Flinders UNIVERSITY

research pulse

FACULTY OF HEALTH SCIENCES

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Dedicated staff supporting Flinders medical research

Animal House Manager, Ray Yates (centre), with senior staff Stuart Lisk (back left), Theresa Fischer (front left), Elloise Trotta (back right) and Brooke Fidler (front right.)

Ray Yates is leader of a team that has built up a national and international reputation for excellence in the care of animals used in medical research. Researchers in the School of Medicine and Flinders Medical Centre have benefited from this high quality facility for more than 30 years. Ray has been in his current position as Manager of the Animal House since 1974, when the FMC and School of Medicine were in their infancy. In the early days Ray had only two other staff members – now he supervises 10 full-time staff working at two sites on campus.

Having completed certificates at IMVS and TAFE himself many years ago, now Ray has a role in training animal care workers enrolled in the TAFE Diploma of Animal Technology - a two year full-time course that is required training for animal house staff. Indeed, Ray estimates that he has contributed to the training of most, if not all, senior animal care staff in the State! He is quick to acknowledge the vital role of his skilled staff in the success of the Flinders facility. The continuity of care and experience provided by long-term staff, particularly Theresa Fischer, Stuart Lisk and Jada Tils-Mathews, all with more than 10 years' service, have been invaluable. Ray has found that many people are surprised by the high standards and cost of animal care required for research facilities. For example, Specific Pathogen Free (SPF) status – keeping animals free of any infection - is the gold standard and requires specialised equipment as well as skilled staff. These high standards are essential both for the welfare of the animals and reliability of the research.

Ray points out that some alternatives to using animals in research are available and are promoted wherever possible. However, this is not feasible for all types of medical research and there is an ongoing requirement for animal testing prior to human trials. Flinders is proactive in providing formal training in ethical issues of animal research to new students and staff. Indeed, Flinders initiated animal welfare procedures and committees long before these were mandatory.

Ray's reputation in the field of animal care and welfare is reflected by his invitations to speak at international conferences on these issues - he received the Arthur Keain Award to address the World Congress on Alternatives in Animal Research. Also recognised by his local colleagues, in 2006 Ray was a recipient of a Staff Award for Outstanding Contributions to Flinders University. Soon Ray is heading off to the USA and Canada to tour other animal facilities to learn about new trends and to further promote Flinders' high profile in the field.

Judy Morris, Associate Editor

From the Executive Dean

I am delighted to say that Professor Paul Worley, our newly appointed Dean of the School of Medicine, is well and truly in the post and moving his agenda forward with a sense of purpose and confidence. I am sure the School and the Faculty will reap innumerable benefits from Paul's energy, vision and expertise across multiple domains. I welcome his input to our research agenda and look forward to the leadership that he brings to the table.

We have now seen a number of iterations of the Submission Specifications for the Research Quality Framework (RQF) exercise and thus we are rapidly approaching the moment when the final version of these will be available. It will be at that point when all of the rules and regulations are spelt out in detail for the last time that the pressure will really be on for universities nationwide to complete the task of creating their Research Evidence Portfolios.

As you know, considerable effort and resources have already been directed to the task across this University. The Faculty of Health Sciences has now appointed its RQF Project Coordinator, Ms Vicki Sellick, whose task it will be to provide high level support to the Faculty Research Office and to liaise with central Office of Research RQF committees and working groups. In addition, Vicki's expertise as a fully qualified librarian and data manager will be invaluable during the data collection process. The Faculty is delighted to have her services to support this critical project.

In recent months, a review of the Flinders Advanced Analytical Laboratories (FAAL) has been conducted with a view to assessing ways of improving the performance of this facility which is a joint venture with the Faculty of Science and Engineering. The University will formally receive the report from the Review Chair in the very near future. However, what seems clear is that a facility like FAAL brings considerable value to our research effort in the form of expertise across a number of high technologies including mass spectrometry, which are increasingly critical to the conduct of competitive, leading edge research in medical and biomedical sciences.

On Thursday 16 August, I had the very real pleasure of attending the announcement of this year's Tall Poppy Science Awards at the National Wine Centre. Flinders University had two very talented awardees this year and our congratulations go to both of them. From the Faculty of Social Sciences, Dr Reg Nixon (Clinical Psychology) was named for his work in acute and post-traumatic stress disorder. Associate Professor Konrad Pesudovs from the Department of Ophthalmology was the awardee from the Faculty of Health Sciences for his work in ophthalmology outcomes research, a key element of which is the development of patient-centred measures for traits including visual disability and quality of life.

Finally, I am delighted to report that Associate Professor Judy Morris from the Department of Anatomy and Histology has been awarded the inaugural Nina Kondelos Prize given to a "female neuroscientist for outstanding contribution to basic or clinical neuroscience research". This award was made at the recent annual meeting of the Australian Neuroscience Society held in Melbourne and is truly a richly deserved acknowledgement of all the outstanding contributions that Judy has made to neuroscience in numerous ways over many years. Flinders University and the Faculty of Health Sciences are very proud of Judy Morris.

Roy Goldie
Executive Dean
Faculty of Health Sciences

New RQF Coordinator for Faculty

The Faculty of Health Sciences welcomed Vicki Sellick back to Flinders to the position of Project Coordinator – Research Quality Framework at the end of August. Vicki has extensive experience in health research management particularly information and data management and research promotion to a range of audiences.

Vicki has most recently worked as the Publications Coordinator in the Marketing and Communications section of SuperSA and prior to that worked for seven and a half years as the Information and Website Coordinator for the Primary Health Care Research and Information Service here at Flinders. Vicki is a qualified librarian and experienced in collating and synthesising information for reporting purposes.

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Vicki Sellick with Ross Forbes (left) and Roy Goldie

Back from the Edge

Jillian Kantawarra, RFDS pilot, Rhonda Anstee, Sabina Knight

Remote Australia is characterised by harsh environments, scarce resources, innovation borne of necessity and little research attention.

Away from the population concentrations on the continental edge, remote area nurses are the mainstay of health service provision. They provide an invaluable service to some of the most disadvantaged populations in Australia. However their work context and role put them at risk of emotional and physical burnout through excessive workload, personal and professional frustration, lack of social or professional rewards and accomplishment, insufficient access to resources, limited professional support and social and cultural isolation. In some remote area health services staff turnover rates of 300% per annum have been reported. The frequent turnover of nursing staff has been shown to impact on the quality of health services through the effect of stress on practitioner performance and the impact of high staff turnover on continuity of care.

Robust, sustainable systems that better prepare and support the remote nursing workforce in this tough context are required. This study aims to reduce and prevent occupational stress in the toughest health work environment in Australia. The study will identify and measure the stressors of remote area health work and develop, implement and evaluate stress-reducing interventions developed through a participatory action research approach over four years. It will commence this year and is due to be completed in 2011.

This is the first systematic examination of work stress in the remote area nursing workforce and the first to involve staff and managers in developing interventions in a remote context. The study will improve staff retention with economic savings for employers, improve service effectiveness and contribute to improved health outcomes in remote Australia.

The research team reflects a multi-institution collaboration. Centre for Remote Health and Flinders University staff, Professor John Wakerman, Sue Lenthall, and Sabina Knight are joined by Greg Rickard, principal nurse of the Northern Territory, Associate Professor Maureen Dollard, an occupational health psychologist from UniSA, Professor Sandra Dunn from Charles Darwin University and Associate Professor Martha MacLeod from the University of Northern British Columbia

The team is supported by strong industry partners, Northern Territory Department of Health and Community Services, Council of Remote Area Nurses of Australia and Office of Aboriginal and Torres Strait Islander Health.

Sue Lenthall
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Flinders Research Featured in South Australian Medical Research Week®

The Annual Scientific Meeting of the South Australian branch of the Australian Society for Medical Research (ASMR) was held during Medical Research Week® on 6 June at the Adelaide Entertainment Centre. With over 200 delegates, this local meeting provides an excellent forum for junior scientists, whether honours, Masters or PhD students, or junior Post-Doctoral researchers, to present their work in a friendly environment amongst their peers. In this light Flinders University was particularly well represented this year with both oral and poster presentations constituting 24% of the total presentations for the day. In addition, as part of the theme of 'Bench to Bedside' including a panel discussion on career development in medical research, Dr Dani-Louise Dixon from the Department of Critical Care Medicine was invited to present as one of South Australia's Leading Lights Showcase. Flinders University was a Gold Sponsor of ASMR's SA Medical Research Week® and sponsored a session of oral presentations on 'Hot Topics' which featured work on the role of elastic fibres in the spine from a collaboration between Dr John Costi from the Department of Orthopaedics at Flinders and Nick Fazzalari (IMVS and Hanson Institute). Flinders also sponsored the Early Career Researcher (ECR) Awards for most outstanding oral and poster presentations by a post-doctoral researcher within five years of thesis submission. Congratulations to Dr Rebecca Ormsby of the Department of Haematology and Genetic Pathology for winning the ECR oral award for her talk on 'Complement Factor H Polymorphisms in Macular Degeneration'.

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asmr Australian Society for Medical Research

Neuroscience and the Bio-Psycho-Social Model of Health and Disease

Invited opinion by Marcello Costa, FAA
Professor of Neurophysiology, School of Medicine,
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The success of medicine in revealing fundamental principles of human biology has confirmed that our underlying methods and conceptual frames are robust and reliable. The assumption is that diseases can be defined in terms of somatic parameters and can be explained by the rules of physics and chemistry.

The conviction that every biological phenomenon eventually can be explained by physics and chemistry clashes with the view that humans are endowed with additional features. These include psychological and social phenomena that, according to many, cannot be 'reduced' to physics and chemistry. The result was that non-physical, non-chemical determinants of diseases were assumed to lie outside of medicine, with no need for medical practitioners to be concerned with psychological and social issues. On the other hand claims that psychological and social phenomena eventually could be explained by physics and chemistry, were regarded as simplistic or even dangerous as they trivialised the very spiritual nature of human beings, offending humanistic sensibilities.

The scientific study of humans as biological beings is a consequence of the distinction that Descartes made between the machine-like nature of animal life and the spiritual nature of the human soul. This distinction probably kept him from getting into trouble with the all-powerful church authority.

His distinction between matter (res extensa) and the thinking, spiritual stuff (res cogitans), had much earlier roots in religious and philosophical movements and survives to date in everyday language. In philosophy this distinction is known as dualism. This distinction enabled scientists to investigate animal and human bodies as machines, revealing the 'mechanisms' that rule biological phenomena. Applied to human biology this approach became known as the biomedical model.

A major disadvantage of Descartes dualism is that by keeping the psychological phenomena beyond reach of mechanistic science, when the discipline of Psychology was founded at the end of the 19th century, it remained confined within the Humanities. This state of affairs perpetuates an unfortunate dichotomy, as if Nature is bipartite, divided into two discrete realms: the 'physical' and the 'mental'.

Medical science more than any other science confronts the sheer complexity of dealing with human individuals, treating them simultaneously as biological organisms, as psychological beings with subjective feelings and also as members of diverse social groups.

To enable 'psychiatry to become better integrated with medical practice', then strongly grounded on the biomedical model, a broader conceptual model was developed 30 years ago by psychiatrist George Engel as the biopsychosocial model (Engel 1977).

By then Psychology and Sociology had been accepted as scientific disciplines in their own merit. The biopsychosocial model brought together these three major scientific disciplines, avoiding potential clashes. The model accepted that each discipline referred to three different 'domains', the biological, the psychological and the social, all three independently affecting both the 'illness', ie how a person feels, and eventually the actual 'disease'.

The three domains can now be better reconciled under a common neuroscience perspective involving the brain and the body (biology), the brain and the self (psychology) and the brain and others (sociology).

The nervous system regulates and integrates most human activities. The control of bodily functions (cardiovascular, respiratory, digestive etc) by specific neural circuits, a fruitful field of neuroscience research at Flinders, is revealing powerful interactions between viscera and the brain. Specific brain neural circuits are increasingly demonstrated to underlie higher functions (memory, attention, consciousness, imagination etc). Even the processes underlying 'reading' other people's intentions and mental states, the bases of social life and communication (social brain), has received a big boost by recent findings of 'mirror' systems in monkeys, apes and humans that underlie such awareness and even emotional empathy.

The realisation that the brain is central to all three domains still leaves significant challenges in explaining how to overcome the 'dualism' which is still accepted implicitly when we move from the biology of the brain-body domain to the psychological and social domains.

The issue confronting neuroscience is: How can a 'thinking, conscious brain' emerge from the biological matter? The simple observation is that it does. Awareness and self-awareness emerge normally in every human during development. How can a thinking *Homo sapiens* emerge from an array of nerve cells? Before becoming a psychological being, a human fetus emerges by a multitude of steps from a single fertilised egg into a myriad of diversified cell types, which assemble into increasingly complex architecture of tissues, organs and systems. Time is therefore a crucial parameter for complexity to emerge and an adult biological organism comes to be organised in a hierarchical way.

The heart, for instance, grows from collections of specialised cells that become organised into a macroscopic pumping organ. The individual muscle cells are essential for the coordinated contraction of our lifelong heart pump, yet the cells are not themselves the pump. The pumping property of the heart is a property that during growth 'emerges', that comes above or 'supervenes' the cells, as philosophers would say. The cells need to be organised in a precise architecture with specific pacemaker and conducting systems. This process requires time.

What kinds of influence occur between the domain of the cells and that of the pumping heart when the developmental process is completed? It can readily be demonstrated that the integrity of pacemaker and conducting cells is necessary for the heart to be in a pumping domain.

Interfering with those critical cells leads to the collapse of the pumping functions, as in fibrillation during a heart attack. The heart pumping domain 'depends' on some specific cells (bottom up influence). But the heart as a whole also influences the working of the individual component cells (top-down influence also referred to as 'downward causation' by some writers).

An important consequence of the view that there are influences across domains in both directions, is that it is easier to understand how actions at the cellular level, say giving a drug such as digitalis, can result in functional changes of the entire pumping organ. It is also easier to understand why acting on the entire organ, for example during increased load, will affect individual heart cells. The rules that govern the influences between two domains are not symmetrical. The rules for the 'whole' affecting the parts (global, top down influences) are different from the rules for the parts affecting the whole (bottom up).

The development of an adult human being, the personality and entire social structures, can thus be regarded as gigantic chains of superimposed nested domains, emerging from one just below, yet depending on all those below. This hierarchical view of biology can be readily extended upwards to the psychological and social domains that emerge during development and evolution, including cultural evolution.

The emergence of a domain and its collapse can occur as part of normal physiology, for example coming in and out of consciousness in the sleep cycle. In many cases however the collapses may be irreversible, such as consciousness after a stroke.

A potentially uplifting corollary of this view is that the emergence of new domains may be open ended. Conversely, the highest domains unavoidably become increasingly dependent on a larger number of lower domains. The higher domains become increasingly fragile. Creative states of mind, university research groups, cultures, languages etc are all examples of such fragile domains. This realisation may perhaps help viewing humans and their emergent activities with more respect.

Suggested reading:

Auyang SY(1998) 'Foundations of Complex-Systems theories'; in *Economics, evolutionary biology, and statistical physics.* Cambridge University Press.

Boulding KE (1956) 'General systems theory - the skeleton of science', *Management Science* 2:197-208.

Campbell DT (1974) 'Downward causation' in Hierarchically Organized Biological Systems', in: *Studies in the Philosophy of Biology*, F.J. Ayala & T. Dobzhansky (ed.), Macmillan Press, p. 179-186

Engel G (1977) 'The need for a new medical model: a challenge for biomedicine', *Science*, 196:129-136.

Laszlo E (2001) *The systems view of the world*, Hampton Press.

Varela F et al (2001) 'The brainweb: phase synchronisation and large-scale integration', *Nature Reviews Neuroscience* 238:229-239

Varela FJ, Thompson E, Rosch E (2000) *The embodied mind*. MIT Press.

National Award to Flinders Neuroscientist

Associate Professor Judy Morris recently was awarded the inaugural Nina Kondelos Prize by the Australian Neuroscience Society, for outstanding contributions to neuroscience research by a female neuroscientist. The prize was made possible by a donation to the society by previous president, Professor George Paxinos, and is named after his late sister. The presentation ceremony was held at the conclusion of the International Brain Research Organization conference in Melbourne – the prize was presented by Nina Argyropoulos, the 12 year old grand-daughter of Nina Kondelos. Judy Morris has been a neuroscientist at Flinders since 1984. As a research fellow in the Centre for Neuroscience she has worked together with a core of close colleagues to make significant contributions to our understanding of chemical signalling by nerves controlling and sensing our internal organs, particularly in the neural pathways controlling blood flow to the skin and reproductive organs. Judy was Convener of the Centre for Neuroscience from 1997-2005 and was awarded Life Membership by the Centre in 2005. Her contributions to neuroscience research also have been recognised by an honorary doctorate from the University of Gothenburg, Sweden, and a 40th Anniversary Staff Award from Flinders University.

Judy Morris (second left) at award ceremony with Prof George Paxinos (left), Nina Argyropoulos (front) and other family members. Photograph by Charles Sevigny.

Good practice in funding & regulation of PHC services for Aboriginal & Torres Strait Islander people

Professor Judith Dwyer and Ms Kim O'Donnell, with colleagues at the Australian Institute for Aboriginal and Torres Strait Islander Studies and the University of Northern British Columbia, have received a $450,000 grant from the Cooperative Research Centre for Aboriginal Health for a three year project that will investigate better ways to arrange the funding and regulation of Aboriginal health Services.

Primary Health Care (PHC) funding is intended to improve the health of Aboriginal and Torres Strait Islander peoples by supporting good health care, while also meeting the need for accountability to communities and to government. Making it possible for PHC providers to recruit skilled staff is also an important goal. But the current arrangements for funding are problematic. There are too many funding lines and too much project funding, a pattern which creates an administrative overburden, compromises the effectiveness of service delivery and weakens the capacity of the agencies to attract and retain a skilled workforce. Government staff also experience problems with administering these funding arrangements.

Data supplied by the Department of Human Services in Victoria demonstrate the problem. Aboriginal organisations in Victoria are funded through more funding programs than non-government, local government, or community health organisations, dollar for dollar (ie the funding comes in more and/or smaller packages).

Funding and policy for Aboriginal health care are complicated by the active engagement of multiple authorities, which often have conflicting goals and priorities, inevitably resulting in implementation failures. Every new program or policy initiative requires an overburden of negotiation and coordination, alliances and partnerships, which delay decision-making and action on the ground, and bring a high risk of shifting priorities, lack of continuity among personnel and premature change or cessation. The Office for Aboriginal and Torres Strait Islander Health has been attending to these problems for many years, and has made progress towards simplifying and systematising funding programs and their reporting requirements through a single funding agreement. However, for many reasons the problems remain.

This project will work with both providers and funders to develop, trial and evaluate alternative approaches.

The project team

Ms Kim O'Donnell is the full-time research coordinator for this project. The Principal Investigators are Professor Judith Dwyer, the head of the Department of Health Management in the School of Medicine, Dr Patrick Sullivan from the Australian Institute of Aboriginal and Torres Strait Islander Studies in Canberra, and Dr Josée Lavoie of the University of Northern British Columbia in Canada.

For more information, please contact kim.odonnell@flinders.edu.au or ring 8201 7768.

Recent Grants and Awards

Research Pulse publishes details of significant (over $100,000 total) new research income awarded to members of the Faculty of Health Sciences as we hear about them. New for this edition are the following:

D Currow, P Frith, J Plummer, P Allcroft, M Biffa, B Fazekas, A Abernethy. Systematic expansion of the clinical evidence base in opioid prescribing for refractory dyspnoea at the end of life. $213,800, NHMRC Palliative Care Research Program.

K Williams. The Australian Corneal Graft Registry. $128,356, Department of Health & Ageing.

A Roche. National Comorbidity initiative - the Comorbidity scholarship project. $1,915,437, Department of Health & Ageing.

Middleton P, Baghurst P, Blank C, Chan A, Crowther C, Glover K, Kowanko I, Martis R, Nixon A, Robinson J, Staugas R, Tooher R, Weetra D. Preventing infant deaths among Aboriginal and teenage women in South Australia. $125,000, SA Department of Health Strategic Health Research Program.

J Dwyer, P Sullivan, J Lavoie. Best practice in funding and regulation of primary health care services for Aboriginal and Torres Strait Islander people. $450,000, Cooperative Research Centre for Aboriginal Health.

Congratulations to Professor Fran Baum, Head of Department of Public Health who was presented with a Fellow of the Australian Health Promotion Association Award at the 17th National Conference of the Association in Adelaide recently.

New Palliative Care Initiative Launched

Flinders University will take the lead role in a $8.9m, three-year program aimed at extending and improving the evidence for palliative care practice across Australia, funded by the Australian Government Department of Health and Ageing.

The Palliative Care Clinical Studies Collaborative (PaCCSC) was launched on 29 August in Melbourne by Senator Brett Mason, Parliamentary Secretary to the Minister for Health and Ageing. Senator Mason said the major investment is just part of the Government's on-going commitment to improving the quality of palliative care for affected Australians.

Professor David Currow, Head of the University's Department of Palliative Care, is the project's Chief Investigator. Professor Currow said the PaCCSC program is wide-ranging and highly ambitious, and aims to provide sound evidence-based assessment to improve community-based prescribing for terminally ill people in the community.

He said the Australian Government is committed to improving the quality of care offered to all people with life-limiting illnesses, but particularly for those who want to spend time at home or in a community setting.

A patient-specific section of the Pharmaceutical Benefits Scheme, the national subsidy scheme for medications, was first created in 2004, and has subsequently grown in size. Professor Currow said that while there is agreement to increase the availability of priority medications for palliative care, there simply isn't the necessary evidence base relating to some key symptoms or clinical problems. "This isn't about getting specific medications registered or subsidised. It's about improving the quality of care by having better evidence and better targeting those particular interventions," Professor Currow said. "If the results are positive, the studies are at a level and quality that can influence clinical practice, can influence registration, and can influence subsidy eligibility."

The national initiative will be run in at least 10 sites in hospitals and affiliated academic units in all mainland states, and at one site in Tasmania. Professor Currow said the Flinders had won the PaCCSC contract because the team's skills incorporated biostatistics, health economics and methodology, in addition to expertise in palliative and supportive care. "It's complex work to design studies that will meet the regulatory requirements and still be feasible to do on a day-to-day basis in many centres across Australia," Professor Currow said. He said that Flinders is already successfully involved in multi-site studies interstate and internationally. "And, importantly, we have found that the patients themselves and their families want to participate in studies which are designed to improve the quality of care on offer," Professor Currow said.

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PhD research leads to Neuroscience Research Grant

PhD candidate and surgical registrar, Dr Dayan de Fontgalland, has a rare achievement under his belt – he has gained external funding for his research while still undertaking a PhD. Together with supervisors Dr David Wattchow, Associate Professor in the Department of Surgery, and Professor Simon Brookes of the Department of Human Physiology, Dayan was the only recipient in South Australia of a Neuroscience Research Grant from Pfizer Australia. The grant provides $50,000 to continue with research on the nerves that sense pain in the human gut.

To date, research by Dayan and colleagues in the Neurogastroenterology Laboratory of the Centre for Neuroscience has provided exciting preliminary data that may well lead to the first identification of the sites of origin of pain in the gastrointestinal tract. Sensory nerves supplying the blood vessels of the gut can produce inflammation, yet can have positive effects such as increasing blood flow to promote the healing of ulcers. The sensory nerves studied by Dayan and colleagues may be involved in the development of painful inflammatory bowel diseases such as Crohn's disease and ulcerative colitis.

The general principles underlying Dayan's research come from many years of basic research on laboratory animals carried out by Professor Simon Brookes and colleagues in the Neurogastroenterology Laboratory. Although

Dayan in the laboratory preparing specimens for labelling nerves involved in gut pain

there are many similarities between laboratory animals and humans, there can be some important differences that need to be taken into account. Dayan's current research is critical for translating basic neuroscience research findings into the clinical setting. His role as a surgical registrar at Flinders Medical Centre gives him the opportunity to obtain specimens of normal and diseased human gut and associated blood vessels from the operating theatre. Once removed, these specimens can be treated with sophisticated labelling and imaging techniques, as well as physiological recordings of nerve activity, to pin down the location and chemistry of the nerves involved in gut pain. This information may well help us develop new therapeutic strategies for treating the intractable gut pain associated with many disease conditions.

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International Symposium on Indigenous Health

Flinders University convened the World Health Organisation Commission on Social Determinants of Health (CSDH) – International Symposium on Indigenous Health, which was hosted by the Cooperative Research Centre for Aboriginal Health (CRCAH) in Adelaide on 29-30 April 2007.

Fran Baum, Head of the Department of Public Health at Flinders, and Mick Gooda, CEO of the CRCAH, led a team comprising staff members from the South Australian Community Health Research Unit (SACHRU, Michael Bentley, Rama Ramanathan, Patricia Lamb, Laura Winslow) and the CRCAH (Carolyn Modra) in organising the symposium, which brought together 70 invited participants from 13 countries, including Australia, Canada, New Zealand and countries in Asia and Latin America.

Symposium participants

The aims of the Symposium were:

- To provide a forum for international exchange between Indigenous peoples on social determinants of health
- To present and discuss a variety of case studies
- To derive key lessons from the case studies and background situational analysis report
- To inform a report and recommendations

Professor Fran Baum said the key purpose of the symposium was to ensure that Indigenous health issues would be fully considered by the World Health Organisation's CSDH. Professor Baum was one of two CSDH Commissioners attending the meeting.

Head of the CRCAH, Mr Mick Gooda welcomed the international focus on the social issues that affect the health of Aboriginal Australians, such as employment, education, housing and exposure to racism. 'The Aboriginal health sector is confronted with the difficulty that no matter how we improve health services provided to our people, we have little control of government agendas on these social determinants,' he said.

'As long as our people are unable to access education, jobs and services taken for granted by other Australians our health outcomes will not be improved.'

A background paper on the social determinants of health specifically affecting Indigenous populations was prepared by the London School of Hygiene and Tropical Medicine and fifteen case studies, designed to focus the thinking of participants on the lived reality of Indigenous peoples and the ways in which their everyday experiences impact on their health and well-being, were presented.

The five Australian case studies included an analysis of the factors contributing to the death of a Central Australian Aboriginal woman, an examination of alternatives for power and water supply to a remote community, and a presentation on the Close the Gap campaign to equalise health status between indigenous and non-indigenous populations in the next 25 years.

Rama (SACHRU) receiving thanks from Lowitja O'Donoghue, patron of the CRCAH

After discussion of the papers, key messages and areas for action were derived and written as a clear set of recommendations into a report, which was presented at the 8th meeting of the CSDH in Vancouver, Canada on 7 June 2007 by three Indigenous representatives who attended the forum - Dr Shane Houston (Australia), Bernice Downey (Canada) and Lucia Ellis (Belize). The report is available on the CSDH website at http://www.who.int/social_determinants/links/events/8th_meeting_csdh_report.pdf

A number of the participants took the opportunity to participate in two pre-symposium site visits, organised by Laura Winslow (SACHRU) to Kaurna and Ngarrindjeri country.

The meeting received financial support from the Commonwealth and South Australian governments through the Office for Aboriginal and Torres Strait Islander Health and South Australian Department of Health, as well as from the Canadian National Collaborating Centre for Aboriginal Health, the New Zealand Government and the World Health Organisation.

Michael Bentley
SACHRU

New Honours Website

Please note due to a hardware upgrade, the address for the School of Medicine Honours website has changed to:

http://health.fmc.flinders.edu.au/honours/

The change will be permanent, so please update your bookmarks accordingly.

research pulse *is an initiative of the Faculty of Health Sciences at Flinders University. Comments and suggestions for future articles are welcome.*
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