



THE LIME NETWORK
Leaders in Indigenous Medical Education

NEWSLETTER

ISSUE NO. 14 / March 2014



LIME WELCOME

Welcome to the fourteenth 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 the launch of the LIME Network Pathways into Medicine Videos.

We also profile a number of teaching and learning initiatives, have information for graduates, clinicians, and students, and

highlight projects of interest, including an Indigenous curriculum development project from Health Workforce Australia. Our member profile this month features LIME Reference Group Member, Dr Suzanne Pitama from the University of Otago, Christchurch.

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

The LIME Network Newsletter is published three times per year (March, July and November) and includes the latest information about 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 – please contact us via W: <<http://www.limenetwork.net.au/contact>>.



University of Auckland student, Maihi Brown talking about his pathway into medicine; part of the LIME Network Pathways into Medicine Videos, see page 6. Photo: Caden Pearson.

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LOGO AND ARTWORK
by Michelle Smith
and Kevin Murray

NEWSLETTER DESIGN
by Warwick Padgham and
Inprint Design

LIME NETWORK UPDATE

LIME NETWORK WEBSITE

The LIME Network website continues to be expanded and updated in order to keep members informed of:

- relevant Indigenous health and medical education **news**;
- **scholarships, jobs and grants**; and
- **conferences, workshops and events**.

On the website you can also find the Indigenous Pathways into Medicine Online Resource.

The Resources and LIME Publications section is regularly updated with new information and houses:

- **LIME Newsletters**;
- **The Projects of Interest Database**;
- **The LIME Good Practice Case Studies resources**, which are available for download; and
- **The Resources Database**, which will be reorganised in the coming months to increase clarity of information and ease of use.

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

REFERENCE GROUP

The LIME Network Program includes a Reference Group which consists of medical educators from each medical school in Australia and Aotearoa/ New Zealand, who aim to improve Indigenous health through medical education, as well as Indigenous student recruitment and support.

The latest **Reference Group** meeting was held at the Australian National University in Canberra on 5 November 2013. Seventeen Reference Group members attended the meeting and were joined by representatives from Medical Deans Australia and New Zealand, and the Australian Indigenous Doctors' Association for part of the day.

Key areas of discussion around LIME activities included:

- **LIME Connection V Post Conference Report and delegate evaluation data**;
- **Development of videos to accompany the Indigenous Pathways into Medicine Online Resource**, which aim to further recruitment and support of Indigenous medical students;
- **The Good Practice Case Studies Volume Two resource launch and distribution**: approximately 700 hard copies have been distributed and another 100 downloaded from the LIME Network website;

- **Ongoing development of the online tools for reviewing and mapping Indigenous health initiatives in Medical Schools**. The tools have been developed to assist schools to internally review and map their Indigenous health initiatives against the AMC Standards for Assessment Accreditation and the CDAMS Indigenous Health Curriculum Framework and will be trialled this year;
- **Completion of videos showcasing the role of Aboriginal and Torres Strait Islander Health Practitioners developed by members of the Reference Group, HWA and the Rural Health Education Network**. The videos are now available online;
- **Future funding for the LIME Network and Governance**.

The University of Notre Dame, Fremantle will host the next Reference Group meeting in May.

LIME CONNECTION VI

The LIME Network, along with representatives from James Cook University in Townsville have begun planning for LIME Connection VI, to be held in tropical north Queensland in 2015. The first steps in planning have started, including searching for conference venues, finding interesting and culturally appropriate social event spaces. A date will be decided soon.

THE LIME NETWORK PROJECT TEAM

The Project Team includes Associate Professor Shaun Ewen, Ms Odette Mazel, Ms Caitlin Ryan, Mr Warwick Padgham and Ms Erin Nicholls (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**.

To find out more about us visit the LIME Network website at

W: <<http://www.limenetwork.net.au>>.



LIME Reference Group members at the Australian National University in Canberra.
Photo: Romlie Mokak.

DEANS MEETINGS

As part of the LIME Network Program's activities this year, LIME staff have begun meeting with new medical school Deans and their LIME Reference Group members. These meetings are designed to formally introduce the LIME Network Program to new Deans, and to update existing medical school leaders on current activities.

Over the past month, LIME Network staff and Reference Group member Rose Gilby met with Professor Wayne Hodgson, Deputy Dean (Education), Faculty of Medicine, Nursing and Health Sciences and other health education leaders at Monash University. We expect to meet with a number of additional Deans over the year ahead.

A COMMITMENT TO RECONCILIATION

A recent addition to the LIME website is a page showcasing the commitments towards reconciliation that have been developed by many of the organisations who contribute to the success of the LIME Network.

Many universities and other members of the LIME Network have demonstrated their commitment towards reconciliation. To assist in the dissemination of information regarding reconciliation between non-Indigenous and Indigenous Australians, each university's Reconciliation Statement or Action Plan has been shared via this new web page.

Where available, Reconciliation Action Plans or Statements have been acquired from the University Faculties involved with the teaching and learning of Indigenous health and medical education.

To access the Commitment to Reconciliation page, please visit **W:** <<http://www.limenetwork.net.au/content/commitment-reconciliation>>.

If you have any suggestions about Reconciliation Action Plans or to add to this page, please contact us via
E: <lime-network@unimelb.edu.au> or
T: +61 3 8344 9160.

LIME HOSTS VISITING PROFESSOR OF MEDICAL EDUCATION



As part of our ongoing activities, the LIME Network has been hosting *Slice of LIME Seminars*. These workshops focus on specific topics of interest for our members, and we aim to hold at least two of these seminars per year. The first in this series was held on 3 March 2014 with Professor Fred Hafferty from the Mayo Clinic, USA, and focused on admissions criteria.

Twenty-three people participated in the session, with ten attending in person, and thirteen via an online stream. Those attending online were able to participate in the discussion through a text chat function, with questions conveyed to Professor Hafferty during the session.

After providing the group with some background to his work at the Mayo Clinic and life in Minnesota, Professor Hafferty led an interactive workshop and discussion on admissions criteria, and the way these criteria impact on student cohorts and curriculum content.

A variety of topics were discussed during the workshop, including:

- the impact of admissions criteria and practices on quality education;
- indicators measuring the quality of medical education;
- patients and local community involvement in medicine admissions criteria and curricula development;
- Indigenous admissions and the quality of curricula being enhanced by the presence of Indigenous students;
- challenges of alternative entry processes, where students can be set up to be seen as separate or different from the main student cohort; and
- supporting a diverse student body with various backgrounds, interests and ways of working.

To view the recorded discussion, please visit

W: <<http://www.limenetwork.net.au/content/slice-lime-seminars>>.



Prof. Fred Hafferty addresses the online audience during his 'Admissions criteria as a driver of quality in medical education' workshop. Photo: Caitlin Ryan.



New job, scholarship and study opportunities are 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 via **W:** <<http://www.facebook.com/LIMENetwork>>.

TEACHING AND LEARNING

DOUBLING THE NUMBER OF MĀORI MEDICAL STUDENTS AT THE UNIVERSITY OF OTAGO

From 2007-2010, the number of Māori medical students enrolled in the Bachelor of Medicine and Bachelor of Surgery (MB ChB) programme at the University of Otago increased from 62 to 78. In the next three year period, 2011-2014, the number of Māori medical students more than doubled. With 160 Māori students enrolled, Māori now make up approximately 10 per cent of the total population of medical students. It is no coincidence that this increase in Māori student enrolment correlates to the founding of Otago University's Māori Health Workforce Development Unit (MHWDU) in 2010 under the direction of Associate Professor Joanne Baxter.

With funding from the New Zealand Ministry of Health, the MHWDU Tū Kahika programme was first delivered in 2010 to support young Māori through the University of Otago Foundation Year health sciences course. The Tū Kahika Scholarship prepares Māori students academically, typically for the rigorous Health Sciences First Year (HSFY) course through the provision of academic, pastoral, social, and financial support. Driven by a strengths-based Māori kaupapa (agenda/focus) and a number of successes to date, the MHWDU now offer a suite of support programmes for aspiring Māori health professionals spanning from 'inspiration to graduation'.

The MHWDU work collaboratively with stakeholders to deliver outreach programmes that engage secondary students and Māori communities with the sciences. They also provide a platform for students to develop skills and knowledge towards entering into

tertiary health study. Programmes include a Year 9-10 Marine Studies science immersion programme run over two three-day blocks, with a follow up Year 11 six-day programme. MHWDU also contribute to Science Wānanga, a marae-based programme where Year 9-11 South Island students have the opportunity to engage with sciences, scientists and Māori role models whilst staying on various marae. For senior students the MHWDU offer Realising Educational Aspirations for Careers in Health, a three-day on-campus programme where students from all over New Zealand get to experience 'university life', attending lectures, labs and tutorials, and learning about health career pathways at Otago University.

Māori students studying HSFY are supported through Te Whakapuāwai's first year retention and support programme. Te Whakapuāwai has been integral to the increased numbers of Māori students studying toward professional qualifications at Otago University. In 2014 a new six-week intensive learning strategies and study skills programme is being introduced to complement the full academic tutorial support provided by the University's Māori Centre. The MHWDU will research the impact of the enhanced Te Whakapuāwai programme on learner outcomes with the objective of understanding how to accelerate academic outcomes for Māori learners, including those from socio-economic or educationally disadvantaged backgrounds. Following on is the MHWDU Tū Tauria Hauora programme, providing support and professional development opportunities to Otago University Māori health professional students through to graduation.

MHWDU programmes are helping to grow a strong, competent and representative Māori health workforce in Aotearoa/New Zealand. A focus on recruitment, retention and achievement has ensured the MHWDU's programmes support Māori students through their entire health professional degree. Delivering quality programmes led by Māori staff and underpinned by Māori values has evidenced a demonstrable increase in the number of Māori students enjoying success in Health Sciences study at the University of Otago.

For more information please contact A/Prof Joanne Baxter via
E: <jo.baxter@otago.ac.nz>.

COLLABORATION AGREEMENT SIGNALS NEW ERA FOR ALLIED HEALTH IN AUSTRALIA

The first Collaboration Agreement between Indigenous Allied Health Australia (IAHA) and the Australian Council of Pro-Vice-Chancellors and Deans of Health Sciences (ACPDHS) was signed on 25 November 2013 at the IAHA 2013 National Conference, held at the Hilton Adelaide.

IAHA is the national peak body representing Aboriginal and Torres Strait Islander allied health professionals and students, and ACPDHS is the peak representative body for Australian universities that provide undergraduate education in the clinical allied health sciences.

"IAHA and ACPDHS are both committed and responsive to the allied health needs of Aboriginal and Torres Strait Islander people," said Faye McMillan, IAHA Chairperson.

"This includes increasing the number of Aboriginal and Torres Strait Islander people participating in the allied health workforce, fostering a community centred and priority driven allied health research agenda for Aboriginal and Torres Strait Islander health, and strengthening the cultural competence of allied health graduates."

"The goal of the agreement is to contribute to improving the health and wellbeing of Aboriginal and Torres Strait Islander people through allied health education, research and workforce development," said ACPDHS Chairperson, Professor Ian

Wronski. "The Council intends to work collaboratively with IAHA to share knowledge, information, experience and resources to meet the objectives of the Agreement. Such collaboration is in line with our aim of strengthening the training of allied health practitioners in Australia to meet the needs of communities."

"Ultimately we want to work together to increase the number of Aboriginal and Torres Strait Islander allied health students enrolling in and graduating from allied health courses," said Ms McMillan. "We also want to see improvements in allied health students'

awareness of Aboriginal and Torres Strait Islander health and wellbeing needs and an increase in the cultural responsiveness of staff within allied health schools and faculties."

Both IAHA and ACPDHS look forward to building a sustainable working relationship over the next two years of this agreement, within the context of improving the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

For more information please contact Ms Donna Murray via E: ceo@iaha.com.au or T: +612 6285 1010.

COMMUNITY ENGAGEMENT CONTRIBUTES TO STUDENT LEARNING

In September 2013, second year NT Medical Program students Bekkie Lee and Ian Lee journeyed to the Katherine NT Remote Clinical School (NTRCS) to undertake a regional engagement study as part of their Flinders University Doctor of Medicine (MD). Their topic centred on gathering qualitative information from the Banatjarl Wimun's Grup regarding their participation in the March 2013 Remote Health Experience (RHE), an inter-professional event focused on remote health hosted by the Katherine NTRCS.

The Banatjarl Wimun's Grup was formed in 2003 by the Jawoyn Association in response to requests by Jawoyn women. The group is composed of Jawoyn women elders, who have knowledge of bush medicine and an aspiration to educate and pass on their knowledge. The women want to create their own solutions to issues they face and are directing their energy towards utilising the Banatjarl land to create their own family healing place that makes culture strong.

Gathering feedback from the women about their experiences at the three day Remote Health Experience is essential to ensuring the women's involvement in the RHE is positive for

them, ensuring any of their concerns are addressed in the preparation and delivery of the program. The learning experience for Bekkie and Ian aimed to help them better understand qualitative research methods and how the context can influence data collection quality.

'Talking circle' was the technique elected by the students to gather information from the Banatjarl women on their country. The women were very keen to share not only their experience of RHE 2013 but also their life experience around health matters, resulting in an outstanding experience for all involved. On the final day of the placement, after the information was gathered and results collated, the students presented their preliminary data to the community and

an academic panel at the NT Remote Clinical School in Katherine. Bekkie and Ian also created a poster with results of their research.

This regional study placement stimulated the students through their engagement with the local environment and people. Applying the two ways process of communication enabled the two groups to learn about each other and share their knowledge in a safe setting. Bekkie and Ian are keen to return to Katherine and learn more about rural medicine and the role they can play in the future landscape of Indigenous health.

For more information, please contact Eliza Gill via E: eliza.gill@flinders.edu.au, or T: +61 8 8946 7556.



Ian Lee and Bekkie Lee (far left) facilitating a talking circle with the Banatjarl Wimun's Grup with support from Kylie Stothers (centre seated on ground) from the Katherine Remote Clinical School. Photo: Hayley Jackson.

LIME PATHWAYS INTO MEDICINE VIDEOS

The LIME Network, in partnership with the Australian Indigenous Doctors' Association (AIDA) and Te ORA Māori Medical Practitioners Association (TeORA), is pleased to announce the launch of the Indigenous Pathways into Medicine Videos - now available for viewing as part of the LIME Network Indigenous Pathways into Medicine Online Resource.

These videos provide a personal insight into the journeys of a number of Indigenous medical students and graduates from Australia, Aotearoa/New Zealand and Hawaii, who are at varying stages of their degree or career.

In the videos, the students and graduates talk about their drive for wanting to study medicine, how they got into their course and the support structures that are available to them at university. They talk openly about the challenges they face as result of doing a medical degree but also of the opportunities and life-changing experiences that doing the course provides.

In his interview, Associate Professor Peter O'Mara explains how he came to understand that it was people, and people's health that he was passionate about. Inspired by the stories of two other Indigenous doctors, Peter realised his own potential and applied to study medicine at the University of Newcastle.

Mania Campbell-Seymour says it was her Nan who inspired her to study medicine and to be the first in her family to become a doctor. She talks about her entry into medicine through a foundation course and the support she receives from the University of Auckland as a Māori student.

Through profiling Indigenous medical students and doctors, their unique pathways into medicine and experiences of studying and practicing, the videos provide access to role

models in the Indigenous community that will inspire others to achieve their dream of becoming a doctor.

Four videos include:

- Journeys into Medicine
- Student Experiences
- Graduate Profile: Peter O'Mara, Martina Kamaka
- Graduate Profile: Elana Curtis, Alicia Veasey

A working group including members of AIDA, Te ORA and the LIME Network came together over six months to drive the development of the short films. At *LIME Connection V* in August 2013, the interviews with Indigenous medical

students and doctors were filmed by Bama Bagarmuguwarra and Kalpowar man Caden Pearson from the Onemda VicHealth Koori Health Unit at the University of Melbourne.

The videos provide an engaging addition to the Indigenous Pathways into Medicine Online Resource; a comprehensive, searchable database of information for potential Indigenous students to compare all medical courses in Australia and Aotearoa/New Zealand including entry requirements, location, course duration as well as information about alternative entry schemes and preparatory courses. Details of scholarships, housing and financial assistance are also provided, as well as the details of student support staff at each university.



Top: A/Prof Peter O'Mara, University of Newcastle tells his story about wanting to study medicine, given his passion about his people's health.



Below: University of Auckland medical student, Mania Campbell-Seymour talks about her pathway into medicine

Medical educators are encouraged to make use of the videos as a recruitment resource within their schools, and we would be very pleased to hear any feedback on the usefulness of the videos via E: <lime-network@unimelb.edu.au> or T: +61 3 8344 9160.

The working group for the project included:

- Justin Cain – AIDA
- Miriam Cavanagh – The University of Notre Dame (Sydney)
- Elana Curtis - The University of Auckland
- Jasmin Hunter – AIDA
- Odette Mazel – LIME Network
- Caden Pearson – Onemda VicHealth Koori Health Unit, The University of Melbourne
- Caitlin Ryan – LIME Network
- Terina Moke – Te ORA Māori Medical

Practitioners Association Interviewees featured in the videos are:

Indigenous Student Pathways

- Mania Campbell-Seymour – The University of Auckland
- Kelly Needham – University of Western Sydney
- Ngaree Blow – The University of Melbourne

Indigenous Student Experiences

- Sarah-Rebekah Clark – The University of Newcastle
- Lauren Barnett – University of Otago
- Maihi Brown – The University of Auckland
- Blair Rasmussen – The University of Sydney

Indigenous Graduate Profiles

- Dr Elana Curtis – The University of Auckland
- Dr Martina Kamaka – The University of Hawaii
- A/Prof Peter O'Mara – The University of Newcastle
- Dr Alicia Veasey – Junior Doctor, Mater Health Services; Board Member, AIDA



Top: Sarah-Rebekah Clark chats about her interests in studying medicine and the experience about studying medicine at the University of Newcastle.

Bottom: Dr Elana Curtis, The University of Auckland speaks about her pathway from student to health professional.

We are grateful to all our committee members and interviewees for participating in this exciting project.

The videos are now available for viewing on the LIME Network website via W: <<http://limenetwork.net.au/pathways>>.

All pathways photos by Caden Pearson.

LIME INDIGENOUS PATHWAYS INTO MEDICINE ONLINE RESOURCE

Are you thinking about becoming a doctor? Try out the Indigenous Pathways into Medicine Online Resource. The resource is designed to help future Indigenous students determine which university will be the best fit for them as they study to become a doctor. It is an online, searchable database, designed to provide a first point of contact for Indigenous school leavers, mature aged students and graduates who are looking to undertake medical studies.

GRADUATES AND CLINICIANS INFORMATION

INDIGENOUS DOCTORS ARE PROUD TO LEAD THE WAY

There are increasing numbers of Indigenous doctors graduating from medical schools. The University of Western Sydney's (UWS) recent Summer Graduation ceremonies saw six (four pictured below) high-achieving Indigenous medical students make the transition to university graduate, hospital intern and junior doctor.

There are currently an estimated 180 Aboriginal and Torres Strait Islander doctors and 260 Aboriginal and Torres Strait Islander medical students in Australia.

These UWS graduates will be pivotal in the long term care of Indigenous Australians. There is a growing sense now that one of the effective strategies in Closing the Gap between the life expectancy of Indigenous and non-Indigenous Australians is to support Indigenous students in their medical careers. In 2014 these young doctors are taking

up two-year internships in locations such as Gosford, Westmead, Campbelltown, Prince of Wales and Nepean hospitals.

Achieving their MBBS has been arduous but these graduates would stop at nothing to realise their long held dreams of becoming doctors. They have managed to achieve excellence as well as balancing family and professional lives.

The UWS School of Medicine is proud of its Indigenous graduates who are role models for the currently enrolled group of 19 Indigenous medical students. The graduates and current Indigenous medical students are also helping to inspire the many young Aboriginal high school students who participate in the University's Heartbeat program, which encourages young students to consider health careers.

For more information, please contact Jenny Akers via
E: <j.akers@uws.edu.au>.

BEYOND MEDICAL EDUCATION ACTIVELY SUPPORTING THE VICTORIAN INDIGENOUS COMMUNITY

Beyond Medical Education, based in Bendigo Victoria, has been actively increasing the support it provides to the local Indigenous community.

Beyond Medical Education is a company established primarily to offer the Australian General Practice Training Program in a large region of western and central New South Wales and north western Victoria.

Recently, they have appointed doctors to the Mildura and District Aboriginal Service: Dr Noore Nipa (part-time) and Dr Jane Neyland, who will be operating an antenatal clinic. A new doctor and supervisor has also been appointed at Goolum Goolum in Horsham, Dr Fearon Kelly.

Beyond Medical Education has also employed a new Program Manager, Ms Maureen Bates-Mckay, who is available for any Aboriginal medical service to contact for further information on their program. Maureen can be contacted on
T: +61 3 5441 9300.

For more information on Beyond Medical Education, please visit their website

W: <<http://www.beyondmedical.com.au>>.



UWS Indigenous Graduates from left; Dr Kelly Needham, Dr Raquel Fraser, Dr Josephine Guyer and Dr Dana Slape (not present in the photo are Dr Marissa Barker and Dr Alyce Giardina who also graduated in the 2013 ceremony).

Photo by: Sally Tsoutas.



A CULTURAL MENTORING PROGRAM BETWEEN NTGPE AND AMSANT

A Cultural Mentoring Program (CMP) joint submission between Northern Territory General Practice Education (NTGPE) and the Aboriginal Medical Service Alliance of the Northern Territory (AMSANT) was initiated in 2009. This offered a compelling argument for ongoing community-based cultural mentoring and support of General Practice Registrars (GPRs) and Junior Doctors undertaking Indigenous Health Training placements in remote Aboriginal communities. The objective was to increase the ability of doctors to connect with and understand the remote communities in which health programs are being implemented, improve cultural security in health service delivery and increase recruitment and retention rates for GPRs and Junior Doctors.

Despite resubmission in 2012, funding for the CMP was not secured. However, NTGPE remained committed to developing a body of work through an NTGPE Project Officer and facilitators from the GroundUp team at the Northern Institute at Charles Darwin University (CDU). A workshop ensued to explore with senior Yolnu cultural authorities, the potential for developing a CMP at Galiwinku, a large Aboriginal community on Elcho Island in Arnhem Land in the Northern Territory as a trial program. Subsequently, a successful three-day workshop was held at Galiwinku late in 2013 involving Cultural Educators, the Project Officer from NTGPE, seven senior Yolnu and the two facilitators from CDU.

NTGPE endorsed the GroundUp both-ways method and workshop driven, participatory action research

approach as an appropriate method for the Stage 2 Trial.

Following this endorsement and a preliminary scoping of how a CMP could be run at Galiwinku, a plan for Stage 2 was developed. NTGPE will endeavour to establish funding for the Trial CMP early in 2014 so the program can commence in the first half of the year. The trial will include developing sustainable structures and practices for the management, administration, resourcing, documentation and evaluation of the program. In community engagement terms, this project involves a very high level of community participation, with NTGPE collaborating with Aboriginal community members as partners in the decision making process about the Cultural Mentoring Program.

For more information, please contact Leeanne Pena via E: [<leeanne.pena@amsant.org.au>](mailto:leeanne.pena@amsant.org.au).

CELEBRATING FLINDERS UNIVERSITY MEDICAL STUDENTS, PAST AND PRESENT

Dr Aleeta Fejo was awarded a Fellowship by the Royal Australian College of General Practitioners (RACGP) in 2013, in a ceremony that was held during the GP13 Conference in Darwin. Dr Fejo is a Larrakia woman who also has a strong connection with the Katherine region in the Northern Territory. She is a former Flinders University student studying in Adelaide and Darwin, has practiced in the Katherine region as a Registrar and is presently working as a General Practitioner in Darwin.

Dr Fejo is considered a role model for current Indigenous students studying at Flinders University's NT

Medical Program, including Larrakia man Ian Lee, who considers Aleeta an inspiration to him and other Indigenous medical students.

Dr Fejo's success was celebrated by Flinders University's NT Remote Clinical School Director, Associate Professor Pascale Dettwiller, and Miliwanga Sandy, a member of the Banatjarl Wumin Council, both based in Katherine. Flinders University student Ian Lee recently spent one week with the pair in Katherine for a placement, and will return in 2014 to undertake a 20 week clinical rotation.

The work of Aleeta's brother, cultural educator Richard Fejo, was also celebrated at GP13. Northern Territory General Practice Education's Cultural and Medical Educators were announced as the winners of the RACGP Standing Strong Together Award for 2013. This Award acknowledges partnerships between General Practitioners and Aboriginal and Torres Strait Islander people in improving Aboriginal and Torres Strait Islander health.

For more information, please contact A/Prof. Pascale Dettwiller via E: [<pascale.dettwiller@flinders.edu.au>](mailto:pascale.dettwiller@flinders.edu.au).



Ian Lee, Larrakia man and current Flinders University NT Medical Program student celebrates Aleeta Fejo's success in receiving her Fellowship with the Royal Australian College of General Practitioners at the GP13 Conference in 2013. Photo: Pascale Dettwiller.

PROJECTS OF INTEREST

MSOD LAUNCHES NEW WEBSITE AND ELECTS INDIGENOUS REPRESENTATIVE

The Medical Schools Outcomes Database (MSOD) Project recently launched a new and improved MSOD website that is interactive, mobile-ready and user-friendly.

This stand-alone site features:

- A streamlined process for accessing data;
- Testimonials from MSOD participants and data users – read what they have to say; and
- An introduction to the new Project team.

Through this new website, you can stay in the loop with the latest MSOD news and follow and interact with MSOD on Twitter and Facebook.

The team invites you to explore their new site and they welcome any suggestions or comments at **W:** <<http://www.msod.org.au>>.

In recent news pertaining to the project, Mr Scott Winch, a Wiradjuri man, was elected as the Research and Scientific Advisory Committee's (R&SAC) Indigenous representative. Scott Winch is the Academic Leader of Indigenous Health for the Graduate School of Medicine at the University of Wollongong and is a member of the LIME Network Reference Group. Scott will assume the position of R&SAC Indigenous representative for 2014 and provide input and advice on all matters, including research referring to Aboriginal and Torres Strait Islander peoples.

The R&SAC also has the ability to draw upon more than one Indigenous health expert, utilising the diversity and experience of the LIME Reference Group. Upon recommendations

made by the Indigenous Health Expert Advisory Group (IHEAG) of Medical Deans (now disbanded), the R&SAC will liaise with the LIME Reference Group in specific circumstances where Mr Winch and the Committee feel that wider consultation is required, due to the complexities and sensitivities involved in research which relates to Aboriginal and Torres Strait Islander people.

The MSOD Project looks forward to working with Mr Winch and the LIME Reference group.

For more information, please contact Jessica Lyford, Project Officer – MSOD via **E:** <jlyford@medicaldeans.org.au>.

THE INDIGENOUS HEALTH AND CULTURAL COMPETENCY PROJECT (IH&CC)

The Indigenous Health and Cultural Competency (IH&CC) project, currently being developed at the Australasian College for Emergency Medicine, has released its first phase of eLearning modules and video Podcast episodes. The IH&CC project provides international medical graduates and other doctors working in emergency medicine education resources to strengthen their understanding of Aboriginal and Torres Strait Islander and other culturally and linguistically diverse communities, enhancing appropriate medical care.

The released IH&CC eLearning module series include four modules covering core knowledge and skills relating to IH&CC in the Emergency Department (ED), and are founded on principles that will be relevant for all health practitioners. These modules introduce learners to culturally competent care and communication in the ED and encourage the growth of understanding about health literacy and health beliefs in addition to language diversity and working with interpreters.

The next phase of modules, due for release in late March and April, focus on the need to improve ED access and experiences of the ED. They highlight the importance and skills required for culturally competent discharge planning and end of life care. They also detail relevant information on Aboriginal and Torres Islander, as well as other culturally and linguistically diverse patient health status and statistics, as related to presentations at the ED.

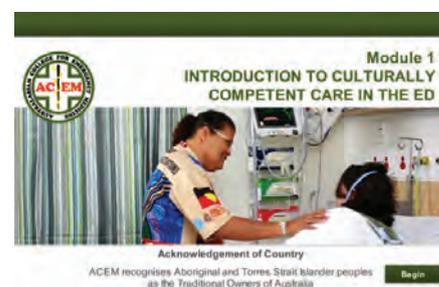
"They are excellent and should be read by everyone who is working or dealing with Indigenous health. I spend regular time providing medical care to Indigenous communities and I found a lot of new and interesting information in the modules" said Dr Marin Marinovic.

The video podcast series complements the eLearning module series by presenting an alternative learning approach to enhance learning relating to IH&CC in the ED and provide examples of culturally competent initiatives in the ED. These resources identify that cultural competency is an ongoing professional development process and is an important means to improve patient outcomes.

The current eLearning modules and video podcast series can be publically accessed via the ACEM website.

This project is funded by the Australian Government.

For more information please visit **W:** <<http://www.acem.org.au>> or **E:** <Cultural.Comp@acem.org.au>.



HEALTH WORKFORCE AUSTRALIA ABORIGINAL AND TORRES STRAIT ISLANDER CURRICULUM PROJECT

Enhancing the capabilities of the health professional workforce to better care for Aboriginal and Torres Strait Islander patients is a critical step in improving the health of Aboriginal and Torres Strait Islander people.

Health professionals need to be both clinically and culturally aware to genuinely affect positive outcomes. This is true in regards to the whole population, but is particularly important for Aboriginal and Torres Strait Islander people, whose health outcomes are often unacceptably poor. Ensuring all health professionals have cultural based training before they graduate from university is one way of improving healthcare practice for Aboriginal and Torres Strait Islander people.

While many universities around Australia are increasingly exploring ways to bring Aboriginal and Torres Strait Islander content and related training into health curricula, there is a lack of consistent understanding around the cultural capabilities needed in health professional training and the developmental journey required to get there.

One step to assist universities in developing the cultural capabilities of health graduates is a national Aboriginal and Torres Strait Islander Health Curriculum Framework. The introduction of a framework across universities has the potential to encourage consistency in teaching and learning practices, while providing a benchmark of minimum levels of cultural capabilities required to work effectively with Aboriginal and Torres Strait Islander peoples.

Health Workforce Australia (HWA), with the assistance of Curtin University, are undertaking a project to develop such a framework. This project will develop a national Aboriginal and Torres

Strait Islander Framework to support universities to improve the knowledge and capabilities of health professionals to work with Aboriginal and Torres Strait Islander people and their communities more effectively. It will provide health graduates with the skills to contribute to transforming health service organisations to be more inclusive and culturally safe.

The project team will be working closely with the higher education sector, students, Aboriginal and Torres Strait Islander communities, health services including the Aboriginal Community Controlled Health Organisations, and accreditation authorities.

The project is currently undertaking national consultations with multidisciplinary stakeholders to gain their insights into the key elements and implementation guidelines. Case studies from around Australia exploring stories of implementation as well as a literature review and environmental scan are also being conducted to inform the Aboriginal and Torres Strait Islander Health Curriculum Framework. An online consultation paper will shortly be available on the HWA website and the public are invited to provide their input if unable to attend the public consultations.

For further information visit
W: <<http://www.hwa.gov.au/work-programs/workforce-innovation-and-reform/atsihw/health-curriculum-framework>>.

FAMILY THERAPY TRAINING FOR ABORIGINAL WORKERS: TRAINING AS EMPOWERMENT

Since 2008, the Indigenous Program at the Bouverie Centre, staffed by a team of Aboriginal and non-Aboriginal Family Therapists, has been training Aboriginal and Torres Strait Islander Child, Family and Health Workers in Family Therapy. This three-year program includes one year training in a Post-Graduate Certificate in Family Therapy followed

by two years of facilitated group reflective practice building on wisdom, skills and knowledge for the group.

The students are community workers from a combination of Aboriginal Community Controlled Organisations and mainstream agencies covering a wide range of support services for children, family, drug and alcohol, family violence and justice.

This program combines post-graduate training with a reflective practice component developed collaboratively with Aboriginal communities bringing together mainstream family therapy frameworks and practice; and Aboriginal family healing knowledge and practices, resulting in the Black and White model that is culturally sensitive, respectful and inclusive.

The Indigenous Program at the Bouverie Centre has made a contribution towards closing the health and education gap for Indigenous people since its inception in 2007. The education gap is reflected in the low uptake of university education by Indigenous Australians where they account for only 0.5% of university places whilst representing 1.9 % population over 15 years of age (ABS & AIHW, 2008).

Professor Larissa Behrendt, Chair of the Federal Government's Review into Indigenous Access and Outcomes in Higher Education has cited the program as a best practice example in her recent Report to Government. What makes this training model different is its accessibility; the training is provided in community, so that the university comes to the participants; the model of education is 'safe and empowering' so that the considerable skills and knowledge of the students are built upon; places within the course are sponsored; and supervision is provided for two years post training to support the implementation of family therapy skills.

For more information, please contact Dr Kerry Proctor via
E: <k.proctor@latrobe.edu.au>.

LIME NETWORK PROFILE:

SUZANNE PITAMA - ASSOCIATE DEAN MĀORI, UNIVERSITY OF OTAGO, CHRISTCHURCH

Where are your whanau (family) from?

Ko Takitimu te waka

Ko Moumoukai te maunga

Ko Nuhaka te awa,

Ko nga Nuhaka te marae,

Ko Ngati Rangi raua ko Rakaipaaka
nga hapu

Ko Ngati Kahungunu te iwi.

My whanau hail from the northern tip of Hawkes Bay, which is found on the east coast of the North Island, Aotearoa. Our area is renowned for its surf breaks and kaimoana (seafood).

What is your current role and what does it involve?

I hold two positions; the first is Faculty Curriculum Representative for the University of Otago in Māori health. This involves chairing the Faculty Curriculum Hauora Māori (Māori Health) Sub-Committee, which draws together Māori health convenors from across our four teaching sites, to support individual site initiatives and collaborative initiatives, as well as advocating for Indigenous health curriculum on the broader Faculty Curriculum Committee.

My second position is as Associate Dean Māori at the University of Otago, Christchurch campus (one of three campi), which means I am the Director the Māori/Indigenous Health Institute (MIHI). The Institute is a centre set up for Indigenous health

teaching and research and I oversee the implementation of the Māori Strategic Framework across our campus.

How did you become interested in Indigenous health?

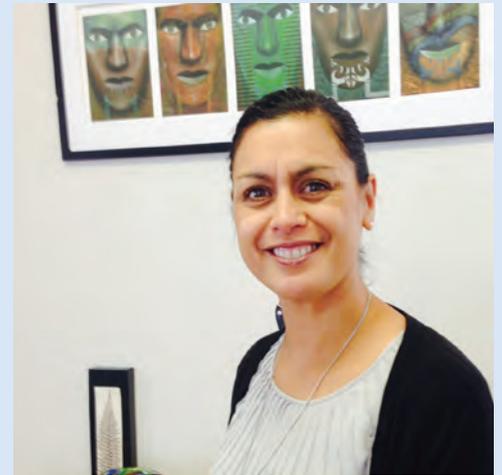
My early experiences as a child are filled with memories of being on marae; hanging out with my cousins and hearing the elders speak the Māori language. I perceived I lived in a somewhat 'perfect' world.

However upon entering university I came to the realisation that I was only on the marae often as a child due to whanau tangi (family funerals), of whanau members who were dying 20-30 years younger than my non-Māori friend's families. I realised the whanau land we lived on, and where our marae were – was the remnant of whanau land post-governmental interventions/confiscations, and that although my elders spoke the Māori language, there were whole generations who had been banned and actively discouraged to speak their language.

Because of this, I was not proficient in the language of my ancestors. So my perfect world bubble popped at 18 years of age – and since then I have sought to find how I can contribute to a future of more positive Indigenous health outcomes.

What is your history with the LIME Project?

I had the privilege to attend the first LIME Connection in 2005 in Fremantle. It was so awesome to meet others who were in the same canoe as me! Meeting other Indigenous and non-Indigenous colleagues who were trying to navigate



a space for Indigenous health within a medical institution, provided me with a wider range of support and networks than I had perceived was possible.

I was grateful for Gregory Phillips and his support as we attempted to develop our University's graduate profile inclusive of Indigenous health aspirations.

The opportunity to be involved in the CDAMS Indigenous Health Curriculum Framework document from an Aotearoa perspective was fantastic, and being involved in the LIME Reference Group has assisted me to further understand some of the wider issues facing Indigenous health curriculum within medical institutions.

What is a highlight of working in medical education and the LIME Network?

I have come to realise that we can change the health landscape for Indigenous people and change the narrative of current Indigenous health disparities through the way we train future clinicians, and that concept keeps me engaged in this work.

How do you think the LIME Network progresses medical education?

The LIME Network allows universities to come together with a shared vision to improve Indigenous health outcomes. The sub-projects that LIME has been a part of assist us to understand how to capture evidence on recruitment and retention of Indigenous students, curriculum initiatives, staff development and institutional impact. Without the LIME Network, Indigenous



Director of the Māori/Indigenous Health Institute, Suzanne Pitama (far right) with fellow University of Otago staff and students at LIME Connection V in 2013. Photo: Fiona Morrison.

health curriculum would have remained isolated within each institution, with no vehicle for creating a network.

Do you have any advice for Indigenous people thinking about a career in medicine, or medical education?

Indigenous health and medical education is an emerging field. There are specific challenges within institutions related to the recruitment and retention of Indigenous staff and students.

Determining the prioritisation of Indigenous health content (for both Indigenous and non-Indigenous students), teaching methods and assessment tools within the context of institutional timetabling politics, social accountability expectations and collegial buy-in, provides both an exciting and challenging work environment.

My PhD research led me to understand that our discipline of Indigenous health curriculum within medical education

is still actually a newly emerging discipline, and that the people from Aotearoa, Australia, Hawaii and Canada are doing amazing work as they attempt to navigate this new territory.

Medical education is not for the faint hearted, but can provide a vehicle by which institutional change and reform

can occur. I believe the LIME Network has accelerated such change for Aotearoa and Australia.

For more information about the Māori/Indigenous Health Institute, please visit their website **W**: <http://www.otago.ac.nz/christchurch/departments/mihi/>.



University of Otago medical student during recent student led clinics within a Māori community setting. Photo: Jane Marriner

STUDENT FOCUS

INTERVIEW WITH UNSW FIRST YEAR MEDICAL STUDENT – RUSSELL THOMPSON

Joel Katz from the Rural Clinical School at the University of New South Wales recently caught up with Indigenous medical student, Mr Russell Thompson and had a yarn about his ambitions for studying medicine.

First year UNSW medicine student Russell has always dreamed of being a doctor. He has just started studying medicine at UNSW, and hopes that one day he can spend time working in Indigenous healthcare. Russell took some time out to tell us his story.

What is your motivation for studying medicine?

Someone once said to me "find something you love and then find a way to get paid for it. If you can do this you will never have to work a day in your life". This saying rings true for me when it comes to medicine.

I've had a passion for science and health since I was a young boy. I've always been obsessed with how the body functions from a cellular level to the organism.

Can you tell us a bit about your past?

I grew up in Tamworth NSW, and belong to the Kamilaroi people. I'm 28 years old, and have a real passion for travelling - I've been to many countries around the world.

Would you like to work in Indigenous healthcare at some time in the future?

During my degree I hope to volunteer in the Northern Territory, Broken Hill and the Torres Strait Islands to gain a deeper understanding of the Indigenous health issues affecting particular areas of Australia.



UNSW first year medical student, Russell Thompson on a recent trip to Fiji, taken in a local village on the island of Nacula. "We visited the village to get a better understanding of how the locals lived. The idea of family is so strong over there. Everyone helps everyone no matter how hard things are."

I'd love to work within my community when I complete my degree, but right now I'm not really sure in what area I'll be able to provide most assistance. I'd like to work closely with the Tamworth Aboriginal Medical Service when I return home to Tamworth and provide whatever assistance necessary to work with my people throughout the New England area, in health issues affecting the community.

I believe that closing the socio-economic and health gap between Indigenous and non-Indigenous Australians is extremely important. One step towards this goal is to reduce the prevalence of diseases such as

diabetes, heart disease and chronic renal disease through health promotion and education.

I feel strongly that it's my responsibility as an Indigenous Australian to help my people in any way I can.

My life motto is "we need to look after each other".

For more information on Indigenous Entry into Medicine, please visit UNSW's Rural Clinical School website at **W:** <<http://rcs.med.unsw.edu.au/indigenous-entry-medicine>>.



SCHOLARSHIPS AND STUDENT INFORMATION

2015 NSW RURAL RESIDENT MEDICAL OFFICER CADETSHIPS FOR INDIGENEOUS MEDICAL STUDENTS

NSW Rural Doctors Network (RDN), on behalf of the NSW Ministry of Health, is offering up to two Cadetships to Indigenous medical students interested in a career in rural New South Wales.

Successful applicants receive a scholarship of AU\$30,000 during the final two or three years of their degree. In return, they agree to work for two years in an eligible NSW rural hospital within the first three years following graduation. Additional benefits include a relocation grant when moving to a rural location, attendance at RDN conferences, attendance at the annual RDN cadet weekend at one of the locations for rural service, and mentoring and support through RDN.

Applications are open to Indigenous medical students studying in NSW in the first or second year of a postgraduate degree, second or third year of a five-year degree or third or fourth year of a six-year degree. Indigenous students who completed Year 12 in NSW and are currently studying medicine at an interstate university or in New Zealand are also eligible to apply.

Applications close Monday 25 August 2014. Further information is available from the RDN website **W:** <<http://www.nswrdn.com.au/students>> or **T:**+61 2 8337 8100.

THE JOAN, ARTHUR & HELEN THACKER ABORIGINAL AND/OR TORRES STRAIT ISLANDER POSTGRADUATE SCHOLARSHIP

Established by the University of Otago Council in 2014, through the provision of funding from Helen R Thacker, this scholarship aims to support students of

Aboriginal and/or Torres Strait Islander descent to undertake postgraduate studies in the field of Health Sciences at the University of Otago, Aotearoa/ New Zealand. The purpose of the fund is to support research and training in health sciences subjects that may have a future benefit to Aboriginal and/or Torres Strait Islander communities.

For full details on the application process, please visit the University of Otago's Doctoral and Scholarships website **W:**<<http://www.otago.ac.nz/study/scholarships>>.

ROBERTA SYKES SCHOLARSHIPS

The Roberta Sykes Scholarship provides supplementary financial assistance to Indigenous postgraduate students who wish to undertake studies at recognised overseas universities. The value of the scholarship is up to AU\$30,000 for the period of one year, paid directly to the recipient in equal instalments at the start of each semester or term, subject to satisfactory academic progress. Applicants may reapply for the scholarship in subsequent years.

If you require further information or wish to discuss your application before submitting, please contact The Roberta Sykes Foundation via **W:** <<http://www.robertasykesfoundation.com/contact>>.

ANZCA INDIGENEOUS AUSTRALIAN ROTARY HEALTH INDIGENEOUS HEALTH SCHOLARSHIP

The program is a co-operative program between Australian Rotary Health, Rotary clubs, some State or Territory Governments and the Commonwealth Government.

The object of this program is to provide a scholarship, which can be used to assist Indigenous students with day-to-day expenses whilst undertaking a health related university course.

The value of each scholarship is AU\$5,000 per year. A Rotary Club contributes AU\$2,500 per year and the State or Commonwealth Government provides a similar amount. The Commonwealth Government also provides funding for the administration of the program within the Australian Rotary Health Office.

For more information, please visit **W:** <<http://www.australianrotaryhealth.org.au>>.

ABORIGINAL AND TORRES STRAIT ISLANDER PHARMACY SCHOLARSHIP SCHEME (ATSIPSS)

The purpose of this scholarship is to encourage Aboriginal and Torres Strait Islander students to undertake studies in pharmacy.

The Aboriginal and Torres Strait Islander Pharmacy Scholarship Scheme is funded by the Australian Government under the Fifth Community Pharmacy Agreement (5CPA) and is administered by the Pharmacy Guild of Australia. Please note that students studying full-time for either a Bachelor of Pharmacy or Master of Pharmacy can apply for the scholarship at any time throughout their study.

The scholarship is valued at AU\$15,000 per year. For more information and details on how to apply please visit **W:** <<http://www.ruralpharmacy.com.au>> or **E:** <ruralpharmacy@guild.org.au>.

APPLICATIONS FOR AMSA'S INDIGENOUS HEALTH ELECTIVE BURSARIES ARE NOW OPEN

The Australian Medical Student's Association (AMSA) offers bursaries for medical students interested in Indigenous health. The Indigenous health elective bursary is a fantastic way for students working towards a career in Indigenous health to gain valuable skills whilst still at medical school. The bursaries are valued at AU\$250-\$1000 and cover the costs of the elective, such as travel and accommodation.

Students need to first apply for the bursary and be successful, then complete their elective with an Indigenous health service provider within Australia, either in a RA 3-5 classified area or in a designated Indigenous health service as recognised by the National Aboriginal Community Controlled Health Organisation (NACCHO). The elective must be completed between July 2014 and March 2015.

Applications close on 30 June 2014. For more information please contact Erin Maylin, Rural and Indigenous Officer for AMSA, via E: <rural.indigenous@amsa.org.au> or visit W: <<http://www.amsa.org.au>>.

RACP PRESIDENT'S INDIGENOUS CONGRESS PRIZE

The Royal Australasian College of Physicians (RACP) is offering the RACP President's Indigenous Congress Prize to medical students, junior medical officers and physician trainees who identify as being of Aboriginal, Torres Strait Islander or Māori descent. The Prize will support attendance at the RACP Future Directions in Health Congress 2014, which will take place from 18 to 21 May 2014 in Auckland, Aotearoa/New Zealand.

Applications close 5.00pm AEDT, 2 April 2014. For more information, please visit W: <<http://www.racp.edu.au>>.

ANZCA INDIGENOUS HEALTH COMMITTEE ANNUAL SCIENTIFIC MEETING SPONSORSHIP

At the beginning of next year the Australian and New Zealand College of Anaesthetists will be offering up to three scholarships for Australian and New Zealand Indigenous medical students and junior doctors to attend the College's Annual Scientific Meeting in May 2014.

The scholarship will include a waiver of the conference fees. Next year's meeting will be held in Singapore and will be a joint meeting with the Royal Australasian College of Surgeons; attendees are welcome to attend sessions for both meetings.

For more information please visit W: <<http://www.anzca.edu.au>>.

NATIONAL RURAL HEALTH STUDENTS' NETWORK 2014 INDIGENOUS HEALTH PORTFOLIO

The National Rural Health Students' Network (NRHSN) is a collaboration of students who are passionate about improving health outcomes from rural and remote Australians with an interest in Indigenous health. The network consists of 29 Rural Health Clubs at universities across the country. Together we represent over 9000 members from medical, nursing and allied health disciplines

The National Rural Health Students' Network's (NRHSN) Indigenous Health Portfolio representatives for 2014 will be Sophie Alpen, a medical student from the University of New South Wales, and Gary J. Wood, a medical student from the University of Melbourne.

These representatives will be working closely with the NRHSN 2014 National Executive, the four other portfolio teams (Nursing, Allied Health, Medical and Community and Advocacy), as well as on a grass-roots level with the rural health clubs throughout the year.

The portfolio has a focus on encouraging and supporting students with an interest in Indigenous health. This is done by supporting rural health clubs and students to attend Indigenous Festivals held around the country, and the aim is to inform and encourage primary and secondary Indigenous students to think about taking up a career in health.

The Indigenous Health Portfolio engages with a number of Indigenous health organisations and hopes to maintain these connections throughout 2014.

Last year the Indigenous Health Portfolio representatives were able to attend LIME Connection V held in Darwin. Many other students who are also part of the Network attended and positively participated in discussions and conference sessions. Some students were also funded by the NRHSN to attend, which provided an opportunity for students with a shared interest to meet and connect with each other. The NRHSN looks forward to future opportunities to be present at LIME events.

The National Rural Health Students' Network is auspiced by Rural Health Workforce Australia, the peak body for the State and Territory Rural Workforce Agencies. To contact either Gary or Sophie please email E: <indigenous.health@nrhsn.org.au> as they would be more than happy to talk to you. For more information you can also visit the website W: <<http://nrhsn.org.au/site/index.cfm?display=109047>>.

PUBLICATIONS AND RESOURCES

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

Cultural competence in medical education: aligning the formal, informal and hidden curricula

Paul, D., Ewen, S. & Jones, R, 2014. *Advances in Health Sciences Education*, February 2014.

The concept of cultural competence has become reified by inclusion as an accreditation standard in the US and Canada, in New Zealand it is demanded through an Act of Parliament, and it pervades discussion in Australian medical education discourse. However, there is evidence that medical graduates feel poorly prepared to deliver cross-cultural care and many commentators have questioned the effectiveness of cultural competence curricula.

In this paper we apply Hafferty's taxonomy of curricula, the formal, informal and hidden curriculum to cultural competence.

Closing the Gap Prime Minister's Report 2014

Commonwealth of Australia 2014.

The Prime Minister reports annually on progress in Closing the Gap. This is the sixth annual report, tabled in Parliament on 12 February 2014.

Clinical teachers' perspectives on cultural competence in medical education

Lu, PY., Tsai, JC. & Tseng, SYH, 2014. *Medical Education*, Volume 48, Issue 2, pages 204-214, February 2014.

Globalisation and migration have inevitably shaped the objectives and content of medical education worldwide. Medical educators have responded to the consequent cultural diversity by advocating that future doctors should be culturally competent in caring for patients. As frontline clinical teachers play a key role in interpreting curriculum innovations and implementing both

explicit and hidden curricula, this study investigated clinical teachers' attitudes towards cultural competence training in terms of curriculum design, educational effectiveness and barriers to implementation.

Mental health in Indigenous settings challenges for clinicians

Hunter, E, 2014. *Australian Family Physician*, Volume 43, Issue 1/2 (Jan/Feb 2014).

Mental health problems in Aboriginal and Torres Strait Islander peoples are common, changing and challenging. Particularly in remote settings, doctors will need to untangle the complex interplay of culture, context and clinical significance. This paper emphasises the importance of local knowledge and cultural respect in complementing clinical competence in the management of Aboriginal and Torres Strait Islander peoples with mental health problems. Anxiety, depression, psychosis, self-harm and problems of childhood and old age are used to exemplify differences by comparison with practice in non-Indigenous populations.

Health professionals' views on Indigenous health and delivery of healthcare services in the Pilbara

Walker, B et al, 2013. *Australian Health Review*, Volume 37, Issue 4, pages 432-436.

The purpose of this paper is to explore health professionals' views about Australian Indigenous people's health and the delivery of healthcare to them, in the Pilbara region of Western Australia. This study details health professionals' views about the types of health conditions that need to be prioritised in addressing the health needs of Indigenous people in the Pilbara. It also details health professionals' perceptions of gaps in health service

delivery for Indigenous people in the Pilbara and examines how these services could be most effectively delivered.

New Indigenous CPD resources for health practitioners

HealthInfoNet, 2013.

This new portal on the Australian Indigenous HealthInfoNet website leads to research and other contemporary health knowledge in forms that have immediate, practical utility for practitioners and policy-makers. Life-long learning is required for all people working in the health system to stay abreast of recent developments and emerging knowledge and practice. This is essential in order to be responsive to scientific and other developments and changing societal expectations.

Defining culturally safe and inclusive practice: collaborative efforts for Indigenous frameworks in higher education

Aseron, J., Wilde, S., Miller, A. & Greymorning, S.N, 2013. *The Clute Institute International Academic Conferences*.

As a recognition for the continuing need to address the economic, social and educational disparity between Indigenous and non-Indigenous populations, this research focused on community identified understandings of key barriers and obstacles pertaining to sustained participation in higher education by Indigenous populations. Our initial investigations revealed the need to identify a manner that would include a safe cultural methodology necessary to engendering this participation. It became evident that current levels of understanding surrounding issues and ideas about acculturation, inclusiveness and multiculturalism were barriers to Indigenous peoples' participation in higher education.

NEWS

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

[Call For More Practising Indigenous Doctors in Australia to Help Improve Health of Communities](#)

Via ABC News

Currently in Australia, there are fewer than 200 practising doctors from an Indigenous background. Health experts have long called for more medical professionals with cultural understanding to help close the gap in life expectancy and medical outcomes between Indigenous and non-Indigenous Australians. To address this, the University of New South Wales set up a scholarship seven years ago with private philanthropic organisation the Balnaves Foundation specifically aimed at supporting Indigenous medical students.

Andrew Julian, 24, is the first student to successfully graduate with the scholarship. He grew up in Sydney's south and wanted to be a doctor from a young age. "Single child to a single parent, just loved science, loved the human body, played a lot of sport, had a few injuries and then spent a lot of time in a doctor's office," he said. "[I] just grew a passion for it and was lucky enough to get accepted into UNSW medicine."

He says the Balnaves scholarship supported him through the six long years of study at UNSW. **W:** <<http://www.abc.net.au/news/2013-12-06/indigenous-doctor/5141934>>.

[Programme for Māori Doctors](#)

Via Radio New Zealand

A Rotorua Whanau Ora Māori health provider aims to establish a training programme for tangata whenua GPs before the end of the year.

Korowai Aroha Health centre has been registered by the Royal New Zealand College of General Practitioners for obtaining the Cornerstone accreditation, which recognises high quality standards of care.

Korowai Aroha Chief Executive Hariata Vercoe says it's helping them to become a magnet for Māori doctors. Ms Vercoe says it could not offer that service before because it had not secured the Cornerstone standard, which she says is necessary to become an assessor. One of the doctors has already begun studies to become a training mentor for young Māori GPs, who have completed their studies, she says. **W:** <<http://www.radionz.co.nz/news/te-manu-korihi/234409/programme-for-maori-doctors>>.

[More Interns Head to Mt Isa](#)

Via North Queensland Register

Mount Isa Hospital has received accreditation to run a full intern training program.

North West Hospital and Health Service (HHS) Executive Director of Medical Services, Dr Ross Duncan said the hospital expected to be able to take its first cohort of dedicated interns in early 2015.

"This is subject to finalising the funding and receiving an allocation of the 2014 class of graduating medical students to undertake their full internships here in 2015," Dr Duncan said.

In the meantime, Dr Duncan said Mount Isa Hospital would continue hosting interns from other Queensland teaching hospitals on 10-week rotational training placements, as it had done for a number of years.

This year, Mount Isa Hospital will be hosting two interns from the Mater Hospital Townsville, three interns from Greenslopes Hospital in Brisbane and one or two interns from The Townsville Hospital during each 10-week rotation. "As well as now being accredited as a full intern teaching hospital, Mount Isa in 2012 received accreditation with the Australian College of Rural and Remote Medicine to deliver primary rural and remote skills training and advanced skills training in

emergency medicine, obstetrics and anaesthetics for junior doctors, and more rotations will be open soon.

"That means that, since last year, junior doctors taking up appointments at Mount Isa Hospital have been able to embark upon Queensland Health's very popular Rural Generalist Pathway. This pathway provides doctors with valuable additional procedural skills in areas such as obstetrics, emergency medicine and anaesthetics, Indigenous health, paediatrics and mental health, and allows them to go on and specialise in rural and remote general practice."

W: <<http://www.northqueenslandregister.com.au/news/agriculture/general/news/more-interns-head-to-mt-isa/2685142.aspx?storypage=0>>.

[UH Monoa and New Zealand Scholars Partner on 'Indigenous Research'](#)

Via Honolulu Civil Beat

The University of Hawaii at Manoa has joined forces with two New Zealand universities — the University of Auckland and Massey University — to engage in multidisciplinary, collaborative research relevant to Indigenous populations.

The institutions' partnership agreement revolves around one main mission: "To uplift the mana and aspirations of Indigenous peoples."

In other words, the research has to benefit the needs of native populations across the Pacific, said Everdina Fuli, who oversees Māori and Pacific research at the University of Auckland, in a statement.

"Our researchers want to help not only their own communities, but the wider Indigenous global community," Fuli said.

Two departments within UH Manoa — the College of Social Sciences' Department of Ethnic Studies and the John A. Burns School of Medicine's Department of Native Hawaiian Health — are spearheading the partnership on Hawaii's end.

"We seek to honour our different genealogies as we bring our kupuna with us to the table," said Ty Kawika Tengan, ethnic studies department chair. "We want to do those things that are positive to uplift the collective mana that comes when we pool this Indigenous knowledge—these practices based in place that distinguish us as people of the Pacific."

Meanwhile, JABSOM and the University of Auckland, along with the University of Washington's Indigenous Wellness Research Institute, have already secured a grant from the U.S. National Institutes of Health that is helping support a 12-week research training program in New Zealand for UH and UW students.

Keaweaimoku Kaholokula, who chairs JABSOM's Native Hawaiian health department, said the program will help Indigenous students in the medical school become biomedical and behavioural scientists. **W:** <<http://hawaii.education.blogs.civilbeat.com/post/77958713531/uh-manoa-and-new-zealand-scholars-partner-on>>.

[New Canberra Uni Chancellor Tom Calma Calls for Indigenous Scholarship Backing Via The Australian](#)

Incoming Canberra University Chancellor Tom Calma has urged ordinary citizens to financially back scholarships for Indigenous students, noting the country still has only one Aboriginal psychiatrist.

Speaking ahead of his inauguration, Dr Calma said only 1.1 per cent of university funding came from donations and bequests, mostly from ageing endowments rather than new philanthropy. "You don't have to donate a lot. Workplace giving programs are really important where just a couple of dollars over the course of a week out of the pay packet can go towards a cause," Dr Calma told the National Press Club.

"They're small, but they can be enough to help somebody buy books or get over any of the humps they might feel. You don't have to be rich; you don't have to go all in any one hit.

"We also see the issue of crowd-funding now starting to gather popularity, and I think universities will start to use that more for research or philanthropic endeavours. We can all do it. It's just a matter of having that mindset to want to do something for somebody else."

Crowd-funding is an online process whereby individuals pledge money towards a set funding target for a particular project, and are only obliged to donate if that target is reached.

Dr Calma is the second Indigenous Australian to serve as a university chancellor. He follows Pat O'Shane, who led the University of New England for nine years until 2003.

But Dr Calma said Australia still lagged behind comparable countries in terms of Indigenous academics, noting Canada and New Zealand had trained Indigenous doctors in 1866 and 1899 respectively.

"But it was not until 1983 that Helen Milroy graduated from the University of Western Australia as Australia's first Aboriginal medical doctor. Dr Milroy is also our first and only psychiatrist," he said.

However, Dr Calma said, there were "encouraging" signs for Australia's future, with 10,000 Indigenous tertiary students currently enrolled.

"There are now around 180 Indigenous doctors and 260 (Indigenous) medical students in Australia. However, there are approximately 80,000 doctors registered in Australia, so to reach parity of 3 per cent in the medical profession, it would require over 2,400 additional Indigenous doctors immediately," he said. **W:** <<http://www.theaustralian.com.au/higher-education/new-canberra-uni-chancellor-tom-calma-calls-for-indigenous-scholarship-backing/story-e6frgcyj-1226832814628#>>.

[IAHA Media Release - Closing the Gap Prime Minister's Report 2014 Via Indigenous Allied Health Australia](#)

The 2014 Close the Gap Prime Ministers report released yesterday by the Australian Government reveals that despite progress in some objectives that we are still facing many challenges in key areas. In order to achieve health equality amongst all Australians it is imperative that Aboriginal and Torres Strait Islander peoples are afforded the same opportunities to access doctors, medicines, and allied health services. Indigenous Allied Health Australia Chairperson Faye McMillan commented "IAHA is committed to the Close the Gap campaign and Steering Committee, and we will continue to advocate on improving the health and well-being of Aboriginal and Torres Strait Islander peoples, particularly within the allied health sector."

Key Prime Minister's Report findings:

While there has been a small improvement in Indigenous life expectancy, progress will need to accelerate considerably if the gap is to be closed by 2031. The target to halve the gap in child mortality within a decade is on track to be met. In 2012, 88 per cent of Indigenous children in remote areas were enrolled in a pre-school programme. Data for 2013, to show whether the 95 per cent benchmark for this target has been met, will be available later this year. New data on whether enrolled children are actually attending school should also be available later this year. Progress against the target to halve the gap in reading, writing and numeracy within a decade has been disappointing. Only two out of eight areas have shown a significant improvement since 2008. The target to halve the gap for Indigenous people aged 20–24 in Year 12 or equivalent attainment rates by 2020 is on track to be met. No progress has been made against the target to halve the employment gap within a decade.

For more information, including accessing the Prime Minister's speech, please visit **W:** <<http://iaha.com.au/closing-the-gap-prime-ministers-report-2014/>>.

CONFERENCES AND EVENTS

Congress Lowitja 2014: Many Mobs. One Vision: Creating a Healthy Future Melbourne, VIC, 19-20 March 2014

Congress Lowitja is the Lowitja Institute's biennial conference. Congress Lowitja 2014, Many Mobs. One Vision: Creating a Healthy Future, celebrates diverse Aboriginal and Torres Strait Islander communities sharing a common goal for a healthy future. Congress Lowitja 2014 will inform the research strategies, programs and projects that will contribute to healthier families and children. The conference sessions will also look at cultural competency in health, the Aboriginal and Torres Strait Islander health research workforce and the measurement of the benefit and impact of research. See more at **W:** <<http://www.lowitja.org.au/congress-2014>>.

Australian Institute of Aboriginal Studies (AIATSIS) National Studies Conference: Breaking Barriers in Indigenous Research: 50 Years on Canberra, ACT, 26-28 March 2014

In 2014, AIATSIS will be celebrating its 50th year. To celebrate this milestone, AIATSIS will be holding its biennial Indigenous Studies Conference with the theme '50 years on: Breaking Barriers in Indigenous Research and Thinking'. This conference will begin the 50th year celebrations by recognizing how far we have come in the area of Indigenous studies in Australia in the past 50 years. It will celebrate the 50th anniversary of the legislated establishment of the Australian Institute of Aboriginal Studies (now AIATSIS) as well as 50 years of leadership and excellence in Indigenous studies by AIATSIS. For more information, please visit **W:** <<http://wired.ivvy.com/event/NISC14/>>.

RANZCOG 2014 Indigenous Women's Health Meeting Adelaide, SA, 2-4 May 2014

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) third Indigenous Women's Health Meeting (IWHM) will be held at Adelaide Convention

Centre in Adelaide, the traditional land of the Kaurna people, South Australia from 2-4 May 2014.

This meeting aims to bring together health professionals from across the country with the common interest and desire to improve the health and wellbeing of Aboriginal and Torres Strait Islander women. For more information, please visit **W:** <<http://www.ranzcog2014.iwhm.com.au/>>.

Aboriginal Health Conference: Strong Commitments, Healthy Communities Perth, WA, 5-6 July 2014

Developing strong commitments to improve the health and wellbeing of Aboriginal people in rural and remote communities. Rural Health West invites you to one of Western Australia's leading Aboriginal Health Conferences to be held in Perth from the 5 - 6 July 2014.

The conference theme Strong Commitments, Healthy Communities will be addressed through presentations, clinical updates, practical workshops, hands-on concurrent sessions and case study learning opportunities that are professionally accredited and delivered by expert specialists and speakers.

The conference program will once again include the popular research stream, featuring presentations highlighting current projects and research that have focused primarily on Aboriginal communities.

Rural Health West invites abstract submissions for oral and poster presentations at this leading Aboriginal Health Conference. Abstracts about research and projects across all areas of Aboriginal health, community engagement, education and workforce development are being sought. The submission closing date is Monday 7 April 2014.

For more information and to submit an abstract, please visit the Rural Health West website **W:** <<http://www.ruralhealthwest.com.au/>>.

Indigenous Oral Health Conference Adelaide, SA, 27-29 August 2014

The aims of the Indigenous Oral Health Conference are to inform researchers, policy makers and the lay public of the challenges in conducting oral health research among Indigenous groups. The conference will also explore issues surrounding translation into policy of oral health research among these populations as well as describing interventions that have resulted in successful oral health policy translation in Indigenous contexts.

While it is recognised that oral health inequalities exist between Indigenous and non-Indigenous populations at a global level, it is less clear which interventions can successfully mitigate these oral health inequalities and which ones can readily be translated into policy.

Two international guest speakers will share their knowledge of using novel research approaches to improve Indigenous oral health and teach strategies to translate Indigenous oral health research findings to influence policy. The two guest speakers are Professor Kamilla Venner and Professor Terry Batliner.

More information regarding the program, keynote speakers and abstract submissions can be found at **W:** <<https://www.adelaide.edu.au/iiohc/abstracts/>>.

National Indigenous Women's Conference Cairns, QLD, 13-15 October 2014

The aim of the National Indigenous Women's Conference is to provide a platform for Indigenous women to celebrate their achievements in life within their home, family, community and workplace. The Conference presents a unique opportunity for delegates to participate in an event which is devoted to the sharing of information and the empowering of women.

This gathering will highlight some of the existing Indigenous women's groups and programs currently implemented in

Aboriginal and Torres Straits 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 involve in implementing Indigenous women's services faced.

For more information, please visit W: <<http://www.indigenoushealth.net/indigenouswomenconference.htm>>.

National Indigenous Men's Conference
Cairns, QLD, 13-15 October 2014

The aim of the National Indigenous Men's Conference is to provide a platform for Indigenous men to celebrate their achievements in life within their home, family, community and workplace.

The event will focus on empowerment, strong leadership and self-determination. Throughout the two and a half day event, we will be facilitating small group discussions with informative guest speakers. The event emphasises the positives of Aboriginal and Torres Strait Islander resilience and determination to strive for a better tomorrow, without the constraints of the negative stereotyping which is more prevalent due to social media and bad media coverage.

For more information, please visit W: <<http://www.indigenoushealth.net/indigenousmenconference.htm>>.

The Global Community Engaged Medical Education Muster
Uluru, NT, 27-30 October 2014

'The Muster' will bring together internationally recognised leaders in community engaged medical education and will continue to stimulate important discussions about key concepts and practices at the forefront of medical education: Longitudinal Learning, Community Engagement, Social Accountability and Aboriginal Health.

Along with a vital scientific program which has become the tradition of these conferences, a key feature of the 2014

Muster will be the time set aside for community of practice discussion and reflection. Key features include 'white space' in the program and conference dinners to start and conclude the conference. The three-day conference has been designed to fit in with the logistics of travel and the Central Australian climate to maximise the opportunities of both a formal and informal program.

The 2014 Muster is the fourth conference to be hosted by Flinders University and Northern Ontario School of Medicine. Partners in presenting the 2014 Muster are James Cook University, Federation of Rural Australian Medical Educators (FRAME), Training for Health Equity Network (THEnet) and Consortium of Longitudinal Integrated Clerkship (CLIC). We call you to muster at this conference.

For more information please visit the 'Muster' website W: <<http://www.flinders.edu.au/muster2014>>.

World Indigenous Health Conference
Cairns, QLD, 15-17 December 2014

The conference is hosted by Indigenous Conference Services (Australia) with a great line up of speakers from around Australia and internationally.

The event is based upon the principal belief that Indigenous health must be approached from a holistic view, which encumbers body, mind and spirit. Thus, leading to the fundamental rights of self-determination.

The conference itself is not designed to provide answers for one and all however it is designed to bring together both government and non-government agencies who are working in the Indigenous health arena, therefore focusing on closing the gap of life expectancy of Indigenous people to equal that of non-Indigenous people.

The format for the conference is to provide a platform for each delegate to share their success stories in an open and culturally appropriate forum.

This event will host and welcome all government and non-government agencies, individuals and groups. Each delegate will have the opportunity to celebrate their community and promote their programs, which we hope will build new working relationships and partnerships from other providers that will be beneficial for Indigenous people.

For more information, please visit W: <<http://www.indigenousconferences.com/>>.

4th Cross Cultural Health Care Conference: Collaborative and Multidisciplinary Interventions
Oahu, Hawaii, USA, 16-17 January 2015

The fourth Cross Cultural Health Care Conference will take place at the Ala Moana Hotel, Honolulu in January 2015.

The evidence base for proving the effectiveness of cultural interventions and training is still emerging. More needs to be done. The Conference provides a forum for the development, dissemination, and implementation of tools to aid both healthcare practitioners and researchers who work with diverse populations.

There is currently an invitation to submit an abstract, related to the topics of the Conference which include:

- The role of culture in the delivery of care in various healthcare settings (e.g. clinic, hospital, community-based);
- Whether healthcare information (both verbal and written) is presented in a culturally and linguistically appropriate manner; and
- Cross-cultural healthcare resources and how they aid in the delivery of care and/or conduct of research.

For more information about the Conference or to submit an abstract, please visit W: <<http://cchc-conference.com>>.

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 support to graduation 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](#), supported by financial assistance from the Australian Government Department of Health.* 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 also including the **LIMELight Awards** celebrating successes in the field
- The **Indigenous Student and Community Bursary Scheme** providing the opportunity for networking and peer support at LIME Connection
- 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, relevant resources 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 support to graduation initiatives through publications such as the **Good Practice Case Studies Booklets** 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 and mature age students to understand the pathways to studying medicine through the online **Pathways into Medicine Resource** and **Indigenous Pathways into Medicine Videos**
- Strengthening capacity and sharing knowledge amongst network membership through **Slice of LIME Seminars**
- Developing a **Peer Support Statement and Strategy** that operates across universities.
- 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 and Global 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 **W:** <<http://www.limenetwork.net.au>>, email us at **E:** <lime-network@unimelb.edu.au> or give us a call at **T:** +61 3 8344 9160.



THE LIMENETWORK
Leaders in Indigenous Medical Education

