Welcome to the ninth 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 our Pathways into Medicine resource, which will provide a comprehensive, searchable database, to assist future Indigenous medical students when deciding which school will be the best fit for them.

We also profile a number of new teaching and learning initiatives, have information for graduates and clinicians on grants and new resources, highlight projects of interest from allied health sectors, and feature an update on the recent work of Medical Deans Australia and New Zealand. Our member profile this month features long time LIME member, Professor Lisa Jackson Pulver from the University of New South Wales, who provides an inspirational story of her own work in medical education.

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

The LIME Reference Group at Bond University, May 2012
LIME NETWORK UPDATE

The LIME Network 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.

LIME CONNECTION V: 26-28 AUGUST - SAVE THE DATE!

Planning has begun for LIME Connection V – to be held in Darwin, Northern Territory. The conference will be co-hosted by Flinders University and Charles Darwin University, and will be held on the new date of August 26-28, 2013. The first meeting of the organising committee was held in July.

REFERENCE GROUP

The LIME Network Project’s governance model includes a representative Reference Group which consists of medical educators from each medical school in Australia and New Zealand, who aim to improve Indigenous health through medical education and Indigenous student recruitment.

The most recent bi-annual Reference Group meeting was held at Bond University on the Gold Coast, on 3rd May.

Key messages emerging from this meeting are as follows:

- **LIME** is an important support network for university staff, providing a space in which collaboration is a springboard for change and improvement;

- The **LIME Good Practice Case Studies Volume 1** received extremely positive feedback from those involved in Indigenous medical education, as well as others in the health sector.

- **Regional Meetings** remain an important forum in which to bring together universities, Aboriginal Medical Services (AMS) and local communities to collaborate on addressing challenges and forming strategies for increased resourcing and support mechanisms, particularly in regard to student placements, recruitment of students, and community involvement in curriculum design.

- **LIME Connection IV** was acknowledged as a great success with a true sense of enthusiasm, engagement and comradeship felt by those who attended.

Other areas of discussion included developing volume two of the Good Practice Case Studies; developing the online, accessible, and easy to update Pathways into Medicine resource for prospective medical students; further developing and piloting the Periodic Service Review tool; planning for a Regional Meeting; planning for LIME Connection V 2013; and disseminating a discussion paper outlining the achievements, outcomes, and history of the LIME Network Project.

NEW CONTRACT

The LIME team are pleased to report that the LIME Network project has been funded for a further twelve months to June 2013, by the Australian Government Department of Health and Ageing (DoHA) through Medical Deans Australia and New Zealand. DoHA are currently reviewing and evaluating all their Close the Gap strategy projects (of which the LIME Network is one), and will consider further longer term funding of the project once this review is complete. We look forward to beginning another productive year of work with LIME Network members.

REGIONAL MEETINGS

The previously planned one-day meeting in April to bring together university staff, community members, staff from Aboriginal Medical Services / Aboriginal Community Controlled Health
LIME NETWORK WEBSITE

The LIME Network website continues to be expanded and updated in order to keep members informed of relevant Indigenous medical education news, scholarships, jobs and grants, as well as conferences, workshops and events.

We have recently updated the look of the website, and have simplified the front page to ensure ease of access to all information. You will now find links on the right hand side to our most popular pages – Newsletter issues, latest news, our Facebook page and our membership page. We welcome feedback on the website, so if you have any ideas or suggestions, please contact us via E: <lime-network@unimelb.edu.au>.

The Resources and LIME Publications section now houses LIME Newsletters, the Projects of Interest Database and the Resources Database – all of which are regularly updated with new information. This section also includes the LIME Good Practice Case Studies booklet, which is available for download.

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.

Organisations and medical students, to discuss issues of partnerships between organisations, was postponed.

LIME staff will work with Reference Group members over the coming months to develop the next regional meeting.

PATHWAYS INTO MEDICINE ONLINE RESOURCE

The LIME Network has been developing a comprehensive database gathering information on Indigenous student pathways into medicine for all universities in Australia and New Zealand. Currently, prospective students have to navigate potentially confusing, conflicting or out of date information in order to determine which course is right for them, and how to apply. It can be especially difficult to determine information about Indigenous alternative entry options or preparatory courses.

The Pathways into Medicine resource will be an online, searchable database, designed to provide a first point of contact for school leavers, mature aged students and graduates who are looking to undertake medical studies. The resource will be searchable by location, length of course, type of course, and pre-requisites. In addition, the resource will provide information on alternative entry pathways and preparatory courses linked to each university specifically for Indigenous people; provide further information on assistance with housing and finance whilst studying; and provide up to date contact details for Indigenous student support staff at each university.

We hope that this resource can be widely utilised by Indigenous people wanting to study medicine, and that the database will assist future students in choosing the university that best suits their needs.

The Pathways into Medicine resource will be available on the LIME Network website in the coming month so keep an eye out!

STAFF UPDATE

The LIME team would like to sincerely thank Margo Collins for her hard work and enthusiasm for the LIME Project over the past year, during her time as LIME Program Manager. Margo has been a wonderful addition to the team, and has supported a number of new initiatives during her year with LIME, particularly the development and publication of the highly regarded LIME Good Practice Case Studies resource. Thank you Margo!

In May the LIME team excitedly welcomed back Odette Mazel, LIME Program Manager, from maternity leave. Odette is now back in the office on a part time basis, and can be contacted via E: <lime-network@unimelb.edu.au> or T: +61 3 8344 9160.
TEACHING AND LEARNING

GOOD PRACTICE CASE STUDIES VOLUME TWO

The LIME Network is currently in the process of developing a second volume of the Good Practice Case Studies resource. The booklet will contain case studies based on presentations from LIME Connection IV in 2011 in the areas of teaching and learning; recruitment and retention; curriculum design and community engagement.

A committee has been established to peer review the submissions, and feedback will be given to authors after a meeting of the committee in July.

For more information and to download a copy of the Good Practice Case Studies volume one, please visit our website at W: <www.limenetwork.net.au/content/resources-and-lime-publications>.

INDIGENOUS AUSTRALIAN NARRATIVES ARE NOW AVAILABLE

Over the past two years the Creating Cultural Empathy and Challenging Attitudes Through Indigenous Narratives Project has been collecting narratives from Indigenous Australians about their experiences with health professionals and health services.

While a few of the stories relate to specific health issues, many focus on health professional/patient relationship development, racist assumptions and stereotyping and specific cultural issues, such as the importance of country to health, and the role of family and community. As expected, many of these stories contain heart-breaking accounts of suboptimal healthcare experiences and personal tragedies, however, the stories also reflect humour, personal strength, resilience and positive insights that engender a strong connection with the story provider.

The narratives are part of the Creating Cultural Empathy and Challenging Attitudes Through Indigenous Narratives Project, funded by the Australian Government Office for Learning and Teaching. Edith Cowan University leads the project, in collaboration with The Combined Universities Centre for Rural Health, Curtin University of Technology, The University of Notre Dame, The University of Western Australia and Health Consumers’ Council (WA).

The website features 43 narratives (available as videos and/or transcripts) and three scenarios which are available to health educators throughout Australia. The scenarios are composite stories based on key themes from the narratives that were identified by the Indigenous Reference Group. The scenarios, written by the Aboriginal playwright David Milroy, are also available as scripts.

The website features a search function for the narratives and health educators are encouraged to use blogs (attached to each narrative and scenario) to communicate with other educators regarding their ideas and experiences using the narratives. Facilitator’s Guides accompany the narratives and scenarios and it is anticipated that these will be refined through feedback from the educators.

The Project can offer a small amount of funding (AU$1000 per university) to facilitate workshops to develop learning materials and activities using the narrative resources.

Support for this project/activity has been provided by the Australian Government Office for Learning and Teaching. The views in this project do not necessarily reflect the views of the Australian Government Office for Learning and Teaching.

For more information please contact E: <altc.betterhealth@ecu.edu.au> or register via the project website W: <www.altc-betterhealth.ecu.edu.au>.

Scene from the Communication Scenario. Cinematographer, Thao Ly
GRADUATES AND CLINICIANS INFORMATION

NATIONAL GUIDE TO A PREVENTIVE HEALTH ASSESSMENT FOR ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE

The Royal Australian College of General Practitioners (RACGP) and the National Aboriginal Community Controlled Health Organisation (NACCHO) have recently launched an updated guide to assist healthcare providers to deliver best practice healthcare and prevent disease in Aboriginal and Torres Strait Islander populations. The National guide to a preventive health assessment for Aboriginal and Torres Strait Islander people provides health professionals with the most up-to-date, best practice advice in preventive health for Aboriginal and Torres Strait Islander people.

HEALTH WORKFORCE AUSTRALIA’S GROWING OUR FUTURE REPORT

Recognising and developing the vital role of Aboriginal and Torres Strait Islander health workers is the subject of Health Workforce Australia’s (HWA) Growing our Future report.

Considered by Ministers at the 27 April 2012 Standing Council on Health meeting, this report is timely given Aboriginal and Torres Strait Islander health practitioners joined the National Registration Scheme for the first time as of 1 July 2012.

Work on the HWA health worker project began in May 2010 and involved extensive national stakeholder consultation. The project’s interim report is currently available from HWA, with plans for the final report to be released later this year.

Growing our Future makes 27 recommendations to strengthen and sustain the Aboriginal and Torres Strait Islander health workforce to deliver care and ensure skills are fully utilised to meet the health needs of the communities.

It also proposes a nationally consistent definition for Aboriginal and Torres Strait Islander health workers, broadly supported by the project’s key stakeholders in the context of the significant variability of health worker roles in urban, regional and remote Australia.

In 2012-13 HWA will continue its work on increasing the capacity of the Aboriginal and Torres Strait Islander health workforce with involvement in a number of sub-projects. HWA is:

- Revising a clinical log book for health workers as a competency-based assessment tool.
- Creating a multimedia resource to promote awareness and respect of the health worker role.
- Providing Certificate IV Training and Assessment for Aboriginal and Torres Strait Islander health workers.
- Revising the national Aboriginal and Torres Strait Islander Primary Health Care Training Package.
- Developing an Aboriginal and Torres Strait Islander health curriculum framework for implementation in health professional education courses.

HWA is also undertaking a project on skill recognition and up skilling process to support Aboriginal and Torres Strait Islander health workers reach the level of qualification required for national registration as health practitioners.

For more information visit W: <www.hwa.gov.au> or contact Pat Maher, Program Manager, on T: +61 8 8409 4564 or E: <pat.maher@hwa.gov.au>.

ROWAN NICKS RUSSELL DRYSDALE FELLOWSHIP

The Rowan Nicks Russell Drysdale Fellowship at the University of Sydney 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 who wish to undertake approved programs/activities, further education or a research project, are strongly encouraged to apply.

The fellowship is valued at up to AU$60,000 towards a salary, support or resources for a period of up to 12 months at a level commensurate with the Fellow’s experience, qualifications and project proposal. OR a stipend and/or payment of course-fees to undertake approved training, education or research.

The Fellowship is awarded initially for a period of up to 12 months. Applications are now open for 2012. Applications close on 7 September, 2012.

For enquiries please contact Louise Lawler on T: +61 418 251 864 or E: <llawler@uow.edu.au>. 
FEATURE: MEDICAL DEANS AUSTRALIA AND NEW ZEALAND UPDATE

There has been much Indigenous health related activity occurring within Medical Deans Australia and New Zealand Inc. recently. Several new initiatives have begun and two significant projects were completed.

The Indigenous Health Expert Advisory Group (IHEAG)

The Indigenous Health Expert Advisory Group (IHEAG) was established in late 2011 to replace the Indigenous Health Sub-Committee and provide Medical Deans with relevant advice on Indigenous health and medical education from a wider range of stakeholders and professionals. The composition of the Group includes Deans of medicine, representatives of relevant stakeholder organisations and experts in areas impacting on Indigenous health including:

- Curriculum
- Clinical Research and Evaluation
- Recruitment and Retention
- Medical Academic Leadership
- Strategic Policy and Program Initiatives
- Vertical Integration
- Accreditation of Medical Programs

This IHEAG is co-chaired by Professor Alison Jones (Medical Deans) and Dr Tammy Kimpton (Australian Indigenous Doctors’ Association).

Medical Deans Project and Policy Manager

Late last year Medical Deans allocated specific funding to employ a Project and Policy Manager. This new position is responsible for the management, monitoring and administration of Medical Deans’ Indigenous Health portfolio, and at a broader level, developing new and strengthening strategic partnerships, drafting policy papers and responses to national consultation processes and developing new proposals for funding. The significant Indigenous health component of this new role reflects Medical Deans’ commitment to Indigenous health equality and belief in extensive consultation, meaningful partnerships and wide-ranging dialogue in order to effect positive and significant change. Mr Joe Cavanagh is employed in this role and can be contacted on T: +61 2 9114 1682 or E: jcavanagh@medicaldeans.org.au.

Te ORA – Medical Deans Collaboration Agreement

Late in 2010, discussions began with Te Ohu Rata o Aotearoa (Te ORA), the Māori Medical Practitioners Association, with the view to establishing a Collaboration Agreement between the two organisations, with a focus on joint activities with the two New Zealand medical schools. The Te ORA – Medical Deans Collaboration Agreement was signed at a wonderful ceremony at Waipapa Marae on Day 1 of the LIME Connection IV Conference in Auckland in November, 2011. The formalisation of the Agreement in 2011 brought together the peak representative body for Deans of Medicine with the peak representative body for Māori medical practitioners. Medical Deans and Te ORA are now formally committed to a collaborative, productive and effective partnership to improve health outcomes for the Māori people of New Zealand. This first collaboration agreement with Te ORA reflects Medical Deans’ trans-Tasman representation and both organisations commitment to work together within the principles of acknowledgement of the sovereignty of the Māori peoples, mutual regard and respect, inclusive consultation and decision-making, and cultural safety for all peoples in all spheres.

Te ORA is also one of the key partnering organisations represented on the Deans’ Indigenous Health Expert Advisory Group.

AIDA – Medical Deans Collaboration Agreement

A third Collaboration Agreement between Australian Indigenous Doctors’ Association (AIDA) and Medical Deans is currently being developed for the period 2012-2015. The AIDA - Medical Deans Collaboration Agreement, now in its seventh year, is based on mutual respect and a commitment to joint decision making and constant learning and reflection. The formal ongoing Collaboration Agreements between the two organisations provide a structured basis for pursuing Indigenous health initiatives, two of which were fully progressed in 2011 with funding made available from the Australian Government Department of Health and Ageing.
Medical Deans – AIDA National Medical Education Review

The Medical Deans – AIDA National Medical Education Review was completed in February 2012. The final report assesses and documents Australian medical schools’ implementation of AIDA’s Healthy Futures Report and the CDAMS (now Medical Deans) Indigenous Health Curriculum Framework. Over 270 individuals completed audit pro formas and participated in interviews and focus groups conducted within all Australian medical schools. Participants included Deans of medicine, medical faculty managers, medical students and key staff members implementing Indigenous health curricula and student recruitment and retention initiatives. The results of the review highlight that progress has occurred. Nationally, ‘all medical schools deliver more Indigenous health content than in 2004 and the numbers of Indigenous medical student enrolments increased each year since 2004, resulting in a total of 218 enrolments in 2011.’

While we celebrate these positive findings, the report indicates there is still much to achieve. Six schools are, in the main, responsible for the improvement in Indigenous student enrolments in recent years and most Australian medical schools highlighted a range of difficulties in allocating sufficient school staffing and funding resources, recruiting and developing leadership pathways for Indigenous staff and building effective partnerships with external Indigenous organisations such as Aboriginal Medical Services. All Australian medical schools identified important gaps and areas for improvement in their implementation of both Indigenous health curricula and student recruitment and retention initiatives. The report delivers 10 recommendations aimed to reduce significant issues impacting on the quality and sustainability of implementation of both initiatives.

Medical Deans – AIDA Capacity Building for Indigenous Medical Academic Leadership

The Medical Deans – AIDA Capacity Building for Indigenous Medical Academic Leadership project was completed in February 2012. The final report highlights the outcomes of the Capacity Building Forum, where ‘more than 70 professionals convened in Sydney on the 13th and 14th of October 2011 to brainstorm a series of strategies aimed at increasing the pool of Indigenous medical academic leaders.’ In breakout sessions participants, guided by a Stimulus Paper, considered the following topics:

- pipeline (pathway) issues
- curriculum differences across the country
- the dilemma of encouraging clinicians to undertake academic careers
- the capacity of research and teaching institutions
- ensuring culturally safe support networks
- the role of all organisations with a vested interest in building the Indigenous medical academic workforce
- strategies to support and fund initiatives identified within each of these categories

During the robust discussions which followed, participants considered pathways and support mechanisms to promote Indigenous medical academic leadership. The forum yielded four emergent themes:

1. The profile of academic careers is poor
2. Training options for academic careers
3. Remuneration is less for academics than clinicians
4. Support for Indigenous academics

With these themes and the need for much foundational work to be accomplished in mind, a series of broad recommendations and opportunities for action were identified for medical schools, research institutes and universities, medical specialist colleges, hospitals and health providers, Aboriginal Community Controlled Health Organisations and policy makers and funders.

The recommendations of both reports were endorsed by Medical Deans and AIDA in separate processes undertaken during February, 2012 and the reports have recently been printed and distributed to all Australian medical schools, Project Committee members and key stakeholders. Both reports can be accessed at the AIDA and Medical Deans’ websites at W:\www.aida.org.au and W:\www.medicaldeans.org.au.

AIDA and Medical Deans have begun working closely with the LIME Network, relevant organisations and medical schools to support the implementation of the recommendations of these reports.

For further information on any items contained in this article, please contact Mr Joe Cavanagh on T: +61 2 9114 1682 or E: jcavanagh@medicaldeans.org.au.
STUDENT INFORMATION

AUSTRALIAN NATIONAL UNIVERSITY’S INDIGENOUS HEALTH STREAM – A STUDENT PERSPECTIVE

Danielle Medek, 3rd Year Medical Student, Australian National University (ANU) Medical School.

I am the first member of the ANU’s Indigenous Stream, which started in 2009, and now involves seven students across the year levels. Participation in the Indigenous Stream allows students to pursue their interests in Indigenous health, offering invitations to events, encouragement and mentorship, and networking students with Indigenous people in the community, other health professionals and researchers with similar interests. Students are also encouraged to undertake a research project involving an aspect of Indigenous health.

Taking part in this program has exposed me to truly life-changing experiences. I have had cultural immersion in the Anangu Pitjantjatjara Yankunytjatjara lands of South Australia, and have learned about Indigenous spirituality on the South Coast of New South Wales. Lessons learned from these experiences will not just affect my practice, but have increased my respect for and connection to the Land and its people.

I am currently in Yuendumu, Northern Territory for a six-week clinical placement. This year I have also spent weekly sessions at the local Aboriginal health service as part of my clinical training in Bega, New South Wales. Meanwhile, my John Flynn placement has allowed me time with Indigenous patients in Charleville, Queensland. Seeing Indigenous patients from remote and regional locations in a variety of healthcare settings has led me to a greater appreciation of who the Indigenous people of Australia are and how multi-faceted the task is of addressing Indigenous health inequalities.

In Canberra, we are surrounded by a wealth of knowledge and enthusiasm in the area of Indigenous health. I have attended various seminars, lectures and workshops concerning public health initiatives, cultural awareness and ethical conduct in Indigenous research. I have been involved in mentoring and promoting tertiary education to young Indigenous people of the region, and have been welcomed into the Indigenous community, participating in festivals and events with health promotion stalls.

The avenues through which I have enriched my Indigenous education have been varied. I have enjoyed the self-directed aspects of the program. I have found that just showing an interest in Indigenous health is enough to open doors to more learning, and more experiences. My participation in the Indigenous Stream has taken me to places around Australia and within myself that I would never have gone otherwise. I look forward to a career putting what I’ve learned and experienced into practice.

Danielle with Ivy, a member of the community at Yuendumu
2013 NSW RURAL RESIDENT MEDICAL OFFICER CADETSHIPS FOR INDIGENOUS MEDICAL STUDENTS

The New South Wales (NSW) Rural Doctors Network (RDN), on behalf of the NSW Department of Health, is offering up to three Cadetships to Indigenous medical students interested in undertaking a medical career in rural NSW. Cadets in their final year of study apply for a PGY1 position through the Rural Preferential Recruitment process administered by the Clinical Education and Training Institute. Cadets receive up to AU$30,000 for the final two or three years of their medical degree and in return work for two years in a rural NSW 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 NSW is eligible to apply. Applications close 20 August 2012.

Further information and application forms are available at the Rural Doctors Network website.

AWARDS FOR THE ANNUAL RACGP CONFERENCE

The Royal Australian College of General Practitioners (RACGP) is holding its annual conference (GP12) on the Gold Coast on 25-27 October, 2012. GP12 is a highlight event on the general practice events calendar, attended by GPs, medical educators, students, registrars, key influencers in Australian general practice and members of practice teams.

The RACGP’s National Faculty of Aboriginal and Torres Strait Islander Health invites applications from Aboriginal and/or Torres Strait Islander medical students for the Aboriginal and/or Torres Strait Islander medical student bursary.

Medical students currently studying at an Australian university who identify as Aboriginal and/or Torres Strait Islander are invited to apply for a student bursary to attend this conference.

Interested applicants can download the application form from the RACGP website. Applications close 25 July 2012.

LIME FACEBOOK PAGE – JOIN US NOW!

New job, scholarship and study opportunities are now being promoted via the LIME Network Facebook page. Information shared via this page focuses primarily on opportunities relevant to medical students, while also providing news, resources and events information for everyone interested in Indigenous medical education.

Membership on the page is growing all the time – you can ‘like’ us now via the main LIME website, or join us directly on Facebook.

Project Officer– LIME Program

The LIME Program is now seeking applications for a Project Officer. The position is a full time maternity leave replacement role, available for one year, based in Melbourne. The Project Officer will be a member of the LIME Network Project and assist with planning, coordination and implementation of key projects and events of the LIME Network. These include an international conference, committee and other stakeholder meetings, development and maintenance of the LIME website, and coordination of the LIME Newsletter. This role will also involve communication tasks relating to the Project and its events. This position requires a keen and dynamic individual, with the ability to be a team player, and a desire to contribute to an exciting Program at the cutting edge of improvements in Aboriginal and Torres Strait Islander health and medical education.

Only Indigenous Australians are eligible to apply under the Special Measure Provision Section 12 (1) of the Equal Opportunity Act 2010 (Vic). To apply for this position by the closing date of 11th August 2012, please visit the University of Melbourne website.
LISTENING, LEARNING AND COLLABORATING

The relatively new Victorian organisation, Weenthunga Health Network, recently held its first Symposium Listening, Learning and Collaborating. The aim was to bring together First Australian and Australian health professionals from a range of health disciplines, to network and share ideas and knowledge on strategies to improve the health status of First Australians. A broad range of health professionals were present and feedback received was overwhelmingly positive, with the range and calibre of speakers noted, and their attendance on a Saturday in Melbourne indicative of the support for Weenthunga.

Aunty Dianne Kerr, an Elder of the Wurundjeri Tribe Land and Compensation Cultural Heritage Council Inc. and Project Officer of their Wellbeing Program, welcomed participants to the land on which the symposium was being held. She encouraged participants to direct their attention and efforts to finding ways to improve her people’s health. She shared her philosophies that “if we improve and enrich our overall wellbeing, our health will be positively influenced in return” as well as “if you look after your country, your country will look after you.”

The Listening and Learning segment of Weenthunga’s Symposium comprised presentations by leaders from the national Indigenous health organisations: Keynote Speaker Mr Justin Mohamed, Chair, National Aboriginal Community Controlled Health Organisation, Co-Chair National Health Leadership Forum and Committee member of the Close The Gap Steering Committee; Ms Faye Clarke, Victorian representative, Congress of Aboriginal and Torres Strait Islander Nurses; Mr Craig Dukes, CEO, Indigenous Allied Health Australia; Mr Clarke Scott, CEO, National Aboriginal and Torres Strait Islander Health Workers Association; and Dr Shannon Price, Member, Australian Indigenous Doctors Association.

These speakers’ messages illustrated the need for Australians to come together, harness the voices of individuals as one so that “we can say what needs to be said and achieve what is long overdue.” Participants were reminded that it is inexcusable that health standards should differ so dramatically amongst the Australian population, with First Australians currently faced with higher mortality rates, shorter life expectancy and general poorer health standards than other Australians living in the same country. Education, collaboration, support, and recognition of all members of Australia’s healthcare system, along with not being ignorant to the social and emotional determinants which affect one’s health, were the key messages of the morning. The symposium strived and succeeded in conjuring an environment rich in passion and determination. Speakers encouraged awareness to be raised, networks to be made and the chance for people to remember that unity is the key. This was voiced as the core component of combating the current health crisis.

The Collaborating segment in the afternoon was very productive with small group discussion centred on four key questions, posed by the Weenthunga committee, which provided participants an opportunity to share and learn from each other and to plan collaborative strategies for all of

Left: Craig Dukes, Rod Jackson, Kelli McIntosh, Clarke Scott and Lin Oke. Photo: Carol Mioduchowski.
Right: Karen Hill, Weenthunga Committee member facilitating a small group discussion. Photo: Carol Mioduchowski
us in our various health roles and disciplines, aimed at improving the health of First Australians in Victoria. The feedback and responses have been documented and will inform the work of Weenthunga, helping shape its future directions and efforts.

The Helen McPherson Smith Trust generously supported the Weenthunga Symposium.

If you are in a health role you might like to join in Weenthunga’s efforts to contribute to improved services for First Australian children, adults and elders and their communities in Victoria. Membership is free via W: www.weenthunga.com.au/get_involved.

2012 AMSA & MSOD STUDENT RESEARCH GRANT INITIATIVE

Medical Deans Australia and New Zealand and the Australian Medical Students’ Association have partnered to further develop the research interests of current medical students through the establishment of a student research grant initiative, utilising data available through the Medical Schools Outcomes Database & Longitudinal Tracking (MSOD) Project.

For 2012, grants of normally up to AU$2,500 and potentially up to AU$5,000 are available to currently enrolled medical students to undertake a supervised research project. Applications opened on 4 June 2012 and will close 17 August 2012.

As part of this initiative academics can nominate themselves as potential supervisors for current students to contact.

If you are a medical student interested in applying, or an academic interested in nominating yourself as a potential supervisor, please visit the website for further information.

MAZIN GRACE – A NOVEL BY DYLAN COLEMAN

LIME Reference group member Dylan Coleman is set to release her first book, which will be published by UQP in September this year. The novel is the winner of the 2011 David Unaipon Award for Indigenous Writing and is based on Dylan’s mother’s story of growing up on a South Australian Lutheran Mission in the 1940s and 50s. The book has been highly praised in recent reviews. For further information please visit the UQP website.

THE HEALTH HEROES CAMPAIGN

The Health Heroes campaign is an initiative of the Australian Government Department of Health and Ageing. It aims to encourage Aboriginal and Torres Strait Islander secondary students to pursue a job in the health sector and supports the Australian Government’s commitment to close the gap in life expectancy between Aboriginal and Torres Strait Islander peoples and other Australians. Key resources available for students and advisers include:

• a Health Heroes website informing students about the range of health jobs, training options, career pathways and support available. The website also includes an interactive career quiz which suggests a range of health jobs based on participants’ interests and skills base.

• 20 case study videos of Health Heroes – young Aboriginal and Torres Strait Islander people talking about their real experiences and health-related jobs available on a DVD and on the campaign website.

• Health Heroes school resource kits which contain a DVD featuring interviews with the Health Heroes, brochures, posters and lesson plan ideas for teachers and career advisers.

For more information, please visit W: www.australia.gov.au/healthheroes, or email E: healthheroes@health.gov.au.
work at the University of New South Wales (UNSW) in the School of Public Health and Community Medicines Muru Marri Indigenous Health Unit.

We work on developing a broad ranging research and teaching agenda on Aboriginal health for the university. Part of our work is connecting with other groups like ours around Australia and internationally.

One thing that we do is around the continuous updating of the University’s medicine program to ensure its relevance and suitability to practise for our graduates.

Since starting at UNSW some nine years ago, I have seen the Indigenous pre medicine programme grow from a struggling process into the model of excellence that runs today through the Nura Gili Indigenous Programmes Unit. The programme runs over a month with students residing on campus for the duration. The programme is designed to prepare students for their first year of medical school, no matter which school they decide to enter.

One thing I am most proud of is the way we have built a residential scholarship programme that has supported more than fifty students at UNSW live on campus through the Shalom Gamarada Ngiyani Yana scholarship programme. We started that about seven years ago when we were seeing a large number of our students having to leave university because they could not afford to live nearby or have enough time to deal with the onerous workload a medical programme demands of its scholars.

I am so proud to be a Koori involved in growing our next generations of doctors. It makes my heart sing. I was once a young Koori medical student struggling with the task of supporting myself, paying the rent, and dealing with the constant workload of being a medical student. I am so happy that others don’t have to do it as hard as I had too. It is very rewarding.

For more information, please contact Professor Lisa Jackson Pulver at the Muru Marri Indigenous Health Unit, School of Public Health and Community Medicine, The University of New South Wales via T: +61 2 9385 3499 or E: <mmihu@unsw.edu.au>.
CONFERENCES AND EVENTS

Royal New Zealand College of General Practitioners (RNZCGP) Education Convention 2012; Close Encounters - Teaching and Learning in the Practice Environment
Wellington, New Zealand, 13-14 July

The Fourth Biennial RNZCGP Education Convention is an opportunity for all groups involved in medical education to come together to learn more about teaching and learning, to share expertise, and enjoy each other’s company. The convention is open to anyone who is involved in teaching in the primary care environment - such as medical educators and teachers of GP registrars, teachers on the postgraduate rural programme, teachers of full immersion year five students, teachers of trainee interns, practice managers and practice nurses.

Primary Health Care (PHC) Research Conference 2012
Canberra, ACT, 18-20 July

The PHC 2012 Conference will provide essential opportunities for delegates to present and hear about the latest research, share ideas, debate critical primary health care matters and form collaborations and network with speakers and other delegates. Building on from previous conferences and taking into account the increase in primary health care research, the program is a blend of opportunities for presentations with workshops, symposia, poster and paper sessions.

Remote Medical Education Conference 2012
Sydney, NSW, 27-28 July

The 2012 Remote Medical Education Conference will bring together individuals and organisations involved in remote medical education to share experiences and explore innovation. Activities will include education workshops, discussion groups, paper presentations and Continuing Professional Development activities. With around 100 delegates expected to attend, the conference will be large enough to investigate the big topics, while small enough to encourage networking and the development of collaborative arrangements.

Te Ohu Rata o Aotearoa - Māori Medical Practitioners Association (Te ORA) Scientific Conference
Kaitaia, New Zealand, 30 August – 2 September

Te ORA is the representative body for Māori doctors and medical students. Te ORA holds annual Hui ā Tau (annual general meeting for members) and Scientific Conferences enabling members and other organisations to present and discuss health research and issues of importance to Māori health. It’s an important Hui to reunite members with each other under a kaupapa of significance to members and invited guests.

This year’s Hui ā Tau and Scientific Conference will be held over four days instead of three days as in previous years. This is to cover off a haerenga-ā-rohe (trip around the local area) on day two (Friday), and enable sufficient time for people to travel to Āhīpara from other parts of the country.

U21 Health Sciences Group Annual Meeting
Auckland, New Zealand, 3-7 September

The program will be structured around main strands within the theme of The University and the Health Care System. These strands will be; leadership in health care, the role of the university; relating research to clinical activity; and developing a clinical academic workforce.

Population Health Congress
Adelaide, SA, 10-12 September

Organised and sponsored jointly by the four leading professional population health organisations in the Asia Pacific region, the Population Health Congress will replace their normal annual conferences in 2012 and create an environment for a very large gathering of population health professionals. It will provide the opportunity for working across and within organisations on key population health issues and for unparalleled opportunities for networking.

Council of Academic Public Health Institutions Australia (CAPHIA) 2012 Teaching and Learning Forum
Adelaide, SA, 13-14 September

CAPHIA is the peak organisation that represents Heads of Schools and Discipline leaders of public health in universities that offer undergraduate and postgraduate programs and research and community service activity in public health throughout Australia. Its purpose is to maintain high quality academic standards in the education
and development of public health practitioners and researchers, to lead and represent public health education in the tertiary sector and to be a respected voice and advocate for the development of public health professionals and researchers within Australia.

**Congress of Aboriginal and Torres Strait Islander Nurses (CATSIN) 14th National Conference and Annual General Meeting; Gettin’ There**
Cains, QLD, 19-21 September

CATSIN was founded in 1997, to formally represent Aboriginal and Torres Strait Islander nurses and midwives. CATSIN is made up of Indigenous nurses and midwives. CATSIN also has an associate membership for Aboriginal and Torres Strait Islander student nurses and retired nurses and midwives. CATSIN is a national, professional nursing and midwifery organisation. It is an independent organisation with links to other professional bodies, and is frequently asked to comment on issues and consult to these organisations.

**Chronic Diseases Network Conference 2012: Promoting Healthy Childhood**
Darwin, NT, 20-21 September

The conference theme, which was decided on by the delegates from 2011, is Promoting Healthy Childhood – Preventing Chronic Conditions. The conference program will explore the range of factors during the early years that contribute to chronic conditions later in life. Chronic conditions can be the result of influences during pregnancy, childhood, or adolescence. Influences on chronic conditions later in life include, but are not limited to, whether a mother smokes in pregnancy, a child’s diet and level of physical activity, exposure to domestic violence, parenting, and social determinants of health such as level of schooling, and the socioeconomic status of the family.

**MedEd12: Inclusion, Innovation and Investment for the Future**
Sydney, NSW, 21-22 September

Medical Deans Australia and New Zealand is delighted to announce MedEd12: Inclusion, Innovation and Investment for the Future, to take place in Sydney on 21 – 22 September 2012. This is the fourth national Medical Education Conference presented by Medical Deans since 2005. Through the themes of Inclusion, Innovation and Investment for the Future, the conference is a timely platform for discussion and advice on nationally agreed directions in relation to medical education, clinical training and health workforce initiatives.

Delegates will have the opportunity to listen to an array of high quality speakers and exchange ideas. Professor Jim McKillop, renowned medical educator from the UK and Chair of the current review of Good Medical Practice, the General Medical Council core guidance for all doctors, will be the keynote speaker. The importance of training across the continuum cannot be understated, and is shown by the sponsorship from partner organisations Confederation of Postgraduate Medical Education Councils and Committee of Presidents of Medical Colleges, together with the Australian Medical Council as accrediting body. Together with government stakeholders, students, doctors in training and policy makers, MedEd12 will contribute to discussion and debate that will drive policy for the future.

**The International Network of Indigenous Health Knowledge and Development (INIHKD) Conference**
Brisbane, QLD, 24-28 September

The INIHKD is an international assembly dedicated to improving the health of Indigenous peoples in Australia, New Zealand, Canada and the United States through Indigenous and community-led research, health services and workforce development. The conference theme will be Building Resilience: Renewing Individuals, Families and Communities.

**The Pacific Region Indigenous Doctors’ Congress (PRIDoC)**
Alice Springs, NT, 3-7 October

The Australian Indigenous Doctors’ Association Ltd (AIDA) is proud to host the 6th Pacific Region Indigenous Doctors Congress which will be held from October 3 through October 7, 2012 in Alice Springs, Northern Territory, Australia. You are invited to join an exciting professional program and to share in Indigenous cultural fellowship.

**The Seventh World Conference on the Promotion of Mental Health and Prevention of Mental and Behavioural Disorders: Incorporating Our Mob, Our Minds, Our Spirit Conference**
Perth, WA, 17-19 October

A 21st Century Approach to Mental Health can only be achieved if we cultivate partnerships incorporating science, policy and programmes along a long term trajectory of developing, evaluating, improving, disseminating and implementing programmes and generating the required advocacy, scientific knowledge, organisational structures and financial and manpower resources.
To do this the conference organisers welcome stakeholders from a wide range of disciplines including: policy makers and policy administrators in local/national government; professionals and clinicians in health and social care; service users; researchers and scientists; and representatives of institutional settings, for example, education, legal and judicial and labour.

Rural Medicine Australia Conference: Demonstrating the Diversity
Fremantle, WA, 26-28 October

This is the peak annual national conference for rural doctors and other professionals working in rural and remote communities. Rural Medicine Australia 2012 will include the biennial scientific forum on rural and remote medicine. The program will feature research presentations in a variety streams, discussion forms, workshops, and skills updates. The three day conference will be preceded by one-day and two-day procedural workshops accredited for continuing professional development.

The Lowitja Institute 2012 National Conference on Continuous Quality Improvement (CQI) in Aboriginal and Torres Strait Islander Primary Health Care: ‘CQI for Everyday and Everybody’
Melbourne, VIC, 13-14 November

The Lowitja Institute National Conference aims to bring together service providers (including community based and community controlled services), government agencies, researchers, industry and policy development departments to present their work/research on CQI in Aboriginal and Torres Strait Islander primary health care; to share information and stories about current research, tools and expertise on CQI in Aboriginal and Torres Strait Islander primary health care; and to identify gaps and complementary CQI initiatives.

Health Workforce Australia Conference – Inspire 2012 - Reshaping Australia’s Health Workforce
Melbourne, VIC, 13-14 November

Health Workforce Australia is planning its inaugural conference, Inspire 2012: Reshaping Australia’s Health Workforce. You are invited to be one of 500 anticipated health workforce leaders and educators from around Australia and overseas who will come together to learn from expert opinion, explore latest innovations, and be collectively inspired to take action to transform Australia’s health workforce.

Indigenous Allied Health Australia National Conference: Joining the Dots, An Interprofessional Approach to Indigenous Health
Brisbane, QLD, 22-23 November

The conference theme will be Joining the Dots ... An Interprofessional Approach to Indigenous Health. The conference program will focus on the importance of interprofessional working relationships and partnerships within the diversity of allied health services and the broader health and related areas, to improve the health and wellbeing of Indigenous Australians. The two day conference will provide a supportive environment for Aboriginal and Torres Strait Islander and non-Indigenous professionals to discuss topics related to: Indigenous Allied Health initiatives; education and training; cultural competency; holistic care; personal experiences; closing the gap; health leadership and influencing policy; lateral-professional partnerships and community health services.

The 2012 National Indigenous Health Conference
Gold Coast, QLD, 5-7 December

The 2012 National Indigenous Health Conference: Many Pathways, One Outcome, is designed to bring together both government and non-government agencies who are working in the field of Indigenous health with the belief that working together can close the gap between the state of Indigenous Health as compared to the health of mainstream Australians.

This gathering will highlight some of the existing Indigenous health programs currently implemented in Aboriginal and Torres Strait Islander communities and provide a unique opportunity for delegates and speakers to see the power of people networking together in one place, at one time with similar goals, and exchange information regarding the successes and challenges that workers involved in implementing Aboriginal and Torres Strait Islander health programs faced.

3rd Cross Cultural Health Care Conference: Collaborative and Multidisciplinary Interventions
Honolulu, O‘ahu, Hawai‘i, 8-9 February 2013

The objectives of this conference are to: assess the potential challenges healthcare practitioners and researchers face when working with diverse populations; identify the strengths and limitations of existing tools and measures that assess cultural competency/humility; and develop opportunities to collaborate with researchers and/or practitioners across disciplines who share an interest in cross-cultural healthcare.
Alukura Celebrates 25 Years of Women’s Health
(article cited from Australian Indigenous Doctors’ Association)

Women’s Policy Minister, Malarndirri McCarthy recently congratulated Congress Alukura on its 25th anniversary of delivering primary health care services to Aboriginal women in Central Australia. Alukura – ‘by the Grandmother’s Law’ – delivers traditional and culturally appropriate health services guided by Aboriginal grandmothers and aunts. “Celebrating 25-years of Alukura… is a remarkable milestone and a testament to all the hard working women, and the men who support them, who have turned their vision into a success,” said Minister McCarthy.

Increasing Indigenous University Staff Numbers to Improve Outcomes

Indigenous Scholarships / The Aurora Project has recently reported on the potential outcomes of increased Indigenous employment at Universities. “For many Indigenous Australians, stepping onto a university campus for the first time can be alienating. It can be difficult being one of the few Indigenous students at university, and this fact has been linked to non-completion rates for Indigenous students. To address this, efforts are underway to increase the numbers of Indigenous lecturers and research staff at universities, and to appoint more Indigenous leaders to the university executive.”

Heart Foundation BeAWARE: Supporting Aboriginal Health Workers and Non-Clincial Staff to Improve Patient Safety!
(article cited from Australian Indigenous Doctors’ Association)

Heart disease is the number one killer of Aboriginal and Torres Strait Islander peoples and the greatest contributor to the gap in life expectancy. The Heart Foundation and Stroke Foundation have produced an online learning module and in-practice resources, ‘BeAWARE of the warning signs of heart attack and stroke.’ BeAWARE supports Aboriginal Health Workers and non-clinical staff to promptly identify patients entering the practice with suspected warning signs of heart attack or stroke. BeAWARE also helps you to demonstrate adherence to accreditation standards and reduce your risk of medico-legal litigation. BeAWARE is free for all practices.

What Will Race Base Research Really Achieve? A Response to Charlatan Training of Aboriginal Health Workers

Mr Justin Mohamed, Chair of the National Aboriginal Community Controlled Health Organisation’s approximately 150 Aboriginal Community Controlled Health Services throughout Australia, questioned the motives of research undertaken by the Indigenous Affairs program at The Centre for Independent Studies, who in their own words examine “the unintended consequences of having race-based policies and whether the problems faced by Aboriginal Health Workers (AHW) are symptomatic of this separatism.”

Cape York: Mobile Women’s Health Service Marks 21 Years

The Mobile Women’s Health Service celebrates its 21st birthday this year, delivering health checks, advice and care to women living in rural and remote regions in Queensland.

The service was piloted in 1993 from five bases. Now the service is run from 15 bases and employs 15 nurses and two Indigenous Women’s Health Workers.

Indigenous Health Journal Celebrates 30 Years

Celebrating 30 years recently, the Australian Indigenous Health Bulletin started life in April 1982 as a hard-copy publication. It is now a peer-reviewed electronic journal published by the Australian Indigenous Health InfoNet. The HealthBulletin publishes peer-reviewed articles and reports on Indigenous health and reviews of specific topics. Information about recent developments of relevance to Indigenous health and summaries of innovative health promotion programs are also made available. Importantly, details of other recent journal articles, reports, conference presentations, resource materials, academic theses and details of new or revised websites are also available.
Aboriginal and Torres Strait Islander Health Practitioner National Registration

From 1 July 2012, Aboriginal and Torres Strait Islander health practitioners will join the National Registration and Accreditation Scheme – a single national system for the regulation of health professions. As from 1 July 2012, anyone who is required to by their employer to be registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia, or who wants to use any of these titles, should register:

- Aboriginal and Torres Strait Islander Health Practitioner
- Aboriginal Health Practitioner,
- Torres Strait Islander Health Practitioner

Workers currently registered in the Northern Territory will automatically transfer to the national scheme. For registration queries, call T: 1300 419 495.

Expression of Interest Sought for National Aboriginal and Torres Strait Islander Health Education Committee

The National Faculty of Aboriginal and Torres Strait Islander Health are establishing an Education Committee to advise the Faculty Board in areas relating to General Practice and Primary Care Education in Aboriginal and Torres Strait Islander Health. The committee will consist of people with an interest and experience in GP education from a variety of backgrounds, including Aboriginal and Torres Strait Islander communities. The committee will work closely with the Faculty Censor and Medical Advisor. If you want to contribute to improving the way general practice works with Aboriginal and Torres Strait Islander people and have interest in education, then we would like to hear from you. Aboriginal and Torres Strait Islander people are strongly encouraged to nominate.

Indigenous Welcome and RAP Celebration at University of Melbourne

The 2012 Indigenous Welcome and a celebration of the University’s Reconciliation Action Plan was held on Thursday 15 March. This event provided an opportunity to meet and socialise with the University’s Aboriginal and Torres Strait Islander staff and students and to learn about the University’s Reconciliation Action Plan, which is in its second year. For more information please direct enquiries to Ellen Day, T: +61 3 8344 8803 or E: <daye@unimelb.edu.au>.

PUBLICATIONS AND RESOURCES

Following are some recent publications and resources of interest. For more publications, visit the LIME Network Resources Database.

Medical Schools as Agents of Change: Socially Accountable Medical Education

This article explores how ‘medical education reform can make an important contribution to the future health care of populations.’ The abstract notes that ‘orthodoxies in medical education have been challenged where the gap between a community’s health care needs and the availability of doctors has been greatest - notably in rural areas and, in Australia, in Aboriginal communities. At a time of growing crisis in health care systems, the need to focus on addressing health inequalities and delivering effective, affordable, people-centred health care is more important than ever… An international movement for change and coalitions of medical schools with an interest in socially accountable medical education provide a “community of practice” that can drive change from within.’
Closing the Gap: Prime Minister’s Report 2012
2012, Australian Government Department of Families, Housing, Community Services and Indigenous Affairs

This Closing the Gap report shows that the foundations for overcoming Indigenous disadvantage are now in place. It demonstrates how governments are delivering investments that will make a significant difference over the long term. It shows that Indigenous people are actively engaging with government and taking responsibility for making changes in their lives.

Close the Gap Campaign Steering Committee for Indigenous Health Equality, 2012, Oxfam Australia

This report examines progress towards closing the gap between Aboriginal and Torres Strait Islander peoples and other Australians in areas such as health, employment and education.

The closing the gap health and health related-programs have continued to be rolled out in the past year and have the potential to make significant headway in relation to smoking cessation, infant health and chronic disease.

Health Performance Report Access
2012, Australian Indigenous HealthInfoNet

The Australian Indigenous HealthInfoNet now has a dedicated section which provides information about and links to the Aboriginal and Torres Strait Islander Health Performance reports. The Aboriginal and Torres Strait Islander Health Performance Framework (HPF), was designed to ‘support a comprehensive and coordinated effort both across and beyond the health sector to address the complex and interrelated factors’ that contribute to the health disadvantages experienced by Indigenous people. The HPF was also seen as ‘an opportunity to streamline reporting on Aboriginal and Torres Strait Islander health and health care delivery.’

Addressing Indigenous Health Workforce Inequities: A Literature Review Exploring ‘Best’ Practice for Recruitment into Tertiary Health Programmes

Addressing the underrepresentation of Indigenous health professionals is recognised internationally as being integral to overcoming Indigenous health inequities. This literature review aims to identify ‘best practice’ for recruitment of Indigenous secondary school students into tertiary health programmes with particular relevance to recruitment of Māori within a New Zealand context.

Building Indigenous Medical Academic Leadership
Astles-Phillips, R., 2012, Australian Indigenous Doctors’ Association and Medical Deans Australia and New Zealand

This report of the forum on Capacity Building for Indigenous Medical Academic Leadership provides a comprehensive account of the key themes which emerged from the discussions over the two days of the Forum, as well as specific recommendations to be considered and implemented over the next 3-5 years. The outcomes reflect the vast experiential knowledge and leadership background of the 70 Forum participants, from across the medical education continuum, and in many cases, broader health education sector. The outcomes therefore honestly reflect the many challenges to date to building capacity in the Indigenous medical academic sphere.

Cavanagh, J., 2012, Medical Deans Australia and New Zealand and Australian Indigenous Doctors’ Association

This review of the implementation of the CDAMS (now Medical Deans) Indigenous Health Curriculum Framework and the Australian Indigenous Doctors’ Association’s Healthy Futures Report arose out of the Medical Deans – AIDA 2008 Collaboration Agreement. The review commenced in September 2010. A Steering Committee and Technical Reference Group were established and qualitative and quantitative research and data collection was undertaken in all Australian medical schools from January – September, 2011. The principal instruments used in the collection of data were semi-structured interviews, student focus group discussions and written responses to two audit proformas. The final report was submitted to the Australian Government Department of Health and Ageing in February 2012.
Australia’s Health Workforce Series: Doctors in Focus
2012, Health Workforce Australia

Health Workforce Australia (HWA) is an initiative of the Council of Australian Governments and was established to address the challenges of providing a skilled, flexible and innovative health workforce that responds to the needs of the Australian community. To be able to plan for these future challenges, it is imperative to understand the existing workforce, its size and characteristics and origins. To this end, HWA designed the Australia’s Health Workforce series, to focus on describing particular professions, settings and issues of interest to provide the context for understanding future health workforce challenges. This is the first issue in the Australia’s Health Workforce series and in this issue doctors in Australia are in focus. Information is brought together from various sources to provide a picture of Australia’s existing doctor workforce.

Racial and Ethnic Identification and Quality of Care: An Australian Perspective

Reflection in/and Writing: Pedagogy and Practice in Medical Education
Wear, D., Zarconi, J., Garden R., and Jones T., 2012, Academic Medicine, v.87, no.5

During the past decade, ‘reflection’ and ‘reflective writing’ have become familiar terms and practices in medical education. The authors of this article argue that the use of the terms requires more thoughtfulness and precision, particularly because medical educators ask students to do so much reflection and reflective writing. The authors examine the debate over how to respond to reflective writing, and, finally, they offer a set of recommendations for incorporating reflection and reflective writing into the medical curriculum.

Summary of Australian Indigenous Health Status 2011
2012, Australian Indigenous HealthInfoNet

The Summary of Australian Indigenous health status 2011 is now freely available on the Australian Indigenous HealthInfoNet website. It provides a plain language summary of the most recent indicators of the health of Indigenous people. The Summary aims to make this information available to all people, including those without a specialised knowledge of the health field.

Managing Two Worlds Together: Stage 2 - Patient Journey Mapping Tools

The Managing Two Worlds Together project aims to add to existing knowledge of what works well and what needs improvement in the system of care for Aboriginal patients from rural and remote areas of South Australia (and parts of the Northern Territory). It explores their complex patient journeys and what happens when they come to Adelaide for hospital care. The relationship between patients and health care providers is the foundation of care and requires communication across cultures, geography and life experiences.

Overcoming the ‘Shame’ Factor: Empowering Indigenous People to Share and Celebrate Their Culture

This paper explores the tenuous relationship between Indigenous perspectives and educational institutions. It discusses the importance of developing respectful dialogue between the two, along with the fundamental necessity of working within a community as opposed to upon it.

Revised Recommendations for Clinical Care Guidelines on the Management of Otitis Media (Middle Ear Infection) in Aboriginal and Torres Strait Islander Populations 2010
2012, Australian Government Department of Health and Ageing

The Recommendations for Clinical Care Guidelines on the Management of Otitis Media in Aboriginal and Torres Strait Islander Populations aim to improve the prevention, early detection and management of Otitis Media in Aboriginal and Torres Strait Islander children in the primary healthcare setting and improve the long term health outcomes for Aboriginal and Torres Strait Islander children. This updated version, prepared by an expert team in ear health led by the Menzies School of Health Research, is based on the 2001 Guidelines and relevant research studies published since 2001.
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 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 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, funded by the Australian Government Department of Health and Ageing.* It was developed as a stand alone project in 2008 and stemmed from the Indigenous Health Project which began in 2002. 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 Program.

The LIME Network Program has achieved significant outcomes including:

- The facilitation of bi-annual Reference Group meetings to provide the opportunity for those working in Indigenous health within medical schools to collaborate, share information, provide feedback and peer network
- The biennial LIME Connection conference to provide a forum for knowledge transfer and dissemination
- Publication of the tri-annual LIME Network Newsletter promoting best practice and sharing successes in the field
- Maintaining the LIME Network Website housing information on LIME Network projects and other news and events
- Building the evidence base of the efficacy of Indigenous health curriculum development and implementation as well as Indigenous student recruitment and retention initiatives through publications such as the Good Practice Case Studies Booklet and the Special Edition of the ANZAHPE Focus on Health Professional Education Journal
- Developing and implementing internal review tools to support medical schools to reflect and evaluate their performance
- Supporting Indigenous high school students to understand the pathways to studying medicine through the online Pathways into Medicine Resource
- Building linkages across health disciplines and with medical colleges through networking and information sharing
- Supporting collaboration between medical schools and their local Indigenous Community Controlled Health Organisations through the facilitation of Regional Meetings
- Contributing to the Medical Deans – AIDA National Medical Education Review.

*The LIME Network is hosted by the Onemda VicHealth Koori Health Unit within the Melbourne School of Population Health at the University of Melbourne.

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.