

NEWSLETTER

ISSUE NO. 6 / July 2011

LIME WELCOME

Welcome to the sixth edition of the Leaders in Indigenous Medical Education (LIME) Network newsletter. The newsletter is published three times per year (March, July and November) and includes the latest information about issues concerning Indigenous health and medical education. The newsletter is designed as a resource for Indigenous and non-Indigenous medical educators, students, medical practitioners, policy makers, nursing and allied health professionals and educators, 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. It aims to celebrate the many successes occurring in Indigenous health, while also contributing positively to areas

in which improvement is necessary. If you have an article, a story, a picture or information about a project or an event of interest, [we would love to hear from you](#).

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

THE LIME NETWORK PROJECT TEAM

The project team includes Mr Shaun Ewen, Ms Margo Collins, Ms Caitlin Ryan, Ms Erin Nicholls, Ms Alice Wilkin and Ms Odette Mazel (currently on maternity leave). If you have any questions, queries or good ideas, please contact us on **E:** lime-network@unimelb.edu.au or **T:** +61 3 8344 9160.



Participants at the LIME Regional Meeting held in Darwin, March 2011

YOU CAN FIND OUT MORE ABOUT US ON OUR WEBSITE:

www.limenetwork.net.au

INSIDE:

NETWORK UPDATE	02
TEACHING AND LEARNING	04
GRADUATES AND CLINICIANS INFORMATION	06
FEATURE: LIME CONNECTION IV	09
STUDENT INFORMATION	10
PROJECTS OF INTEREST	12
LIMENETWORK MEMBER PROFILE: PROF. JAMES ANGUS	13
NEWS	14
CONFERENCES AND EVENTS	16
PUBLICATIONS AND RESOURCES	19
BACKGROUND	20
LOGO AND ARTWORK <i>by Michelle Smith and Kevin Murray</i>	
NEWSLETTER DESIGN <i>by Inprint Design</i>	

LIME NETWORK UPDATE

LIME CONNECTION COMMITTEE

The fourth biennial LIME Connection will be held in Auckland, Aotearoa/ New Zealand from 29 November to 1 December 2011. This year's Connection will focus on **Medical Education for Indigenous Health: Building the Evidence Base**. The [Connection Committee](#) are holding monthly meetings to develop the program, entertainment, awards process and overall organisation of the event.

The call for abstracts has closed and the committee was pleased to receive close to 80 strong applications. Successful applicants will be notified by the end of July and a provisional program will be available soon on the [LIME website](#).

Student and Community Bursaries have now been allocated, following an application process throughout April, May and June. We look forward to welcoming our successful applicants to the event.

Nominations for the [LIMElight awards](#) are open and further information can be found on the website. You can register for the Connection at our [website registrations page](#).

Please see the article on page 9 for further details.

REGIONAL MEETING

Following the success of the New South Wales Regional Meeting held in October 2010, and the Victoria/Tasmania meeting held in 2008, the LIME team, along with our colleagues from Flinders, Adelaide, Western Australia, Charles Darwin and James Cook universities, held a regional meeting in Darwin on 31 March. The gathering brought together representatives from Aboriginal Medical Services, universities and rural clinical schools, as well as community members and others involved in the teaching and learning of Indigenous health, to discuss student placements, community involvement in curriculum development and student recruitment and retention (see picture, page 1).

STEERING COMMITTEE

The annual [LIME Steering Committee](#) meeting was held in Sydney in late March, bringing together representatives from a number of stakeholder organisations in order to set the future direction of the LIME Network project. This productive day focused on the key activities of the LIME Network over the past year, and confirmation of work for the year ahead.

REFERENCE GROUP

The bi-annual [Reference Group](#) meeting was held in Melbourne on 16 June, when the LIME team were pleased to welcome 15 participants to our offices. The meeting focused on LIME activities, including the further development of the Periodic Service Review Tool, as well as funding and governance arrangements for the upcoming project extension (2011-12).



LIME Reference Group members meet in Melbourne. L-R: David Paul, Papaarangi Reid, Dylan Coleman, Shawana Andrews, Lisa Jackson-Pulver, Lilon Bandler, Dennis McDermott, Gaye Doolan, Louise Lawler, Margo Collins, Shaun Ewen and Jane MacLeod

AWARDS

In May, the LIME Network project was awarded the *Rio Tinto Award for Excellence and Innovation in Indigenous Higher Education*.

This is a University of Melbourne-wide teaching award, recognising excellence and innovation in the development of curriculum and higher education programs relating to Indigenous Australians.

Rio Tinto Australia is the foundation corporate partner of the [Murrup Barak Melbourne Institute for Indigenous Development](#) and is sponsoring this annual award to recognise and promote high quality teaching, curriculum and community engagement activities that enhance the capacity of University of Melbourne graduates to contribute to Indigenous development.

The selection committee for this award also put LIME forward as a University of Melbourne 2011 nominee to the National Australian Learning and Teaching Council awards for university teaching – *Awards for Programs that Enhance Learning*.

THE LIME NETWORK WEBSITE

The [LIME Network website](#) is continuously being updated and you can find the latest information on conferences, events, workshops and job opportunities on our [News and Events page](#). Our pages for [Students](#), [Projects of Interest](#), [Newsletters](#), [Indigenous Health Medical School Contacts](#) (accessible to members only) and [Resources](#) provide comprehensive information for LIME Network members and those wanting to find out more about Indigenous medical and health education. If

you have any suggestions about resources, projects of interest or news and events, please contact us via **E:** lime-network@unimelb.edu.au or **T:** +61 3 8344 9160.

The LIME Network is now on [Facebook](#). Here you will find the latest updates from the LIME Network website, including links to our new employment and scholarship opportunities and news regarding recent and upcoming LIME activities.

LIME PROJECT STAFF UPDATE

New Program Manager Margo Collins

The LIME Team is pleased to welcome Margo Collins to the position of LIME Program Manager for twelve months. Margo brings to the position a solid administrative background in medical education, with her most recent role of Project Officer (Clinical Assessment) in the Medical Education Unit of the University of Melbourne Medical School, focusing on the development of communication skills of medical students. Her educational background includes a Bachelor of Arts (University of Melbourne), a Graduate Diploma



Margo Collins
Photo Michelle Van Kampen

(Counselling) and she is currently undertaking a Masters in Applied Social Sciences. Margo brings great enthusiasm to this role and will be a great addition to the team!

New Research Assistant Alice Wilkin

Alice Wilkin has recently joined the LIME team as a Research Assistant. Alice has previously worked on projects with the Western Region Health Centre and the Cooperative Centre for Aboriginal Health, and has completed an honours thesis which focuses on Aboriginal women who work in the Victorian health care system. Welcome Alice!

Baby news!

The LIME team is delighted to announce the arrival of Selby Esther Mazel, a daughter for LIME Program Manager Odette and her partner Renae. Selby was born on 2 June weighing 3.25 kgs. We wish Odette, Renae and the whole family all the best at this exciting time.



Selby Esther Mazel
Photo Renae Davies

TEACHING AND LEARNING

LIME GOOD PRACTICE CASE STUDIES

One of the LIME Network's quality review objectives is to *identify quality and effective teaching and learning and Indigenous student recruitment and retention initiatives*. To achieve this, we would like to collect a range of good practice case studies from medical schools showcasing aspects of Indigenous health curriculum design and implementation, or Indigenous student recruitment and retention. We would like to share those stories with the broader LIME community.

These case studies should be about 250 words long — no more than 500 — and provide information on the structure and design of your initiative as well as any evaluation undertaken to assess its effectiveness. The case studies may be published online on the LIME Network website, may be suitable for future editions of the LIME Network newsletter, and may be published in a booklet to be distributed through our Network.

For further enquires or to submit a case study, please contact us on
E: lime-network@unimelb.edu.au
or T: +61 3 8344 9160.

THE GRADUATE CERTIFICATE OF DIABETES FOR ABORIGINAL HEALTH WORKERS

Established in 1996, the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) is a Registered Training Organisation, which provides accredited training to Aboriginal Health Workers. VACCHO identified a need to improve training available for Aboriginal Health Workers in order to increase their capacity to address diabetes-related issues in their local communities.

In support of the Commonwealth Government's pledge to 'Close the Gap' between Indigenous and non-Indigenous health outcomes, and its commitment to 'encourage more Indigenous people to take up careers as health professionals', VACCHO and Diabetes Australia approached Deakin University's Institute of Koorie Education (IKE) to provide further training and development in the area of diabetes. The Department of Health funds the training for students, provides mentoring funds and contributes toward the coordination of the program. IKE provides educational services to Indigenous communities throughout Australia.

Deakin University, through the School of Nursing, proposed that a pathway be established for Aboriginal Health Workers into the Graduate Certificate of Diabetes Education and that the course be delivered in community-based mode rather than through distance education, which provides a holistic approach to education.

Community-based learning involves a combination of both on and off campus teaching designed to enable Indigenous Australian students to study without being removed from their communities for substantial periods of time. This enables students to remain connected to their communities and continue to actively contribute to community life. The program is monitored by a project committee made up of all major stakeholders:

- School of Nursing – Deakin University
- Institute of Koorie Education – Deakin University



L–R: Graduates Elizabeth Hill, Kellie Hunter-Loughron, Charmaine Vandenberg, Shirley Best and lecturers Sharon Thorpe, Jennifer Brown, Maree Rootes

- Department of Human Services (DHS) or Department of Health (Victoria)
- VAEAI – Victorian Aboriginal Education Association Incorporated
- VACCHO
- Diabetes Australia
- Barwon Health.

IKE commenced its pilot program in 2010 and congratulates the students for the hard work and dedication to their studies that have produced a 100 per cent success rate. IKE staff are very excited to be producing the first-ever cohort of Aboriginal diabetes educators from Victoria and are proud of the success of the pilot program and the efforts of the first graduated students.

Graduate Elizabeth Hill commented:

I found the course very interesting and challenging, it forced me to work very hard and use a part of my brain that hadn't been used for a long time. Working in an Aboriginal Health Service also provided me with real insight into diabetes and the difficulties associated with managing such a chronic illness, more so for Aboriginal people in our communities who are faced with many other influencing factors that impact on everyday lives... Understanding diabetes and learning ways of communicating using the [right] language ... is a valuable tool which I believe I will value the most... The delivery of the course was excellent with exceptional academic staff Sharon Thorpe, Jennifer Brown and Marie Rootes.

LEARNING ABOUT ABORIGINAL CHILD HEALTH

A follow-on project from [Marulu](#) and the Lililwan Project is being conducted in the Fitzroy Valley, Western Australia. Having instigated the changes in alcohol sales in their community, members of the team at Nindilingarri Cultural Health Services (Fitzroy Crossing) are working with others from the University of Sydney Medical School and the George Institute and their supporters on the Liliwan Project, the first Australian study of the prevalence of Fetal Alcohol Spectrum Disorders (FASD). A series of online modules for learning about Australian Aboriginal child health has been created.

Your assistance and participation in the modules are welcome.

Examples and case studies drawn from the Fitzroy Valley and urban communities will be used to facilitate learning in four online modules:

Module 1 – Joining the dots: Aiming for cultural competence
Cultural competency training based on Aboriginal communities in general, with a specific example from the Fitzroy Valley.

Module 2 – Resilience and risks: Social determinants of Aboriginal child health
Exploration of the social determinants of Aboriginal child health—past, present and future—using North American and Australian examples.

Module 3 – What's up, doc? Common and important diseases
Common and important diseases (respiratory; ear, nose and throat; skin; eye) including rheumatic heart disease and post-infectious glomerulonephritis.

Module 4 – Worrying developments: Determinants of child development
Factors impacting on child behaviour and cognitive development including FASD, and the effects of early life trauma.



Tylon measures Dr James Fitzpatrick.
Photo Elizabeth Elliott



'It is a leaf with a coolamon inside; the spirals around the outside black and white represent the two ways of knowledge. The coolamon is a good representation of infants being carried and nurtured.'

Bridget Miller, Family Violence Prevention & Legal Service, Marninwarntikura Women's Resource Centre, Fitzroy Crossing

Modules 1 and 2 use video and audio material from the Fitzroy Valley and other areas to promote reflection and participation in facilitated online discussion forums. In Modules 3 and 4, interactive case-based discussions with relevant clinical images and reference material provide opportunities for varying levels of engagement with topics.

The modules will go live for learning by Fellows and Trainees of the Royal Australasian College of Physicians (RACP) and staff of Aboriginal Health Services in

September this year. It will also be made available through the planned Indigenous Health and Cultural Competency Online Portal to be hosted by the Royal Australasian College of Surgeons (RACS).

The Modules Project has been developed in partnership with Nindilingarri Cultural Health Services. It has been funded by the Department of Health and Ageing under the Rural Health Continuing Education Sub-program Stream One, which is managed by the Committee of

Presidents of Medical Colleges. The RACP is solely responsible for the content of, and views expressed in, any material associated with this project. It is also supported by an RACP continuing professional development grant and the Poche Foundation of the University of Sydney.

For further information please contact Megan Phelps at the Children's Hospital at Westmead Clinical School on E: MegP@chw.edu.au

GRADUATES AND CLINICIANS INFORMATION

TO WORK TOGETHER TO IMPROVE THE HEALTH OF ABORIGINAL AND TORRES STRAIT ISLANDER COMMUNITIES: THE COMMITMENT OF THE ROYAL AUSTRALIAN COLLEGE OF GENERAL PRACTITIONERS

The Royal Australian College of General Practitioners (RACGP) is Australia's largest professional general practice organisation, representing over 18,000 urban and rural general practitioners across Australia. Recognising that improving the health of Aboriginal and Torres Strait Islander people is one of Australia's highest health priorities, the RACGP established the National Faculty of Aboriginal and Torres Strait Islander Health (the Faculty) in February 2010. The Faculty now has 800 members and six staff. Faculty Board members comprise GPs (including an international medical graduate and a Torres Strait Islander GP), and a representative from the National Aboriginal Community Controlled Health Organisation (NACCHO) and the Australian

Indigenous Doctors' Association (AIDA). The Board Chair is Dr Brad Murphy, a remote area solo GP in Queensland and an Aboriginal man from the Kamilaroi people of northwest NSW.

The objectives of the National Faculty of Aboriginal and Torres Strait Islander Health are to:

- advocate widely for improvement in Aboriginal and Torres Strait Islander health
- model and advocate for best practice in community engagement
- develop and promote education that improves engagement in Aboriginal and Torres Strait Islander health

- support all of those working to improve the health of Aboriginal and Torres Strait Islander communities
- advise and assist the RACGP to become culturally safe and effective in its work in Aboriginal and Torres Strait Islander health.

While the Faculty is responsible for leading initiatives to improve health outcomes for Aboriginal and Torres Strait Islander people, the RACGP commitment is that improvements are achieved through all of its activities, as outlined in its Position Statement on Aboriginal and Torres Strait Islander Health.

Consistent with findings in Australia and overseas, the RACGP believes that accessible, high quality primary health care is essential for the improvement in life expectancy and health for Australia's first people. It recognises that general practices, in addition to Aboriginal Community Controlled Health Services (ACCHSs), play a vital role in providing these services to Aboriginal and Torres Strait Islander communities across Australia. A number of recent Faculty initiatives support general practices to provide accessible, high quality health care. Several are briefly described below.

Online cultural awareness activity and criteria for cultural awareness education and cultural safety training

A major opportunity for general practices to improve accessibility for Aboriginal and Torres Strait Islander people in their community, is to provide a more culturally safe practice environment. The National Faculty of Aboriginal and Torres Strait Islander Health has developed and released an online activity: *Introduction to Aboriginal and Torres Strait Islander Cultural Awareness in General Practice*, to enhance awareness of this and other access barriers and to consider positive changes that could be made to improve health care access and delivery. Participation in the online activity is seen by the Faculty as a valuable first step for general practices to enhance their provision of clinically and culturally appropriate health care for Aboriginal and Torres Strait Islander people. The 6-hour educational activity focuses

on providing a historical and contemporary context for current health and wellbeing inequities experienced by Aboriginal and Torres Strait Islander people. It was funded by the Department of Health and Ageing, to be available by the College free of charge to general practices wishing to meet the cultural awareness training requirements of the Indigenous Health Incentive.

The Faculty believes that this online activity is of a purely introductory nature, and urges general practice teams who complete it to go on to participate in locally delivered, face-to-face cultural safety training. To ensure that cultural awareness education and cultural safety training programs offered to RACGP members are of high quality, educational criteria have also been developed, to adjudicate applications by training providers for endorsement through the Quality Improvement & Continuing Professional Development Program.

Position paper: The identification of Aboriginal and Torres Strait Islander people in Australian general practice

The 2007 Council of Australian Governments National Indigenous Reform Agreement requires improvements in the data used to measure progress towards 'Closing the Gap' in health outcomes for Aboriginal and Torres Strait Islander people. It is expected that all jurisdictions in the health sector will have implemented the Australian Institute of Health and Welfare report *National Best Practice Guidelines for Collecting Indigenous Status in Health Data Sets* by December 2012.

Also, at general practice level, identifying Aboriginal and Torres Strait Islander status is a necessary precondition for participation in the 'Closing the Gap' initiative. Without practice awareness, a patient who is of Aboriginal or Torres Strait Islander origin cannot benefit from various measures in the Australian Government's Indigenous Chronic Disease Package. However, the recording of Aboriginal and Torres Strait Islander status in patient health records in general practices is low. Research has identified a number of concerns about, and barriers to, introducing routine collection of Indigenous status in general practices.

The RACGP has begun to address this issue by introducing a new indicator in the *RACGP Standards for General Practices* (4th edn): Criterion 1.7.1.(E.) 'Our practice can demonstrate that we routinely record Aboriginal and Torres Strait Islander status in our active patient health records'. A RACGP position statement, *The Identification of Aboriginal and Torres Strait Islander People in Australian General Practice* has also been released. Further activities will be undertaken during 2011 to support general practices to implement appropriate identification processes.

Aboriginal and Torres Strait Islander Health Curriculum Statement

The RACGP acknowledges that a major pathway to the participation of general practitioners in improving Aboriginal and Torres Strait Islander health starts with medical students and GP registrars. Their education should

encompass culture, history, and a holistic view of health and well-being, in addition to awareness of the factors related to the disproportionate percentage of Aboriginal people with poor health and increased mortality.

A RACGP curriculum statement for Aboriginal and Torres Strait

Islander health has been developed, identifying the relevant knowledge, skills and attitudes necessary for general practice. It is hoped that institutions responsible for undergraduate and postgraduate medical, nursing and paramedical courses will include the compulsory study of Aboriginal culture, history, and

health issues as part of formal course work, drawing from this curriculum statement.

For more information about the above Faculty initiatives, and to learn about others, visit the [Faculty website](#).



The Royal Australian
College of General
Practitioners



The RACGP
National Faculty of Aboriginal
and Torres Strait Islander Health
Working Together

COUNT YOURSELF IN – INDIGENOUS PHYSICIANS ASSOCIATION OF CANADA

One of the difficulties in health human resource planning in Canada is the lack of current and accurate information about Indigenous health professionals, to serve as a baseline for both planning and evaluation purposes.

The last recalled 'counting' of Indigenous physicians occurred in the mid-1990's and is the basis of the oft-quoted number of 150–200 Indigenous doctors currently in Canada. The true numbers are not known, but the importance of obtaining information is recognised. It is the intent of the Indigenous Physicians Association of Canada (IPAC) to collect this information in a way that respects the rights of those it represents, such as rights of confidentiality, ownership and privacy.

Guided by the principles of Ownership, Control, Access and Possession (OCAP), IPAC has developed the Health Human Resource Data Collection Form for data collection, storage, analysis and sharing of collected information, as well as policies to inform the data collection.

The IPAC Board of Directors has approved policies and the data collection form for dissemination to its members, partners and contacts in the hope that exposure to a large audience will bring a large number of responses, therefore accurately capturing the actual number of Indigenous physicians, residents and students in Canada.

[Please visit the website](#) to review the policies, complete the data collection form and submit to
E: info@ipac-amic.org or
F: +1 204 221 4849
by 31 August 2011.

Should you have any questions with regard to the policies, the process or completing the form, please do not hesitate to contact the IPAC office on
T: +1 204 219 0099.



LIME CONNECTION IV

29 November–1 December 2011 / Auckland, Aotearoa/New Zealand
www.limenetwork.net.au

**REGISTRATIONS ARE NOW OPEN FOR LIME CONNECTION IV!
PLEASE VISIT OUR WEBSITE TO REGISTER NOW.**

Early bird and speaker registration closes on 26 August

The fourth biennial LIME Connection will be held in Auckland, Aotearoa/New Zealand from 29 November to 1 December 2011.

This year's Connection will focus on **Medical Education for Indigenous Health: Building the Evidence Base**. Specifically, the event will address leading approaches to the inclusion of Indigenous health into medical education. The Connection will also showcase the growing body of evidence illustrating the relationship between medical education and Indigenous health outcomes.

The Connection will provide an opportunity to discuss and critique current practices and explore emerging tools and techniques to drive improvement in outcomes for Indigenous health and aims to encourage information sharing, professional development, capacity-building and networking amongst peers. LIME Connection seeks to support collaboration between medical schools and to build linkages with those from other health disciplines.

Keynote speakers include experts in Indigenous health and medical education from Australia, New

Zealand and Hawai'i. The target audience includes Indigenous and non-Indigenous medical educators, Indigenous health specialists, medical practitioners, policy makers, students and community members.

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

LIMELIGHT AWARDS 2011

Nominations and applications close on 26 August

The LIMElight awards are given in recognition of significant and outstanding work that staff, students and medical schools undertake in the teaching and learning of Indigenous health in medical education, as well as Indigenous student recruitment and retention.

These awards acknowledge an innovative program or initiative that addresses critical issues, brings people together collaboratively, and implements an innovative solution.

The awards ceremony will be held in conjunction with the LIME Connection IV dinner on 30 November, in Auckland.

Nominations or applications will be accepted for the following categories:

- Leading innovation in 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

For more information, as well as nomination and application forms, please visit the [LIME Network website](#).

Visit the LIME Network website for more information and registration details: www.limenetwork.net.au or contact **T:** +61 3 8344 9160 or **E:** lime-network@unimelb.edu.au

STUDENT INFORMATION

SCHOLARSHIPS

Indigenous Staff Scholarships

Applications close 31 July

Indigenous Staff Scholarships provide professional development opportunities to Aboriginal and Torres Strait Islander staff working at universities. The scholarships are part of the Australian Government's plan to help improve education outcomes for Aboriginal and Torres Strait Islander people in higher education. Up to five national scholarships are awarded each year.

Aboriginal and Torres Strait Islander employees (academic or general) at an Australian university who actively encourage Aboriginal and Torres Strait Islander students to complete their higher education studies can apply.

Successful applicants can take twelve months leave from their job to study full time in their chosen field. They receive up to AU\$23,600 as a living allowance and up to AU\$11,800 for tuition fees and student contribution amounts for the year. Amounts are indexed annually.

Scholarships will be awarded on merit against the selection criteria outlined in the guidelines ([see website for details](#)). Priority is given to members of staff at postgraduate level who have not previously received an Indigenous Staff Scholarship. However, interested Aboriginal and Torres Strait Islander staff studying at undergraduate level are also invited to apply. Scholarship

recipients will be selected by the Minister for Tertiary Education on advice from the Indigenous Higher Education Advisory Council.

Puggy Hunter Memorial Scholarship Scheme

Applications close 16 September

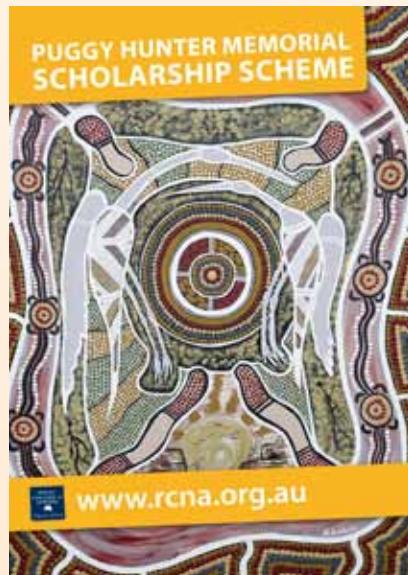
The Puggy Hunter Memorial Scholarship Scheme is funded by the Australian Government Department of Health and Ageing. The Scheme was established in recognition of Dr Arnold ('Puggy') Hunter's significant contribution to Aboriginal and Torres Strait Islander health in his previous role as Chair of the National Aboriginal Community Controlled Health Organisation.

The aim of the Scheme is to help address the under-representation of Aboriginal and Torres Strait Islander people in health professions and assist in increasing the number of Aboriginal and Torres Strait Islander people with health professional qualifications.

The scholarship provides financial assistance to Aboriginal and Torres Strait Islander people who are intending to or are undertaking study in an entry level qualification in an eligible health related discipline at an Australian university or TAFE (Certificate IV and above).

Eligible health areas include:

- Aboriginal Health Worker
- Allied health (excluding pharmacy)



- Dentistry/oral health
- Medicine
- Midwifery
- Nursing

Applicants must identify as Aboriginal or Torres Strait Islander status. Scholarships will be awarded on the recommendation of a selection committee and will be based on how an applicant addresses the following criteria:

- how the applicant became interested in a career in health
- their commitment to becoming a health professional
- and their ambitions as a health professional in the next 5-10 years.

2012 New South Wales Rural Resident Medical Officer Cadetships for Indigenous Medical Students

Applications close 15 August

The NSW Rural Doctors Network (RDN), on behalf of the New South Wales Department of Health, is offering up to four Cadetships to Indigenous medical students interested in undertaking a medical career in rural New South Wales. Students in their final year of study can apply for a PGY1 position through the Rural Preferential Recruitment process administered by the Clinical Education and Training Institute. Cadets receive up to AU\$15,000 per year for the final two years of their medical degree, and in return work for two years in a rural New South Wales Base Hospital within the first triennium following graduation.

The Cadetship also offers additional benefits, including a relocation grant when moving to a rural location, subsidised attendance at RDN conferences, subsidised attendance at the annual RDN cadet weekend at one of the locations for rural service and mentoring and support through RDN.

Any Indigenous student who is studying medicine in New South Wales is eligible to apply.

Further information and application forms are available at the [Rural Doctors Network website](#).

Rowan Nicks Russell Drysdale Fellowship in Australian Indigenous Health and Welfare 2012

Applications close 26 August

The Rowan Nicks Russell Drysdale Fellowship is designed to support individuals wanting to make a contribution in the area of Australian Indigenous Health and Welfare. The Fellowship particularly aims to support the development of workers and future leaders in Australian Indigenous Health and Welfare.

Australian Indigenous people are strongly encouraged to apply.

Australian citizens or permanent residents who have appropriate prior experience and/or education and wish to undertake approved programs / activities or further education, or a research project are eligible to apply.

The value of the fellowship is a salary for a period of up to 12 months, in the first instance at a level commensurate with the Fellow's experience and qualifications or a stipend and/or payment of course-fees to undertake approved training, education or research.

2012 Fulbright Australian Scholarships

Applications close 31 August

The Fulbright program is the largest and one of the most prestigious educational scholarship programs in the world. It operates between the

United States and over 155 countries worldwide. Established in Australia in 1949 through a bi-national treaty between the Australian and U.S. Governments, the program has supported almost 4,800 scholarships.

The mission of the Australian-American Fulbright Commission is to promote mutual understanding through educational and cultural exchange between Australia and the United States. It does this primarily through the administration of Fulbright scholarships.

Postgraduate Scholarship on Indigenous Chronic Disease and Health Professional Education

Several full-time postgraduate scholarships are available over the next three years for suitably qualified candidates to undertake research studies leading to a Masters (Research) or Doctorate on exploring how health professional education can reduce disparities in chronic disease care and improve outcomes for Indigenous populations. Indicative degrees available include Master of Philosophy, Master of Education, Doctor of Philosophy, Doctor of Education, Master of Aboriginal Health, Master of Health Professional Education. Research areas include Indigenous health, health professional education, inter-professional education, medical education, and e-health.

For further information, contact David Paul E: david.paul@uwa.edu.au or T: +61 8 6488 7084.

PROJECTS OF INTEREST

Part of the LIME Network Project's aim is to share information about projects that are relevant to Network members. Following are a number of initiatives that are being driven by LIME Network members.

CAPACITY BUILDING FOR INDIGENOUS MEDICAL ACADEMIC LEADERSHIP

The joint initiative between the Australian Indigenous Doctors' Association and Medical Deans Australia and New Zealand to look at capacity-building for Indigenous medical academic leaders has gained momentum with the engagement of a Project Manager in May this year.

The project, funded by the Australian Government Department of Health and Ageing (DoHA), involves conducting a review of current capacity building models in academic leadership to inform discussion at a forum to be held in the second half of 2011. Stakeholders will come together at the forum to establish a plan, incorporating recommendations and strategies, to build capacity over the next three to five years.

The Project Manager, Rebecca Astles-Phillips, is establishing the Steering Committee, identifying current models on academic leadership building, and making contact with key stakeholders, including members of the LIME Network. At the close of the project, scheduled for the end of September, the three to five year plan will be provided to key stakeholders and DoHA with the view to identifying concrete pathways and support mechanisms which will ensure

rapid and sustained growth in the current Indigenous academic medical workforce.

For further information, please contact Rebecca Astles-Phillips on [E: astles@medicaldeans.org.au](mailto:astles@medicaldeans.org.au).

WEENTHUNGA HEALTH NETWORK

Weenthunga Health Network Inc. is a new collegial Victorian network for health professionals, practitioners and workers in any health role with a desire to see improved health of First Australians. Weenthunga is a First Australian-led network which encourages inter-disciplinary collaboration between Australians and First Australians – at local and regional levels as well as across the State.

Being very aware of the many organisational endeavours of governments, of VACCHO and its member organisations and mainstream health organisations committed to 'Closing the Gap' in Indigenous health, Weenthunga have been liaising with their key Aboriginal health leaders. Weenthunga has a strong belief in the value and benefits of collaboration between First Australians and Australians, individuals with goodwill and commitment to help make a difference who make up the Weenthunga membership. Through the collaboration of individual members, Weenthunga can help achieve the objectives of the national Indigenous health associations and organisations like LIME.

Weenthunga believes members have some 'yeast to add to the mix' that will help see some progress in meeting key objectives in Victoria, such as being available to mentor and encourage First Australian students interested in a health career to complete their schooling and enter health studies.

Already the membership of First Australians and Australians is drawn from the fields of Aboriginal Hospital Liaison, Aboriginal Health Research, Close the Gap Project Work, Community Development, Dental Therapy, Diabetes Education, Dietetics, Exercise Physiology, General Practice, Health Education, Health Promotion, Health Service Management, Medicine, Mental Health Work, Midwifery, Neuropsychology, Nursing, Occupational Therapy, Optometry, Osteopathy, Psychiatry, Psychology, Physiotherapy, Podiatry, Social Work and Speech Pathology. It is anticipated that members from many more health roles will join as the word is passed around.



If you would like to join — it's free (no fees, just goodwill and commitment!) — and it is easy to join via the [website](#).



For more information, please contact Kelli McIntosh, President, and Lin Oke, Executive Officer, at [Weenthunga Health Network](#).

Connecting Through Conversations: The flames represent the campfire, a focal point for sharing knowledge and listening. The circles represent communities, which have an abundance of knowledge to share. Artist: Shawana Andrews

LIME NETWORK PROFILE

PROFESSOR JAMES ANGUS OUTGOING PRESIDENT, MEDICAL DEANS AUSTRALIA AND NEW ZEALAND



A privilege to serve

I was first introduced to Indigenous medical education when I was invited by the Committee of Deans of Australian Medical Schools, in 2003, to replace Professor Richard Larkins as the Dean responsible for the project officer developing the Indigenous Health Curriculum Framework. Richard had a significant interest in Indigenous medical students and on hand-over to me as Dean at Melbourne he emphasised the importance of the Centre for Health and Society in our Melbourne School of Population Health, then led by Professor Ian Anderson.

This 'custodial' role has been a wonderful experience and a highlight of my term as President, Medical Deans Australia and New Zealand (Medical Deans).

As Dean, I was privileged to join Gregory Phillips (our Indigenous Curriculum Development Project Manager) at work at Victor Harbour after a most moving welcome to country at the first LIME Connection conference in 2005. Subsequent LIME meetings have been outstanding successes as the Indigenous Health Curriculum Framework and the Critical Reflection Tool were unanimously approved by all Deans. The Australian Medical Council assessment criteria for all Australian and New Zealand medical schools' accreditation now include guidelines on Indigenous curriculum.

Highlights of the Medical Deans work through the LIME Network project are the growing understanding of embedding cultural awareness and safety in

all aspects of medical education and how getting this right will empower potential Indigenous medical students to start the course. One highlight of the Deans annual meetings is the Indigenous Knowledge Initiative (every two years) in which we gain a better understanding of history, traditional culture and contemporary issues. Medical Deans strong partnership with the Australian Indigenous Doctors' Association and the Māori Medical Practitioners Association of Aotearoa/New Zealand is indicative of the importance Medical Deans places in building strong relationships.

As I step down from the role of President of Medical Deans, and my close involvement with the Indigenous subcommittee and LIME, I would like to congratulate and thank all the LIME members and your leadership group for embracing Medical Deans in a great professional partnership and for ensuring that Indigenous medical education and our future Indigenous medical workforce has every chance of delivering the healthcare and reform we all strive to achieve.

There is no doubt in my mind that progress in Indigenous health literacy, access, and 'Closing the Gap' is directly related to an educated Indigenous health workforce and a clinical academic workforce that must be supported and nurtured. Medical Deans has recognised a responsibility in this partnership that must be valued and sustained for the longer term.

NEWS

Australian Indigenous Doctors' Association 2011 Symposium Dinner
June 2011

AIDA will hold its 2011 Symposium Dinner on the 22nd of October in Broome, and would like to invite new Indigenous medical graduates and Fellows to get in touch with them and attend the event. If you have graduated or become a Fellow in the past 12 months, contact Susan Granger on **T:** 1800 190 498, or **E:** susan@aida.org.au.

Experiences of Racism/Intolerance High Amongst Aboriginal & Torres Strait Islander Physios - National Association of Aboriginal and Torres Strait Islander Physiotherapists Survey
June 2011

The National Association of Aboriginal and Torres Strait Islander Physiotherapists (NAATSIP) has revealed that 81% of surveyed members have experienced some form of racism or intolerance while working as a physiotherapist, or during their studies. You can read the media release from NAATSIP [here](#).

Public Health Indigenous Leadership in Education Network - June 2011 Bulletin
June 2011

The Public Health Indigenous Leadership in Education Network (PHILENetwork) is the leadership group formed from the National Indigenous Public Curriculum Network. This group forms part

of a larger project – Indigenous Public Health Capacity Building Project. This project is funded by the Australian Government Department of Health and Ageing. The PHILENetwork has made significant contributions to the development of capacity in Indigenous public health since the inaugural 2003 National Indigenous Public Health Curriculum Workshop in Brisbane.

Congratulations Lisa Jackson-Pulver, AM
June 2011

We would like to congratulate LIME Network Reference Group member Professor Lisa Jackson-Pulver, who has been awarded a Member of the Order of Australia (AM). The award was given in recognition of service to medical education, particularly through the Muru Marri Indigenous Health Unit at the University of New South Wales, and as a supporter of educational opportunities for Aboriginal and Torres Strait Islander people. Lisa is a longstanding member of the LIME Network, and we are delighted to see this work being recognised in this way.

The LIME Network is now on Facebook
May 2011

On our new Facebook page you will find the latest updates from the LIME Network's website, including links to employment and scholarship opportunities and news regarding recent and upcoming LIME activities. Join us on Facebook today!

Federal Budget 2011
May 2011

Budget information on Indigenous health is being collated by the HealthInfoNet. You can view the information via their website link above.

Blackchat April 2011
April 2011

The Australian Indigenous Doctors' Association's latest Blackchat magazine is out now and available by clicking on the above link.

Wangka Pulka - 3rd Edition
April 2011

The Lowitja Institute is proud to present the third edition of its newsletter, Wangka Pulka.

This issue includes:

- reports on the laneway launch of the Melbourne office in March
- an overview of the health peak bodies 'Close the Gap' group meeting with the Prime Minister, and
- a guest editorial by Justin Mohamed, Chair of NACCHO

The Lowitja Institute welcomes your stories and feedback on the newsletter, the next issue of which is due out in August 2011.

Harvest Alliance School for Indigenous Health

April 2011

Congratulations to the Harvest Alliance School for Indigenous Health on its official launch. The School is part of the Faculty of Medicine, Nursing and Health Sciences at Monash University and one of its aims is to recruit, support and graduate Indigenous students in health professional training.

Ear Science Institute, Australia: Ear Health Survey

April 2011

Researchers at the University of Western Australia, Flinders and La Trobe Universities are conducting research into how health care professionals interpret otoscopy images. The Australian College of Rural and Remote Medicine Research Committee invites members to participate in an anonymous online survey to help understand rural doctors' level of expertise in identifying damaged ears in Aboriginal Australians. To complete the survey, please go to the survey site in the above link.

Appointment of new Deputy-Vice Chancellor (Indigenous Strategy and Services)

April 2011

The University of Sydney is pleased to announce that Professor Shane Houston has accepted the offer to take up the new position of Deputy Vice-Chancellor (Indigenous Strategy and Services).

Professor Houston is currently Executive Director, Systems Performance and Aboriginal Policy with the Northern Territory Department of Health and Families. He has a long-standing interest in the development of culturally secure health services and systems and in health economics, especially in finding greater equity in how health systems allocate and use resources.

He currently holds an adjunct professorial appointment at the University of Notre Dame (Sydney) in the School of Medicine and is a board member of the Menzies School of Health Research. Previously he was a board member of the Cooperative Research Centre for Aboriginal Health and the Lowitja Institute.

With his background in education and health, Shane Houston is the ideal person to develop and lead an integrated University-wide strategy to advance Indigenous participation, engagement, education and research.

National Association of Aboriginal and Torres Strait Islander Physiotherapists, Inc.: Call for Members

March 2011

The recently formed National Association of Aboriginal and Torres Strait Islander Physiotherapists, Inc (NAATSIP) is now accepting applications for membership.

Aboriginal and Torres Strait Islander physios, physio students and physio assistants are welcome to apply for Ordinary Membership.

Non-Indigenous physios, physio students and physio assistants are welcome to apply for Associate Membership.

Organisations involved in the delivery of physiotherapy services/ education/policy, or involved in the health of Aboriginal and Torres Strait Islander peoples, are welcome to apply for Corporate Membership.

For more information and to request a membership application form, please contact **E:** admin@naatsip.org.

World Indigenous Peoples Conference on Education

March 2011

The newsletter for Australian participants of the World Indigenous Peoples Conference on Education, Issue 2, March 8, is now available via the link above.

Inaugural Elder in Residence joins UNSW Medicine

Aboriginal woman (Aunty) Ali Golding has been appointed as Elder in Residence in the Faculty of Medicine at the University of New South Wales. The inaugural Elder in Residence will advise on and contribute to Indigenous activities with UNSW Medicine and the University.

CONFERENCES AND EVENTS

LIME Connection IV

Auckland, Aotearoa/ New Zealand,
29 November–1 December 2011

This year's Connection will focus on Medical Education for Indigenous Health: Building the Evidence Base. Specifically, the Connection will address leading approaches to the inclusion of Indigenous health into medical education. The event will also showcase the growing body of evidence illustrating the relationship between medical education and Indigenous health outcomes.

Early Bird Registration closes on 26 August – register now via the [website](#).

Primary Healthcare Research Conference 2011

Brisbane, QLD, 13–15 July

The annual Primary Health Care Research Conference (formerly GP & PHC Research Conference) is a major event in Australian general practice and primary health care research, to present research findings, discuss research methodology and policy issues, and build and maintain essential networks between researchers, practitioners, policy makers and representatives of consumer organisations.

Australian Cardiovascular Health and Rehabilitation Association Conference

Perth, WA, 8–10 August

The theme of the meeting, Casting a Wider Net, embraces the challenge of making cardiovascular

health and rehabilitation services more inclusive and accessible to cardiac patients, including minority groups and Aboriginal Australians.

World Indigenous Peoples Conference on Education

Cusco, Peru, 14–18 August

The conference will focus on three areas: Indigenous education for future generations, living Indigenous languages and Indigenous wisdom for common welfare.

International Association for Medical Education Conference

Vienna, Austria, 27–31 August

The main conference runs from 29–31 August, and includes plenary sessions, symposia, conference workshops, research papers, PhD reports, short communications and poster sessions. There is also a range of full-day and half-day preconference workshops and master class sessions on Saturday 27 and Sunday 28 August, together with four Essential Skills in Medical Education courses.

Medical Deans Australia and New Zealand Annual Conference

Sydney, NSW, 6–8 September

The conference will be held over a 3 day period and includes the Faculty Administrators' Workshop, the Deans' bi-annual Indigenous Knowledge Initiative, Days 2 and 3 at the Waterview Convention Centre for all Deans, faculty staff and invited guests, and includes the conference dinner.

15th Annual NT Chronic Diseases Conference

Darwin, NT, 8–9 September

The conference program will explore the complex range of individual, family, community, social and cultural factors that influence the relationship between chronic diseases and mental health; and the ways in which the community and health professionals can improve wellbeing.

McCaughey Centre and Onemda Short Course: Race, Culture, Indigeneity and the Politics of Disadvantage

Melbourne, VIC, 19–20 September

A Short Course presented by the McCaughey Centre and the Onemda VicHealth Koori Health Unit, Melbourne School of Population Health, University of Melbourne.

- Are you interested in the political context of Indigenous disadvantage?
- Are you ever confused or frustrated by the complexity of Indigenous affairs?
- Would you benefit from a range of theoretical tools that could help you negotiate complex issues?

While the historical, social and political context of Indigenous affairs poses particular challenges for those working within it, few have access to the body of scholarship that addresses issues of cultural diversity, anti-racism, and identity politics. This workshop aims to

use interactive exercises, case studies and small group work to:

- introduce key concepts from anthropology, social theory, social psychology;
- sociology and critical Indigenous studies relevant to understanding Indigenous affairs;
- illustrate theories and debates using a range of texts, including journal articles, videos, newspaper articles, web resources and policy documents; and
- enhance the ability of those working with Indigenous Australians to critically analyse texts and apply social science theory to practical problems relating to their work.

For further information contact Hannah Reich on
E: hsreich@unimelb.edu.au.

6th National Aboriginal & Torres Strait Islander Male Health Convention

Perth, WA, 19–22 September

The Gathering incorporates the 9th National Men's Health Conference, the 6th National Aboriginal & Torres Strait Islander Male Health Convention, and the 5th National Men and Family Relationships Forum.

Australian Institute of Aboriginal and Torres Strait Islander Studies: National Indigenous Studies Conference 2011

Canberra, ACT, 19–23 September

The Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS) National Indigenous Studies Conference brings together multidisciplinary expertise from across the Indigenous Studies sector, including researchers, policy makers, community members, academics, representative organisations, consultants, traditional owners and service providers. Whether interest in the conference topic is from the perspective of Aboriginal and Torres Strait Islander education, health, cultural heritage, arts, policy, sport, economics, language, anthropology, archives, IT or other equally relevant sectors, the conference presents a unique opportunity to communicate information about research, projects and programs with a wide audience and to benefit from discussion around shared areas of interest.

Public Health Association Australia Conference

Brisbane, QLD, 26–28 September

The Public Health Association of Australia provides a forum for the exchange of ideas, knowledge and information on public health. The Association is also involved in advocacy for public health policy, development, research and training.

6th International Conference: Making Policy a Health Equity Building Process

Cartagena de Indias, Colombia, 26–28 September

The conference will focus on health equity as an inherently normative ethical value based on the principle of distributive justice and in line with the principles of human rights. Inequities in health have consistently placed groups of people who are already socially disadvantaged at further disadvantage with respect to their health and welfare whilst also overcoming other effects of social disadvantage.

Aboriginal and Torres Strait Islander Environmental Health Conference

Darwin, NT, 27–30 September

The conference invites people and agencies involved in the delivery and/or development of environmental health services or environmental health initiatives within Indigenous communities in Australia to attend.

Cross-Cultural Health Care Conference: Collaborative and Multidisciplinary Interventions

Oahu, Hawaii, 7–8 October

The 2011 Cross- Cultural Health Care Conference will provide an overview of critical issues facing healthcare professionals who work with diverse patient populations. Additionally, the conference will

provide a forum to discuss the evidence base regarding cross-cultural healthcare training and treatment interventions. Taking a multidisciplinary perspective, the focus is on how cultural factors can and have been incorporated into the training of healthcare professionals and how culture can potentially influence treatment.

2011 CRANplus Conference
Perth, WA, 11–14 October

The diversity of remote health practice is akin to the diversity of this vast continent of Australia. The 2011 Conference would like to hear from the very broad cross section of individuals and organisations that are providing and supporting health service delivery in remote & isolated areas.

Indigenous Pre-Conference Workshop at the Oceania Tobacco Control Conference
Brisbane, QLD, 17 October

For further information please contact **E:** ceitc-info@unimelb.edu.au.

Oceania Tobacco Control Conference
Brisbane, QLD, 18–20 October

This biennial meeting is presented by Cancer Council Australia and the 2011 conference will be hosted by Cancer Council Queensland.

World Conference on Social Determinants of Health 2011
Rio de Janeiro, Brasil, 19–21 October

The aim of the World Conference on Social Determinants of Health is to bring Member States and others together to foster high-level political support for national policies to address social determinants of health to reduce health inequities. Its specific objectives are to strengthen political commitment by Member States to develop and implement national policies on social determinants of health to reduce health inequities; and share experiences, challenges and technical knowledge on addressing social determinants of health, taking into account the need for strengthening governance arrangements and learning from different contexts.

Australian Indigenous Doctors' Association Symposium: Our Doctors Making a Difference
Broome, WA, 20–23 October

The 2011 Symposium, AGM and Adjacent Events provide AIDA members and stakeholders with an opportunity to celebrate the achievements of Aboriginal and Torres Strait Islander doctors, including general practitioners, physicians, specialists, researchers, academics, teachers and students.

The theme this year is *Our Doctors Making a Difference*, and is of particular importance to Australia's Indigenous health workforce, demonstrating the importance of Aboriginal and Torres Strait Islander doctors in the pursuit of improving health outcomes for their people.

Rural Medicine Australia 2011: Annual National Conference
Alice Springs, NT, 28–30 October

The conference is the national rural doctors' gathering co-hosted by Australian College of Rural and Remote Medicine and the Rural Doctors Association of Australia. The program, a draft of which is available now, will reflect the preferences expressed in feedback from Rural Medicine Australia 2010 for a program that provides procedural skills, knowledge updates, and forums where issues directly affecting rural and remote medical practitioners and their patients can be frankly addressed.

Developing Leaders in Healthcare Education
Mornington Peninsula, VIC, 31 October – 4 November

The Association for the Study of Medical Education (ASME) and The Australia and New Zealand Association of Health Professional Educators (ANZAHPE) are recognised as leading international associations for healthcare education. Healthcare educational leadership has been identified as an area of need across the world. ASME and ANZAHPE have developed an innovative and exciting course for leaders and potential leaders in healthcare education in Australia, New Zealand, South East Asia, the Pacific and internationally. The course will be delivered by a joint faculty from both organisations with extensive experience in clinical and educational leadership. A small amount of pre-course reading work is required.

PUBLICATIONS AND RESOURCES

Following are some recent publications and resources of interest. For more publications, visit the [LIME Network Resources Database](#).

[Aboriginal Health in Victoria – Research Summary](#),
VicHealth, 2011

[Are Medical Student Results Affected by Allocation to Different Sites in a Dispersed Rural Medical School?](#)
Sen Gupta, T.K., Hays, R.B., Kelly, G. & Buettner, P.G. 2011, *Rural and Remote Health*, vol. 11 (online).

[Indigenous Health – A Role for Private General Practice](#)
Johanson, R.P. & Hill, P. 2011, *Australian Family Physician*, vol. 40 (1-2), pp.16-9.

[Time to Close the \(data\) Gap on Indigenous Disadvantage](#)
Russell, L. 2011, *Australian Policy Online*

[Putting Indigenous Cultural Training into Nursing Practice](#)
Downing, R. & Kowal, E. 2011, *Contemporary Nurse*, vol. 37(1)

[A Postcolonial Analysis of Indigenous Cultural Training for Health Workers](#)
Downing, R. & Kowal, E. 2011, *Health Sociology Review*, vol. 20(1), pp.5-15

[Culture Shock and Healthcare Workers in Remote Indigenous Communities of Australia: What do we know and how can we measure it?](#)

Muecke, A., Lenthall, S. & Lindeman, M. 2011, *Remote and Rural Health*, vol. 11 (online).

[Aboriginal and Torres Strait Islander Peoples Training for Health-related Disciplines](#)

Australian Institute of Health & Welfare, 2011

[Our Doctors Making a Difference](#)
O'Mara, P. 2011, *The Medical Journal of Australia*, vol. 194 (10)

[The Challenges of Remote Area Medical Education](#)

Peachey, L. & McBain-Rigg, K. 2011, *The Medical Journal of Australia*, vol. 194 (10)

[Safeguard or Mollycoddle? An exploratory study describing potentially harmful incidents during medical student placements in Aboriginal communities in Central Australia](#)
Patel, A., Underwood, P., Nguyen, H. & Vigants, M. 2011, *The Medical Journal of Australia*, vol. 194 (10)

[Social Determinants and the Health of Indigenous Australians](#)
Marmot, M. 2011, *The Medical Journal of Australia*, vol. 194 (10)

[The Lowitja Institute: Building a national strategic research agenda to improve the health of Aboriginal and Torres Strait Islander peoples](#)

Arabena, K. & Moodie, D., 2011, *The Medical Journal of Australia*, vol. 194 (10)

[Racism as a Determinant of Social and Emotional Wellbeing for Aboriginal Australian Youth](#)

Priest, N., Paradies, Y., Gunthorpe, W., Cairney, S. & Sayers, S. 2011, *The Medical Journal of Australia*, vol. 194 (10)

[The Health and Welfare of Australia's Aboriginal and Torres Strait Islander People: An overview 2011](#)

Australian Institute of Health and Welfare, 2011

[Social Determinants Approaches to Public Health: From Concept to Practice](#)

Blas, E., Sommerfeld, J. & Kurup, A.S. 2011, *World Health Organization*

BACKGROUND

The Leaders in Indigenous Medical Education (LIME) Network Project 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 retention of Indigenous medical students. We seek to do this through establishing a continuing national presence that encourages and supports collaboration within and between medical schools and colleges in Australia and New Zealand and by building linkages with the community and other health science sectors.

The LIME Network consists of a range of participants from key medical education and Indigenous health groups. The LIME Network Project has a Steering Committee which sets strategic and policy directions and a Reference Group which provides advice and support in implementing project initiatives. Members of the Steering Committee are drawn from a number of key stakeholder organisations and the Reference

Group is made up of members from each medical school in Australia and New Zealand.

For a list of committee members and organisations please see our Organisation Chart.

The LIME Network Project is a Medical Deans Australia and New Zealand Project hosted by the Onemda VicHealth Koori Health Unit within the Melbourne School of Population Health at the University of Melbourne. It was developed as a stand alone project in 2008 and stemmed from the Indigenous Health Project which began in 2002.

Prior to the development of the LIME Network Project, major outcomes of the Indigenous Health Project included the Indigenous Health Curriculum Framework and the Critical Reflection Tool (CRT), which remain important resources for the current project. The Framework was developed as a flexible guideline that could be used to contribute to the meaningful learning experiences

of students and staff around Indigenous health, and the CRT is an internal quality review process aimed at supporting medical schools to continue to provide quality Indigenous health curriculum and Indigenous student support initiatives.

Other outcomes of the project included the endorsement of the Indigenous Health Curriculum Framework by all Deans of Medicine and its inclusion as part of the accreditation guidelines of the Australian Medical Council (AMC); and the facilitation of Australian Indigenous Doctors' Association (AIDA) / Medical Deans Agreement for Collaboration, through which AIDA completed an audit of medical schools to assess their Indigenous medical recruitment and retention approaches. Importantly, a preliminary network of Indigenous and non-Indigenous medical educators was established to lead and encourage curriculum implementation – this became the LIME Network.

CONTACT DETAILS

If you would like more information on LIME Network activities, would like to become a member, or have something you would like to contribute to the next newsletter, please visit our website: www.limenetwork.net.au, email us at lime-network@unimelb.edu.au or give us a call at T: +61 3 8344 9160.

THE LIME NETWORK
Leaders in Indigenous Medical Education