

Menzies Centre for
**Health
Policy**



THE UNIVERSITY OF
SYDNEY



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Directors' Report

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What's New

- As the Serious and Continuous Policy and Practice Study (SCIPPS) draws to a close, a 'map' has been prepared that provides a thematic overview of SCIPPS results as related to the research and chronic disease policy context. The next 3 months will see the major work on dissemination and translation of research findings to the policy and practice communities, as well as to the community at large. Two important aspects of this dissemination process will be three roundtables held in late 2011 and a conference to be held in 2012.
- An NHMRC grant has been awarded to conduct a comprehensive study of the use of Chronic Disease Management Plans and to work on a methodology to use these data to assess the impact of primary care policy that underpins the Extended Primary Care Initiative.
- The project, Preventing Poor Outcomes for People with Chronic Illness, has been funded by a two-year grant from the Ian Potter Foundation. Project work at the Australian National University will conclude at the end of 2011. The University of Sydney are recruiting a Fellow to lead the Sydney project from early 2012.
- The position of Director, Menzies Centre for Health Policy (University of Sydney) has been advertised. Following the appointment of a successor, Stephen Leeder will continue at the University two thirds time to work with the research teams and PhDs with whom he is associated but not the mainstream work of the Menzies Centre.
- A new full-time lecturer has been appointed at the University of Sydney to support the Master of Health Policy. The Masters program has increasing student enrolments and an excellent reputation for educating health policy professionals. The lecturer will also contribute to the Menzies Centre's research program.
- The University of Sydney delivered a one-day workshop on evidence and policy for NSW Health, requested as a staff development program by MH-Kids. MH-Kids is the child and adolescent mental health services policy, service development and service planning unit of the Mental Health and Drug & Alcohol Office (MHDAO), NSW Health, and has a statewide brief. The workshop was well received.
- Menzies Centre staff have been invited to deliver 3 presentations at the upcoming 7th Health Services and Policy Research Conference, Adelaide, 5th - 7th December 2011.
- Menzies Centre staff have written for and been interviewed by media extensively about the revised Council of Australian Governments reform program for Australia's publicly funded health service. The Menzies Centre website details the media coverage and has been a useful tool to promote the Menzies Centre's expertise in health reform and governance.

Research

Research is a core activity of the Menzies Centre for Health Policy. Menzies Centre staff collaborate extensively with government agencies, area health services, non-government organisations, independent institutes and with industry, locally and internationally, on a wide range of research and consultancy projects. Staff at the Menzies Centre mentor and supervise research students enrolled at both The Australian National University and the University of Sydney. The Menzies Centre also hosts academic and student visitors pursuing projects that align with the research strengths and interests of Menzies Centre staff.

Research is grouped into the following work areas. Current projects for each work area are listed below and updated in detail on the following pages. Work in areas without specific projects is captured in Publications and Events. Please see relevant sections later in this report.

- **Chronic Disease and Aged Care**
 - Serious and Continuing Illness Policy and Practice Study
 - The Childhood Asthma Prevention Study
 - Health Economics Capacity Building Grant
 - Improving Health Literacy in Seniors with Chronic Illness
 - Calvary Health Care Bethlehem Palliative Care Study
 - Preventing Poor Outcomes for People with Chronic Illness
- **Dental and Oral Health**
- **e-Health**
- **Global Health**
 - Initiative for Cardiovascular Health Research in the Developing Countries
 - Health Sector Aid Effectiveness in the Pacific
 - Securitisation and Multi-drug Resistant Tuberculosis: Global and Australian Perspectives
 - Process Evaluation of Cardiovascular Disease Interventions in Anhui Province China
- **Health Care Financing**
- **Health Reform**
 - **NSW Health advisory role**
- **Health Surveys**
 - Survey on Attitudes towards the Australian health system
- **Indigenous Health**
- **Mental Health**
- **Obesity and Nutrition**
- **Prevention and Primary Care**
- **Sensory Impairment**
 - Vision-Hearing Project
- **Sustainability**

Chronic Disease and Aged Care

Serious and Continuing Illness Policy and Practice Study

Evaluation of HealthOne Mt Drutt

HealthOne Mt Drutt (HOMD) is a system of managing people with chronic illness that integrates primary and community health services.

SCIPPS Sydney has been working in close collaboration with the Mount Drutt Community Health Centre and HealthOne staff to conduct a mixed method evaluation of HOMD.

The qualitative component of the evaluation commenced in 2010. Interviews with NSW Health and SWAHS policy makers, steering committee members and HOMD staff were completed by the end of 2010. Interviews with patients were completed in March/April 2011. Most interviews with these patients' GPs were completed in August 2011 (with two still outstanding). Coding and analysis of policy maker and patient interviews is complete. Coding of steering committee member interviews is complete with analysis continuing. A focus group with Mount Drutt Community Health staff was held in November 2011.

Patient Emergency Department presentations and hospital admissions data were extracted in August 2011. Cleaning and analysis of these data are continuing. CHIME (Community Health Information Management Enterprise) data were extracted in October 2011 and are being cleaned for analysis. A survey to all service providers with HealthOne enrolled patients was distributed in May 2011. Analysis of these data has begun.

Write up of the draft report commenced in September 2011 and is scheduled to be completed by end November 2011.

Care Navigation Evaluation (RCT and Process Evaluation)

The aim of the RCT is to determine the efficiency of Care Navigation, a care management plan for chronically ill patients. It is hoped that Care Navigation enables chronically ill patients to minimise exacerbations in their illness with the assistance of community health services, decreasing their need to make emergency presentations to hospital.

The RCT study population consists of 500 participants who were recruited to the study at Nepean Hospital between 17 May 2010 and 25 February 2011. Care Navigation is provided to participants who were randomised to receive the intervention. It is also provided to any patients who are not on the study and are considered appropriate for Care Navigation.

The Research Assistant position is now held by Patricia Jonas, who started work in late August. She is continuing with the 12-month follow-up phone interviews, and mailed out Picker Patient Experience surveys to the first 170 participants in August. The PPE survey for the next 200 participants was sent out in late October.

Natalie Plant continues to work closely with Patrick Kelly to develop a final data cleaning and analysis plan for the RCT. Applicants are currently being reviewed for a Research Officer (Statistics) to work closely with Patrick on the data cleaning and statistical tasks.

Research continued

Interviews for the Process Evaluation have resumed, and will be carried out by the end of 2011, excluding those scheduled for the end of the study.

Indigenous experiences of chronic illness

The Space/Time paper is under review with Health Services Research. The paper on Unsolicited Support has been published by BMC Public Health. The paper on Experiences of Mainstream Health Services was not accepted by the two journals to which it has been submitted for consideration. The authors are considering alternative publications.

Papers from the main qualitative study

A paper on Motivation to Self manage has now been accepted for publication in Health Expectations and we are at the 'proof' stage.

45 and up data-linkage study

Our first paper "Chronic disease management items in general practice: a population-based study of variation in claims by claimant characteristic" authored by Kirsty Douglas, Laurann Yen, Rosemary Korda, Marjan Kljakovic and Nicholas Glasgow, was published by the Medical Journal of Australia in the GP edition in August. We were unsuccessful in our funding application for NHMRC funding to undertake the next stage of the study, and will consider alternatives to make best use of our licence to use the 45 and Up data resource.

Impact of chronic illness on socio-economic wellbeing of senior Australians

No new work has been done on information from this survey. However, the topic is now the foundation for one of the three SCIPPS round tables planned for November (See Dissemination of Results – SCIPPS Communication Plan).

Survey of Time Use and Coordination

The time use and coordination study is in the process of being analysed, with a number of publications and conference presentations in train or being planned.

A literature review of the time spent by people with chronic illness has been submitted for publication and is out to review.

One paper looking at carer time use has been presented to a conference in Oxford, by Tanisha Jowsey, who also met with Chema Valderas and his team to discuss possible collaboration on analysis and publication of data from the survey about co-morbidity. The team will plan out the publications and then decide on how best the collaboration will work.

Another paper, with an invitation to submit to Ageing and Society, will be presented at UCal in November.

We hope to engage some additional academic time to maximise the publications completed prior to the end of the project.

Research continued

Who cares for me? Study

This small study is being carried out through the Pracnet network of GP practices in the ACT where we hope to compare patient and provider views about the need for co-ordination of care, or multidisciplinary practice. Ethics approval has been obtained, the questionnaires designed and the study is underway, with one practice completed. All data collection from all practices will be completed by the end of October, and data are being entered into the FileMaker Pro database as they progress. Analysis and reporting will take place in November, December and January.

Development of the SCIPPS Map and Narrative

A draft of the SCIPPS Map has been completed. This Map provides a thematic overview of SCIPPS results as related to the research and chronic disease policy context, and will form the basis of the SCIPPS final report.

Condensed versions of each section of the map are now being produced with the aim to produce 1,3,25 version document for each section of the map.

Dissemination of results – SCIPPS Communication Plan

The next 4 months will see the major work on dissemination and translation of research findings to the policy and practice communities, as well as to the community at large.

Two important aspects of this dissemination process will be three roundtables held in late 2011 and a conference to be held in 2012.

Publications

Published Papers July-September 2011

1. Essue B, Kelly P, Roberts M, Leeder S, Jan S. We can't afford my chronic illness! The out-of-pocket burden associated with managing chronic obstructive pulmonary disease in western Sydney, Australia. *J Health Serv Res* 2011;16(4):226 – 231.
2. Douglas K, Yen L, Korda R, Kljakovic M, Glasgow N. "Chronic disease management items in general practice: a population-based study of variation in claims by claimant characteristics" *Med J Aust* 2011;195(4):198-202.
3. Ward N, Jowsey T, Aspin C, Haora P, Yen L. With good intentions: complexity in unsolicited informal support for Aboriginal and Torres Strait Islander peoples. A qualitative study. *BMC Public Health* 2011; 4(11): 686.

Papers in press

1. Yun-Hee Jeon, Annie Black, Janelle Govett, Laurann Yen, and Ian S McRae. Private health insurance and quality of life: Perspectives of older Australians with multiple chronic conditions. (*Australian Journal of Primary Health*)

Research continued

2. Jowsey T, Yen L, Pearce-Brown C, Douglas K. What motivates Australian health service users with chronic illness to engage in self-management behaviour. (Health Expectations)

Papers in submission

1. Corcoran K, McNab J, Girgis S, Colagiuri R. Is Transport a Barrier to Health Care for Older People with Chronic Diseases? A Review (Submitted to: Asia Pacific Journal of Health Management).
2. Corcoran K, Jowsey T, Leeder S. One size does not fit all: the different experiences of those with chronic heart failure, type II diabetes and chronic obstructive pulmonary disease diabetes (Submitted to: Australian Health Review)
3. Jowsey T, Yen L, Ward N, It Hinges on the Door: Space time and identity in Aboriginal health services. (Health Services Research)
4. McCrae I, Yen L, Jeon Y-H, Herath PM, Essue B. The burden of health care costs faced by older Australians with chronic conditions. (PLOS)
5. Mathews P W, Jowsey T and Yen L. Time to measure time: A narrative review of chronic illness and time use (under review; Health and Social Care in the Community)

Presentations

- Justin McNab and James A Gillespie, 'Building Collaboration at the Grass Roots: HealthOne Mt Druitt, Community Health and General Practitioners', 7th Health Services and Policy Research Conference, Adelaide, 5th - 7th December 2011.
- Tanisha Jowsey and Laurann Yen. 'Aboriginal and Torres Strait Islander experiences of health service spaces', 7th Health Services and Policy Research Conference, Adelaide, 5th - 7th December 2011. (poster)
- Laurann Yen, Ian S McRae, Paul Mathews, Tanisha Jowsey and James Gillespie. Patient time spent on health related activity: should this be factored into health service planning? 7th Health Services and Policy Research Conference, Adelaide, 5th - 7th December 2011. (poster)
- Laurann Yen, Ian S McRae, Paul Mathews and Tanisha Jowsey. "Chronic Illness: A Second Job?" Ageing and Society: An Interdisciplinary Conference. U Cal Berkeley 8-9 November 2011.

Research continued

The Childhood Asthma Prevention Study

The Childhood Asthma Prevention Study (CAPS) is the first and only Australian randomised controlled trial of the effectiveness of both house dust mite avoidance and modification of dietary intake of fatty acids, both implemented from birth, for the prevention of asthma and other allergic disease during childhood. The study started in 1997 and recruitment of 616 subjects was completed in January, 2000.

The study has taken a new direction in the past two years, due to the interest of Professor David Celermajor and his colleagues in studying the relation between dietary fats and changes in the walls of the carotid arteries. These studies have emphasised the importance of exposure during early childhood to different dietary fats for the development of changes in the artery walls that may signify long-term cardiovascular risk.

Health Economics Capacity Building Grant

Stephen Leeder is a Chief Investigator on a 5 year NHMRC Capacity Building grant that will provide training and development for a team of health economists to research chronic diseases. The program, Health Economics Research, Modelling, Evaluation and Strategy (HERMES), 'Using health economics to strengthen ties between evidence, policy and practice in chronic disease', is a collaboration between the George Institute, School of Public Health and the Menzies Centre for Health Policy. It will address issues such as: What is the value for money from investment in different treatments? How do such diseases affect the economic circumstances of families? How do we ensure that strategies to address illness work in practice and can be sustained? How do these issues get put on the policy agenda?

Beverly Essue and Joel Negin are Team Investigators on the grant and it is progressing well.

Presentations:

Essue B, Wong G, Chapman S and Jan S. The household economic impact of chronic kidney disease in Australia. 8th World Congress on Health Economics. Toronto, Canada. 11-13 July 2011. Oral Presentation.

Improving Health Literacy in Seniors with Chronic Illness

Jim Gillespie, Clive Aspin and Steve Leeder received a grant from National Seniors Australia to conduct a study on how seniors living with chronic illness navigate the health system and gain access to information about available care and management options to assist them in managing their conditions. The SCIPPS data have been reanalysed to identify strategies to improve health literacy. Further interviews have been completed with health professionals and patients enrolled in HealthOne Mt Druitt. This project is due to report by the end of 2011.

Research continued

Calvary Health Care Bethlehem Palliative Care Study

Jim Gillespie, Angela Beaton, Cathie Hull and Beverley Essue were commissioned to provide Calvary Health Care Bethlehem (CHCB) with a descriptive analysis of their specialist model of palliative care. The project tracked the patient journey through the CHCB community-based and hospital-based palliative care service, and analysed some of the factors that shape the patients' experiences, including the economic impact on patients and their families of receiving palliative care for a life-limiting illness. The report has been completed and a final version was accepted by Calvary Health Care Bethlehem in October 2011. We plan a public release of the report, as this project can make contributions to national policy in this area.

Preventing Poor Outcomes for People with Chronic Illness

The project, Preventing Poor Outcomes for People with Chronic Illness, has been funded by a two-year grant from the Ian Potter Foundation. Project work at the Australian National University (ANU) will conclude at the end of 2011. The University of Sydney are recruiting a Fellow to lead the Sydney project from early 2012.

Data collection for the ANU project is close to complete, with interviews carried out with participants from four sites; Medibank, HealthOne, Northern Rivers Division of General Practice and the Department of Health in the Northern Territory. Final interviews will be conducted in the next few weeks. Interviews completed so far have been transcribed and the coding framework is being developed. The team will seek advice about the current plans for implementation of a national policy framework from the AIHW, so that interview findings can be put into the context of developing policy.

Papers in submission

- "Coordination of care in Australian mental health policy" (Michelle Banfield, Laurann Yen, Karen Gardner, James Gillespie, Ian McRae, Robert Wells) has been submitted to *Australian Health Review*, and revisions completed prior to resubmission.
- "From Coordinated Care Trials to Medicare Locals: where next for coordinating care?" (Karen Gardner, Laurann Yen, Michelle Banfield, James Gillespie, Ian McRae, Robert Wells) has been revised and resubmitted to the *International Journal of Quality and Safety*.

Global Health

Initiative for Cardiovascular Health Research in the Developing Countries

Research continued

A study conducted in China, India, Argentina and Zambia, estimating the costs to families of heart disease and stroke suffered by one member, has now been published. This study has been coordinated from Delhi and Stephen Leeder has chaired the overseeing committee. It complements his work in 2003-4 examining the macroeconomic effects of CVD. A major publication on the study has been accepted for publication by PLoS. Dr Harikrishnan continues to work with Stephen Leeder and NY colleagues on a revision of the monograph *A Race Against Time*, first published in 2004.

Health Sector Aid Effectiveness in the Pacific

Joel Negin is conducting research funded by the Knowledge Hub on Health Policy & Finance at the Nossal Institute for Global Health on health sector aid effectiveness in the Pacific.

The 2009 projects focused on sector wide approaches in Samoa and the Solomon Islands and tracking of funding flows for non-communicable disease and HIV/AIDS. The work was extended in 2010 to investigate regional health sector governance mechanisms. The research is being done in collaboration with the World Bank and Secretariat of the Pacific Community partners. 2011 projects include finalising the regional health governance project and continued work on health financing in Solomon Islands as donors attempt to adhere to the Paris Declaration on Aid Effectiveness.

Joel Negin has been in continuing conversation with AusAID and other Pacific development partners about the impacts of the current regional health governance model. AusAID and NZAID in particular have sought his advice based on recently completed work on the proliferation of regional health governance mechanisms. Joel spent two days in Wellington in August working with NZAID. Additionally, Joel spent a week in the Solomon Islands working closely with senior officials of the Ministry of Health and Medical Services on health policy issues. Joel provided technical assistance on human resource planning, referral procedures and costing from outer islands to the National Referral Hospital and examined national budgeting processes.

Publications

- Asante AD, **Negin J**, Hall J, Dewdney J, Zwi AB. Cuban health assistance program and human resources for health challenges in the Pacific: analysis of policy implications. *Human Resources for Health*. Forthcoming.
- **Negin J**, Martiniuk ALC. Sector Wide Approaches for health in small island states – lessons learned from the Solomon Islands. *Global Public Health*. 8 July 2011. Epub ahead of print.

Research continued

Securitisation and Multi-drug Resistant Tuberculosis: Global and Australian Perspectives

Jim Gillespie and Joel Negin are looking at new issues around an old disease that has re-emerged in a new and less treatable form. Multi-drug resistant Tuberculosis (MDR TB) – a more virulent variant with higher mortality rates – has emerged recently as a result of inadequately administered treatment programs for TB. It is closely linked to the prevalence of HIV and AIDS and ‘low quality treatment programs’. The project is looking at the policy context of WHO’s TB DOTS policy and the emergence of MDR TB as a policy problem on Australia’s borders to identify productive responses. Several publications are being prepared on the development of the DOTS program, border protection and MDR TB in the Torres Strait and the ‘securitization’ of illness. This project will conclude at the end of 2011.

Process Evaluation of Cardiovascular Disease Interventions in Anhui Province China

The Menzies Centre for Health Policy has been awarded \$16,000 under the University of Sydney IPDF program to undertake a process evaluation and policy study of a community based cardiovascular (CVD) reduction program in rural China. The project will be conducted in collaboration with Lanzhou University, Gansu Province, China. CVD is a serious health, economic and social issue in rural China and an area of increasing need and research investment. The Menzies Centre has expertise in process evaluation and a knowledge exchange in this area will benefit both Lanzhou and Sydney Universities. Professor Leeder visited Lanzhou in May 2011 and it is expected that a PhD student from Lanzhou will enrol at the University of Sydney next year to pursue the project.

Health Reform

NSW Health advisory role

The Menzies Centre was engaged by NSW Health in 2010 to provide independent policy advice on key significant areas of work required during the roll out of the COAG National Health and Hospitals Network Agreement in NSW. Over the next 12 months, the Menzies Centre will evaluate the chronic illness ‘module’ of HealthOne Blacktown in the Western Sydney Local Health District. NSW Health requested that the HealthOne Blacktown Evaluation use a similar methodology to that employed in the Evaluation of HealthOne Mount Drunit carried out by Menzies Centre for Health Policy. A second component of the HealthOne Blacktown Evaluation will be to develop evaluation methods that can be used in the evaluation of HealthOne services elsewhere in NSW.

Research continued

Health Surveys

Survey on Attitudes towards the Australian health system

The second Menzies-Nous Survey on Attitudes to the Health Care System went to the field in July 2010. It focused on the experience of primary and aged care, and provided an early view of attitudes to proposed national health care reforms. Analysis of the results has been completed, and the two reports – on general attitudes and on aged care – were launched in November 2010. The Survey Report was published on the Centre's website and has received extensive media attention. Several publications have been completed or planned using the Menzies-Nous data. Planning is currently underway to complete a third survey. This will again involve both the Sydney and ANU nodes as well as the Nous Group.

What is influential public health research?

James Gillespie and Stephen Leeder are Chief Investigators with Professor Simon Chapman on an NHMRC Project grant that is looking at how population health research workers and policy makers communicate. The study addresses the question as to what the characteristics are of public health research that leads to policy change. The project commenced in early 2009. Interviews with researchers and most of the policy makers have been completed and the project has a substantial number of publications accepted and under review.

Sensory Impairment

Vision-Hearing Project

The Vision-Hearing project is a NHMRC Partnership grant that pilots a screening model for the detection of dual sensory impairment among clients presenting to low vision services. The project, led by Stephen Leeder (CIA) and managed by Julie Schneider (Menzies), received \$318,000 in NHMRC funds in addition to financial and in-kind support from partner organisations, Vision Australia and the Audiological Society of Australia.

To October, 257 participants have been recruited to the study (recruitment rate ~50%). All clients have undergone hearing screening assessments and completed detailed questionnaires on their age, sex and social status, hearing health, general health, cognition, and quality of life.

Participants hearing levels are assessed by air conduction only, across a range of frequencies representing the frequency range of speech (500Hz; 1000Hz; 2000Hz; 4000Hz and 8000Hz). If hearing is found to be outside of normal range (>20dB) at any frequency 0.5-4kHz, dual sensory impairment is discussed with the client. If the participant had not previously sought help for their hearing loss information is provided about hearing services eligibility and clients are encouraged to go on and attend a full assessment.

Since July 2011, our major achievements include:

- Continuation of baseline assessments

Research continued

- Implementation of the follow-up phase - over 46 interviews have been completed
- Planning to extend the follow-up phase to incorporate some qualitative interviews on help-seeking, isolation, care and support needs.

Related Publications (from BMES)

Gopinath B, Schneider J, McMahon CM, Teber E, Leeder SR, Mitchell P. Severity of age-related hearing loss is associated with impaired activities of daily living. *Age and Ageing* in press, accepted 4 July, 2011.

Related grant submissions

Gopinath B, Hickson L, Schneider J, McMahon CM, Burlutsky G, Leeder SR, Mitchell P. Hearing Impaired Adults are at Increased Risk of Experiencing Emotional Distress and Social Engagement Restrictions Five Years Later. Submitted to *Journal of the American Geriatrics Society* JAGS.

Gopinath B, Schneider J, Hickson L, McMahon CM, Burlutsky G, Leeder SR, Mitchell P. Hearing Handicap, rather than Measured Hearing Impairment, Predicts Poorer Quality of Life Over 10 Years in Older Adults. Submitted to *Journal of the American Geriatrics Society* JAGS.

Schneider J, Gopinath B, McMahon CM, Teber E, Leeder SR, Mitchell P, Wang JJ. Prevalence and 5-year Incidence of Dual Sensory Impairment in an Older Australian Population. Submitted to *Annals of Epidemiology*.

Research Students

Jennifer Hunter (supervisor Stephen Leeder)

Developing a minimum dataset for use in an Australian integrative medicine clinic

A case study of the first four years of a primary care integrative medicine (IM) clinic in Sydney was undertaken to describe the clinic and its IM team; and identify its successes and challenges. A lack of data measuring patient outcomes prompted the need to develop a minimum data set.

Jennifer has undertaken a systematic literature review of patient questionnaires for use in primary care integrative medicine clinics. From over 2000 questionnaires, 412 potential questionnaires were identified and a final shortlist 42 robust tools are recommended.

In-depth interviews with patients and practitioners at the clinic were undertaken to explore their views about the use of questionnaires to measure holistic health. Based on these findings a minimum dataset will be proposed that aims to measure a broad spectrum of domains including health care use, physical health outcomes, disease prevention, quality of life and positive definitions of health and wellbeing.

Research continued

From this project, the long-term aim is to develop a standardised online database that is able to monitor health service use and patient outcomes. The database will provide a practical tool to support urgently needed evaluations of multidisciplinary primary care and integrative medicine clinics in Australia. Jennifer's project is supported by a National Institute of Complementary Medicine seed funding grant.

Ashley McAllister (supervisor Stephen Leeder)

Are contemporary welfare reforms appropriate for people with a mental illness?

Ashley McAllister is exploring contemporary (since 1990) welfare reforms to determine if the current policies are appropriate for people with mental illness when applying for income support. This project is a unique comparative multiple-case study between Australia, Canada, New Zealand and the United Kingdom to determine: 1) the key barriers, especially ones created by policy, in applying for disability-related income support, and whether the barriers are similar across the four countries, 2) why welfare reforms have continued to be based on an active labour market strategy, and 3) if existing policies should be re-framed in a more ethically-sound way to better meet the needs of those with mental illness. This research will use an iterative process of exchange with policy-makers to test the feasibility of implementing revised policies. This project has the potential to reduce the risk of marginalisation among those with mental illness by facilitating knowledge translation between those who work with people with mental illness and those who create the policies. Ashley has recently presented her preliminary findings on the key barriers at the Australian Political Studies Association Conference in Canberra.

Surianti Sukeri (supervisor Stephen Leeder)

The Economic and Human Impact of Ischemic Heart Disease among Households in Malaysia

Malaysia is a middle income country with a tax-based health financing system. Health care is relatively affordable and safety nets are provided for the needy. With such an ideal system, do patients and carers in Malaysia suffer financially and emotionally from their illness?

This cross-sectional study was conducted with two objectives: 1) to determine the economic impact of Ischemic Heart Disease (IHD) and 2) to explore the experience of living with IHD among patients and their carers in Malaysia.

Household microeconomic assessments and semi-structured interviews were conducted during June-October 2008 among IHD patients and their carers at the National Heart Institute, Kuala Lumpur, Malaysia. Selection criteria for the questionnaire were patients/carers to patients aged 25-90, who were hospitalized due to IHD during the previous year prior to the data collection.

The study showed that the mean out-of-pocket (OOP) cost for IHD was USD 944.43. OOP costs on average consisted of 16.1% of the household non-food consumption and catastrophic spending (OOP costs =40% of non-food consumption) was reported in 16% of households. However 98.2% of patients reported no financial distress and only 18.1% reported decreased income due to illness.

Research continued

It was discovered that the economic and psychosocial impact of IHD among patients and their families in Malaysia was considerable. However the true economic impact of IHD on households could be much larger than was captured from the study.

Despite the highly subsidised tax-based health financing in Malaysia, patients and their household had to pay an average of US\$870 yearly in out-of-pocket (OOP) costs. Sixteen out of every 100 households suffered from catastrophic health spending (OOP costs = 40% of non-food consumption). Although only nine suffered from distressed financing, as many as 29% reported having problem paying for their health care and a quarter of the patients had to withdraw their saving to support their illness. Almost 17% had to reduce their monthly food consumption. Many had difficulties paying for their utility bills, education, rent, car maintenance/loan, and dental/optical expenses. Nevertheless, only a selected few reported moving houses, selling off assets and taking up new employments to help cope with living expenses. Although such occurrences were small in number, it does not preclude the fact that IHD did bring great impact financially for these patients and their families.

These findings provide some justification for reviewing financing mechanisms to address chronic disease in Malaysia. Welfare distribution was exceptionally low which either meant patients in this study were ineligible because they were not poor enough or patients were not aware of its existence. Currently, welfare provisions in Malaysia are reserved for poor families, the elderly, single mothers with children and disabled persons. Amendment should be made to include allocation for chronic disease patients or their carers who were unemployed and impoverished by their illnesses. These allocations should be made known to families in need and information regarding the application should be widely-distributed in health care facilities.

Publication

Sukeri S, Mirzaei M, Leeder S. Death; not a second before, not a second after. Life after Myocardial Infarction from the perspective of Muslim Patients and Carers in Malaysia . Submitted to the Journal of Advanced Nursing. (Submitted)

Research continued

Shauna Downs (supervisor Stephen Leeder)

Food policies to improve diets and reduce chronic disease in India

Shauna Downs is examining trans fatty acids (TFA) in the Indian food supply. Her project will use food supply chain analysis in both national and regional case studies in India to: 1) determine the sources of TFAs in the food supply, 2) identify key points for policy interventions to reduce their consumption; and 3) to determine the feasibility of these policies. The project will examine the processes and actors that take food from farm-to-fork, while identifying potential pressure points in the food supply for policy interventions. A feasibility assessment of the proposed policy interventions will be conducted with key stakeholders (including government ministries, public organizations and relevant leaders from the private sector) in India. This project has the potential to improve diets and help reduce chronic disease in India by identifying feasible multi-sectoral policy options. The novel use of food supply chain analysis will provide scope for applying this methodology to other key aspects of the food supply. Shauna has completed seventeen interviews with various stakeholders in India as part of the first phase of data collection for this study and will conduct further data collection in the coming months. She is also a Co-Investigator on a recently funded Wellcome Trust/Public Health Foundation of India Capacity Building Grant to investigate trans fat intakes and the feasibility/cost-effectiveness of product reformulation to reduce trans fat in India.

Soraya Siabani (supervisor Stephen Leeder)

Standardizing A Self-Care Heart Failure Index (SCHFI) and using it to compare the effect of education by volunteers and health workers in Iranian patients with heart failure

This study seeks to establish what benefit education by health workers and volunteers may have on patients with heart failure in Iran. The SCFI will be used to measure differences in outcomes among two groups of such patients either exposed to health worker educators or to volunteers.

Objectives:

- To investigate the reliability and the validity of SCHFI in Iranian people with CHF
- To measure the Self-Care Heart Failure Index (SCHFI) components (i.e symptom monitoring) in patients with CHF in Iran
- To compare SCHFI for two groups of patients randomly divided into two groups either exposed to health worker educators or to volunteers.

Adam Capon (supervisor James Gillespie)

The development of an environmental health policy for nanotechnology in Australia

Adam is being sponsored by NSW Health to complete the first major Australian study of the policy implications of the development of nanotechnologies. He has undertaken the first comprehensive review of the current regulatory and policy structures concerning public health chemicals policy in Australia and has planned quantitative and qualitative research to explore and make recommendations on the public health implications of nanotechnology. Adam will consult closely with the different Australian jurisdictions to develop workable policies.

Research continued

Angela Littleford (supervisor James Gillespie)

NSW models of care that reflect innovation in ageing and chronic disease management and their links to policy

Angela has interviewed 30 health leaders from NSW and Australia to gain their views on the changes needed to the health care system in order to meet the needs of an ageing population with increasing rates of chronic disease; including models of care that are delivering innovation in the areas of chronic disease management for older people.

Data collection is complete and analysis of the data is underway using grounded theory methodology. Angela is undertaking further study in qualitative analysis.

Recent publications and presentations include:

- Littleford, A (2011) Innovative solutions for Australia's ageing population, Ninth Asia/Oceania Regional Congress of Gerontology and Geriatrics, Melbourne.
- Littleford, A (2011) Innovation in Health Care: Solutions for Australia's Ageing Population, Global health Innovation Conference, Yale University, USA.
- Wade, V., Littleford, A. & Kralik, D (2010) Home Medication Management by Videophone: Translation from pilot to integrated service in Communications in Medical and Care Compunetics, Springer-Verlag Belin, Heidelberg.
- Littleford, A (2010) Reading between the lines: best practices of policy through interpretation, (invited paper) Government Policy Conference, Canberra.
- Littleford, A and Kralik, D (2010) Making a difference through integrated community care for older people, Journal of Nursing and Healthcare of Chronic Illness, Blackwell Publishing Ltd. pp. 1-9.
- Littleford, A and Slinn, A (2010) Working in the Community, in Kralik, D and VanLoon, A. (Eds) Community Nursing in Australia, John Wiley & Sons Australia.

Angela commenced her study in Semester 2, 2008 and has been enrolled on a part time basis.

John Hall (supervisor James Gillespie)

The global politics of Tuberculosis control: an analysis and critique of the international Tuberculosis Directly Observed Short Course (TB DOTS) policy, its development, and transfer to low income countries

John Hall is a public health physician with long experience of working in the Pacific Islands and other low resource settings. He is examining the reasons for widespread failures in health surveillance and implementation of externally funded programs. His main interest is the troubled relationships between global policies devised with little regard for local realities and the difficulty of implementing these interventions in setting with poor resources, inadequate trained workers and fragile governance structures.

Research continued

Deborah Schaler (supervisor James Gillespie)

The comparative effectiveness of patient feedback as a tool to improve the safety or quality of the health system.

Deborah is undertaking a comparative study of the impact of three patient feedback mechanisms (patient complaint policy, patient satisfaction surveys and patient journeys) on the safety or quality of a health system. The inter-relationships of these mechanisms to other elements of the safety and quality system, particularly the incident management and risk management systems will be explored. The study aims to better understand: the situated-ness and integration of patient feedback in the quality and safety frame; the relative efficiency and effectiveness of these three mechanisms in leading to improvement in quality or safety in a selected health service; compare the effectiveness of patient feedback mechanisms to other elements of quality and safety governance; and to identify and pilot strategies to strengthen these relationships.

The study will be mixed method and situational analysis mapping will be undertaken in the early part of the research to map and better understand the meso-level relationships. A pilot site (the Women and Children's Division in ACT Health, Canberra, comprising the Women and Children's Hospital and a range of community based services) has been identified and Deborah has obtained all required ACT Health approvals to proceed. The research is currently at ethics approval stage.

Andrey Zheluk (supervisor James Gillespie)

Contemporary HIV & drug policy advocacy in the Russian Federation

The HIV epidemic in the Russian Federation has been driven by injecting drug use since the late 1990s. During the 2000s, the Russian government maintained a strong drug prohibitionist and anti harm reduction stance.

Despite international funding for HIV harm reduction programs over the course of the decade, there was almost no change in the central government commitment of resources required to scale up HIV prevention and treatment programs for injecting drug users.

Whereas each successive donor program sought to engage federal, provincial and local tiers of government to support of harm reduction, policy changes have thus far been insufficient to influence the course of the injecting drug use driven epidemic across Russia.

Andrey is investigating the role of project performance data collected during the implementation of a five-year Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM) project to influence HIV and drug policy locally and nationally in Russia.

He has finished his field research with senior NGO project staff in Russia. He is currently analysing data and preparing publications.

Initial themes that have emerged from the research include:

1. The disconnection between drug policies and HIV policies in Russia.

Education

One of the principal objectives of the Centre includes training researchers to such a level that they will have the capacity to participate meaningfully in national and international research programs on health policy and to undertake research training activities and programs that are consistent with these objectives. The Menzies Centre has provided a focus for expanding postgraduate programs in health policy at the University of Sydney and a new Master of Public Health program at the Australian National University.

The University of Sydney

The Master of Health Policy offers three core units in second semester. Each unit is convened by staff from the Menzies Centre, with active contributions from the School of Public Health and a wide array of policy practitioners. Jim Gillespie was on Special Studies Program (study leave) during the semester, but continued to contribute to teaching in HPOL5003.

HPOL5003 Analysing Health Policy (S Leeder, J. Gillespie and M. Rivas – enrolment 32:)

This unit builds policy analysis and analytical skills by exploring policy design, implementation and evaluation. It looks at the methods and limitations of evidence-based health policy and the problems of integrating equity concerns when developing and applying health policy. The day schools include workshops on the use of epidemiological and social science literature in policy development.

HPOL5007 Global Health Policy (AM Thow – enrolment: 49)

This unit explores new global health threats that transcend national boundaries; especially those whose causes or results transcend the capacity of individual states to influence, avian flu, for example. It examines the governance of policy responses, good and poor, that these global health threats evoke. The influence and power of agencies in the United Nations system, including the World Health Organisation and UNICEF, the World Bank, the Gates Foundation and stakeholder groups are be examined. Teaching makes extensive use of current case studies. The unit concentrates on less developed countries.

HPOL5009 Health policy Project (S Leeder, A. Dominello, C. Hull and M. Rivas – enrolment: 12)

This unit is a capstone project that builds on the skills developed in HPOL5008 and other core units to provide students with an opportunity to develop their issues analysis and policy development skills under close supervision of an allocated academic mentor. Students choose a health policy project which is developed in workshops into a viable policy proposal.

Publications and Presentations

Peer Reviewed

- Mirzaei M, Truswell S, Arnett K, Page A, Taylor R, Leeder SR. Cerebrovascular disease in 48 countries: secular trends in mortality 1950–2005, *J Neurol Neurosurg Psychiatry*, published online October 21, 2011 doi:10.1136/jnnp-2011-300408
- Essue B, Kelly P, Roberts M, Leeder S, Jan S. We cant afford my chronic illness! The out-of-pocket burden associated with managing chronic obstructive pulmonary disease in western Sydney, Australia. *J Health Serv Res Policy*. 2011 Oct;16(4):226-31. Epub 2011 Sep 27.
- Ferreira MA, Matheson MC, Duffy DL, Marks GB et al. Australian Asthma Genetics Consortium. Identification of IL6R and chromosome 11q13.5 as risk loci for asthma, *Lancet*. 2011 Sep 10;378(9795):1006-14.
- Ward NJ, Jowsey T, Haora PJ, Aspin C, Yen LE. With good intentions: complexity in unsolicited informal support for Aboriginal and Torres Strait Islander peoples. A qualitative study. *BMC Public Health*. 2011 Sep 4;11:686.
- Gopinath B, Anstey KJ, Sue CM, Kifley A, Mitchell P. Olfactory Impairment in Older Adults Is Associated With Depressive Symptoms and Poorer Quality of Life Scores, *Am J Geriatr Psychiatry*. 2011 Sep;19(9):830-834.
- Yen L, McRae I, Jeon Y-H, Essue B, Herath P. The impact of Chronic Illness on workforce participation and the need for assistance with household tasks and personal care by older Australians, *Health Soc Care Community*. 2011 Sep;19(5):485-94.
- Negin J, Mills EJ, Albone R. Continued neglect of ageing of HIV epidemic at UN meeting. *Lancet*. 2011 Aug 27;378(9793):768.
- Douglas KA, Yen LE, Korda RJ, Kljakovic M, Glasgow NJ. Chronic disease management items in general practice: a population-based study of variation in claims by claimant characteristics, *MJA* 2011; 195 (4): 198-202.
- Greenberg H, Raymond SU, Leeder SR. The Prevention of Global Chronic Disease: Academic Public Healths New Frontier, *Am J Public Health*. 2011 Aug;101(8):1386-90. Epub 2011 Jun 16.
- Leeder S. 9/11 and all that, *Aust N Z J Public Health*. 2011 Aug;35(4):318.
- Wong MCS, Wang HHX, Jiang JY, Leeder S, Griffiths S. Predictors of switching from beta-blockers to other anti-hypertensive drugs: a review of records of 19,177 Chinese patients seen in public primary care clinics in the New Territory East, Hong Kong *Asia Pac Fam Med*. 2011;10(1):10.
- Negin J, Nemser B, Cumming R, Lelera E, Ben Amor Y, Pronyk P. HIV Attitudes, Awareness and Testing Among Older Adults in Africa, *AIDS Behav*. 2011 Jul 8.
- Negin J, Martiniuk A. Sector wide approaches for health in small island states: Lessons learned from the Solomon Islands, *Glob Public Health*. 2011 Jul 8.

Publications and Presentations continued

- Gopinath B, Schneider J, Hartley D, Teber E, McMahon CM, Leeder SR, Mitchell P. Incidence and predictors of hearing aid use and ownership among older adults with hearing loss. *Ann Epidemiol.* 2011 Jul;21(7):497-506.
- Thow AM, Snowdon W, Schultz J, Leeder S, Vivili P, Swinburn B 2011.
- The role of policy in improving diets: experiences from the Pacific Obesity Prevention In Communities food policy project. *Obesity Reviews*, 12 (Suppl. 2), 68–74.

Industry

- Leeder S. A worldwide lesson in tackling non-communicable diseases, *Australian Doctor*, October 2011.
- Leeder S. Need for a listening tour, *Australian Medicine*, September 2011.
- Russell L. The limits of mental health interventions for trauma, *Australian Medicine*, September 2011.
- Leeder S. Tomorrow's health needs a shift in education today, *Australian Doctor*, September 2011.
- Leeder S. Don't believe the hype - health reform is sexy, *Australian Doctor*, August 2011.
- Russell L. Shocking news on life expectancy in the United States, *Australian Medicine*, August 2011.
- Leeder S. UN and NCDs, *Australian Medicine*, July 2011

Media - Print

- Russell L. The state of emergency, *Sydney Morning Herald*, 18 October 2011.
- Russell L. Non-communicable diseases pose UN challenge, *The Canberra Times*, 23 September 2011.
- Wells R. Vested interests and states rights leave sufferers of chronic disease out in the cold, *The Australian*, 3 September 2011.

Media - Interviews & Quotes

- Eggleton M. Has Medicare run out of puff?, *The Australian*, 22 October 2011. Professor Stephen Leeder is quoted.
- Cresswell A. Breaking point, *The Australian*, 22 October 2011. Dr Jim Gillespie is quoted.
- If I were health minister . . ., *The Australian*, 15 October 2011. Professor Stephen Leeder contributes to this article.
- Robotham J. GPs offer breast cancer after-care as number of patients increases, *Sydney Morning Herald*, 26 September 2011. Associate Professor Christine Giles is quoted.
- Cresswell A. Results of the nation's health check are back, *The Australian*, 20 August 2011. Dr Jim Gillespie is quoted.
- Eastley T. Who benefits from health deal? Australian Broadcasting Corporation Transcripts, 2 August 2011. Professor Stephen Leeder is interviewed.

Publications and Presentations continued

- Trembath B. Questions on Government's health deal, Australian Broadcasting Corporation Transcripts, 2 August 2011. Mr Robert Wells is interviewed.

Online

- Leeder S. Greece's financial crisis takes toll on the nation's health, *The Conversation*, 24 October 2011.
- Leeder S. Reforming the World Health Organization, *Inside Story*, 26 September 2011.
- Leeder S. Non-communicable diseases come to the United Nations, *The Conversation*, 22 September 2011.
- Leeder S. Australia's role in reforming the World Health Organisation, *The Conversation*, 14 September 2011.
- Keleher H, Sainsbury P, Leeder S, Baum F, Moore M. Time to support changes to private health insurance subsidy, *Crikey*, 10 August 2011.
- Sweet M. Health reform: it's incremental and a work-in-progress, *Croakey*, 3 August 2011. Professor Stephen Leeder contributes to the article.
- Wells R. The hospital reform deal merits congratulations, *Croakey*, 3 August 2011. This article was first published at *The Conversation*.

Conference Presentations

- McNab J. The Blue Mountains GP Network Chronic Disease Self-Management Project. Primary Health Care Research Conference, 13-15 July 2011, Brisbane.
- Jowsey T. Can we get some help? Aboriginal and Torres Strait Islander stories of informal support. Primary Health Care Research Conference, 13-15 July, Brisbane.
- Essue B, Wong G, Chapman S and Jan S. The household economic impact of chronic kidney disease in Australia. 8th World Congress on Health Economics, 11-13 July 2011, Toronto, Canada.
- Colagiuri R. Global Challenge of Diabetes. Diabetes and Obesity Management and Prevention Workshop, July 2011, Sydney.
- Colagiuri R. World focus on non-communicable diseases. Diabetes and Sustainable Populations Forum, July 2011, Sydney.
- Colagiuri R. Invited Speaker. Corporate Responsibility and Healthy Lifestyle Interventions Symposium, July 2011, Sydney.
- Colagiuri R. The scale of the challenge. UN Civil Society Interactive Hearing on NCDs, June 2011, New York.

Events

The Menzies Centre for Health Policy delivers regular seminars that address contemporary health policy issues. The Menzies Oration and Emerging Health Policy Researchers Conference are regular features of the events program and attract widespread interest. The 3rd S T Lee Lecture was also held in Sydney in November.

Upcoming Events

Sydney Health Policy Network

Monday, 28 November 2011

Guest Lecture presented by Gregor Henderson: independent adviser in mental health and wellbeing, Scotland, UK

Why Modern Life is bad for our mental health and wellbeing and what we might choose to do about it.

This lecture explores what emerging public health policy, with its focus on wellbeing and social action, may have to offer our individual and collective responses to mental illness and mental health and to creating a more mentally health society for the 21st century.

Traditional approaches to mental health policy with their primary focus on the needs of people living with significant mental illnesses have made steady progress over the last 20 - 30 years. However a continued focus on mental health policy as being predominately concerned with the identification and alleviation of mental illness has its limits to overall public health and to improving the quality of life, inclusion, equality and human rights of people recovering from mental illnesses and the economic and social consequences of living with a mental illness.

This lecture will argue that new ways of thinking about public and mental health policy that embrace a wider and more integrated approach with a focus on addressing the social, economic and cultural determinants of both mental illness and mental health (or mental wellbeing) will bring significant advantages and improve outcomes for people recovering from mental health difficulties and the wider community.

Drawing on emerging policy, evidence and practice from around the world, Gregor will present the case for making public mental health with a focus on wellbeing a legitimate goal for national and local policies and actions.

Gregor Henderson

From 2003 – 2008, Gregor was the first Director of the Scottish Government's innovative and now internationally renowned National Program for Improving Mental Health and Wellbeing (www.wellscotland.info).

Gregor currently works as an adviser to the UK Department of Health in England on public mental health and wellbeing. This follows two years of leading a national program on wellbeing and public mental health for the National Mental Health Development Unit, supporting the development and implementation of national mental health policy. (www.nmhdu.org.uk).

Events continued

Gregor writes on mental health, wellbeing, social and public policy issues and lectures across the UK, Europe, and internationally. Gregor is interested in how policy, research evidence, practice and people's lived experiences can be combined to help transform the way people, communities and society think and act about mental health and wellbeing.

Tuesday, 29 November 2011

Conference - Mind over Money: Reforming national health funding and its implications for mental health.

Guest Facilitator: Gregor Henderson - Independent adviser in mental health and wellbeing, Scotland, UK.

The conference will be split into two sessions. The morning session will provide attendees with an overview of the new national health funding and governance arrangements.

The afternoon session will explore what these new arrangements mean for mental health in Australia and the prospects for ongoing reform. Understanding this landscape will be critical to ongoing effective health policy and research.

Past Events

S T Lee Lecture - Taking Aim at Non-communicable Diseases in Asia/Pacific

Monday, 7 November 2011, University of Sydney

Professor Robert Beaglehole - Emeritus Professor, University of Auckland

Non-communicable diseases (NCDs), principally cardiovascular diseases, cancer, diabetes and chronic respiratory diseases, are the leading causes of death in the Asia/Pacific region. The region includes countries such as Australia which have had major successes in reducing NCD death rates with a comprehensive approach. By contrast, in China where 80% of deaths are due to NCDs, the response to NCDs is at a very early stage. Smaller island countries of the Pacific have declared a "state of health emergency" because of the toll of NCDs.

Professor Beaglehole will speak to the momentum generated by the UN Declaration in September 2011 that recognises the enormous health and economic burdens imposed by NCDs on all countries and firmly positions NCDs as a development, and not just a health, issue.

Robert Beaglehole

Robert Beaglehole trained in medicine, epidemiology and public health in New Zealand, England and the USA before becoming a Public Health Physician. He was Professor of Community Health at the University of Auckland, New Zealand (1988-1999). He joined the staff of the World Health Organization in 2000 and between 2004 and 2007 he directed the Department of Chronic Disease and Health Promotion. He developed an integrated and

Events continued

stepwise approach to the prevention and control of chronic diseases and led the development of the Bangkok Charter on Health Promotion in a Globalized World. He left WHO in February 2007 having reached the UN retirement age and returned to live in New Zealand. He is now co-director of International Public Health Consultants and Professor Emeritus of the University of Auckland. He practices public health in New Zealand and globally with a focus on the prevention and control of noncommunicable diseases. He chairs the Lancet NCD Action Group.

Emerging Health Policy Research Conference

17 August 2011, University of Sydney

The Menzies Centre for Health Policy held its 6th annual Emerging Health Policy Research Conference on Wednesday, 17 August 2011.

The conference showcased the work in progress of current doctoral and early career research workers, as well as those new to the field of health policy research.

Participation in the Emerging Health Policy Research Conference provided an opportunity to:

- discuss health policy responses to current local, national and global health challenges;
- hear about 'in progress' health policy research;
- discuss new ideas and identify opportunities for collaboration across disciplinary boundaries.

Keynote speaker: Hon Dr Geoff Gallop, Professor, Director, Graduate School of Government, University of Sydney

Conference Sessions:

Equity

Food Policy

Governance

Cross-Sectoral Policy

Evidence & Policy

Chronic Illness

Workforce

Advocacy and Agenda Setting

Aged Care

A full conference program is available on the conference website: http://www.menzieshealthpolicy.edu.au/events_past.php#ehpr2011

Staff List

Directors

- Professor Stephen Leeder, The University of Sydney
 - Mr Robert Wells, The Australian National University
-

University of Sydney

- Deputy Director: Dr James Gillespie
- Manager: Amanda Dominello
- Administrative and Research Officer: Alida Castelletto
- Events and Communication Officer: Diana Freeman (maternity leave)
- Research Fellow and Ian Potter Fellow: recruitment in progress
- Project Officer: Shauna Downs
- Research Fellow: Joel Negin
- Lecturer: recruitment in progress
- Associate Lecturer: Minerva Rivas Veralda
- Associate Lecturer: Anne Marie Thow

Research Students:

- PhD Student: Surianti Sukeri
- PhD Student: Jennifer Hunter
- PhD Student: Soraya Siabani
- PhD Student: Adam Capon
- PhD Student: Angela Littleford
- PhD Student: John Hall
- PhD Student: Andrey Zheluk
- PhD Student: Ashley McAllister

- PhD Student: Shauna Downs
- PhD Student: Deborah Schaler

Serious and Continuing Illness Policy and Practice Study:

- Research Fellow, SCIPPS: Justin McNab
- Research Officer, SCIPPS: Natalie Plant
- Program Support Officer, SCIPPS: Kate Corcoran
- Research Assistant: Patricia Jonas

Hearing-Vision Project:

- Postdoctoral Researcher: Julie Schneider
- Research Assistant: Moira Dunsmore

Australian National University

- Associate Director: Ms Laurann Yen
- Business Manager: Ms Marion Eluga
- Ian Potter Fellow: Michelle Banfield
- Ian Potter Fellow: Karen Gardner

Serious and Continuing Illness Policy and Practice Study:

- Senior Research Officer: Ms Tanisha Jowsey

Menzies Centre for Health Policy



THE UNIVERSITY OF
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Directors' Report

The Menzies Centre for Health Policy is a collaborative Centre between The Australian National University and the University of Sydney. It aims to provide the Australian people with a better understanding of their health system and what it provides for them. The Centre encourages informed debate about how Australians can influence health policy to ensure that it is consistent with their values and priorities and is able to deliver safe, high quality health care that is sustainable in the long term.

The Menzies Centre:

- produces and publishes high-quality analyses of current health policy issues;
- delivers public seminars and education programs on a wide variety of health policy topics;
- undertakes comprehensive research projects on health policy issues.

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