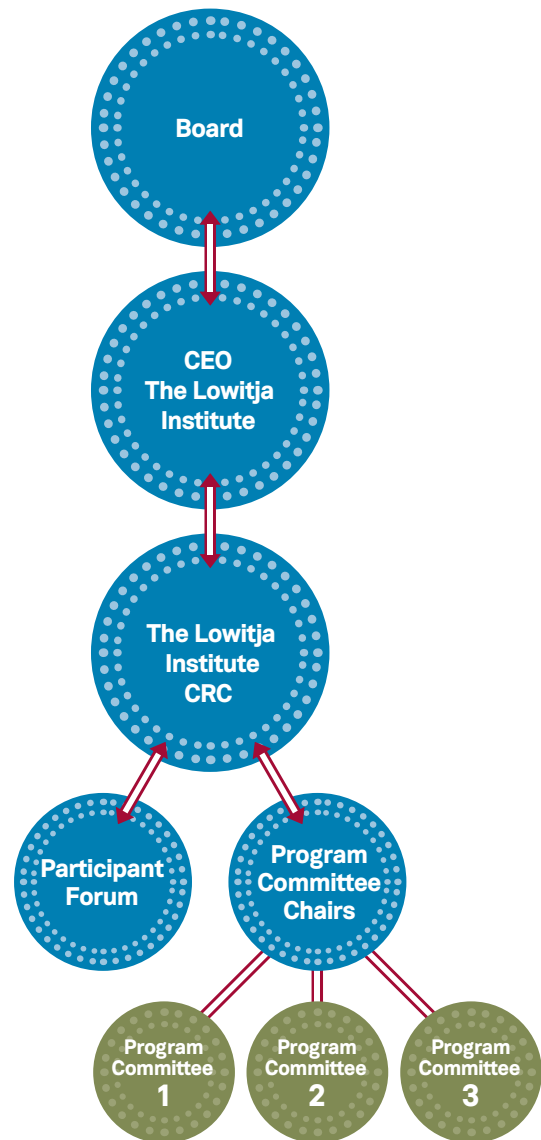
Work through this program deepens our understanding of how individuals, children, families and communities can mitigate the negative impacts of the social determinants of health and maximise the effectiveness of positive cultural, social, economic and environmental influences.

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

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

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.



Professor Kerry Arabena

Chair, Community capability and the social determinants of health

Dr Roxanne Bainbridge
Ms Vanessa Harris
Ms Suzanne Ingram
Dr Ray Lovett
Professor Adrian Miller



Professor Cindy Shannon

Chair, A health workforce to address Aboriginal and Torres Strait Islander health

Mr Scott Avery
Professor Marion Kickett
Ms Janine Mohamed
Professor Roianne West
Dr Michael Wright



Dr Mark Wenitong

Chair, Health policy and systems

Ms Donisha Duff
Dr Jill Guthrie
Dr Kim O'Donnell
Associate Professor Ted Wilkes

Research Highlights

New projects

Fourteen research activities were established during 2015–16 in three priority areas: Aboriginal and Torres Strait Islander early childhood health, cultural determinants of Aboriginal and Torres Strait Islander health, and cultural competence of mainstream health services and systems:

- Evaluation of a successful anaemia prevention program in a remote Aboriginal community in the Northern Territory
- Growing up children in two worlds: Building Yolŋu skills, knowledge and priorities into early childhood assessment and support
- Empowering Indigenous individuals, families and communities to create supportive environments for children to thrive — Family Wellbeing
- ‘Mayi – Kuwayu’: A large scale longitudinal study of cultural Aboriginal and Torres Strait Islander wellbeing
- Exploring Aboriginal and Torres Strait Islander cultural identity of young people in flexi schooling contexts
- The role cultural connectedness plays in the pathways to resilience experienced by Aboriginal and Torres Strait Islander adolescents
- Analysis of key factors associated with Aboriginal and Torres Strait Islander suicide in South Australia
- Service integration for Aboriginal and Torres Strait Islander early childhood
- The narrative framing of Aboriginal and Torres Strait Islander health and wellbeing: A review
- Reframing discourse and changing the narrative of Aboriginal and Torres Strait Islander health and wellbeing: An analysis
- Identifying the core elements of the cultural determinants of health of Aboriginal and Torres Strait Islander people
- Reclaiming strong Aboriginal and Torres Strait Islander identities through a gender equity lens
- Models and quality of genetic health services for Aboriginal and Torres Strait Islander people
- Development of a framework for evaluation of policies, programs and services that aim to improve Aboriginal and Torres Strait Islander health and wellbeing

Plans were developed for each project to guide knowledge translation.

Identifying research priorities: Workshops

Workshops with key participants representing research, community and policy perspectives are critical to the identification of research priorities and formulation of research questions.

An Aboriginal and Torres Strait Islander health research workforce is critical to improving health outcomes for Aboriginal and Torres Strait Islander people. The Lowitja Institute embraces this principle through its collaborative approach to research, where Aboriginal and Torres Strait Islander people and communities are central to the work that we undertake and the way in which we do it. Also, through a range of programs and projects including a scholarships fund (see page 19), workshops, publications and a biennial Congress Lowitja.

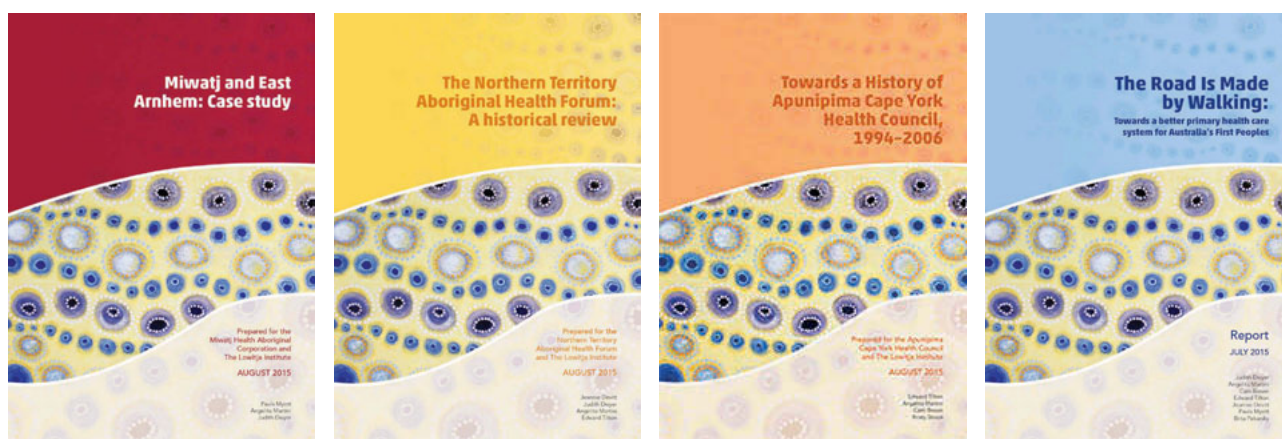
In July 2015, the Lowitja Institute convened a health research workforce workshop to consult with Aboriginal

and Torres Strait Islander experts from around Australia on two questions: What does Aboriginal and Torres Strait Islander health research excellence mean? What does it mean to be an Aboriginal and Torres Strait Islander researcher? Professor Adrian Miller from the Indigenous Research Unit, Griffith University, facilitated the workshop. Professor Bronwyn Fredericks, Pro-Vice Chancellor of Indigenous Engagement at Central Queensland University, and Dr Chelsea Bond, Senior Lecturer at the Oodgeroo Unit, Queensland University of Technology, presented to the meeting. A report is available at www.lowitja.org.au/workforce-workshop.

On March 2016, The Lowitja Institute CRC convened a workshop in Melbourne to identify specific questions in relation to systemic racism; participants came from research, community and policy environments.



Systematic Racism Workshop participants, 15 March 2016



Completed projects

A better health system for Aboriginal and Torres Strait Islander peoples

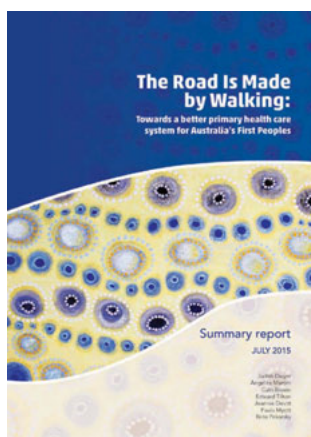
The Funding, Accountability and Results for Aboriginal Health Services (FAR) Project is a study of reforms in primary health care (PHC) for Aboriginal and Torres Strait Islander communities in the Northern Territory (between 2009 and 2014) and Cape York, Queensland (between 2006 and 2014). In both places, the intention of the reforms was to establish a regional system of PHC provision with reliable access to care for all Aboriginal and Torres Strait Islander communities in the regions, and to increase community control of health care by transferring some or most of the responsibility for providing PHC from government health authorities to regional Aboriginal Community Controlled Health Organisations (ACCHO). These were bold plans with long histories of development in both jurisdictions.

The FAR study aimed to contribute two kinds of knowledge. The first concerns the question of how to implement health policy and health system reforms effectively. The second concerns the substance of the reforms needed to achieve the policy goal. That is, we aimed to learn about what needs to be changed, as well as how to implement the changes.

The focus of the Identifying the Compliance Requirements for Aboriginal Community Controlled

Cooperatives in Victoria Project was to develop an understanding of the particular obligations associated with reporting against the types of funding agreements held by Aboriginal Community Controlled Health Organisations (ACCHOs) in Victoria. A case study was carried out investigating the compliance and reporting requirements of Rumbalara Aboriginal Co-operative. The study demonstrates that on top of the reporting overburden, incredible complexity is introduced when single organisations work across a range of health and community service sectors and consequently have to report in different ways, on different performance criteria, using different databases, for funding from different government programs. The irony is that while ACCHOs aim to build their service delivery capability in order to implement holistic responses to individual and community needs, reporting to funders appears to work against this.

The project published as *A Reciprocal Relationship: Accountability for public value in the Aboriginal community sector*, by P. Sullivan, places recent public sector management theories into a new orientation for the relationship between the Aboriginal community controlled sector and government. It recommends new approaches that reflect the realities of local delivery of Aboriginal public health services, while allowing for flexibility, reduced burdens of reporting yet robust accountability and improved client services.



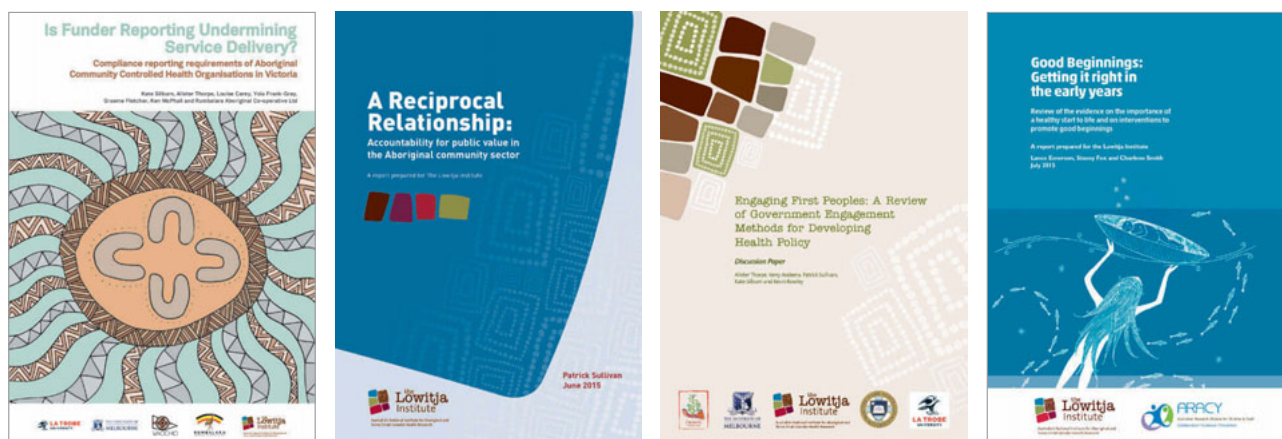
The report argues that the process of accountability has got in the way of the outcomes it should be accountable for. It points out that while public management theory has moved on from rigid one-size-fits all governance and counting inputs and outputs, our public service is slow to catch up. It suggests, following leading theory, that public management is not an end in itself but must produce public value in the same way a commercial business must produce private value, and that the way to ensure this is to start, not at the top, but at the end of the process where accountability begins.

National, state and regional engagement policies and strategies in Aboriginal and Torres Strait Islander health and wellbeing to identify best practice were the focus of a study by researchers from the universities of Melbourne, La Trobe and Notre Dame. The study supports those faced with the challenges of effective implementation of policies and programs within the Aboriginal and Torres Strait Islander health arena, and Indigenous affairs more generally. It defines and makes strong recommendations for effective engagement that are of particular relevance to practitioners contributing to the achievement of equity in health and wellbeing for First Peoples in increasingly complex policy and community contexts. A discussion paper by A. Thorpe, K. Arabena, P. Sullivan, K. Silburn and K. Rowly titled *Engaging First Peoples: A review of government engagement methods for developing health policy* was published in early 2016.

Good beginnings: Getting it right in the early years

The Stewardship Dialogues for Aboriginal and Torres Strait Islander Health were established to test if an open exploration of underlying barriers to better progress in Aboriginal and Torres Strait Islander health policy and programs can generate new ways to approach some of the 'wicked problems' of policy and implementation. The project engaged senior representatives of the main stakeholders in the Aboriginal and Torres Strait Islander health field (drawn from policy, practice, community and academic sectors) in what might be considered 'dangerous conversations', each one conducted over two days, with an eminent Chair and expert facilitators backed up by discussion papers produced for and/or by the group.

Dialogue participants identified that education and early years interventions, implemented in collaboration with Aboriginal and Torres Strait Islander communities and properly adapted to their settings, held the potential to produce significant long-term effects on health and wellbeing. However, as always, poor implementation without collaboration is unlikely to realise these benefits. *Good Beginnings: Getting it right in the early years*, a publication prepared for the Lowitja Institute by L. Emerson, S. Fox & C. Smith was published in October 2015. The report highlights the importance of early childhood interventions and offers evaluations of numerous programs.



The reports discussed above are available at www.lowitja.org.au/lowitja-publishing.

The Lancet–Lowitja Institute Global Collaboration

In April 2016, the prestigious international medical journal, *The Lancet*, published a study commissioned from the Lowitja Institute titled *Indigenous and Tribal Peoples' Health (The Lancet–Lowitja Institute Global Collaboration): A population study*. The report is a world-first study into the health and wellbeing of more than 154 million Indigenous and Tribal peoples (approximately half the world's Indigenous populations). It was launched in Melbourne on 21 April by Professor Fiona Stanley AC to coincide with its publication in *The Lancet* in London. Ms Stephanie Clark, Executive Editor at *The Lancet* attended the launch in Melbourne. A seminar was held in Melbourne the following day at which senior writers presented their findings.

The report, by I. Anderson, B. Robson, M. Connelly et al., analysed data from 28 Indigenous and Tribal groups across 23 countries and brought together 65 experts from countries such as Australia, United States, Canada, Aotearoa/New Zealand, Sweden, Nepal, Norway, Denmark, Russia, China, India, Thailand, Pakistan, Brazil, Colombia, Chile, Myanmar, Kenya, Peru, Panama, Venezuela, Cameroon and Nigeria.

Researchers assessed data on basic population, life expectancy at birth, infant mortality, low and high birth weight, maternal mortality, nutritional status, educational attainment, poverty and economic status. The research does not make cross-country comparisons.

The paper responds to the United Nations 2030 Agenda for Sustainable Development signed in September 2015 with the stated aim 'to end all forms of poverty, fight inequalities and tackle climate change while ensuring that no one is left behind', and shows much is yet to be done.

Full details, including the report, infographics, videos and podcasts and related media articles can be found at www.lowitja.org.au/indigenous-tribal-health.



L-R: Aunty Di Kerr, Mr Romlie Mokak, Ms Stephanie Clark, Prof. Ian Anderson, Ms Pat Anderson AO, *The Lancet*–Lowitja Institute launch, 21 April 2016, Fiona Hamilton Photography



Professor Fiona Stanley AC, launch of *The Lancet*–Lowitja Institute Global Collaboration, 21 April 2016, Peter Casamento Photography

Policy, Programs and Impact



Translating research into practice

CQI Tools and Resources Project

The CQI Tools and Resources Project was conducted for the Australian Government Department of Health (DoH) (Indigenous Health Division) between June 2015 and June 2016. The Lowitja Institute led the project, which was undertaken primarily by a small research team (Dr Sanchia Shibasaki and Dr Beverly Sibthorpe) under contract to the Institute.

A Project team, chaired by Institute CEO Mr Romlie Mokak, and including representation from the National Aboriginal Community Controlled Health Organisation (NACCHO) and the state and territory Affiliates, provided extensive input from the Aboriginal Community Controlled Health Service (ACCHS). In addition, a Technical Panel and a small Expert Group contributed to the development of the training tools, as did interviews with key informants and advice from a small number of other experts co-opted for specific tasks.

This was the third in a series of projects related to a national CQI framework for Aboriginal and Torres Strait Islander primary health care that the Lowitja Institute undertook for DoH over a three-year period. The first two projects resulted in the 2014 report, *Recommendations for a National CQI Framework for Aboriginal and Torres Strait Islander Primary Health Care*, and, in 2015, the *Draft National CQI Framework for Aboriginal and Torres Strait Islander Primary Health Care 2013–2023*. Input from the ACCHS sector during stages 1 and 2 also shaped this project in very important ways.

The aim of the CQI Tools and Resources Project was to identify and develop tools and resources to support

the ACCHS sector to implement four of the fifteen core components in the draft National CQI Framework, namely: Clinical Governance, CQI Leads, PDSA Cycles, and Service Support.

The project developed new tools including a Professional Development Course Outline, an Orientation and Induction Package, role descriptions for the key roles involved in implementing the CQI framework, and a modifiable Plan–Do–Study–Act (PDSA) template.

Aboriginal and Torres Strait Islander Health Research in Practice Project

This project, being undertaken by the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS), will result in the production of a manuscript of approximately 30,000 words for a printed book and an online resource eBook with enhanced audio-visual capabilities. The project will:

- Describe the evolution of the Lowitja Institute and its predecessor organisations in the health research landscape
- Highlight the vision of influential individuals embodied in the Institute's work
- Capture the contribution that the Institute has made to Aboriginal and Torres Strait Islander health research (methodology and body of work), and
- Highlight important partnerships and the reasons for their success.

The project manuscript is being prepared for publication in March 2017.

Inaugural Knowledge Translation Seminar

The Lowitja Institute conducted its inaugural knowledge translation seminar, *Translating Research into Action*, on 19 November 2015 at the National Library of Australia in Canberra. The event comprised a panel of experts who discussed what success looks like when the research is community driven.



L–R: Mr Romlie Mokak, Ms Pat Anderson AO, Ms Joy Savage (CEO, Aboriginal Hostels Limited), Mr Cleveland Fagan (CEO, Apunipima Cape York Health Council), Aunty Matilda House (Ngunnawal Elder), Mr Leslie Baird (Wontulp Bi-Buya College, Cairns), Professor Judith Dwyer (Flinders University), 19 November 2015

The seminar featured three of our recent research projects: Family Wellbeing Program, presented by Mr Leslie Baird; Funding, Accountability and Results (FAR), presented by Mr Cleveland Fagan; Managing Two Worlds Together: Improving the Indigenous Patient Journey, presented by Professor Judith Dwyer. In addition, Local Ngambri Elder, Aunty Matilda House, provided the Welcome to Country; Lowitja Institute Chairperson, Ms Pat Anderson OA, introduced the day's program; Ms Joy Savage, CEO of the Aboriginal Hostels Limited, responded and reflected on the significance of the work presented; and Lowitja Institute CEO Mr Romlie Mokak, acted as MC.

The seminar was primarily targeted to an audience of Australian Government policymakers, Aboriginal and Torres Strait Islander peak health bodies, other policymakers and community organisations. More than 100 people attended. Following the event,

the Lowitja Institute uploaded on its website (and Vimeo channel) videos of presentations and interviews for the purpose of ongoing knowledge exchange. More information about the event can be viewed at www.lowitja.org.au/seminar-19nov.

Measuring the impact

Deloitte Access Economics Analysis

In 2015, Deloitte Access Economics undertook a retrospective cost benefit analysis (CBA) of the Cooperative Research Centre for Aboriginal and Torres Strait Islander Health (CRCATSIH) research program. This retrospective CBA built on a methodology developed by Access Economics in 2009. Using the CBA methodology and applying usage, impact, and attribution probability assumptions (as required by the Australian Government Cooperative Research Programme guidelines), the net benefit of the CRCATSIH research program was estimated as \$359.1 million over 15 years. The cost for funding this research program was expected to be \$106.6 million.

The estimated benefit to cost ratio (BCR) of this modelling was 3.4:1. That is, it was expected that \$3.40 would be returned in benefit for every \$1 invested in the CRCATSIH research program.

Resilas – designing research and evaluation that benefits communities

The Lowitja Institute is committed to high impact research that has direct benefit for Aboriginal and Torres Strait Islander peoples. With this in mind, it is building a new online tool called Resilas to create better health results for Aboriginal and Torres Strait Islander communities and help researchers and policymakers better demonstrate the results of their work. Resilas draws on the extensive work undertaken in the Lowitja Institute impact tool by Professor Komla Tsey and colleagues from James Cook University and extends the application and reach of this work.

Resilas will be a user-friendly resource to help guide researchers and policymakers apply a culturally and methodologically validated program logic interface. It will:

- engage Aboriginal and Torres Strait Islander people as decision makers, leaders, researchers and participants
- be appropriate to the research context and the research question
- combine Aboriginal and Torres Strait Islander knowledge with rigorous Western approaches and be built on ethical decisions
- facilitate translation of research knowledge and evidence into policy and practice, and
- represent value for money.

It is anticipated that Resilas will be completed during 2017.

Forging relationships

The Lowitja Institute International Indigenous Health and Wellbeing Conference 2016

During the reporting period, planning began for the Lowitja Institute International Indigenous Health and Wellbeing Conference 2016. A governance structure comprising an organising committee, a scientific committee and a cultural committee was established to oversee the planning. Committee members represent a range of entities from community organisations to research institutions. A three-day program, incorporating the conference theme—Identity, Knowledge, Strength—was designed to offer a unique opportunity for delegates to:

- celebrate Indigenous knowledges in a safe and strong cultural space
- share wisdom and stories, and learn from Elders and each other
- learn about the best science, practices and solutions
- participate in exploratory and difficult conversations and leave the conference with new perspectives and expanded methodologies

- connect and enrich engagement with colleagues and peers
- build and enhance opportunities for partnerships across research, policy and community
- craft a strong statement to inform action and influence national and international Indigenous health and wellbeing agendas
- enjoy a rich and varied art, performance and social program, and
- leave the conference inspired and energised by our identity, knowledge and strength to drive individual and collective work that benefits Indigenous peoples.

The conference program includes keynote addresses by Indigenous national and international experts including Professor Megan Davis (Australia), Moana Jackson (Aotearoa/New Zealand), Chief Wilton Littlechild (Canada), Professor Karina Walters (USA) and Ms Gunn Heatta (Norway). A range of modalities to showcase delegates' work was offered during the call for abstracts: concurrent, individual and joint presentations; posters; interactive workshops and panels such as traditional healing and yarning circles; Elder-specific and family-specific events as well as for men and women.

It is anticipated that the conference will attract Australian and international Indigenous and non-Indigenous colleagues with expertise and interests in Indigenous health and wellbeing; community organisations, leaders and individuals; researchers; students; policymakers; service providers and health workers.

A conference website was established at www.lowitjaconf2016.org.au.

National Health Leadership Forum

Mr Romlie Mokak continued to represent the Institute on the National Health Leadership Forum (NHLF) during this reporting period. He acted as Chair of the NHLF for the period July to December 2015 during which time the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan was developed in consultation with the NHLF. The Implementation

Plan was launched jointly by the then Minister for Rural Health, the Hon Fiona Nash MP, the Hon Warren Snowdon MP, Senator Rachel Siewert and Mr Mokak, on 22 October 2015.

Centres of Research Excellence collaboration

The Lowitja Institute has continued to partner with two Centres for Research Excellence funded by the National Health and Medical Research Council (NHMRC):

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

Extending hospitality

Several meetings by external organisations, such as the Victorian Government Department of Health, were held in the Lowitja Institute Boardroom. Here, the purpose of the Institute is to provide a culturally safe space to organisations and colleagues working for the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

We also welcomed colleagues from near and far, some highlights below:



HSRAANZ, 6 December 2015

On 6 December 2015, the Lowitja Institute CRC hosted the pre-conference Indigenous researchers meeting of the 9th Health Services Research Association of Australia and New Zealand (HSRAANZ) conference. This meeting provided national and international researchers with the opportunity to network before the conference, develop a cohort of Indigenous researchers, raise the profile of Indigenous health in the main conference, and increase their confidence as Indigenous participants. Researchers from Australia, Canada, the United States and Aotearoa/New Zealand attended the meeting, as well as Ngangkari from the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands in South Australia.

On 12 January 2016 the Lowitja Institute was pleased to host the Skin & Cancer Foundation's inaugural Indigenous health evening, organised by Dr Crystal Williams, Dermatology Registrar and Aboriginal member of the Australian Indigenous Doctors' Association.



L–R: Mr Richard Williams, Mr Romlie Mokak, Dr Crystal Williams, Aunty Di Kerr, Dr Jennifer Cahill, Skin and Cancer Foundation, 12 January 2016

The purpose of the evening was to discuss how to move forward in addressing Aboriginal and Torres Strait Islander health parity. An audience of 35 listened to brief talks then engaged in a Q&A session with panel members Dr Williams, Dr Jennifer Cahill and Mr Romlie Mokak, Lowitja Institute CEO. Aunty Di Kerr welcomed the meeting to Country. The Skin & Cancer Foundation Inc. is a not-for-profit, DGR registered organisation



L–R: Mr Romlie Mokak (Lowitja Institute), Dr Ingeborg Larssen (Sami Parliament of Norway), Mr Jason King (Victorian Aboriginal Health Service), Ms Joddy Barney (University of Melbourne), Professor Siv Kvernmo (The Arctic University of Norway), Ms Gunn Heatta (Sami National Centre for Mental Health and Substance Use), Aunty Di Kerr (Wurundjeri Elder), Mr Henrik Olse (Vice-President, Governing Council of the Sami Parliament of Norway), Ms Lisbeth Vesterheim Skoglund (Sami Parliament of Norway), Ms Pat Anderson AO (Lowitja Institute), Ms Chrissy Grant (NH&MRC), Mr Bent-Martin Eliassen (The Arctic University of Norway), Ms Mary Guthrie (Lowitja Institute), Kirsti Strøm Bull (University of Oslo & Sami University College), Mr Joshua Smith (Victorian Department of Health and Human Services), Sami Parliament at Lowitja Institute, 24 February 2016

providing specialist treatment, education and research for a wide variety of skin cancers and disorders.

It was a great pleasure to welcome a delegation from the Sami Parliament of Norway, led by Mr Henrik Olse, to the Lowitja Institute on Wednesday 23 February. The delegation visited the University of Melbourne for two days during its time in Australia and came to the Institute to share knowledge about ethics in Indigenous health research. Aunty Di Kerr welcomed the visitors to Country and Ms Mary Guthrie (Lowitja Institute), Dr Ray Lovett (ANU), Ms Chrissy Grant (NH&MRC) and Ms Jody

Barney (University of Melbourne) gave presentations about their work in Aboriginal and Torres Strait Islander health research ethics. After a delicious lunch catered by Charcoal Lane the delegation visited the Victorian Aboriginal Health Service.

Growing the next generation of Aboriginal and Torres Strait Islander health researchers

Lowitja Institute CRC Scholarship Program

The Lowitja Institute is committed to developing a strong base of Aboriginal and Torres Strait Islander health researchers. In recognition of the emphasis placed on this outcome, The Lowitja Institute CRC, which the Institute hosts, has funded 16 PhD scholarships from 2014 to 2019.

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 practices that lead to positive change in the health and wellbeing of Aboriginal and Torres Strait Islander people.

Five new PhD scholarships were awarded to Aboriginal and Torres Strait Islander students during the 2015–16 period:

- Ms Margaret Harvey, RMIT/AIATSIS, *Researching my island home – Navigating through the intersection of research and culture in the creation of live performance*
- Ms Vicki Couzens, RMIT/AIATSIS, *Koorramook Yakeeneeyt (Possum Dreaming): Cloaks, cultural traditions and wellbeing in Aboriginal communities*
- Ms Emily Munro-Harrison, The University of Melbourne, *Urban invisibility: Identities of young Aboriginal and Torres Strait Islander people in urban Victoria*
- Mr Matthew West, University of Newcastle/La Trobe University, *Development of targeted foot complications screening and intervention program for Aboriginal and Torres Strait Islander people*

- Mr Alister Thorpe, The University of Melbourne, *Engage-Exchange-Change: Strengthening Indigenous health research engagement, action, translation and impact.*

A Co-funded Scholarship Program was established, enabling the Lowitja Institute CRC to collaborate with Participants to provide additional scholarships for Aboriginal and Torres Strait Islander students. Nine Participants will co-fund a total of 11 co-funded scholarships, nine PhDs and two Masters by research. These additional co-funded scholarships, which commenced in July 2016, are an exciting advancement in the Lowitja Institute CRC's aim to develop career pathways for students into postgraduate studies and further research.

Co-funded PhD scholarships were established with Queensland University of Technology, La Trobe University, Edith Cowan University, The George Institute of Global Health, The University of Melbourne and Griffith University.

A co-funded Masters scholarship was established with the National Centre for Epidemiology and Population Health at the Australian National University, and one with the Menzies School of Health Research.

Three Lowitja Institute CRC scholarship holders successfully completed their PhD programs during the reporting period, and one completed a Masters by research.

Ms Lisa Whop, PhD thesis, Menzies School of Health Research

The first comprehensive study on Indigenous Australian women's inequalities in cervical screening: a Queensland record-linkage study

Since the introduction of the Australian National Cervical Screening Program (NCSP) in 1991, cervical cancer incidence and mortality in Australia have decreased by more than 50 per cent. However, incidence and mortality for Indigenous women are two and four times higher respectively than for non-Indigenous women. The NCSP is unable to report on program performance indicators for Aboriginal and Torres Strait Islander women because Indigenous status is not routinely collected by Pap smear registers (PSRs).

Using linked data from the Queensland PSR with hospital inpatient and cancer registry data, Ms Whop's thesis investigated cervical screening participation, prevalence of cervical abnormalities and length of time to clinical investigation following a high-grade abnormality for Indigenous compared with non-Indigenous women in Queensland.

Mr Stewart Sutherland, PhD thesis, Australian Institute of Aboriginal and Torres Strait Islander Studies

A transnational study: The effects of reconciliation on social and emotional wellbeing of people affected by past policies and practices of forced removal

Mr Sutherland's research investigated the impact of forced removal policies and practices on the social and emotional wellbeing of Indigenous peoples in Australia, Canada and New Zealand. This study also investigated these populations' attitudes towards reconciliation in the wake of government apologies; also, the impact on people's social and emotional wellbeing that may have stemmed from government apologies and reconciliation programs.

In undertaking his research, Mr Sutherland interviewed 90 participants from 15 sites across the three countries. He developed and used Cultural Situated research methodologies. This allowed his interviewees to be forthcoming and reveal information at great depth that may not have occurred using other methodologies. The level of detail obtained allowed Mr Sutherland to draw out themes from an Indigenous viewpoint.

Ms Maree Meredith, PhD thesis, Flinders University

Health promotion benefits of art centres in Anangu Pitjantjatjara Yankunytjatjara Lands

There are approximately 3000 people on the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands with 460 persons (15%) engaged in art activities in seven art centres. Anecdotal evidence suggests that these centres contribute to community health and wellbeing of artists and the community. This study used a mixed method approach to examine the health promoting capacity of art centres and to identify key features of best practice models using the social determinants of health framework.

The research methods included participant observation, interviews with Aboriginal and non-Indigenous stakeholders, a survey designed in collaboration with artists and art centre workers, and case studies of two centres identified as health promoting. This research has the potential to extend the scholarship towards a deeper understanding of Aboriginal methodologies and theories.

Ms Julieann Coombes, Master thesis by research – The George Institute of Global Health

*What's next for Aboriginal and Torres Strait Islander children after a burn injury?
What are the barriers to appropriate care?*

There is significant overrepresentation of Aboriginal and Torres Strait Islander children with burn-related injuries. However, there is little research exploring burn victims' access to appropriate health care and their quality of life after they return to their homes, families and communities. Ms Coombes' research was part of a larger prospective study exploring burn care in Aboriginal and Torres Strait Islander children.

Ms Coombes used semi-structured interviews to conduct qualitative research with Aboriginal and Torres Strait Islander children under 16 years of age, and their families, who had presented to a burns unit. The interviews with burn victims mapped out participants' pathways to accessing services to gain information about how a child with a serious burn and their family interact and experience the journey to recovery. The Aboriginal Interpreter Service was present during discussions with the participants whose first language was not English. As an Aboriginal researcher, Ms Coombes used Aboriginal ontology as her framework—a holistic framework based on interconnectedness, person-centred care, and Aboriginal ways of knowing. This research aimed to generate rich data to assess the impact of burns care on the quality of a victim's, and his or her family's, life. It will also help understand the barriers to health care once a child is back in community, and help explore the support systems Aboriginal and Torres Strait Islander children have or need to ensure better health outcomes and recovery and continuous health and wellbeing.

Science and Young Minds Project

In 2014–15, the Lowitja Institute CRC provided a small amount of funding to QIMR Berghofer Medical Research Institute to undertake a small project, Science and Young Minds – Youth Engagement in Skin Health. This project introduced young Aboriginal and Torres Strait Islander high school students in remote north-west Queensland to science workshops. In particular, the workshops engaged students in discussions, learning and hands-on activities about skin health and medical research in relation to local needs, and shared knowledge of parasitology and infectious disease. During the reporting period, a summary report of this project was published under the title High School Outreach in remote north-west Queensland, authored by Dr K. Fischer.



Conclurry High School student at QIMR Berghofer Medical Research Institute, Brisbane. Photography by Andrew Erwin, courtesy QIMR Berghofer

The Lowitja Institute Research Leadership Award

The Lowitja Institute and the Cranlana Programme collaborated in the establishment of the Aboriginal and Torres Strait Islander Research Leadership 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 inaugural winner of this award was Professor Sandra Eades, Domain Head of Aboriginal Health and Disadvantaged Communities at Baker IDIHeart & Diabetes Institute.



Professor Sandra Eades

Other activities

Aboriginal Adult Literacy Program

The Lowitja Institute is continuing to support the Aboriginal Adult Literacy Program run by the Literacy For Life Foundation through in-kind activities, including the Lowitja Institute Chairperson being a member of the Foundation Board and as partner to an ARC grant.



L–R: Professor Jack Beetson with Pat Anderson AO, Chairperson of the Lowitja Institute, at the literacy campaign launch in Brewarrina on 26 August 2015. Photo courtesy Dr Bob Boughton, University of New England

On 30 November 2015, Dr Bob Boughton, project lead of the Wilcannia Aboriginal Adult Literacy Campaign, shared the project's learnings and successes with Lowitja Institute staff.

The Lowitja Institute provided seed funding for this project over two phases. Phase One was completed in June 2011, Phase Two in May 2013. The Literacy Campaign pilot, separately funded from a variety of sources, was in two stages. Stage One was completed in November 2012. Stage Two was completed in April 2014.

Speeches and seminar

Indigenous people driving the agenda forward, delivered by Mr Romlie Mokak, CEO of the Lowitja Institute, to the World Indigenous Cancer Conference, Brisbane, 14 April 2016.

Building the Foundations for Better Lives for Country Kids, delivered by Ms Pat Anderson AO, Chairperson of the Lowitja Institute, to the 2016 Caring for Country Kids Conference, Alice Springs, 19 April 2016.

Aboriginal and Torres Strait Islander Health Research leadership, presented by Mr Romlie Mokak, CEO of the Lowitja Institute, University of Canberra, 16 July 2015.

The Lowitja Institute: Working for Aboriginal and Torres Strait Islander people, presented by Mr Romlie Mokak, CEO of the Lowitja Institute, Curtin University, 1 September 2015.

Telling Tales – The power of the narrative, delivered by Ms Mary Guthrie on behalf of Ms Pat Anderson AO to the CRANaplus Conference, Alice Springs, 16 October 2015.

Online resources for researchers

Lit.search and EthicsHub are two important online research resources established in 2013 and 2015 respectively. These were maintained and updated during the reporting period.

Ethical research, where the definition of ethics is identified by and for Aboriginal and Torres Strait Islander people, is a key research principle of the Lowitja Institute. EthicsHub supports people and organisations working in Aboriginal and Torres Strait Islander health research to access processes and resources that ensure that work done in this space is safe and culturally appropriate for Aboriginal and Torres Strait Islander individuals and communities. This resource was further developed during 2015–16 and is available at www.lowitja.org.au/ethics.

Lit.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 popular resource with some 2200 users during the reporting period. **Lit.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 with more than 24 million citations for biomedical literature from MEDLINE, life science journals, and online books. **Lit.search** is available at www.lowitja.org.au/litsearch.

A Strong and Sustainable Organisation

When Dr Lowitja O'Donoghue agreed to have the Lowitja Institute named after her, she entrusted in us her **spirit and energy, her values and priorities**. Dr O'Donoghue told us to **be a courageous organisation committed to social justice and equity for Aboriginal and Torres Strait Islander peoples, to match words to action, to achieve real, tangible and immediate outcomes. Also, to be known throughout Australia as a strong and sustainable organisation working fearlessly for change and improvement in the lives of Aboriginal and Torres Strait Islander peoples**. Our strategic plan and all the work that follows will honour Dr O'Donoghue's vision.

The Lowitja Institute Strategic Plan 2015–18

The purpose of the Lowitja Institute is to value the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

As the national institute for Aboriginal and Torres Strait Islander health research, a significant responsibility rests with the Lowitja Institute to provide leadership on work that will result in improvements to the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

To achieve this, the Lowitja Institute will embrace those who likewise share a firm commitment in valuing the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

Our work encompasses all areas that contribute to the health and wellbeing of Aboriginal and Torres Strait Islander peoples, including the social and cultural determinants of health and wellbeing. The work of the Lowitja Institute will be ambitious, rigorous and culturally safe. We will directly contribute towards our people achieving their greatest potential.



Our vision is that the Lowitja Institute will be an authoritative and collective voice for the benefit of Aboriginal and Torres Strait Islander peoples' health and wellbeing.

The Lowitja Institute will pursue a new generation of solutions that will make a real difference to the health and wellbeing of Aboriginal and Torres Strait Islander peoples. We will facilitate work that benefits Aboriginal and Torres Strait Islander peoples first and foremost. To do this, we will support Aboriginal and Torres Strait Islander priorities and collective ways of working. We will ensure that our work recognises the strength and agency of Aboriginal and Torres Strait Islander peoples. The knowledge we provide will be culturally ethical and intellectually rigorous.

Our aspirations

The Lowitja Institute will facilitate research and knowledge exchange that improves the health and wellbeing of Aboriginal and Torres Strait Islander peoples. We will strengthen the Lowitja Institute's ability to influence policies, programs and practices that reflect the Institute's vision while ensuring that we endure into perpetuity.

To facilitate research and knowledge exchange that makes a positive difference to Aboriginal and Torres Strait Islander peoples' health and wellbeing.

Strategies:

- Facilitate research and knowledge exchange that

is world-class, culturally ethical and advances the purpose of the Institute

- Work with partners to contribute in practical ways to improve Aboriginal and Torres Strait Islander peoples' health and wellbeing.

Through our research, knowledge exchange and advocacy, to impact policies, programs and practice that will improve the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

Strategies:

- Translate research into more effective policies and programs
- Influence national agendas and priorities which impact on the Aboriginal and Torres Strait Islander peoples' health and wellbeing
- Advocate for programs that have shown positive results and/or promise.

To be a strong and sustainable organisation.

Strategies:

- Continue to develop capacity to address current and future opportunities and challenges
- Develop a plan for the Lowitja Institute to thrive into perpetuity.

Board of Directors



L–R: Mr Selwyn Button, Dr Tamara Mackean, Ms Pat Anderson AO (Chair), Ms June Oscar AO, Professor Peter Buckskin PSM, Mr Russell Taylor AM. Not in photograph: Professor Greg Anderson, Mr Brendon Douglas, Mr Ali Drummond, Ms Robynne Quiggin, Professor Fiona Stanley AC

The Lowitja Institute is governed by a Board of Directors, who are elected by members (see inside cover). The Board is chaired by Ms Pat Anderson AO.

During 2015–16, Institute directors included:

- o **Professor Greg Anderson**, the head of the Iron Metabolism Laboratory who until recently served as Deputy Director of the QIMR Berghofer Medical Research Institute (2012–16)
- o **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
- o **Mr Selwyn Button**, a Gungarri man from south-west Queensland and the Assistant Director-General (Indigenous Education), Department of Education, Training and Employment, Queensland
- o **Mr Brendon Douglas**, the Director of Research and Innovation at Charles Darwin University and an Executive Council member of the International Development Contractors Group
- o **Mr Ali Drummond**, a qualified nurse of Torres Strait Islander descent and a Lecturer in the School of Nursing, Queensland University of Technology
- o **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

- o **Mr Russell Taylor AM**, a Kamilaroi man with family connections to La Perouse in Sydney and CEO of the Australian Institute of Aboriginal and Torres Strait Islander Studies
- o **Ms June Oscar AO**, a Bunuba woman from Fitzroy Crossing and Chief Executive Officer of Marninwarntikura Women's Resource Centre
- o **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
- o **Ms Robynne Quiggin**, Deputy Commissioner Aboriginal and Torres Strait Islander Social Justice, Australian Human rights Commission.

Dr Mackean was elected to the Board at the 2015 AGM for a three-year term.

Mr Drummond was re-elected for a further three-year term and Mr Selwyn Button was appointed to the Board for a further 12-month term at the Annual General Meeting in November 2015.

Ms June Oscar AO was appointed by the Board as a director on 3 May 2016. The Board also appointed Professor Fiona Stanley AC as a director on 6 May 2016 and Ms Robynne Quiggin as a director on 12 May 2016.

Corporate

The Lowitja Institute is undergoing a transformational process from sole reliance on government funding to a bold program of business development that will ensure its sustainability into the future. With this in mind, the Institute has started to convert its extensive research base into valuable insights and product offerings.

This vision comes with challenges including the need to develop new skills in our workforce, identifying resources to encourage business growth, understanding our competitors and our points of difference. The Institute must be both determined and clever to transform from

being an organisation 100 per cent dependent on government funding to one that has a robust funding base with a new generation of products, devices and partners. This has to be completed by June 2019 to ensure its existence now and into the future. The Lowitja Institute views the Federal Government as a central financial contributor to this endeavour now and beyond 2019.

As host of the Lowitja Institute CRC, delivery of CRC projects is a priority for the Lowitja Institute until funding from this program ceases in June 2019.

Innovation and business development



Lowitja INSIGHT

Is where the Institute will convert its research and knowledge translation into useful insight to enable better decision-making and policy development.



Lowitja CONSULTING

Tapping into its wider researcher and expert network, the Lowitja Institute will expand its consulting services to ensure programs and health outcomes achieve greater benefit for Aboriginal and Torres Strait Islander communities.



Lowitja STANDARDS

As the peak health research body for Aboriginal and Torres Strait Islander peoples, the Lowitja Institute in partnership with peak service providers is seeking to set new levels of health standards as they apply to the delivery of health services across Australia.



Lowitja VENTURES

Although the Institute is small, its strength has always been its relationship with key stakeholders. Through partnerships including commercial, the Institute is ready to tackle some key health priorities and make positive in-roads for communities across Australia.

As part of the Institute's future business development strategy, work has commenced to create an online design and evaluation tool called Resilas drawing from the impact tool but also extending its application and reach; please see page 15.

The Lowitja Institute for Aboriginal and Torres Strait Islander Health CRC



Participants Forum, Melbourne, 15 June 2016

The Lowitja Institute hosts the Lowitja Institute Aboriginal and Torres Strait Islander Health CRC (The Lowitja Institute CRC) funded by the Australian Government Department of Industry, Innovation and Science Cooperative Research Centres (CRC) Programme.

The history of the Lowitja Institute CRC dates back to 1997 with the establishment of the CRC for Aboriginal and Tropical Health (CRCATH, 1997–2003), which was followed by the CRC for Aboriginal Health (CRAH, 2003–09), and the CRC for Aboriginal and Torres Strait Islander Health (CRCATSIH, 2010–14).

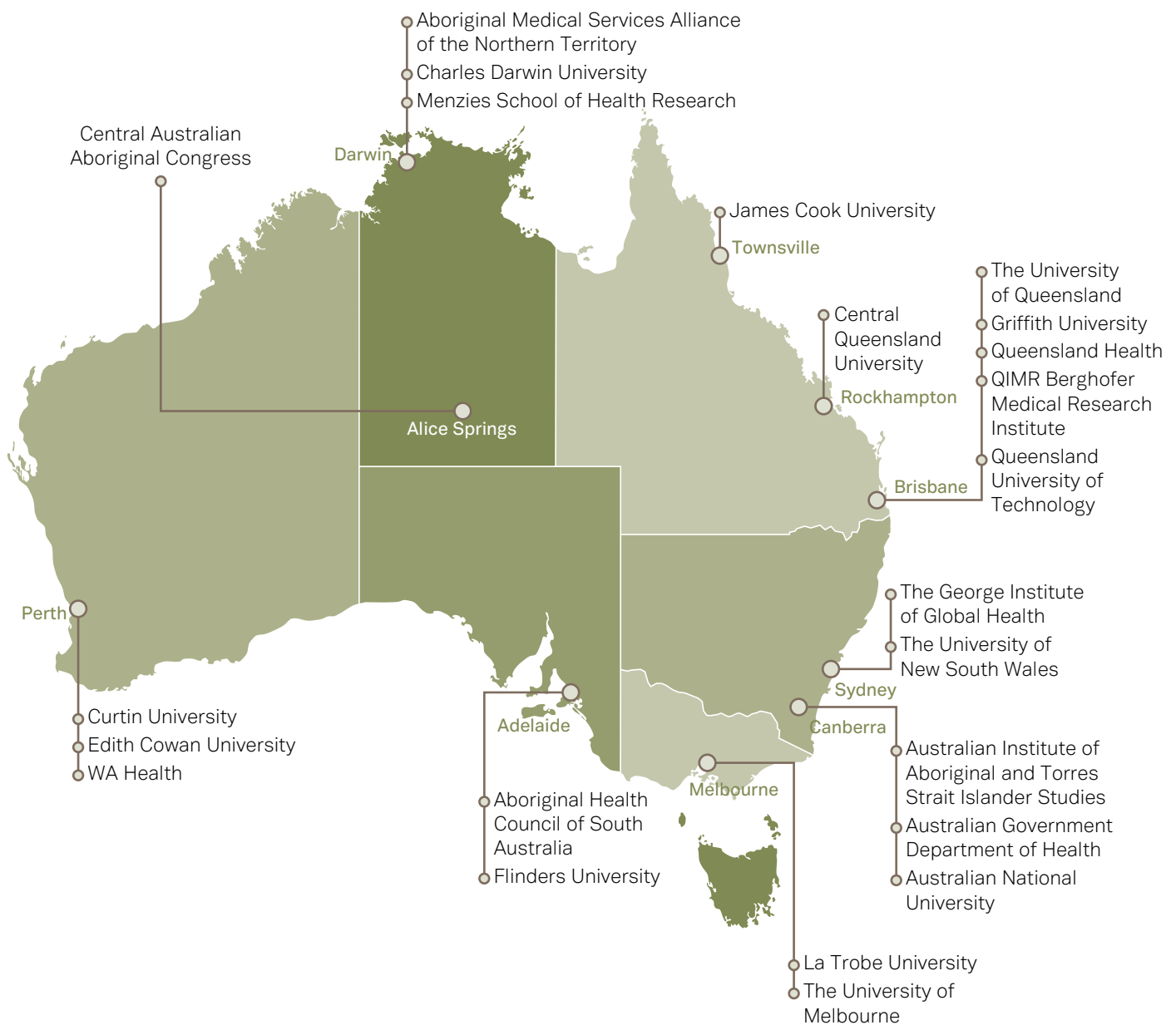
The current CRC commenced operations on 1 July 2014.

At present, the Lowitja Institute CRC works with 23 Participants including Aboriginal and Torres Strait Islander health organisations, State and Australian government departments, and research institutions. This group meets twice a year to discuss current work, future activities and issues of governance and funding; this year we met in Melbourne on 27 November 2015 and 15 June 2016.



Participants Forum, Adelaide, 27 November 2015

The Lowitja Institute Aboriginal and Torres Strait Islander CRC Participants



Australian Government
Department of Industry,
Innovation and Science

Business
Cooperative Research
Centres Programme

Strong brand and communications



A number of publications and other resources were produced in the 2015–16 reporting period: 11 project reports, two

policy briefs and one summary report; and

various promotional and ancillary materials supporting the work of the Lowitja Institute, as well as the Lowitja Institute CRC and its knowledge translation activities.

A complete list of these publications can be found in Appendix 1 and is available at www.lowitja.org.au/lowitja-publishing.



Our practice is to source unique artwork by Aboriginal and Torres Strait Islander artists to illustrate specific publications, particularly when artist and artwork have

a close connection to the research project and/or its content. In the reporting period we engaged Carbon Creative, an Indigenous creative agency in Brisbane, to assist us with some of this work.



The reduction of the number of printed publications and mass distributions has been a priority. Hardcopy distributions—targeted to key audiences—have been

reduced to less than 1000 copies for the reporting period, and downloads from our website have increased nearly 20 per cent to some 16,500 items. **Website use in general grew approximately 20 per cent** during the reporting period, with 58,980 unique visitors and some 202,000 page-views.



In addition to our website, **we placed six of our most popular publications on the Kindle platform**, available for purchase

through Amazon. Lowitja Institute CRC

publications are also available through the Australian Indigenous HealthInfoNet, Australian Policy Online, RMIT Publishing Informit Collections, the EBSCOhost international bibliographic database and through the National Library of Australia, the State Library of Victoria and the library of the Australian Institute for Aboriginal and Torres Strait Islander Studies.



We have also made a concerted effort to produce more video and audio material for wider dissemination of our activities.

For example, 12 video resources were

produced to promote *The Lancet*–Lowitja Institute Collaboration (see page 12), to record its launch and, in particular, to capture the full content of a seminar given by senior writers of this landmark study, ensuring the work is accessed by multiple audiences in different settings, now and in the future. Seven video resources were created for the Translating Research into Practice inaugural seminar (see page 14), with the same purpose. The Lowitja Institute Vimeo channel is available at <https://vimeo.com/lowitjainstitute/videos>.



We published 23 editions of the fortnightly eBulletin. In late June 2016, subscribers numbered some 2500, about 10 per cent higher than the year before.

A subscription campaign will be activated through the Lowitja Institute website to increase the number of subscribers. The eBulletin disseminates information about the Lowitja Institute, and the Lowitja Institute CRC activities and its participants. It includes publications, events, jobs, conferences, scholarships and resources that focus on Aboriginal and Torres Strait Islander health and the social determinants of health, the areas of interest to our readers.



The stakeholder database also grew approximately 10 per cent during the reporting period and, similarly to eBulletin subscriptions, strategies for

growing the database will be in place later in 2016. Careful segmentation makes this a very important communications resource for the Lowitja Institute not only for promotional/marketing purposes, but to identify and bring together specific interest groups, or segments, around activities such as workshops, roundtables and seminars.



Our principal social media communications channel is Twitter, where **our followers grew by 30 per cent** to approximately 5500 followers during

the reporting period. All our activities are promoted through Twitter and we participate in appropriate social media activity by our partners. An activity analysis reporting mechanism for social media has been developed, particularly to monitor project related activity. **Twitter has proved to be an invaluable communication channel for the Lowitja Institute as it has helped us connect more effectively** with our key audiences principally Aboriginal and Torres Strait Islander communities, as well as Aboriginal and Torres Strait Islander and non-Indigenous researchers and organisations. We are also followed by people and organisations working in policy development.



Social media/Twitter has been particularly useful in the promotion of our conference.

Targetted 'tweets' contributed significantly to drawing attention to the call for abstracts for the Lowitja Institute International Indigenous Health and Wellbeing Conference 2016; we received some 320 submissions from a target of 120. Similarly, it enabled us to reach audiences from northern Russia to rural Peru.



We have successfully applied for a Google Ads grant that currently gives us US\$10,000 per month advertising value for the promotion of our activities.



A particular, and successful, **effort was made during the reporting period to communicate** with Aboriginal and Torres Strait Islander communities **via community radio, press and television**, focusing on the output of the Institute, our strategic direction and values.



The Lancet–Lowitja Institute collaboration launch (see page 12) in April 2016 **attracted a great deal of attention in the media**, with some 27 online and print articles, in Australia and overseas; for example, an article published in *The Guardian* in Australia, USA and UK. A media release was published in both English and Spanish.

Professional Certificate in Indigenous Research



This course is offered by the University of Melbourne, a Lowitja Institute CRC Essential Participant. It is an interdisciplinary coursework program that explores research and develops research skills from an Aboriginal and Torres Strait Islander perspective. Lowitja Institute CRC staff contribute a specialist writing and editing workshop to the program.

Finance

The Lowitja Institute finished the 2015–16 financial year with a \$63,000 surplus.

Income

totalled \$4.13m with \$3.35m in CRC Programming Funding including \$220,000 in cash contributions from CRC Participants; project income of \$359,000 related to the final instalment from the Australian Government Department of Health for stage three of the Continuous Quality Improvement project, and sponsorship for the Lowitja Institute International Indigenous Health and Wellbeing Conference 2016; interest income at \$167,000; sundry income of \$127,000.

Expenditure

totalled \$4.06m, with research related activities representing 83 per cent of expenditure and corporate services 17 per cent. Project activity expenditure was \$1.39m, with the majority of expenditure related to project funding and completion of residual research activities of the Cooperative Research Centre for Aboriginal and Torres Strait Islander Health. Expenditure also included scholarship payments, and work on the external contract with the Australian Government Department of Health.

Administration activities cost \$190,977; corporate related employment \$490,395; research related employment \$1.34m, and operational expenditure was \$646,931.

Cash reserves

increased significantly, from \$5.1m to \$7.2m, during the financial year as a result of CRC Programme funding not matching research funding expenditure, with the surplus funds recognised as a liability. It is anticipated that these funds will decrease in the next financial year with more project funds due to be released.

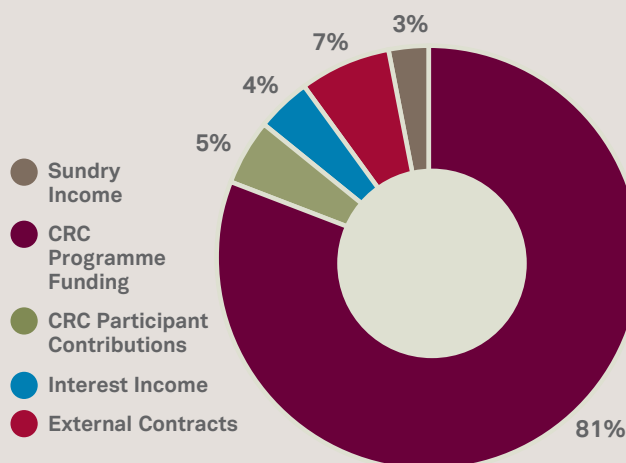
Debtors

at \$142,000 related to the external contract work with the Australian Government Department of Health. There was minimal movement in fixed assets, with the overall reduction in asset value due to depreciation.

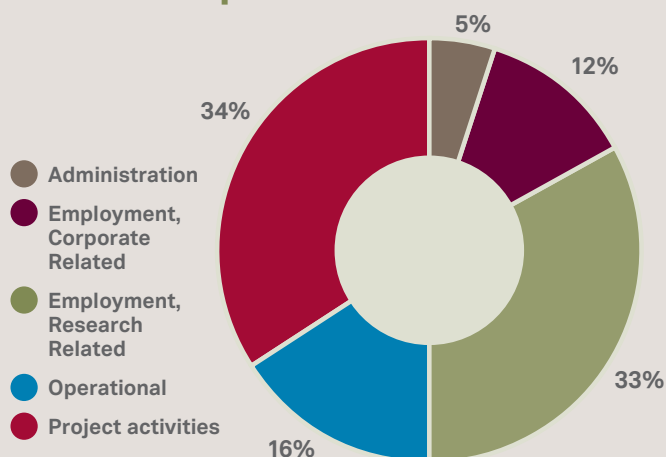
Current liabilities

at \$5.43m included \$4.9m from CRC Programme and other income in-advance, project commitments, employee accruals of \$192,000 and \$88,000 in GST payable.

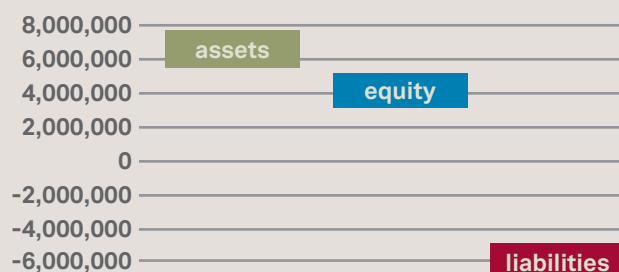
The Lowitja Institute 2015–16 Income



The Lowitja Institute 2014–15 Expenditure



The Lowitja Institute Financial Position at 30 June 2016



Appendix 1: Publications List



Published by the Lowitja Institute

Devitt, J., Dwyer, J., Martini, A. & Tilton, E. 2015, *Northern Territory Aboriginal Health Forum: A historical review*, The Lowitja Institute, Melbourne.

Dwyer, J., Martini, A., Brown, C., Tilton, E., Devitt, J., Myott, P. & Pekarsky, B. 2015, *The Road Is Made by Walking: Towards a better primary health care system for Australia's First Peoples – Report*, The Lowitja Institute, Melbourne.

Dwyer, J., Martini, A., Brown, C., Tilton, E., Devitt, J., Myott, P. & Pekarsky, B. 2015, *The Road Is Made by Walking: Towards a better primary health care system for Australia's First Peoples – Summary Report*, The Lowitja Institute, Melbourne.

Elliott, A., McIlwaine, F., Stone, N. & Proctor, K. 2015, *The Bouverie Centre's Aboriginal Family Therapy Training Program: Impact Analysis Report*, The Lowitja Institute, Melbourne.

Emerson, L., Fox, S. & Smith, C. 2015, *Good Beginnings: Getting it right in the early years*, The Lowitja Institute, Melbourne.

Fischer, K. 2016, *High School Outreach in Remote Northwest Queensland*, The Lowitja Institute, Melbourne.

Myott, P., Martini, A. & Dwyer, J. 2015, *Miwatj and East Arnhem: Case study*, The Lowitja Institute, Melbourne.

Silburn, K., Thorpe, A., Carey, L., Frank-Gray, Y., Fletcher, G., McPhail, K. & Rumbalara Aboriginal Co-operative 2016, *Is Funder Reporting Undermining Service Delivery? Compliance reporting requirements of Aboriginal Community Controlled Health Organisations in Victoria*, The Lowitja Institute, Melbourne.

Sullivan, P. 2015, *A Reciprocal Relationship: Accountability for public value in the Aboriginal community sector*, The Lowitja Institute, Melbourne.

Thorpe, A., Arabena, K., Sullivan, P., Silburn, K. & Rowley, K. 2016, *Engaging First Peoples: A Review of Government Engagement Methods for Developing Health Policy*, Discussion Paper, The Lowitja Institute, Melbourne.

Tilton, R., Martini, A., Brown, C. & Strout, K. 2015, *Towards a History of Apunipima Cape York Health Council, 1994–2006*, The Lowitja Institute, Melbourne.

Other publications

Elliott, A., McIlwaine, F., Stone, N. & Proctor, K. 2015, *The Bouverie Centre's Aboriginal Family Therapy Training Program: Impact Analysis Report, Summary Report*, The Lowitja Institute, Melbourne.

Lowitja Institute Policy Briefs:

- *Planning, Implementation and Effectiveness in Indigenous Health Reform*, July 2015, The Lowitja Institute, Melbourne.
- *The Road Is Made by Walking: Towards a better primary health care system for Australia's First Peoples*, November 2015, The Lowitja Institute, Melbourne.

Evidence briefs: from the ABCD National Research Partnership:

- Summary of research findings for Aboriginal and Torres Strait Islander Workers / Health Practitioners:
 - Improving the quality of type 2 diabetes care for your community
 - Improving the quality of primary health care for your community
 - Diabetes and depression: improving the quality of care for your community
- Summary of research findings for Community Health Boards:
 - Improving the quality of type 2 diabetes care for your community
 - Improving the quality of primary health care for your community
 - Diabetes and depression: improving the quality of care for your community

Twenty three eBulletins were published in the course of the reporting period.

Appendix 1: Publications list

Journal articles 2015–16

Garvey, G., Thewes, B., He, V., Davis, E., Girgis, A., Valery, D'Aprano, A., Silburn, S., Johnston, V., Oberklaid, F., Tayler, C. 2015, 'Culturally Appropriate Training for Remote Australian Aboriginal Health Workers: Evaluation of an Early Child Development Training Intervention', *Journal of Developmental and Behavioural Paediatrics*, vol. 36, no. 7, pp. 503–11.

Garvey, G., Percival, N., Izquierdo, L., Moodie, D. & Moore, S. 2016, 'Big Data in an Indigenous Health Context: Opportunities and obstacles', *Ethics in Cancer*, vol. 40, no. 2, pp. 93–7.

Garvey, G., Thewes, B., He, V., Davis, E., Girgis, A., Valery, P., Giam, K., Hocking, A., Jackson, J., Jones, V. & Yip, D. & the Members of the SCNAT-IP Implementation Group 2016, 'Indigenous Cancer Patient and Staff Attitudes Towards Unmet Needs Screening Using the SCNAT-IP', *Supportive Care in Cancer*, vol. 24, no. 1, pp. 215–23.

Guthridge, S., Li, L., Silburn, S., Li, S.Q., McKenzie, J. & Lynch, J. 2016, 'Early Influences on Developmental Outcomes Among Children, at Age 5, in Australia's Northern Territory', *Early Childhood Research Quarterly*, vol. 35, pp. 124–134.

Howse, G. & Dywer, J. 2016, 'Legally Invisible: Stewardship for Aboriginal and Torres Strait Islander health', *Australian and New Zealand Journal of Public Health*, vol. 40 (Suppl. 1), S14-S20.

McCalman, J., Bainbridge, R., Percival, N. & Tsey, K. 2016, 'The Effectiveness of Implementation in Indigenous Australian Healthcare: An overview of literature reviews', *International Journal for Equity in Health*, vol. 15, p. 47.

Percival, N., O'Donoghue, N., Lin, V., Tsey, K. & Bailie, R. 2016, 'Improving health promotion using quality improvement techniques in Australian Indigenous primary health care', *Frontiers in Public Health*, March, doi: 10.3389/fpubh.2016.00053.

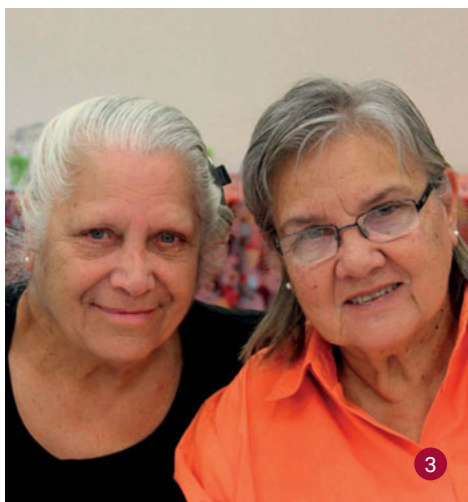
Rowley K., Doyle J., Johnston L., Reilly R., McCarthy L., Marika M., Riley T., Atkinson P., Firebrace B., Calleja J. & Cargo M. 2015, 'Strengths and limitations of a tool for monitoring and evaluating First Peoples' health promotion from an ecological perspective', *BMC Public Health*, vol. 15, p. 1215, doi: 10.1186/s12889-015-2550-3.

Appendix 2: Acronyms



ACCHO	Aboriginal Community Controlled Health Organisation	CRE	Centre for Research Excellence
ACCHS	Aboriginal Community Controlled Health Service	DoH	Australian Government Department of Health
AIATSIS	Australian Institute of Aboriginal and Torres Strait Islander Studies	FAR	Funding, Accountability and Results
ANU	Australian National University	HSRAANZ	Health Services Research Association of Australia and New Zealand
APY	Anangu Pitjantjatjara Yankunytjatjara	Lowitja Institute CRC	Lowitja Institute Aboriginal and Torres Strait Islander Health CRC
BCR	Benefit to Cost Ratio	NACCHO	National Aboriginal Community Controlled Health Organisation
CBA	Cost Benefit Analysis	NCSP	National Cervical Screening Program
CBR	Cost Benefit Ratio	NHLF	National Health Leadership Forum
CQI	Continuous Quality Improvement	NHMRC	National Health and Medical Research Council
CRE	Centre of Research Excellence	NICaN	National Indigenous Cancer Network
CRE-IQI	CRE for Integrated Quality Improvement	NPY	Ngangkari from the Ngaanyatjarra Pitjantjatjara Yankunytjatjara
CRCaH	Cooperative Research Centre for Aboriginal Health	PDSA	Plan–Do–Study–Act
CRCATH	Cooperative Research Centre for Aboriginal and Tropical Health	PSRs	Pap smear registers
CRCATSIH	Cooperative Research Centre for Aboriginal and Torres Strait Islander Health	PHC	Primary Health Care
CRC	Cooperative Research Centre		

Other Highlights








1. L–R: Ms Pat Anderson AO and Senator the Hon Michaelia Cash, Minister for Employment and Minister for Women, Australian Financial Review and Westpac 100 Women of Influence Awards, where Ms Anderson won the Public Policy Category. Belinda Rolland Photography, courtesy 100 Women of Influence.
2. Boon Wurrung Elder Aunty Carolyn Briggs taking the Lowitja Institute staff on a trip on Birrarung (Yarra River), 12 November 2015
3. Kurna Elder Aunty Georgina Williams and Ms Pat Anderson AO, Participants Forum, Adelaide, 27 November 2015
4. Wurundjeri Elder Aunty Georgina Nicholls, CQI Framework meeting, 11 December 2015
5. Mr Romlie Mokak and Mr Tim Soutphommasane (Race Discrimination Commissioner), 16 November 2015
6. Mr Romlie Mokak, LIMELight Leadership Award for Outstanding Leadership by an Individual, 12 August 2015. Photo courtesy LIME Network
7. L–R: Ms Rosemary Gundjarranbuy (Yalu' Marngithinyaraw, Indigenous Researchers Initiative & Charles Darwin University), Mr Stephen Dhamarrandji (Elcho Island Community), Ms Shawana Andrews (The University of Melbourne), Ms Nicole Turner (Indigenous Allied Health Australia), Prof. Yvonne Cadet James (James Cook University), Dr Pettina Love (La Trobe University), Aboriginal and Torres Strait Islander health research workforce workshop, 21 July 2015
8. L–R: Mr Romlie Mokak, Dr Bob Boughton (University of New England & Literacy for Life Foundation), 30 November 2015
9. L–R: Ms Libby Collins and Mr Steven Page (Bangarra Dance Theatre), Prof. Ngiare Brown (Australian Indigenous Doctors' Association), Mr Romlie Mokak, 28 August 2015
10. L–R: Mr Romlie Mokak, Mr Mick Gooda (Aboriginal and Torres Strait Islander Social Justice Commissioner), Mr John Patterson (Aboriginal Medical Services Alliance of the NT), Adjunct Prof. Mick Adams (Edith Cowan University), Assoc. Prof. Noel Hayman (Inala Indigenous Health Service & University of Queensland), Aboriginal and Torres Strait Islander health research workforce workshop, 21 July 2015
11. L–R: Ms Vikki Briggs (The Lowitja Institute), Ms Joanne Luke (The University of Melbourne), Prof. Bronwyn Fredericks (Central Queensland University & National Indigenous Research and Knowledge's Network), Aboriginal and Torres Strait Islander health research workforce workshop, 21 July 2015
12. Program Committees, 11 September 2015 (see www.lowitja.org.au/program-committees)
13. Bridget Robson (Te Rōpū Rangahau Hauora a Eru Pōmare, University of Otago), *The Lancet*–Lowitja Institute Global Collaboration seminar, 22 April 2016.
14. Prof. Ian Anderson (The University of Melbourne), The Lancet–Lowitja Institute Global Collaboration launch, 21 April 2016
15. L–R: Prof. Siv Kvernmo (The Arctic University of Norway), Mr Romlie Mokak, Dr Christopher Lawrence (The University of Melbourne), 25 November 2016
16. L–R: Dr Kathy Avery Kinew (University of Manitoba), Wurundjeri Elder Aunty Di Kerr, 22 September 2015
17. Mr Romlie Mokak with Prof. Kerry Arabena (fourth from left, The University of Melbourne) with scholars and staff from the University of Melbourne at the Lowitja Institute CRC Participants breakfast, 15 October 2015
18. Sharing stories with Ngangkari from the Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council, HSRAANZ, 6 December 2015



Thank you very much



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Fiona Hamilton Photography (cover)


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