



THE LIMENETWORK
Leaders in Indigenous Medical Education

NEWSLETTER

ISSUE NO. 17 / March 2015

LIME WELCOME

Welcome to the seventeenth edition of the Leaders in Indigenous Medical Education (LIME) Network Newsletter.

In this edition we are pleased to bring readers information about current LIME activities, including information on the **Indigenous Medical Student and Community Member Bursaries**, and **LIMElight Awards**, as part of LIME Connection VI, which will be held in Townsville, Australia from 11 – 13 August 2015.

We profile a number of teaching and learning initiatives, have information for graduates, clinicians, and students, and highlight scholarship and awards currently available. Our member profile this month features LIME Reference Group Member, Miriam Cavanagh from the University of Notre Dame, Sydney.

We hope you enjoy this edition of the LIME Network Newsletter and encourage your contributions for future publications.

**ENCOURAGE A COLLEAGUE
TO SIGN UP AS A MEMBER TODAY!**

LIME CONNECTION VI

**Knowledge Systems, Social Justice and Racism
in Health Professional Education**

11-13 AUGUST 2015 TOWNSVILLE, AUSTRALIA

KEY DATES

BURSARY APPLICATIONS CLOSE: 12 APRIL 2015

NOMINATIONS FOR LIMELight AWARDS CLOSE: 1 MAY 2015

EARLY BIRD & SPEAKER REGISTRATIONS CLOSE: 22 MAY 2015

VISIT W: <LIMENETWORK.NET.AU>

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LOGO AND ARTWORK
by Michelle Smith
and Kevin Murray

NEWSLETTER DESIGN
by Inprint Design
and Caitlin Ryan

LIME NETWORK UPDATE

LIME NETWORK TEAM

The Project Team includes Professor Shaun Ewen, Ms Odette Mazel, Ms Caitlin Ryan and Ms Erin Nicholls. If you have any questions, queries or good ideas, please contact us on T: +61 3 8344 9160 or email E: <lime-network@unimelb.edu.au>.

LIME Project Officer Warwick Padgham, who has been with LIME since 2012, has recently moved into a new role.

Warwick has been an incredible addition to the team, particularly through his work on LIME Connections,

and in strengthening LIME communications through the website and newsletters.

We're pleased to report that Warwick will continue to work closely with the LIME team, in his new role as Senior Project Officer at the [Melbourne Poche Centre for Indigenous Health](#).

LIME NEWSLETTER

The LIME Network Newsletter is published in March, July and November. It includes information about Indigenous health education and is designed as a resource for Indigenous and non-Indigenous health educators, students,

practitioners, policy makers, community members and all those interested in improving Indigenous health outcomes.

The Newsletter is a collaborative publication that encourages information sharing between LIME Network members, celebrating the many successes occurring in Indigenous health, and contributing positively to areas in which improvement is necessary.

If you have an article, story, picture or information about a project or an event, we would love to hear from you. Please contact us via W: <limenetwork.net.au/contact>.

LIME CONNECTION VI

[LIME Connection VI](#) will be held in Townsville, Australia from 11 – 13 August 2015, hosted by James Cook University.

You can read all about the latest LIME Connection VI news on page 12, including:

- Nominations and Application for the [LIMElight Awards](#) are now open;
- The Indigenous Medical Student and Community [Bursaries](#) are now open;
- Early Bird [Registrations](#) are open until May.

Visit the website for more information, and to register for the event.

W: <limenetwork.net.au/lime-connection-vi>.

LIME NETWORK WEBSITE

The LIME Network website provides resources for members. It houses information on [News](#), [Events](#), [Jobs and Scholarships](#).

The Students Section includes the [Indigenous Pathways into Medicine Online Resource](#) and contacts for [Indigenous Education Centres](#).

The Resources Section houses the searchable [Resources Hub](#), downloadable [Good Practice Case Studies](#) booklets and [Newsletters](#), as well as links to video recordings of previous [Slice of LIME Seminars](#).

If you know about resources, projects, news and events that we should highlight, or have feedback, please contact us via E: <lime-network@unimelb.edu.au> or T: +61 3 8344 9160.

SOCIAL MEDIA

You can now join the LIME Network on both [Facebook](#) and [Twitter](#), for regular Program updates and news! Use [#LIMEvi](#) for LIME Connection tweets.

LIME NETWORK FUNDING

The LIME Network Program is currently funded until July 2015. The LIME Team are seeking future funding.

SLICE OF LIME SEMINAR

The next [Slice of LIME Seminar](#) will be held on 27 April at University of Sydney.

LIME Connection keynote speaker Dr Barry Lavellee will be one of the presenters. Please see page 10 for further details on the event.

REFERENCE GROUP

Central to the success of the LIME Network is the [Reference Group](#), consisting of medical educators from each medical school in Australia and Aotearoa/ New Zealand, who aim to improve Aboriginal, Torres Strait and Māori health through medical education, as well as Indigenous student recruitment and support.

LIME Reference Group meetings are held biannually, and are hosted by a different medical school for each meeting.

The latest Reference Group meeting was hosted by The University of Tasmania, Hobart on 13th November and attended by twenty Reference Group members.

The group also visited Risdon Cove to talk about Aboriginal history with the Tasmanian Aboriginal Centre (TAC), and

held a networking event with University of Tasmania leaders and TAC staff.

Reference Group members discussed:

- LIME Connection VI planning;
- Publishing the Good Practice Case Studies Issue 3 resource;
- Furthering the online curriculum mapping tools;
- Funding proposals for 2015;
- Collaborations with medical school Deans and specialist colleges;
- Slice of LIME professional workshops; and
- Planning for a Regional Meeting in 2015.

The LIME team would like to thank staff at the University of Tasmania and the TAC for supporting such a productive and rewarding meeting.

WRITING WORKSHOP

The Reference Group meeting also included a writing workshop with facilitator Hugh Kearns.

Twenty Reference Group members participated, and feedback from the session included that it was encouraging, validating, supportive, and motivating.

Participants felt the session provided simple and practical ideas, and helped to identify a starting point for their writing.

Topics included writing processes, strategies, useful tips, creating plans, publishing, and co-authoring.

Publication outcomes will be followed up at the next Reference Group meeting.

Many thanks to Hugh Kearns for a successful workshop.



Clockwise from left: LIME Reference Group Members; Shaun Ewen addresses UTAS and TAC staff; the Writing Workshop.
Photos: Caitlin Ryan.

TEACHING AND LEARNING

TIME WELL SPENT: FIRST ANU ABORIGINAL MEDICAL SCHOOL GRADUATE

Gaye Doolan

It takes time for a new medical school to attract Aboriginal and Torres Strait Islander students, and the ANU Medical School has been no exception.

As a graduate program commencing in 2004 it has taken 10 years before the ANU Medical School has seen the graduation of its first Aboriginal doctor.

This took place in December 2014 with the graduation of Dr Jessica King.

The ANU Medical School has prided itself on the commitment it has made to the recruitment and retention offered to Aboriginal and Torres Strait Islander students.

In 2008, the ANU Medical School employed an Indigenous Health Project Officer with a view to promoting the ANU Medical School as a medical school of choice for Aboriginal and Torres Strait Islander applicants.

Support strategies were put in place to assist with tutoring to prepare applicants for GAMSAT, and two identified places for Aboriginal and Torres Strait Islander students were adopted for each intake.

Students who qualify for one of these two identified places are provided with an AU\$18,000 p.a. scholarship across the four years of their course.

A number of Aboriginal and Torres Strait Islander applicants have received support to prepare for GAMSAT, with the majority applying and being accepted at the ANU and a smaller number being accepted into other medical schools.

Jessica is the first of a growing number of Aboriginal and/or Torres Strait Islander students choosing to study medicine at the ANU and the time spent in preparing her for medicine and supporting her throughout her studies has been time well spent.

Congratulations to Jessica for all her hard work!

For more information, please contact Gaye Doolan at ANU on E: <gaye.doolan@anu.edu.au>.



ANU Graduate Dr Jessica King with LIME Reference Group Member Gaye Doolan. Photo: Rob King.

FLINDERS NT PLACEMENT

Pascale Dettwiller

Flinders Northern Territory offers a range of rural and remote clinical placements that includes the Katherine site. As the Director of the Rural Clinical School Katherine, Pascale Dettwiller endeavors to attract passionate and dedicated health students to the placements with the hope that they will come back to practice when they graduate.

Below she shares the story of medical student Gary Sit, who undertook a Katherine placement which exceeded all expectations in June 2014. The story shows that community-based clinical placements have more to offer than discipline based learning.

KATHERINE: THE TERRITORY'S BEATING HEART

Gary Sit

For four hours I had been staring out the window of an old Greyhound, taking in the landscape. Upon glimpsing the sunburnt soil, I was transported to another place and time; I felt like a 5 year old again living on my grandfather's red dirt acreage in remote western Queensland.

I was looking forward to feeling that red dirt between my now metropolitan toes and I wondered if a man who had become so Melbournian in recent years could find that boy again.

I stepped off the bus in Katherine on a Thursday afternoon and was met with that glorious Territory heat and with what I now know as that famous Katherine hospitality. We were given a quick tour of Katherine and shown our accommodation for the next nine days.

The following day I, along with Flinders students, would meet the Governor General, Sir Peter Cosgrove on his whirlwind tour of the Territory and have an introduction to the local Aboriginal cultures because, as I'm sure you can appreciate, while we might have similarities, Wiradjuri culture is different to that of the Jawoyn people.

Other highlights of the trip included a junk yard art show (featuring local artists), a concert at an Aboriginal art gallery, hiking at Nitmuluk National Park and hours in the crystalline Katherine 'hot springs'. The dry season is definitely one of abundance in Katherine.

After a weekend of enjoying Katherine, it was time to begin placement. The week was spent at Mialli Brumby community (also known as Kalano), a small Aboriginal community nestled in the Katherine township.

Here we would develop a music video involving writing, recording, filming and editing over five days. This project involved Wurli-Wurlinjang Health Service's Health Promotion Coordinator Sophie Gribble and Indigenous Hip Hop Projects' (IHHP) Dion Brownfield, Nellie

Harris, Tina Demelo and Jerome Farrah. 'Let's Go Kalano' was to be a hip hop health promotion video which was largely community directed with the assistance of the skilled IHHP team.

I found the first days hard (I think we all did) because, for this community at least, it was a new and likely scary concept. It's not easy to put yourself out there like we were asking the kids to - sharing your thoughts when writing lyrics, singing in front of a group of your peers and filming in front of the whole community.

I was very impressed by the way Jerome and Dion got the boys involved when they were writing the lyrics and the way Tina got the kids going when filming (she even had me dancing and I loved it).

For me, there were many highlights - firstly, the kids. What could I write about them? They were strong, proud and resilient and wanted to show off their community to the world but

at the same time many were shy when it came to getting in front of the mic or the camera (understandably).

However, when they let their walls down and got into the swing of filming and recording they were absolutely magnificent. They also kicked my butt playing basketball! Another highlight was a boat tour of the stunning Katherine Gorge (where we did some filming) with the traditional owners.

I have travelled much of Australia, but was in awe at the natural beauty the river possessed. Mind you, I wasn't as keen to go swimming as some of the tourists I saw were!

Throughout the filming process, the elders were supportive and welcoming to the team and myself. I think we all felt heartened by their presence throughout the week. I had no expectations when I came to this thriving, beautiful community but if I had, I believe they would have exceeded all of them.



Kalano kids in the Nitmuluk Gorge with Gary Sit (in blue).

The sense of community was palpable and I felt it.

I have heard many things said about the Territory and they vary from good to bad. I don't think I was on the receiving end of any negativity the whole time I was there.

I felt safe and welcomed by it's people. There are clearly social issues regarding things such as alcohol in both the white and black communities and this is evident on any night in the main street of Katherine. However, I wouldn't let this put you off a placement here.

For me, Katherine felt like the beating heart of the Territory; it is a place unlike anywhere you've ever been. If you approach Katherine with an open mind and an open heart, you will truly profit from a placement here.

My experience is something that I will keep with me throughout the rest of my degree.

At the end of my placement, I felt sad to leave and come back to my lonely little house in Ballarat. I had felt a sense of home in this community and place, and as I was leaving I knew that one day I would return.

To watch and share the health promotion video please visit W: <youtube.com/watch?v=KfobTx_UX5A>.

For more information, email via E: <Pascale.dettwiller@flinders.edu.au>.

BOND INDIGENOUS HEALTH TEAM TEACHING AWARD

Shannon Springer

In December 2014, the Aboriginal and Torres Strait Islander medical education team at Bond University's Faculty of Health Science and Medicine won the Faculty Quality Teaching Award for Designing and implementing an innovative Aboriginal and Torres Strait Islander Health curriculum, which commences with cultural immersion, across the undergraduate medical program.

This Faculty-wide recognition celebrates outstanding achievements of staff and recognises their dedication and contribution to the University and its success. The team, (nominated by students/staff), will go into the Vice Chancellors Award for Teaching Excellence.

The journey began in 2011 when the Bond Medical Faculty became determined to develop an innovative, integrated Indigenous health program in accordance with national professional standards and guidelines (AMC, CDAMS, RACGP).

The 3 year program is significant and includes nine one week cases, a DVD on cultural identity, discussions on racism, cases in the virtual hospital and an early cultural immersion in first year, facilitated by respected Aboriginal and Torres Strait Islander educators.

The immersion is seen as a vital stepping stone for medical students to the Indigenous health curriculum that spirals throughout the medical program.

The off campus site, in the green Gold Coast hinterland, provides the backdrop to making a safe and supportive environment to deliver the two day program. Students step off the bus into a powerful Welcome to Country ceremony and traditional dance.

In a creative and interactive way through nine one-hour sessions, students explore aspects of their own culture and identity and the way this impacts their interaction towards Indigenous people.



Cultural immersion 2013. L-R Back – Shannon Springer, Janie Dade Smith, visitor, Mary Martin, John Togno, Narelle Urquhart, Katrina Bramstedt, Narelle Jackson, Sally Sargeant; Front – Christina Wolfe, Luther Cora Dancers.

Students are able to experience significant insights into both historical and contemporary influences of Indigenous culture and the people, and draw logical connections to health.

All student evaluation feedback across the three program years to date has been very positive

and supports the view that this program has more than met the goals it was designed to achieve. Some students have indicated a strong interest in working in the field.

Congratulations to the members of the team which include: Janie Dade Smith, Shannon Springer,

John Tognio, Mary Martin, Bradley Murphy, Christina Wolfe, Katrina Bramstedt, Sally Sargeant and David Waynforth.

For more information, contact Shannon Springer, A/Prof Aboriginal and Torres Strait Islander Health, Discipline Lead via E: <sspringe@bond.edu.au>.

CULTURAL COMPETENCY TRAINING AT DEAKIN UNIVERSITY

Colin Bell, Annie Simmons, Scott McCoombe, Erik Martin

The School of Medicine at Deakin University has, as one of its course learning outcomes, a commitment to Global Citizenship: to prioritise prevention and implement wholistic approaches to enhance the health and well being of individuals, communities and populations; and encourage graduates as public health advocates committed to advancing the health and well being of rural, remote, Indigenous and marginalised individuals and communities.

Underpinning this commitment is a staged approach to ensure our graduates emerge as culturally competent practitioners. To this end we offer key time points throughout the students' four-year training program (within Public Health Medicine) to immerse in cultural learning activities and engage with Indigenous elders, staff and the community.

Our program aligns with the National Best Practice Framework for Indigenous Cultural Competency in Australian Universities. During Year 1 (on campus), it fulfills

the first two components of cultural competence comprising knowledge and understanding of Indigenous Australian cultures, histories and contemporary realities and awareness of Indigenous protocols (cultural awareness); and critical reflection on one's own culture and professional paradigms in order to understand its cultural limitations. This is achieved through:

- a two-day structured cultural awareness training program including a visit to a culturally significant site and the local Aboriginal Community Controlled Health Organisation with engagement from Indigenous elders, key stakeholders and health practitioners; and
- reflective writing integrated in assignment and group work.

In year two, students draw on their cultural knowledge and input from guest lecturers so they can recognise racism and how it impacts on Indigenous health and equity. They are also encouraged to choose a public health research topic that addresses the needs of marginalised populations.

In the clinical/community setting during Year 3, students realise the final two components of the Best Practice Framework, namely

proficiency to engage and work effectively in Indigenous contexts congruent to the expectations of Indigenous Australian peoples; and effecting positive change in one's profession, through:

- a self-directed module to broaden clinical and community care thinking to the social determinants of health;
- a three-hour practical workshop centred on the role of the Aboriginal Hospital Liaison Officer (AHLO) with a focus on creating a professional working relationship with the AHLO and cultural considerations of Indigenous patients in the clinical setting; and
- an Indigenous long-case study that assesses students' application of preventive medicine, enhancement of the health system and identification of an advocacy role as a trainee practitioner.

Early evaluation demonstrates positive feedback on the excursions and workshop, and feasible roles are identified for professional practice. Formal research is underway to assess knowledge and attitude change.

For information please contact E: <annie.simmons@deakin.edu.au>.

CURTIN UNIVERSITY INDIGENOUS CULTURES AND HEALTH RECEIVES TEACHING AWARD

Helen Flavell

An interprofessional unit taught at Curtin University's Faculty of Health Sciences, which has been delivered to nearly 10,000 students since its introduction in 2011, was recognised with an Australian University Teaching Award through the Office for Learning and Teaching in December, 2014.

The unit, Indigenous Cultures and Health (ICH), received an award for *Programs that Enhance Learning* in the category of Educational Partnerships and Collaborations with Other Organisations. ICH is taught through a partnership between Curtin's Faculty of Health Sciences and Centre for Aboriginal Studies, to thousands of students annually, from over 20 disciplines.

It provides mainly non-Aboriginal students the opportunity to gain insight into the history, diversity and culture of Indigenous Australians. The ICH team works in partnership with Aboriginal organisations and community members, to ensure that students see the essential need for cultural safety and security when working as health professionals, and understand the impact of past policies and events on current and future generations of Indigenous Australians

IHC is innovative in design and underpinned by intercultural pedagogy, a specialised area of education. A typical student comment reveals the capacity of the unit to raise students' understanding of the

impact of colonisation and intergenerational trauma on health and well being:

"This is a very controversial unit, but I think it's essential in helping to beat the inequalities in the Australian health care system. This unit made me notice a change in my attitudes and has really motivated me to work with Indigenous people. I liked that we heard from different people each week and think my tutor was absolutely amazing! She was so passionate and was really just able to come down to our level and see where we were coming from and help us to understand her side of things."

The reputation of ICH has also resulted in a national Health Workforce Australia consultancy to create an Indigenous health curriculum framework, which is due for completion this year.

Ms Louise Austen, Professor Marion Kickett, and Associate Professor Julie Hoffman travelled to Canberra to receive the award at Parliament House on 9 December.

All three highlighted that the success of ICH was the result of a large team including: the 40 plus Aboriginal and non-Aboriginal tutors who taught ICH, community members who shared their stories and contributed to the unit's design, and other Curtin staff who supported the unit.

The scale of delivery of a unit like ICH is unique to Curtin and aligns with the University's Reconciliation Action Plan.

For more information contact E: <H.Flavell@curtin.edu.au>.



Louise Austen, Marion Kickett & Julie Hoffman receive the award. Photo: Sue Jones.

LIME NETWORK PROFILE

MIRIAM CAVANAGH
THE UNIVERSITY OF NOTRE DAME, DARLINGHURST

Where are your family from?

My dad is a Wonnarua Aboriginal man from the NSW area. My mother is of both Aboriginal and Torres Strait Islander families. Her family on her father's side is from Lockhart River & Yarrabah areas. Her family on her mother's side is from the Western Islands in the Torres Straits called YAM Island (IAMA or in Kulkalgau Ya).

What is your current role and what does it involve?

My roles are university lecturer and Cultural Mentor in Aboriginal and Torres Strait Islander Health to medical and nursing students. Students are given a Cultural Workshop to develop better understanding before going on any clinical placements within Australia.

At times my role requires delivery of lectures in various schools, to students and staff, in the areas of managing diversities and understanding cultural differences. Comparison and characteristics of Aboriginal or Torres Strait Islander and non-Aboriginal values is thought provoking and sometimes confronting for staff & students.

How did you become interested in Indigenous health?

Being born into these two different cultures, which I live and work within every day. My Aboriginal and Torres Strait Islander Peoples have unique belief systems and are spiritually connected to the land, sea, sky and waterways.

The different cultures of Indigenous knowledge are a fascinating area to focus

on. There are also other very important and practical reasons - looking at challenges of community relevance, infrastructure and capacity are important, as we progress toward state of the art Indigenous health assessment within Australia.

Are you working on any exciting or inspiring projects that you'd like to share?

I just finished a project called 'The Strengthening Nursing Culture Project' focused on nursing student placements within Aboriginal Medical Services within NSW. It included presentations to all 1st year tutors (in PBLs) and Professional Development in Cultural Training workshops.

What is your history with the LIME Project?

I have been a LIME Network Reference Group member since 2006 and am still with the Reference Group these days. I've seen how the great dynamics, a lot of personal and team dedication from all over Australia and New Zealand, and partnerships within LIME can work in harmony and achieve good outcomes. Partnerships between colleagues in Australia and New Zealand can now be seen in the teaching and learning of Indigenous health within medical education today.

How do you think LIME progresses medical education?

Indigenous knowledge is important for developing relevant ways to think or do things in this area in the future. This can



mostly be seen within our local communities where the bearers of such knowledge live.

LIME is a great global network of knowledge from Indigenous and non-Indigenous peoples, based on experiences. It is like having a knowledge bank for all resources that can be accessed freely, which has emerged over many years. The members from both Australia and New Zealand include academic institutions, NGOs and individuals engaged in advocacy for Indigenous knowledge sharing.

It supports universities around Australia and New Zealand to understand cultural safety, to be accountable and to work in partnership.

Do you have any advice for Indigenous people thinking about a career in medicine?

I was taught that you have to look at the key difference between Western and Aboriginal or Torres Strait Islander healing methods - the balance of practical and spiritual healing. Generally, Western healing focuses on the physical, while Aboriginal or Torres Strait Islander healing explores the spiritual along with the physical, using ritual and ceremony to heal a person's entire being. The Aboriginal and Torres Strait Islander method is more than just a quick fix; it is a journey and a process that is just as spiritually based as it is physically based.

GRADUATES AND CLINICIANS

SLICE OF LIME SEMINAR

Finding Common Ground -
Avoiding the Terminology Trap
27 April, 4pm-7pm, Sydney, NSW

This event is a Poche Indigenous Health Network *Key Thinkers Forum* and a National Senior Teaching Fellowship activity, supported by the Office of Learning and Teaching.

The forum will focus on identifying and applying critical elements of cultural competency/humility/safety for effective cross-cultural work.

It will bring together key thinkers in this area to search for common ground, and will seek to clarify our understanding of which elements, across the array of health care models, are critical to success, along with identifying any less-obvious barriers to effectiveness.

The three hour forum will be held at the University of Sydney and will also be streamed online and recorded for later viewing as part of the [Slice of LIME](#) professional development seminars.

The forum will be chaired by Dr Tom Calma, and features Dr Melanie Tervalon (USA); Dr Rhys Jones (Aotearoa/New Zealand); Professor Juanita Sherwood (Australia); Professor Dennis McDermott (Australia); and Dr Barry Lavalley (Canada) who will also join us in Townsville as a keynote speaker for LIME Connection VI in August.

For more information please see the Slice of LIME web page at W: <limenetwork.net.au/content/slice-lime-seminars>.

SHEPPARTON RURAL HEALTH ACADEMIC CENTRE COMMUNITY GRADUATIONS

Peter Ferguson

In November 2014, Shepparton's Rural Health Academic Centre (RHAC) in country Victoria held its first community graduation ceremony. Three mature-aged Aboriginal and Torres Strait Islander students, Karyn Ferguson, Raelene Nixon and Tui Crumpen, graduated from a Masters of Health Social Science,



Marcia Langton, Jane Fremantle, Karyn Ferguson, Raelene Nixon, Tui Crumpen, Peter Ferguson, Lisa Bourke, and Bill Adam at the Graduation.
Photo: Di Doyle.

delivered by the School of Population and Global Health, at the University of Melbourne.

The development of an Aboriginal and Torres Strait Islander Masters cohort at the rural campus has included ground breaking alternative entry pathways and the use of video conferencing technology for Melbourne-based classes.

These mature-aged students have jobs, families and mortgages, and volunteer in local Aboriginal community controlled organisations. The option to attend RHAC for classes, rather than travel to Melbourne, meant that higher education was now possible. An added advantage for the local Aboriginal community is that over four years the graduates have brought their new skills to bear within local organisations.

The local Aboriginal and Torres Strait Islander students did well throughout the course, and received either 1st or 2nd class

honours for their 15,000-word minor thesis research project.

Shepparton now has three extra locally grown Aboriginal and Torres Strait Islander academics, who are engaged in local research projects. This vertical integration throughout the research life cycle has previously been missing in the area. The inclusion of an Aboriginal and Torres Strait Islander lens built into the research process is an exciting indicator of change on Yorta Yorta country.

Future work at RHAC includes the development of a Graduate Certificate in Aboriginal Health, and potential for an Advanced Diploma in Aboriginal Health taught by VACCHO, in Shepparton. At a RHAC planning day, staff set an ambitious aim of developing 20 allied health graduates in 20 years.

For more information, please contact Peter Ferguson via [E: <peterf@unimelb.edu.au>](mailto:peterf@unimelb.edu.au).

HEALTH PROFESSIONALS AND STUDENTS CLINICAL SKILLS WORKSHOP

Pascale Dettwiller

In December 2014, Flinders NT Katherine hosted a two-day interprofessional clinical skills workshop for the Aboriginal and Torres Strait Islanders Health Practitioners from Katherine West Health Board.

The workshop was held as part of a five-day professional development course organised by WhoSed Consulting Manager, Leanne McGill. James Cook University second year medical students, on a four-week rural and regional placement in

Katherine, were also invited to join two days of the course, to experience interprofessional education training at the new Flinders clinical facility.

Activities included demonstrations on cardiac arrest, its management and CPR practice using the mannequins available in the new clinical facility; performing a doctor-patient consultation in the simulation room; students and health professionals joint debriefs on the simulated consultation; presentation and demonstrations on infection control; and practicing cannulation and venepuncture skills on simulation arms.



Student and Health Professional participants at the workshop. Photo: Pascale Dettwiller.

For more information about the professional development course, or the Flinders NT Katherine site, please contact E: <pascale.dettwiller@flinders.edu.au>.

FLINDERS GRADUATION FOR TERRITORY'S FIRST HOME-GROWN DOCTORS

Lila Loveard

The first doctors to be educated entirely in the Northern Territory graduated at a Flinders University ceremony in Darwin in December 2014.

Eight completing medical students, members of the first intake into the full-four year Flinders University Northern Territory Medical Program (NTMP) in 2011, received their degrees from Chancellor Stephen Gerlach at the Darwin Convention Centre.

Graduating student Dr Kane Vellar was honoured to be the first Indigenous graduate from the NTMP. Dr Vellar commenced his intern placement at the Royal Darwin Hospital in January 2015.

Graduates of the course are committed to spend two years working in the Territory, and

it is anticipated that many will pursue their careers there. Several other students from the initial intake who are studying part-time or who have paused in their studies will graduate in the next two years.

While based initially in Darwin, NTMP students can spend much of their third and fourth years of study in community settings across the Territory. The Northern Territory Remote Clinical School operates in Nhulunbuy, Alice Springs, Katherine and Tennant Creek to provide training in rural and remote health care that is especially attuned to the needs of Aboriginal Australians.

Preference for entry to the NTMP is given to Indigenous students and to Territory residents, with numbers of applications and competition for places increasing each year.

An entry path for school-leavers has also been set up as a double

degree with CDU, and includes quota places for Indigenous students.

For more information please contact Lila Lovard via email on E: <lila.loveard@flinders.edu.au>.



Dr Kane Vellar graduating in December 2014. Photo: Toni Wythes.

FEATURE: LIME CONNECTION VI

11-13 August 2015 Townsville, Australia

Knowledge Systems, Social Justice and Racism in Health Professional Education

LIME Connection VI will build on evidence based presentations from previous LIME Connection conferences and capture new initiatives, share successful methods and workshop visions for the future.

The theme encourages strengths based presentations relating to Indigenous health teaching and learning, curriculum development and research in health professional education, as well as models for community engagement and the recruitment and graduation of Indigenous students.

LIME Connection provides an opportunity for:

- Collaboration, information sharing and networking amongst peers;
- Professional development and capacity-building;
- Linking with community, colleges and those from all health disciplines;
- Discussion and critique of current practices; and
- Exploration of emerging tools and techniques to drive improvement in outcomes for Indigenous health.

LIME Connection VI is hosted by James Cook University and is held under the auspices of Medical Deans Australia and New Zealand, the Australian Indigenous Doctors' Association (AIDA) and Te Ohu Rata O Aotearoa (Te ORA) - Māori Medical Practitioners Association.

Visit the website to register, apply for a LIMELight Award, or apply for a Student & Community Bursary.

W: <limenetwork.net.au>.

LIME CONNECTION KEYNOTE SPEAKERS

Keynote speakers include experts in Indigenous health and medical education from Australia, Aotearoa/New Zealand, Hawai'i and Canada

- **Dr Chelsea Bond, Queensland University of Technology, Australia.** Chelsea is an Aboriginal (Munanjahli) and South Sea Islander Australian and a Senior Lecturer. She has worked as an Aboriginal Health Worker and researcher in Indigenous communities across south-east Queensland for over 15 years.
- **Ms Tania Huria, University of Otago, Christchurch, Aotearoa/ New Zealand.** Tania is a Senior Lecturer at the University of Otago, Christchurch, Māori Indigenous Health Institute. Tania contributes to the Advanced Learning in Medicine undergraduate teaching and is one of the developers of an Indigenous Health Framework that is used within the Advanced Learning in Medicine years at the University of Otago.
- **Professor Keawe'aimoku Kaholokula, University of Hawai'i, USA.** Keawe is a Professor and Chair of Native Hawaiian Health in the John A. Burns School of Medicine at the University of Hawai'i at Mānoa. He received his PhD in clinical psychology from the University of Hawai'i at Mānoa in 2003 and completed a clinical health psychology post-doctoral fellowship in 2004.
- **Dr Barry Lavalley, University of Manitoba, Canada.** Barry is a member of Manitoba First Nation and Métis communities, and is a University of Manitoba trained family physician specialising in Indigenous health and northern practice.



LIMELIGHT AWARDS

The LIMELight Awards are given in recognition of significant and outstanding work that staff, students and medical schools undertake in teaching and learning of Indigenous health in medical education, as well as Indigenous student recruitment and support to graduation.

The Awards will be announced at the LIME Connection VI Dinner on 12 August in Townsville.

Applications and nominations are being sought for the following award categories:

- Leading innovation in Indigenous health curriculum implementation
- Leading innovation in Indigenous student recruitment, support and graduation
- Leading innovation in community engagement
- LIMELight Leadership Award for outstanding leadership by an individual
- Student Award

LIMELight applications/nominations close 1 May.

Apply via the [LIME Network website](#) now!

INDIGENOUS MEDICAL STUDENT AND COMMUNITY MEMBER BURSARIES

To support participation of students and community members in LIME Connection VI, bursary places will be offered to Aboriginal, Torres Strait Islander and Māori medical students and community members working with medical schools, with a strong interest in Indigenous health.

Each bursary will cover the costs of the pre-conference educational visit, registration, travel, accommodation and meals.

Bursary applications close 12 April.

See page 18 for details, or apply via the [LIME Network website](#).

**REGISTER NOW FOR
LIME CONNECTION VI!**

W: <limenetwork.net.au>.

LIME CONNECTION VI SPONSORS



PROJECTS OF INTEREST

TASMANIAN MEDICAL RESEARCH AND LITERATURE AWARD

LIME Reference Group member Maureen Davey, from University of Tasmania, recently received the Erica Bell Foundation Award for Excellence in Tasmanian medical research and literature, for the publication *Tasmanian Aborigines step-up to health: evaluation of a cardiopulmonary rehabilitation and secondary prevention program*.

The research evaluated a very successful Tasmanian Aboriginal Centre program that increased participation in rehabilitation by Aborigines with, or at high risk of, established disease, and led to positive changes in health behaviours, functional exercise capacity and health-related quality of life.

The Erica Bell Foundation was established earlier this year by Erica's husband, Dr Bastian Seidel, to foster creative and academic thinking and writing in Tasmania. Dr Erica Bell was the Associate Professor of Health and Policy and Services Research at the University of Tasmania and a member of the Faculty of Health's Wicking Dementia Research and Education Centre until her sudden death in July last year.

Maureen said "I was thrilled to receive the award, as Erica was one of the many splendid mentors who supported my transition from health practitioner to writer.

"As a non-Aboriginal Tasmanian and a doctor, I had been immersed in the world of Tasmanian Aboriginal health and politics for two decades

before coming to work for the UTAS School of Medicine. I had a lot of practical experience in providing and evaluating health services, and had written many internal reports for the Tasmanian Aboriginal Centre, but had not published any research in academic journals.

"Erica agreed to be a mentor in this transition, and we had many stimulating conversations about the place of research and publication in influencing policy and practice regarding Aboriginal rights, Aboriginal health, climate, family violence, homelessness and addiction. I came to the table uncertain that the benefits of research outweighed its costs and needing to work out how I could write about my work in Aboriginal health in public ways.

"Erica had a long history of figuring out how her research skills could add value to the work of community organisations, and had built strong partnerships with the Salvation Army and others. She had made some links with the Tasmanian Aboriginal Centre and had thought very creatively about the possibilities of what she had to offer. The ideas we generated as possible research projects were very exciting, and perhaps some of them will come to fruition, now I no longer need the training wheels on my research bicycle."

Congratulations to Maureen and the Tasmanian Aboriginal Centre on this award.

For more information please see **W:** <biomedcentral.com/1472-6963/14/349> and visit the Erica Bell Foundation website at **W:** <ericabellfoundation.org>.

QUALITY IMPROVEMENT FRAMEWORK AND TOOLKIT FOR HOSPITALS

St Vincent's Hospital Melbourne hosts the Aboriginal and Torres Strait Islander Quality Improvement Framework and Toolkit for Hospital Staff (AQIFTHS). It is an online quality improvement resource, created as a result of the national research project Improving the Culture of Hospitals, completed in 2010, and funded by the Cooperative Research Centre for Aboriginal Health (now the Lowitja Institute).

Since that time the toolkit has been referenced in the EQUIP National Standards (Standard 12) and St Vincent's has undertaken additional project work implementing the AQIFTHS in two Victorian hospitals as part of the Improving Pathways to Hospital Care.

Further resources were collated as part of a Victorian Travelling Fellowship to Canada. Both these developments have created additional learnings and resources.

Through the ongoing support of the Lowitja Institute, this resource has now been redrafted, taking into account the new learnings, and the additional resources incorporated into the updated online resource. Work continues on the implementation of the AQIFTHS, and new learnings will continue to be added to this resource over time.

For more information please see **W:** <svhm.org.au>.

AMSANT CELEBRATES 20TH ANNIVERSARY

Leanne Pena

The Aboriginal Medical Services Alliance NT (AMSANT) proudly celebrated its 20th anniversary and 40 years of Aboriginal community controlled health in the NT with a hugely successful conference in Alice Springs in November 2014.

The 'Our Health, Our Way' conference attended by over 200 participants, showcased a number of projects, initiatives and programs working successfully in the Aboriginal health sector for Aboriginal people and their communities in the Northern Territory.

The conference brought together a blend of Aboriginal health leaders, health service CEOs, clinic managers, clinicians and staff as well as researchers, policy makers and government staff from the NT and nation-wide.

The conference gave an important emphasis on the establishment of Aboriginal community control health across the NT and how AMSANT became established as the peak body.

Speakers presented on the long and colourful history: the plight, the struggles and the numerous gatherings of leaders that formed the path to building a much needed presence of Aboriginal health as a priority for our mob. Donna Ah Chee, CEO of CAAC expressed "Congress is one of the best examples in the world of a comprehensive

primary health care service. And we would not have been able to get to where we are today, without the support and advocacy of AMSANT".

The two day conference saw participants being involved in loads of sessions consisting of innovative community driven programs, projects and initiatives around workforce, eHealth, Continuous Quality Improvement, leadership and public health programs.

"It started with Congress and now we've got quite significant players on the landscape. There have been major achievements by Congress, Danila Dilba in Darwin, Wurli Wurlinjang in Katherine, Anyinginyi [Tennant Creek]... All of us have played a role, not just in getting the necessary financial support, but in the policy debate on a national level." Marion Scrymgour, Chair of AMSANT and CEO of Wurli Wurlinjang explained.

Celebrations to acknowledge our historic milestone saw singer Warren H Williams, comedian Sean Choolburra and actor Luke Carroll joined the conference dinner to pay tribute to the sector's work and provide an entertaining evening to celebrate our hard earned achievements with the prospect of many more achievements to look forward to.

The 40 years of Aboriginal community controlled health in the NT has seen a significant and successful growth of innovation and leadership that has demonstrated system wide improvements in Aboriginal

primary health care.

John Paterson, CEO of AMSANT stated "In the last 20 years it has been a big learning curve for AMSANT and our members. We have now demonstrated the capability and our capacity to deliver a very, very important community service and programs to all our Aboriginal people, here in the Northern Territory. And we are hoping that the next forty years is on equal par."

To see videos and other publications from the AMSANT Our Health Our Way conference please visit:

W: <amsant.org.au>.



John Paterson speaking at LIME Connection V in 2013. Photo: Fiona Morrison.

STUDENT INFORMATION

PART OF A GLOBAL VILLAGE

Australian Indigenous Doctors' Association

Third-year University of Newcastle medical student and Wiradjuri woman Sarah-Rebekah Clark, recently had the experience of a lifetime when she travelled to Nepal through the Medical Insurance Group Australia's (MIGA) Elective Grant.

The eight-week trip was designed to expose medical students to health equity issues locally, nationally or internationally.

'To gain an insight into the different sectors of the Nepali healthcare system, I divided my time into a few different placements,' Sarah-Rebekah said.

'I spent four weeks in obstetrics and gynaecology at the Western Regional 'Gandaki' Hospital (Public), three weeks in Paediatrics at Manipal Teaching Hospital (Private), and one week at the Kalika Sub Health Post,



Sarah-Rebekah with local children who were playing along the trekking path to the village experience. Photo: Courtney Taylor.

which is like our GP clinics but with no GP, only one midwife and a couple of health assistants.

It was interesting to note cultural and health equity similarities between the Nepalese people and our Indigenous mob. My time there really helped me develop an appreciation for being part of a global village and community.'

Sarah-Rebekah is also a Student Representative of the Australian Indigenous Doctors' Association (AIDA) and encourages other Indigenous medical students to

take advantage of AIDA's free student membership.

'AIDA helps me feel connected to an extended family of other Indigenous students and doctors. I am so grateful and proud to be part of an organisation like AIDA and really appreciate the support they provide, particularly during their annual conference.'

Sarah-Rebekah commenced her medical studies a year out of high school and was drawn to medicine because of her passion to help close the gap in the health inequities that Aboriginal and Torres Strait Islander people experience.

'I have a passion for working with children, so I can see myself working in that area in the future,' Sarah-Rebekah said.

For more information on the Australian Indigenous Doctors' Association (AIDA), please visit:
W: <aida.org.au>.



Sarah-Rebekah performing a routine check up on a patient at the Outreach Clinic at Kalika Village, Pokhara Nepal. Photo: Courtney Taylor.

BUILDING GREATER UNDERSTANDING FOR HEALTH STUDENTS

Danielle Dries

The National Rural Health Students' Network (NRHSN) creates opportunities for students to pursue meaningful careers in rural health. NRHSN encourages students to get involved in communities, build relationships with people and gain positive rural experiences.

Indigenous health is one area where the NRHSN are seeking to engage more members this year. They would like to build on achievements from 2014, when 145 students from 28 university Rural Health Clubs attended 15 Indigenous community events across Australia.

These activities provide two-way learning experiences where students are immersed within the communities and are able to provide careers advice, promote health, and most importantly have a whole lot of fun. Taking the time to observe, listen and understand are skills that will make future doctors, nurses and allied health professionals more effective when working in the bush.



Speech pathology students with a local high school student during a visit to Wilcannia NSW. Photos: Tony Wells, Rural Health Workforce Australia.

The NRHSN's Indigenous community engagement activities also help university students see that there are plenty of happy and healthy Aboriginal people out there and that culture is still very much alive and beneficial for the well being of Aboriginal and Torres Strait Islander peoples.

The NRHSN advocates for reducing disparities in health outcomes for Aboriginal and Torres Strait Islander peoples and improved health in rural and remote Australia.

They contribute to this by empowering young people to lead healthy lifestyles and to think about their future, and actively promote this when attending Indigenous community activities.

Last year, for example, Rural Health Club members from James Cook University participated in the Deadly Dukes program in Townsville. Club members visited a local Indigenous school on a regular basis to provide one-hour sessions on rural health careers and healthy lifestyles.

The NRHSN also encourages and supports members to gain a broader understanding of Indigenous health. This year the Rural Health Club at the Australian National University in Canberra is running a two-day event in March dedicated to Close the Gap, in which over 100 Rural Health Club members will attend.

One of the workshops they will be holding for students will focus on a case study of an Aboriginal person and how their health may have been impacted throughout history



Danielle Dries

from colonisation to the present. There will also be male and female "yarning circles" facilitated by Indigenous doctors to allow students to reflect on what they have learnt, but also allow a safe space to ask questions.

Looking ahead, the NRHSN are keen to hear from Aboriginal and Torres Strait Islander peoples and organisations who would like to collaborate with the student network on activities and events that will benefit all involved.

If you have a suggestion, please feel free to email the team via **E: <info@nrhsn.org.au>**.

Danielle Dries is the 2015 Indigenous Health Officer with the National Rural Health Students' Network, which has 9,000 members who belong to 28 university Rural Health Clubs.

She is a proud Kurna woman from South Australia. Before studying medicine, she graduated in physiotherapy. She is the winner of the 2014 Allied Health Inspiration Award from Indigenous Allied Health Australia.

LIME CONNECTION INDIGENOUS MEDICAL STUDENT AND COMMUNITY BURSARIES ARE NOW OPEN!

To support participation of student and community members in LIME Connection VI, bursary places will be offered to Aboriginal, Torres Strait Islander and Māori medical students, and community members working with medical schools, who have a strong interest in Indigenous health.

Each bursary will cover the costs of the pre-conference educational visit to Palm Island, registration, travel, accommodation and meals.

Bursary recipients will have the opportunity to network, collaborate and participate in all aspects of the conference alongside their peers.

This includes an event for bursary recipients to meet LIME Reference Group members, who will be available for support and guidance throughout the event.

Indigenous medical students are also encouraged to submit an abstract to present at LIME Connection VI. Students who have submitted a successful abstract will be given priority for bursary funding.



Student & Community Bursary Recipients, Darwin, 2013. Photo: Fiona Morrison.

You are eligible to apply for a bursary if you are:

- of Aboriginal and/or Torres Strait Islander or Māori descent;
- a current student enrolled in medical studies at an Australian or New Zealand University (students only);
- a student member or agree to register as a member of the Australian Indigenous Doctors' Association (AIDA) or Te ORA (students only);
- actively involved in working with a Medical School (community members only).

Bursaries have been generously funded by these Medical Schools:

Australian National University, Bond University, Deakin University, Flinders University, Griffith University, James Cook University, Monash University, University of Adelaide, University of Auckland, University of Melbourne, University of Newcastle, University of New South Wales, University of Notre Dame (Fremantle & Sydney), University of Otago, University of Sydney, University of Tasmania, University of Western Australia, University of Western Sydney, University of Wollongong.

"The whole event was very inspiring and being around Indigenous people throughout the world was a major highlight. The Connection has made me more passionate to undertake further studies in the field of Indigenous health" - Student bursary recipient 2013.

For further detail on eligibility criteria and to download application forms, please visit the LIME Network website **W:** <limenetwork.net.au>, or contact us **E:** <lime-network@unimelb.edu.au> **T:** +61 3 9035 8294.

APPLICATIONS CLOSE: 12 APRIL

SCHOLARSHIPS, GRANTS AND PRIZES

FLINDERS UNIVERSITY INDIGENOUS ENTRY STREAM: APPLY NOW

A key priority of the Northern Territory and Commonwealth governments is to increase the participation of Indigenous people in medicine. Flinders University recognises, respects and supports this key priority through its commitment to equity and inclusiveness in its medical program.

The second key development is the addition of the Indigenous Entry Stream, which applies for entry to the Flinders medical program in both Adelaide and the Northern Territory.

Via the Indigenous Entry Stream, Indigenous graduates may apply directly to Flinders University rather than through GEMSAS (Graduate Entry Medical School Admissions System), and applications to the Indigenous Entry Stream will not require GAMSAT results.

Applicants are strongly encouraged to contact the Indigenous support units in the Northern Territory or South Australia to discuss their application.

Applications close: 30 March

For more information and to discuss your application, please contact:

Frank Campbell (NT)

E: <indigenoussupportnt@flinders.edu.au>;

Bevin Wilson (SA)

E: <indigenoussupportsa@flinders.edu.au>; or call

T: +61 8 8946 7494.

RACP INDIGENOUS PRIZE

The Royal Australasian College of Physicians (RACP) is offering the RACP President's Indigenous Congress Prize to medical students, junior medical officers and physician trainees. The prize will support attendance at the RACP Congress in Cairns, 24-27 May.

Applications close: 31 March

For more information, visit
W: <racp.edu.au>.

MIGA ELECTIVE GRANTS PROGRAM

As part of an initiative introduced in 2013, each year MIGA set aside one of the six Elective Grants to award to an Indigenous medical student applicant interested in pursuing an elective placement in a developing community

Applications close: May 2015

For more details please visit
W: <miga.com.au/content.aspx?p=57>.

GRADUATE WOMEN VICTORIA SCHOLARSHIPS

Graduate Women Victoria offers an annual program of scholarships and bursaries for women students enrolled in Universities in Victoria.

Applications close: 31 March

For more information, please see
W: <gradwomenvic.org.au>.

LIME ON TWITTER

The LIME Network is now on Twitter. Join us by following [@LIME_Network](https://twitter.com/LIME_Network) for the latest news and updates on current projects.

We will be tweeting about the upcoming LIME Connection conference with [#LIMEvi](https://twitter.com/LIMEvi) and would love you to join the conversation!

LIME ON YOUTUBE

The LIME Network YouTube channel includes videos relevant to Indigenous medical education. These include Indigenous doctors and students outlining their various pathways into medicine, and recordings of the Slice of LIME professional development forums.

Visit W: <youtube.com/LIMENetworkProgram> to view the videos!

LIME ON FACEBOOK

The LIME Network is on facebook. Join us now to see the latest updates on LIME projects, including the upcoming LIME Connection conference, student related news, and scholarship opportunities.

Follow us here W: <facebook.com/LIMENetwork>.

PUBLICATIONS AND RESOURCES

For more publications visit the [LIME Network Resources Hub](#).

[Introduction to Aboriginal Health and Health Care in Canada: Bridging Health and Healing](#)
Douglas V 2014, *Springer Publishing Company*.

Written by one of the leading researchers in First Nations and Inuit Health, this is the only entry-level text to address the current state of knowledge in the field of Aboriginal health.

The book places Aboriginal health in Canada within its historical and philosophical context as it addresses social and clinical approaches to major health issues facing this population. It discusses the distinctive features of Aboriginal health and healing as opposed to traditional Western medicine and why it should be studied as a discrete field.

W: <[springerpub.com](#)>

[Recommendations for a National CQI Framework for Aboriginal and Torres Strait Islander Health](#)
2014, *The Lowitja Institute*.

In 2014, on behalf of the Commonwealth Department of Health, the Lowitja Institute conducted consultations on a proposed national continuous quality improvement framework in Aboriginal and Torres Strait Islander primary health care. A report that provides advice to the Department about the relevance and potential shape of such a network is available from the Department's website

W: <[health.gov.au](#)>

[Improving Access to Primary Mental Healthcare for Indigenous Australians](#)
Reifels L et al. 2014, *Australian and New Zealand Journal of Psychiatry*.

This paper examines the uptake, population reach and outcomes of primary mental healthcare services provided to Indigenous Australians via the Access to Allied Psychological Services (ATAPS) program between 2003 and 2013, with particular reference to enhanced Indigenous ATAPS services introduced from 2010.

W: <[sagepub.com](#)>

[Victorian Aboriginal Child Mortality Study: Patterns, Trends and Disparities in Mortality between Aboriginal and Non-Aboriginal Infants and Children, 1999–2008](#)
Freemantle J et al. 2014, *The Lowitja Institute*.

The report uses linked population birth information collected by the Consultative Council on Obstetric & Paediatric Mortality Morbidity (Victorian Perinatal Data Collection) with the birth registration information collected by the Registrar of Births, Deaths and Marriages, 1988–2008 inclusive, to construct mortality rates for Victorian-born Aboriginal infants and children. It illustrates the patterns and trends in deaths for Aboriginal compared with non-Aboriginal infants and children born 1999–2008 inclusive.

W: <[lowitja.org.au](#)>

[Winnunga Nimmityjah Aboriginal Health Service 1988-2014: Breaking Barriers in Aboriginal Research and Services](#)
Tongs J & Poroch N 2014, *Australian Aboriginal Studies* v2.

This paper describes the growth of Winnunga Nimmityjah Aboriginal Health Service located in the Australian Capital Territory, from modest beginnings at the Aboriginal Tent Embassy in 1988 to delivery of a comprehensive holistic model of health care to the Aboriginal and Torres Strait Islander community of Canberra and the surrounding region.

W: <[aiatsis.gov.au](#)>

[Shifting Gears in Career: Identifying Drivers of Career Development for Aboriginal and Torres Strait Islander Workers in the Health Sector](#)
Bretherton T 2014, *The Lowitja Institute*.

A new report that explores how the Australian health sector might improve career development opportunities for Aboriginal and Torres Strait Islander people, was published by the Lowitja Institute in December 2014.

The report considers the current evidence surrounding career development, along with Aboriginal and Torres Strait Islander worker experiences, and offers a usable conceptual framework for change.

W: <[lowitja.org.au](#)>

NEWS

Read more via the LIME Network website at **W:** <limenetwork.net.au/views/events/announcements>.

New Degree Launches to Improve Indigenous Health - Millie So.

Aboriginal and Torres Strait Islander Social Justice Commissioner Mick Gooda has launched UTS's new Bachelor of Primary Health Care, a course designed for Indigenous students to help make a difference in the health and well being of Indigenous Australians.

Mr Gooda spoke about successes and challenges across Australia in improving the health and wellbeing of Indigenous Australians. He set the scene at a national level for the new degree, discussing progress towards removing health disparity between Indigenous and non-Indigenous people and the importance of valuing cultural competence and cultural security.

W: <newsroom.uts.edu.au/news/2014>

HealthInfoNet Healing Portal

Edith Cowan University's Australian Indigenous Health/*nfo*Net, in partnership with The Healing Foundation, is developing a healing portal on the Health/*nfo*Net website.

The healing portal will engage users from a broad range of areas including health, justice, child protection and family violence and will include a free on-line yarning place to encourage a rich exchange of knowledge and information, and will be established in early to mid-2015.

E: <t.hoyne@ecu.edu.au>

Continued investment is the only way to Close the Gap

The Close the Gap Campaign is urging the Federal Government to focus on greater access to primary health care services to detect, treat and manage chronic health conditions in Aboriginal and Torres Strait Islander communities.

W: <humanrights.gov.au/publications/close-gap-progress-and-priorities-report-2015>

Improvements Seen Across Many Indigenous Primary Healthcare Indicators - AIHW.

Improvements have been seen across a range of national key performance indicators (nKPIs) for Indigenous primary healthcare services, according to two reports released by the Australian Institute of Health and Welfare (AIHW). The 19 indicators in this report focus on chronic disease prevention and management and on maternal and child health.

These are the two key focus areas to achieve the objective of closing the gap in life expectancy between Indigenous and non-Indigenous Australians.

W: <aihw.gov.au/media-release-archive-2014>

Medical Deans Newsletter

You can read the latest Medical Deans Australia and New Zealand newsletter to find out about staff updates, relevant news and current projects.

W: <medicaldeans.org.au>

Indigenous Trauma Course: University of Wollongong Teams up with Harvard - Hannah Paine.

A visiting trauma expert's alarm at drug and domestic abuse in Indigenous areas has led to the creation of a training program to be offered at the University of Wollongong in conjunction with Harvard Medical School.

The program recognises the role trauma plays among Indigenous Australians.

It was developed as part of an official partnership with Massachusetts General Hospital, a teaching hospital of Harvard.

Aboriginal health specialist Debra Hocking, who will run and co-ordinate the program, said it will aim to give participants better ability to treat individuals and whole communities through recognising the hurt caused to Indigenous Australians.

W: <brisbanetimes.com.au/nsw>

Indigenous Medicine: A Fusion of Ritual and Remedy - Graham Jones.

Indigenous Australian practices, honed over thousands of years, weave science with storytelling.

In this Indigenous science series, we look at different aspects of First Australians' traditional life and uncover the knowledge behind them.

W: <theconversation.com/au>

CONFERENCES AND EVENTS

LIME Connection VI Townsville, QLD, 11-13 August

LIME Connection VI: Knowledge Systems, Social Justice and Racism in Health Professional Education, will build on presentations from previous LIME Connections, capture new initiatives, and share successful methods.

W: <limenetwork.net.au>

2015 IGPRN Workshop Brisbane, QLD, 13-15 March

The Indigenous General Practice Registrar's Network Workshop includes mock RACGP OSCEs, clinical topics, Advanced Life Support course, well being activities, fellowship planning and connection with your peers.

E: <igprmenquiries@agpra.org.au>

National Close the Gap Day Australia, 19 March

Join more than 200,000 Australians of all ages and backgrounds who are supporting Aboriginal and Torres Strait Islander health equality.

W: <oxfam.org.au>

Australasian Student Selection for the Health Professions Conference Melbourne, Vic, 8-10 April

Focuses on student selection and admissions into health professions courses in Australia, New Zealand and globally. Presentations by local and world leaders involved in student selection and health professions workforce planning as well as researchers and practitioners.

W: <sshpc.com.au>

Having the Hard Conversations Adelaide, SA, 21-22 April

Having the Hard Conversations: Good Practice in Working with Resistance to Indigenous Health and Cultural Safety, is presented by the Poche Centre for Indigenous Health and Well-Being, Adelaide and its collaborators in the 2014-15 National Senior Teaching Fellowship.

E: <di.autio@flinders.edu.au>

Creating Futures Conference Cairns, QLD, 11-14 May

Populations of interest are Indigenous peoples from Australia, New Zealand and beyond, the residents of neighbouring island nations, and people living with and recovering from mental and/or physical illness or disability in remote and tropical areas.

W: <cf15.conorg.com.au>

Aboriginal Maternal and Child Health Conference 2015 Perth, WA, 13-14 May

This is an opportunity for those working in partnership with Aboriginal families to share outcomes in clinical and primary health care in Closing the Gap in Aboriginal maternal and child health.

E: <amssu@health.wa.gov.au>

Aboriginal Health Conference Perth, WA 4-5 July

The theme Healthy families - healthy futures will be addressed through presentations, clinical updates, practical workshops, hands-on concurrent sessions

and case study learning opportunities that are professionally accredited and delivered by expert specialists.

E: <events@ruralhealthwest.com.au>

6th SNAICC National Conference Perth, WA, 15-17 September

An opportunity for Aboriginal and Torres Strait Islander organisations, policymakers, researchers, government and non-government organisations and industry representatives to gather and make renewed commitment to Aboriginal and Torres Strait Islander children.

W: <snaicc.org.au>

AIDA Conference 2015: Collaboration, Communication and Celenbration Adelaide, SA, 16-19 September

The 2015 AIDA conference will be held at the Stamford Grand Hotel Adelaide. More information to follow soon.

W: <aida.org.au>

2015 IAHA National Conference: Allied Health - Stepping into Action Cairns, QLD, 29 Nov-2 Dec

A conference for allied health graduates, students and the wider allied health workforce.

W: <iaha.com.au>

WA Clinical Supervisor Training

The WA Clinical Training Network is offering training for clinical supervisors in 2015 at no cost to participants, in Perth, Kalgoorlie and Broome.

W: <health.wa.gov.au>

SPONSOR LIME CONNECTION VI

SUPPORT INDIGENOUS MEDICAL EDUCATION AND PROMOTE YOUR ORGANISATION!



THE LIMENETWORK
Leaders in Indigenous Medical Education Network
www.limenetwork.net.au

LIMECONNECTIONVI

11-13 AUGUST 2015 / TOWNSVILLE, AUSTRALIA

Knowledge Systems, Social Justice and Racism in Health Professional Education

SPONSORSHIP OPPORTUNITIES TO SUPPORT INDIGENOUS HEALTH AND MEDICAL EDUCATION

The sixth biennial LIMECONNECTION will be held in Townsville from 11 - 13 August 2015. LIMECONNECTIONVI: Knowledge Systems, Social Justice and Racism in Health Professional Education will build on evidence based presentations from previous LIME CONNECTION conferences and capture new initiatives, share successful methods and workshop visions for the future. The conference theme encourages strengths based presentations relating to Indigenous health teaching and learning, curriculum development and research in health professional education, as well as models for community engagement and the recruitment and graduation of Indigenous students.

There are a range of ways to show support for LIMECONNECTIONVI, all of which provide your organisation with high visibility branding and promotion. Through your support you will demonstrate organisational commitment to Indigenous health, medical education and Indigenous student recruitment and graduation.

Your sponsorship will be recognised in flyers, promotions and publications accessed by:

- The 200+ participants of the Connection;
- Our member database, currently comprising approximately 1000 individuals and organisations;
- Visitors to our website, receiving over 4000 page views per month.

The LIME Network is a dynamic network dedicated to ensuring the quality and effectiveness of teaching and learning of Indigenous health in medical education, as well as best practice in the recruitment and graduation of Indigenous medical students.

SPONSORSHIP OPPORTUNITIES

Wedge of LIME Major Sponsor: Up to AU\$15,000 +GST

- Recognition during opening, closing and keynote sessions as a Wedge of LIME Major Sponsor
- Signage at the LIMElight Awards Dinner
- Opportunity to exhibit company information at the registration area
- Recognition, including name and logo, as a Wedge of LIME Major Sponsor in LIMECONNECTIONVI publications, promotional material and on the LIME website
- Two complimentary registrations, including social events
- Opportunity to provide brochures and products in conference bags
- Recognition as a Wedge of LIME Sponsor in the LIME Newsletter (circulation. c.1000)

Zest of LIME Sponsor: Up to AU\$10,000 +GST

- Opportunity to exhibit company information at the registration area
- Recognition, including name and logo, as a Zest of LIME Sponsor in LIMECONNECTIONVI publications, promotional material and on the LIME website
- One complimentary registration, including social events
- Opportunity to provide brochures and products in conference bags
- Recognition as a Zest of LIME Sponsor in the LIME Newsletter (circulation. c.1000)

Twist of LIME Sponsor: Up to AU\$5,000 +GST

- Opportunity to provide brochures in conference bags
- Recognition as an Twist of LIME sponsor in LIMECONNECTIONVI publications, promotional material and on the website
- Recognition as a Twist of LIME sponsor in the LIME Newsletter (circulation c.1000)

If you would like know more about LIMECONNECTIONVI sponsorship options, or if you have any questions, please contact us on +61 3 8344 2538 or visit our website: www.limenetwork.net.au

BACKGROUND

The Leaders in Indigenous Medical Education (LIME) Network Program is a dynamic network dedicated to ensuring the quality and effectiveness of teaching and learning of Indigenous health in medical education, as well as best practice in the recruitment and graduation of Indigenous medical students.

We do this through a bi-national presence that encourages and supports collaboration within and between medical schools in Australia and Aotearoa/New Zealand, and by building linkages with the community and other health science sectors.

The LIME Network is a program of Medical Deans Australia and New Zealand supported by funding from the Australian Government Department of Health.*

It was developed as a stand alone project in 2008 and stemmed from the Indigenous Health Project (2002-2008). Major outcomes of this Project included the Indigenous Health Curriculum Framework and the Critical Reflection Tool, which remain important resources.

The LIME Network Program's significant outcomes include:

- Facilitation of bi-annual **Reference Group** meetings to provide opportunities for those working in Indigenous health & medical schools to collaborate, share information, provide feedback & network;
- The biennial **LIME Connection** conference, providing a forum for knowledge transfer & dissemination, also including the **LIMELight Awards** to celebrate successes;
- The **Indigenous Student and Community Bursary Scheme**, providing the opportunity for student networking & peer support at LIME Connection;
- Publication of the tri-annual **LIME Network Newsletter** promoting best practice & sharing successes in the field;
- Maintaining the **LIME Network Website**, housing information on LIME Network projects, news & events;
- Building the evidence base of Indigenous health curriculum & student recruitment & support, through publishing **Good Practice Case Studies Booklets** & a Special Edition of the **ANZAHPE Focus on Health Professional Education Journal**;
- Developing & implementing **internal review tools**, supporting medical schools to reflect & evaluate performance;
- Supporting Indigenous people to explore pathways to studying medicine, through the **Indigenous Pathways into Medicine Online Resource & Video Profiles**;
- Strengthening capacity & sharing knowledge among network membership through **Slice of LIME Seminars**;
- Developing a **Peer Support Statement and Strategy** that operates across universities;
- Building linkages across health disciplines & with medical colleges through **networking and information sharing**;
- Supporting collaboration between medical schools & Indigenous Community Controlled Health Organisations through **Regional Meeting facilitation**;
- Hosting meetings with **medical school Deans**, to introduce the LIME Network & update existing medical & health science staff on program activities.

CONTACT DETAILS

If you would like more information regarding LIME Network activities, would like to become a member, or have something you would like to contribute to the next Newsletter, please contact us:

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