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What’s New

• Professor Andrew Wilson has been announced as the new Director MCHP (Sydney). His position will commence in mid-January 2013. Professor Wilson is currently Executive Dean of the Faculty of Health at Queensland University of Technology. He has specialist qualifications in clinical medicine and public health, and a PhD in epidemiology. Professor Stephen Leeder will continue to be involved with MCHP especially in relation to the supervision of several PhD students and the teaching program.

• Associate Professor Adrian Kay has now commenced as the Director of the MCHP (ANU). MCHP (ANU) has joined the Crawford School of Public Policy. Associate Professor Kay brings to the Centre a strong background in policy and was previously Director of the Policy & Governance Program at the Crawford School of Public Policy. Bob Wells continues to maintain a close relationship with MCHP.

• Dr Amanda Smullen was announced as the new Deputy Director of MCHP (ANU). Dr Smullen is a senior lecturer in policy and governance. Her work has focused upon the spread of public management reform ideas and the way these have been adopted and translated to different national political contexts and institutions. Her current research focuses upon the governance role of (semi-independent) agencies within the health/mental health field and examines the instruments and processes through which they seek to establish integration within Federal systems.

• New direction at MCHP (ANU): The node aims to build conceptual frameworks, novel methodologies, encourage debate about issues raised by research developments and introduce new questions that will contribute and challenge policy discussions. The Centre is committed to interdiciplinary research which is anchored in public administration, governance and social policy perspectives. The MCHP at ANU is focused on Global and Transnational Health Policy, Accountability and Performance and Governing Health Risks Beyond Ministries of Health. These themes are underpinned by a cross-cutting approach with three distinctive characteristics:

  • Comparative: policy analysis focussed on dimensions between the Organisation for Economic Co-operation and Development (OECD) countries and across developed-developing country linkages
  • Historical: policy reform understood in its longitudinal context
  • Multi-level: investigating health policy-making between and across different political and administrative scales

• Associate Professor Ruth Colagiuri has taken an office at MCHP (Sydney). Associate Professor Colagiuri will spend time between the MCHP (Sydney) and the Boden Institute until the end of 2012. She will then work solely with the MCHP (Sydney) on a half time appointment.
What’s New continued

- Professor Stephen Leeder has been honoured with life membership of the Australian Epidemiological Association in acknowledgement of the significant contribution he has made to the Association. Professor Leeder was a foundation member of AEA, and president from 1991 to 1995.

- Professor Andrew Wilson has been awarded the 2012 Sidney Sax Medal at the Australian Healthcare and Hospitals Association annual awards. The Sidney Sax Medal is awarded to an individual, active in the health services field, who has made an outstanding contribution in the field of health services policy, organisation, delivery and research. This same honour was bestowed on Professor Stephen Leeder in 2009.

- Angela Littleford, a PhD student with MCHP (Sydney), and supervised by Associate Professor James Gillespie, was announced as the South Australian winner and national finalist for the Nokia Award for innovation at the Telstra Business Women’s Awards. The award was based on her work with the Royal District Nursing Service of South Australia in implementing new models of chronic care and drew on her current PhD research at the MCHP.

- The 7th annual Emerging Health Policy Research Conference was held in August. The keynote speaker was Professor Stephen Simpson, Director of the Charles Perkins Centre who spoke on the topic: “Putting the Balance back into Diet”. 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. It is held annually in August.

- The annual ST Lee lecture was delivered in September by Professor Phua Kai Hong. The title of his talk was ‘Health Systems and Population Ageing in the Asia-Pacific Region: Challenges and Policy Options for the Future’. He also participated in a round table discussion at MCHP (ANU).

- Dr Anne Marie Thow travelled to Bangladesh at the end of August to attend a training workshop for the South Asian Infant Feeding Research Network, funded through a Public Sector Linkages Program Grant from AusAID held by Michael Dibley. The training was in the area of policy analysis for infant and young child feeding.

- Professor Leeder travelled to London from October 12 – 19 to attend the ‘Aspects of Health Policy - Lessons for the Future’ - LSE Health event to celebrate the life, work and achievements of Professor Walter Holland. There were four themes discussed: chronic diseases; infectious diseases; the organisation and governance of health services; and how priorities can be established for provision of services for these diseases. Professor Leeder was the lead speaker on Chronic Disease. He is now working on a paper covering the theme, to contribute to a monograph.
What’s New continued

- The third biennial national survey conducted by MCHP and Nous Group (Nous) has been published, providing key findings about the views held by Australians on their own health, on the Australian health care system and on aged-care services. A very successful launch campaign was held across the country in October and attracted good media coverage.

- Associate Professor James Gillespie, Dr Justin McNab and Beverley Essue travelled to Beijing at the end of October and presented papers at the Second Global Symposium of Health Services Research.

- Professor Stephen Leeder and Associate Professor Paul Lancaster made a presentation to a delegation of paediatricians from Shanghai on Friday 2 November. The presentation was organised through Asia Aid.

- Associate Professor Jim Gillespie and Dr Anne-Marie Thow greeted a delegation from the Chinese Health Committee of Linwu County Committee of the Chinese People’s Political Consultative Conference, Chenzhou City and Chenzhou Municipal Center for Health Services on the 9 November. The purpose of their visit was to obtain an overview of our operations and roles, hold discussions on health policies development and to establish contact for future collaboration opportunities. The visit was organised through the Australia China Business Council of NSW.

- The MCHP held a planning day on the 12th November. The day brought together many of the Centre’s members from Sydney and ANU and was a good opportunity to talk about achievements to date and possibilities for future directions.

- The annual Sydney Health Policy Network conference was held on Wednesday, 14 November with the title All that health reform! What have we achieved and what have we learned? The morning session featured presentations from the guest speakers followed by a panel taking questions from the audience. The afternoon workshops were designed to address key health policy areas. Work is now underway to produce articles to be published in the Medical Journal of Australia.

- Staff from MCHP (Sydney) provided a day of training to the NHMRC Trip Fellowship scheme on Tuesday, 20 November. The aim of the workshop was to provide the Fellows with an insight into the influence of policy in Australia, how it is developed and evolves, what influences it (including evidence).

- Moira Dunsmore, who is working with Rebecca Barton and Dr Julie Schneider on the Dual Sensory Impairment partnership grant, has recently had her position reclassified to an academic level in acknowledgement of the integral input she continues to have in the achievement of the project’s research goals.
Research is a core activity of the MCHP. MCHP 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 MCHP mentor and supervise research students enrolled at both The Australian National University and the University of Sydney. The MCHP also hosts academic and student visitors pursuing projects that align with the research strengths and interests of MCHP 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
  - Care Navigation RCT
  - The Childhood Asthma Prevention Study
  - Health Economics Capacity Building Grant
  - NHMRC Centre for Research Excellence – Air pollution & Health (CREAP)
  - 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

- **Health Care Financing**
  - Public-private funding and service delivery in the Australian hospital sector

- **Health Reform**
  - NSW Health advisory role

- **Health Surveys**
  - Survey on Attitudes towards the Australian health system

- **Research Policy**
  - Is there a role for researchers to influence organisational change with regard to the use of Research Evaluation Metrics (REMs)?

- **Indigenous Health**

- **Mental Health**

- **Obesity and Nutrition**

- **Prevention and Primary Care**

- **Sensory Impairment**
  - Vision-Hearing Project

- **Sustainability**

- **Research Students**
Research continued

Chronic Disease and Aged Care

Serious and Continuing Illness Policy and Practice Study

The MCHP was successful in getting an extension to the SCIPPS NHMRC grant for a further six months. The project will now conclude in December 2012. An extension was requested to complete further dissemination of research findings to stakeholders and policy makers. There are a number of papers in preparation or in press that will complete the work of the program, including the papers resulting from the final research activity and the survey on time and coordination for people with chronic illness. These papers will be completed over the rest of the year.

The financial reconciliations will need to be finalised for the final report to the NHMRC on the work of the program. The outputs for the program have included multiple presentations at national and international conferences, over 20 peer reviewed publications in national and international journals, policy briefings to the Department of Health and Ageing and a substantial number of public statements, press releases and policy statements by the investigators, and particularly by the Directors of the MCHP, Steve Leeder and Bob Wells.

Dissemination of results – SCIPPS Communication

A booklet titled Positioning Chronic Disease Care and Management in the Current Health Reform Context was produced in May 2012 bringing together discussions from the conference and roundtables and also summaries, results and published papers from previous SCIPPS work. This booklet was distributed to all people who attended the conference and other SCIPPS associates and stakeholders with an interest in chronic disease policy, care and management. Several request for presentations and further booklets for wider dissemination have resulted from this mail out.

Papers in Submission

- 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)

Evaluation of HealthOne Mt Druitt

HealthOne Mt Druitt (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 Druitt 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. Interviews with these patients’ GPs were completed by end November 2011. A focus group with Mount Druitt Community Health staff was held in November 2011.
Patient emergency department presentations and hospital admissions data was extracted in August 2011. CHIME (Community Health Information Management Enterprise) data was extracted in October 2011. A survey to all service providers with HealthOne enrolled patients was distributed in May 2011.

Analysis of all qualitative and quantitative data was completed by April 2012. The writing up of the draft report was completed June 2012. The draft report has now been circulated to the members of the HealthOne partnership for review and comment. It is expected that this process will be finished and the draft will be finalised December 2012.

**Care Navigation Evaluation (RCT and Process Evaluation)**

The aim of the evaluation is to determine the efficiency of Care Navigation, a coordinated care plan for chronically ill patients in Western Sydney, and to identify facilitators and barriers to its implementation.

The pragmatic RCT randomly allocated 500 participants between standard care and Care Navigation between 17 May 2010 and 25 February 2011. The 24-month follow-up phone interviews are underway, being conducted by Patricia Jonas, with the final follow up due late February 2013.

Natalie Plant and Patricia Jonas have begun validity checks for completeness and accuracy of the RCT data. This process will continue through to April 2013.

Statistician Kylie-Ann Mallitt is expected to return from maternity leave in February 2013 and will perform an analysis on these data.

A protocol paper is being reviewed by authors for submission to Implementation Science. Further possible papers have been discussed and outlines have been written to facilitate paper-writing when the data comes in at the end of the 24-months follow up.

Dr Justin McNab and Associate Professor Jim Gillespie have carried out interviews for a process evaluation of Care Navigation. Associate Professor Gillespie has interviewed seven decision and policy makers whose roles and responsibilities were diverse, ranging from senior advisory, executive, management and policy roles at NSW Health, Local Health District and Hospital levels.

Dr McNab has interviewed twelve people, including the Inbound and Outbound Care Navigators, continuing care coordinators, ASET CNC, respiratory and cardiac CNCs, Emergency Department NUM, GP Liaison Nurse, and Community Health nurses. Justin will be interviewing patients and GPs in the New Year.
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. Enrolled subjects continue to be studied and interest has grown in understanding the relation of adolescence to asthma.

The study has taken a new direction in the past three years, due to the interest of Professor David Celermajer 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 arterial walls that may signify long-term cardiovascular risk.

Health Economics Capacity Building Grant

Stephen Leeder is the Chief Investigator in an NHMRC Capacity Building Grant (2009 – 2013) entitled Health Economics Research, Modelling, Evaluation and Strategy (HERMES). It involves training, salary and scholarship support for a number of early career health economists to research chronic diseases. The program ‘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 MCHP (Sydney). It aims to 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?

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

NHMRC Centre for Research Excellence – Air pollution & Health (CREAP)

Stephen Leeder is an investigator in an NHMRC Centre for Research Excellence awarded in 2011 for $2.5 million for the project “Understanding and ameliorating the human health effects of exposure to air pollution from knowledge to policy and public health practice.” The project is led by Professor Guy Marks at the Woolcock Institute for Medical Research (WIMR), will run for 5 years, and will facilitate research, research training, translation and collaboration in the field of air pollution and health. The CRE comprises a multi-institution collaboration with main foci of research activity to take place in Sydney, Melbourne and Brisbane. During 2012 several research projects have begun in NSW and Victoria under the auspices of several of the chief investigators and new PhD students recruited to the study.
Preventing Poor Outcomes for People with Chronic Illness

The project, Preventing Poor Outcomes for People with Chronic Illness, has been funded by a grant from the Ian Potter Foundation. Project work at the ANU concluded at the end of 2011. The University of Sydney has recruited a Fellow, Ms Beverley Essue to lead the Sydney project. Work commenced in July 2012.

Australian National University

At the ANU node, the focus of the research was the translation of policy into practice in relation to the coordination of care.

The research stemmed from findings from the SCIPPS qualitative research that showed that both people with chronic illness and health practitioners held a view that the management of chronic illness by health and social care providers was fragmented and poorly coordinated, and that while all groups recognised the importance of coordination, activities to achieve it were not well defined and were not fostered by the current structures, funding and relationships within the system.

The first activity undertaken was an analysis of current policy promoting coordination, to identify how coordination was defined in the Australian and international literature; to what extent current policy drove implementation of coordination of care; and what were the barriers and enablers within the system that would have an impact on coordination.

Karen Gardiner has one paper under review from this study, and Michelle Banfield has had one published in Australian Health Review. There are a further two papers being worked on, looking at issues around information transfer and coordination. Jim Gillespie is a collaborator from Menzies on all of these papers, the other authors are from APHCRI.

The second and main work of the project was a set of case studies on information collection, governance, use and management with the aim of better coordination of care. Providers in four different primary care environments, all known to have an interest in coordination of care, were recruited for interviews, which took place late mid to late 2011. 18 individuals were interviewed by the research team at the ANU. Interviews were recorded and transcribed and then thematically analysed using the NVivo9 software. Two papers have been completed on the basis of this research, one focusing on continuity of information in the coordination of individual patient care; and the second focusing on the way information is used, or not, by the meso and macro levels of the health system to inform health policy.

Outputs

University of Sydney

Chronic illness management in the 21st century: is universal access enough to protect the poor?

This project builds on existing work that has investigated the household economic impact of chronic illness and disability in Australia and in other lower income settings. This project will contribute to this body of research by applying consistent methods to generate evidence on the links between economic hardship and other common chronic illnesses. In addition, an analysis and deconstruction of existing health and social policies will elucidate the mechanisms within Australia’s social insurance systems that lead to negative consequences for socioeconomically disadvantaged patients. Finally, this project will provide evidence on the effectiveness, including cost-effectiveness, of options to mitigate the negative consequences associated with chronic illness management.

Project outline

Phase one: Defining the extent and nature of the problem

This phase will entail an analysis of existing data from a series of observational studies (cross-sectional and prospective cohorts) that have measured the household economic impact of a range of chronic illnesses.

Phase two: Deconstruction of the problem

This phase of the project will entail an analysis of existing health and social policy to identify the gaps and mechanisms that lead to negative economic and social outcomes for patients.

Phase three: Assess the feasibility and effectiveness of policy options to address the problem

This phase of the project will build on the second phase to identify policy options/improvement that have the potential to mitigate the negative consequences associated with chronic illness management.

Outputs

Conference Presentations

Research continued


• Essue B, Jan S. Is universal health insurance the panacea for economic hardship associated with illness? Lessons from Australia. 2nd Global Symposium on Health Systems Research; Beijing, China. 31 October – 3 November 2012. Oral Presentation.

Publications


Grants

• Snapshot follow-up – a study designed to investigate the patient journey, experience and costs for individuals in the 12 months following admission to a NSW hospital with acute coronary syndrome (ACS) (NSW Cardiovascular Network grant scheme) - Awarded.

Global Health

Initiative for Cardiovascular Health Research in the Developing Countries

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 included 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. The projects in 2012 have extended to an examination of human resources for health challenges in the region especially in light of the deep engagement of the Cuban government in medical training. Additionally, Joel will examine the available models for Australian engagement in the health sector in the Pacific in light of the Independent Review of Aid Effectiveness released last year.

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.

Health Care Financing

Public-private funding and service delivery in the Australian hospital sector

A joint project between the MCHP (J. Gillespie), Australian Healthcare and Hospitals Association (Anne-marie Boxall) and Catholic Health Australia.

Australia has a hybrid health system with health services funded and provided by the public, private and not-for-profit sectors. The relationship between the sectors is complex, particularly in the area of hospital care. Private patients are routinely treated in public hospitals and public patients are routinely treated in private hospitals, with each sector funded by a bewildering mixture of government, private health insurance and out-of-pocket payments. This project examines some case studies of these changing relationships and their significance for national attempts to reform the health system.

The initial outcome will be a joint Issues Paper surveying current policy reform questions around service contracts between public and private hospitals to relieve pressure on elective surgery waiting lists. Further funding will be sought in 2013. 
Health Reform

NSW Health advisory role

The MCHP 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.

The MCHP 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 Druitt carried out by MCHP. 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. Due to a delay in the establishment of the HealthOne Blacktown service this work will now be carried out in 2013.

Health Surveys

Survey on Attitudes towards the Australian health system

A report on the third Menzies-Nous Survey on Attitudes to the Health Care System has been published. The survey asked respondents questions about their use of, understanding of, satisfaction with and attitudes towards the Australian health and aged care systems.


The Report was launched at invited roundtables in Sydney, Melbourne, Adelaide and a public seminar in Canberra. The roundtables included representatives from health departments, hospital administration, professional colleges and professional organizations, Medicare locals, aged care providers and consumer groups.

The Survey involves staff from the University of Sydney (J. Gillespie), ANU (L. Yen, I. McRae, R. Wells) and the Nous Group.

Research Policy

Is there a role for researchers to influence organisational change with regard to the use of Research Evaluation Metrics (REMs)?

This research investigates the factors that inhibit and facilitate adoption of REMs by researchers and university departments. It will also, for the first time, identify how researchers are using research metrics as part of their research role and identify the (perceived or not) incentives researchers receive for compliance. This is of particular interest especially if there is no formal incentive in place for comparably successful REMs. Finally, the research will also investigate how departmental management can facilitate REM adoption (through education programs and incentives etc) and, conversely, the role researchers can play in influencing organisational change by either facilitating or resisting the adoption of REMs. Gemma Derrick visited the MCHP (Sydney) and conducted interviews in early 2012. Jim Gillespie was at the Centre for Human and Social Sciences, Madrid in May 2012.

**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.

At end of December 2011, the baseline phase of the project came to completion with 300 participants recruited to the study (recruitment rate <50%). All clients underwent 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 were assessed by air conduction only, across a range of frequencies representing the frequency range of speech (500Hz; 1000Hz; 2000Hz; 4000Hz and 8000Hz). If hearing was found to be outside of normal range (>20dB) at more than one frequency 0.5-8kHz, dual sensory impairment was discussed with the client. If the participant had not previously sought help for their hearing loss information was provided about hearing services eligibility and clients were encouraged to attend a full assessment. Those with unmet hearing needs have been followed up within 12 months to see if the screening model impacted their help seeking behaviour.

Follow-up data collection was completed in November 2012. Furthermore a pilot qualitative component has been added to the project, with in-depth interviews being conducted with a purposively selected group of 20 participants. These interviews cover topics such as help-seeking, isolation, and care and support needs, in order to identify the factors that inhibit and facilitate the active involvement of older Australians in their hearing health care.

Since July 2012, our major achievements include:

- Initial baseline data analysis complete.
• Completion of Phase 2 (follow-up phase) - 169 interviews completed; 39 withdrawn or unable to complete follow-up interview.

• Follow-up data analysis underway.

• Presentation of study design and preliminary follow-up results at Audiology Australia-NSW Branch Continuing Professional Development Day.

• Continuation of qualitative interviews - 11 complete. Data analysis has commenced.

• Collection of audiometric reports continuing. Data entry complete to date.

Recent conference presentations:


Related publications:


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 of 42 robust tools are recommended.
Research continued

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.

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.

Several papers have been prepared and submitted for publication.

**Ashley McAllister (supervisor Stephen Leeder)**

*Comparing how disability income support is designed in Australia and Ontario for people with mental illness*

Ashley McAllister’s project is a unique comparative multi-case study between Australia and Ontario (Canada) that investigates contemporary (since 1991) disability income support (DIS) reforms. She will explore how these programs have evolved over the past 20 years.

Most literature on DIS focuses on what is wrong with the person, asking how can we provide an incentive or make a person more employable. In this project, the design of the system in relation to mental illness will be critically analysed to identify areas of improvement within the system rather than the person. Her aim is to understand how disability is defined in DIS policy; how DIS is designed; and to identify key areas for improvements to better meet the needs of those with a mental illness. While she recognise that boundaries need to be drawn when determining eligibility for DIS, she aims to develop evidence that demonstrates the unique needs and challenges of designing policy for those with a mental illness. 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 completed her first phase of data collection having done 13 interviews with major policy-makers in Australia and Ontario involved in designing DIS to determine the drivers and policy barriers relevant to the local policy environment. She aims to start her second phase of data collection early next year.

**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 uses food supply chain analysis to:
Research continued

1. determine the sources of TFAs in the food supply,
2. identify key points for policy interventions to reduce their consumption, and
3. determine the feasibility of these policies.

The project examines 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 has been 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 nearly 40 interviews with various stakeholders in India as part of the data collection for this study. She is currently analyzing her data and writing manuscripts for publication. In addition to her PhD work, Shauna is also a Co-Investigator on a 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 determine the validity of the SCHF index for use in Iran and establish what benefit education by health workers and volunteers may have on patients with heart failure in Kermanshah, Iran.

**Objectives:**

- To investigate the reliability and the validity of SCHFI in Iranian people with CHF
- To measure SCHFI components (i.e., symptom monitoring) in patients with CHF in Iran
- To compare SCHFI scores for two groups of patients randomly allocated either to receive health education from health educators or volunteers.

**Progress:**

During the past 10 months Soraya has undertaken the following:

- Obtained clearance from the various ethics committees in Sydney and Iran. The ethic committee approved the research project on 15th March 2012
Research continued

- Created a list of appropriate patients from the past two years to study at the Kermanash University of Medical Sciences Hospital, Iran. Of the listed patients, one in four are available for interview, the others being uncontactable or unwilling to participate in the proposed research. Two hundred and forty patients have been enrolled in the study.

- The data collection stage was started on the first week of March 2012 and ended the last week of May 2012. Two hundred and twenty-one (231) patients were interviewed by Dr S and two trained nurses and a GP at Imam Ali hospital or their homes (according to patients’ preference and availability).

- In order to enable the volunteers to educate patients about self-care, two two-day workshops were conducted in Samenolaema Health Care Centre in February and May 2012. At the end of the workshops, the volunteers were given addresses of 8-20 patients each (depending on their interest) to educate them face to face at home.

- Patients who agreed to participate in the project were randomly divided into three groups; educated by volunteers, participated in a class with a general practitioner, and a group that came to hospital and were educated by nurses. These classes have now been conducted, patients interviewed and data are being analysed.

**Joel Negin (supervisor Stephen Leeder)**

Joel Negin has completed his PhD and is set to receive the degree in December 2012. Joel is a Senior Lecturer in International Public Health and his dissertation tracked the ageing of the HIV epidemic in sub-Saharan Africa. As more and more people are put on life-prolonging anti-retroviral treatment, the cohort of people living with HIV will age (as has occurred in developed country settings). Despite this, all United Nations and World Health Organization HIV reporting focuses on those aged 15-49 and ignores those aged 50 and older. Joel’s PhD aimed to build the evidence base on this important and emerging topic looking at epidemiology, awareness, treatment and policy as well as co-morbidities between HIV and non-communicable disease. Joel has published five papers with a sixth under review.

**Surianti Sukeri (supervisor Stephen Leeder)**

Surianti has completed her PhD on the economic and social impact of ischaemic heart disease (IHD) in Malaysia. Her dissertation employed both quantitative and qualitative methods among households affected by IHD. The research discovered that despite the subsidised tax-based health care financing in Malaysia, the impact of IHD on households is nevertheless significant. In addition, the research also discussed the possibility of health reforms with recommendations for future health financing schemes in Malaysia. Surianti is currently a lecturer at the Department of Community Medicine, Science University of Malaysia where she is conducting a similar study on thalassaemia.
Research continued

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.

Deborah Schaler (supervisor James Gillespie)

Patient feedback - improving health care safety and quality?

Health services are urged to strengthen their partnerships with patients to improve the quality of individual patient experience and overall safety of the health system. Among multiple ways health services can engage with patients at the individual/service/system level are a range of quantitative and qualitative patient feedback mechanisms including patient complaint systems, patient satisfaction/experience surveys and the collection of narrative such as patient experience journeys. Recent studies have identified opportunity for further research on effectiveness of patient feedback mechanisms and for development of processes for systematic health service analysis of patient feedback data.

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 selected health service. The study also aims to develop, trial and evaluate a method for the health service to systematically analyse its patient feedback data (through triangulation of quantitative and qualitative data). The policy implications of the study are that health services might review their level of investment and/or selection of patient feedback strategies and analyse their patient feedback data more effectively.

The study is mixed method and includes situational analysis mapping to better understand the meso-level relationships. A pilot site (the Women and Children’s Division in the ACT Government Health Directorate, Canberra, comprising the Women and Children’s Hospital and a range of community based services) has been recruited. Data collection including semi-structured interviews with key staff and relevant quality and safety data is well underway and will be completed by December 2012.
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.

Angela has recently established an additional supervisor to assist her with the grounded theory methodology and analysis of her data. Analysis remains the focus of her work at the present time. Related to her work, Angela authored a response to the Draft Independent Health Pricing Authority Framework, advocating the need for pricing methods that move beyond single episode DRG funding to comprehensive models of care that meet the needs for older people with chronic disease. Please click on this link to find Angela’s work.

Angela has already some of the results of her research to transform models of chronic care used by the Royal District Nursing Service of South Australia. This work was recognized when Angela was announced the South Australian winner and national finalist for the Nokia Award for innovation at the Telstra Business Women’s Awards. The award was based on her work with the Royal District Nursing Service of South Australia in implementing new models of chronic care and drew on her current PhD research at the MCHP.

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.

Andrey Zheluk (supervisor James Gillespie)

*Contemporary HIV & drug policy advocacy in the Russian Federation*

Since the late 1990s, injecting drug use has fueled an HIV epidemic in the Russian Federation. Despite considerable international evidence concerning the effectiveness of a comprehensive package of evidence based interventions, the Russian government has maintained a punitive prohibitionist stance and committed limited resources to drug treatment and care programs. Successive international donor programs have sought to engage federal, provincial and local tiers of government to support evidence based illicit drug harm minimisation approaches.
Efforts at changing Russian federal illicit drug policy have been largely unsuccessful. The policy change process is complicated by the institutional character of Russian public administration. Public administration is widely regarded as ineffective, and governed by informal and opaque processes.

Andrey then chose to focus on surveillance problems associated with illicit drug policy. He followed on from the work conducted by Ginsberg et al (2008) on influenza surveillance using Google search patterns. In the course of conducting this research he discovered that the unique characteristics of the Russian online search market make it an ideal environment for developing public health policy research methods based on online search patterns.

He has therefore focused the writing of his thesis - by- publication on developing online methods for the analysis of health policy problems. These methods should be generalisable to a broad range of communicable and non-communicable diseases and policy problems, and to emerging online data sources. The planned papers are:

- Accepted paper on critique of Google search pattern methods.
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 MCHP has provided a focus for expanding postgraduate programs in health policy at the University of Sydney and a 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 MCHP, with active contributions from the School of Public Health and a wide array of policy practitioners.

**HPOL5003 Analysing Health Policy (S Leeder and J Gillespie enrolment: 45)**

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 and C Huckel-Schneider 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 (AM Thow and J Gillespie enrolment: 10)**

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, drawn from the broad networks of the Menzies Centre. Students choose a health policy project which is developed in workshops into a viable policy proposal.
Publications and Presentations

Peer Reviewed

Books


Book Chapters


Journal Articles


**Industry**


• *Leeder S*. Managed care need not be a health hazard, *Australian Medicine online*, 3 November 2012.


• *Leeder S*. Are conscientious objectors wrecking our immunisation program?, *Australian Medicine online*, 3 September 2012.

• *Leeder S*. By all means use social media but exercise caution, *Australian Doctor*, 31 August 2012.

• *Leeder S*. What is needed for real prevention is full government participation, *Australian Medicine online*, 6 August 2012.

Publications and Presentations continued

- **Leeder S.** Gold medal dreaming, *MJA InSight*, 30 July 2012.

- **Leeder S.** In Pursuit of Prevention, More than Just a Union: A History of the AMA, *Faircount Media Asia Pty Ltd*, July 2012.

**Media - Print**

- **Russell L.** GPs are being asked to take up thy mouse and co-ordinate, *Canberra Times*, 21 November 2012.

- **Russell L.** The US will face a stark electoral choice this year, *Canberra Times*, 11 September 2012.

- **Russell L.** Republicans’ lunge to right opens way for Obama, *Canberra Times*, 4 September 2012.


- **Wenhan S, Russell L.** Women faring badly in our healthcare system, *Canberra Times*, 3 August 2012.

**Media - Interviews & Quotes**

- **Ford P.** Care for the elderly rates as top priority, *Australian Medicine Online*, 19 November 2012. *The Menzies-Nous Australian Health Survey 2012* is reported on.

- **Dunlevy S.** Medicare rebates don’t keep up with inflation and families struggle with medical bills, *Sunday Telegraph*, 18 November 2012. Beverley Essue and a Menzies Centre for Health Policy study are quoted. This story also ran in the following publications: *Sunday Herald Sun*, 18 November 2012; *The Sunday Mail*, 18 November 2012; *Sunday Tasmanian*, 18 November 2012; and *Sunday Times (Perth)* 18 November 2012.

- Time for Medicare overhaul as gap between rebates and bills widens, *Sunday Mail*, 18 November 2012. A Menzies Centre for Health Policy study is quoted.

- **Radio 2GB** has interviewed **Professor Ruth Colagiuri**, director of the Health and Sustainability Unit at the Boden Institute of Obesity, Nutrition, Exercise and Eating Disorders at the University.

- **Davey M.** Consumers support tougher food laws, *The Sydney Morning Herald*, 8 November 2012. **Dr Anne Marie Thow** is quoted.

- **Ferguson J.** Nurse-patient ratios ‘archaic’, *The Australian*, 2 November 2012. **Professor Stephen Leeder** is quoted.

- **Davey M.** Too many managers lead way on poor health, *The Sydney Morning Herald*, 2 November 2012. **Professor Stephen Leeder** is quoted.
Publications and Presentations continued


- Dunlevy S. Unhealthy wait to see a doctor, *Daily Telegraph*, 24 October 2012. **Associate Professor Jim Gillespie** is quoted.

- Australians willing to cough up for better care, *ABC News*, 23 October 2012. **Associate Professor Jim Gillespie** is quoted and the *Menzies-Nous Australian Health Survey 2012* is reported on.


- Patty A. Cuts, then tourniquet, for ailing system, *The Sydney Morning Herald*, 29 September 2012. **Professor Stephen Leeder** is quoted.

- *ABC News* interviewed **Professor Stephen Leeder**, Sydney Medical School, on how a draft paper that calls for more government investment in the health sector recognises that rate of growth of the health system is not economically sustainable.


**Online**


- **Gillespie J.** Have health reform efforts changed our perceptions and experiences of services?, *Croakey*, 30 October 2012.

- Australians give health system upbeat diagnosis, Transforming the Nation’s Healthcare, 23 October 2012. **Associate Professor Jim Gillespie** is quoted and the *Menzies-Nous Australian Health Survey 2012* is reported on.

- Favourable shift in health care opinions?, Australian Ageing Agenda, 23 October 2012. The Menzies-Nous Australian Health Survey 2012 is reported on.
• The Menzies-Nous Australian health survey 2012, Australian Policy Online. The Menzies-Nous Australian Health Survey 2012 is reported on.

• Sweet M. After all the years of health reform effort and expense, what has been achieved?, Croakey, 23 October 2012. Professor Stephen Leeder contributes.

• Sweet M. Australian Medicare Local Alliance directors announced – and some creative thoughts on what we might expect of them, Croakey, 11 September 2012. Professor Stephen Leeder contributes.


• Sweet M, Lupton D. Reporting on a recent forum on health inequalities and the social determinants of health, Croakey, 8 August 2012. Forum held at the University of Sydney and hosted by the Sydney Health Policy Network.

• Usherwood T. Next steps in health care reform, The Conversation, 7 August 2012.

• Leeder S. Health Minister is losing ground to the states but reform is still possible, The Conversation, 7 July 2012.

Conference Presentations

• Essue B, Jan S. Is universal health insurance the panacea for economic hardship associated with illness? Lessons from Australia. 2nd Global Congress on Health Systems Research; Beijing, China. 31 October -3 November 2012. Oral Presentation.

• Gillespie, JA, Huckel-Schneider C, Thow, AM, Generating sustained political priority for NCDs: What is a suitable governance model?, 2nd Global Congress on Health Systems Research; Beijing, China. 31 October -3 November 2012.


Publications and Presentations continued


- **Hunter J.** Health is that is more than the absence of disease, *Emerging Health Policy Research Conference, August 2012, Sydney.*

- **Hunter J.** Motivators for participating in, or supporting observational research, *Emerging Health Policy Research Conference, August 2012, Sydney.*

- **Siabani, S.** Comorbidity burden and sociodemographic characteristics of patients with chronic heart failure in Kermanshah, Iran, *Emerging Health Policy Research Conference, August 2012, Sydney.*

- **McAllister, A.** Mental illness and Medicare in Australia and Canada: Are they compatible?, *Emerging Health Policy Research Conference, August 2012, Sydney.*


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.

Past Events


Thursday, 6 September, The University of Sydney

The 2012 S.T. Lee Lecture* was delivered by:

Professor Kai Hong Phua
AB cum laude SM (Harvard), PhD (LSE)
National University of Singapore


*The University of Sydney, by way of a gift, established the S.T. Lee Lecture Fund in 2008 to invite a distinguished scholar and/or practitioner on the subject of contemporary health policy to deliver an annual lecture. The S.T. Lee Lecture is named for Seng Tee Lee, a business executive and noted philanthropist. Dr Lee is director of the Lee group of companies in Singapore and of the Lee Foundation.

Emerging Health Policy Research Conference

15 August 2012, University of Sydney

The Menzies Centre for Health Policy held its 7th annual Emerging Health Policy Research Conference on Wednesday, 15 August 2012.

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.

Keynote speaker: Professor Stephen Simpson, Director, Charles Perkins Centre, University of Sydney.

Topic: Putting the balance back in diet.

Conference Sessions:

- Health Services and Systems
- Food Policy
- Patient Feedback and Quality of Life
- Effective Care Across the Lifespan
- Economics and Policy Decision Making
- Innovative Approaches to Knowledge and Policy

Sydney Health Policy Network

The Sydney Health Policy Network is a cross-disciplinary network established within the University of Sydney that will consist of the chair and members of the Steering Committee, and the members of the Network. The Menzies Centre for Health Policy provides operational support to foster and promote the formation and function of the Network.

Past Events

SHPN Conference 2012 - All that health reform! What have we achieved and what have we learned?

Wednesday, 14 November 2012, The University of Sydney

Three years on from major health reforms instigated by the current Labor government, we looked at where we are up to in the process. The conference speakers offered personal views on what has been achieved, what remains to be done, and what we have learned from this intense organisational upheaval and realignment.

Following the presentations, conference participants had an opportunity to ask questions in a discussion facilitated by Professor Geoff Gallop, and contributed to by guest panellists and key members of the Sydney Health Policy Network. Participants were then invited to join workshops exploring key health policy issues.

Guest Speakers:

- Dr Christine Bennett, former Chair of the National Health and Hospitals Reform Commission
- Dr Anthony Hobbs, former Chair of the External Reference Group, National Primary Health Care Strategy
- Professor Rob Moodie, former Chair of the National Preventative Health Taskforce

Guest Panel Members:

- Professor Ian Hickie AM, Brain & Mind Research Institute, University of Sydney
- Associate Professor Hans Zoellner, Faculty of Dentistry, University of Sydney
- Professor Mary Chiarella, Sydney Nursing School
- Diana O’Halloran, Chair, Western Sydney Medicare Local; Conjoint Professor, University Of Western Sydney (Standing in for Dr Anthony Hobbs)

Guest Facilitator: Professor Geoff Gallop AC, Director, Graduate School of Government
Events continued

PGSIG Forum: Strategies to Influence Policy
Thursday, 11 October 2012, The University of Sydney

Researchers don’t often get a chance to communicate with politicians about the type of research evidence that is valuable and how to best frame issues. However, as the need for research to be translated into policy becomes increasingly important, this conversation needs to begin. This forum invited postgraduate students and early career researchers to engage in a dialogue with former politicians about these key issues. The aim of the forum was to provide the opportunity to speak candidly with former politicians and gain insight into how to embark on policy relevant research.

Guest Speakers:
- Hon Dr Geoff Gallop, Professor and Director, Graduate School of Government and former Premier of Western Australia.
- John Della Bosca, National Campaign Director for the National Disability Insurance Scheme and former NSW Minster.
- The Honourable Elisabeth Kirkby OAM, former member of the Legislative Council of NSW and state leader of the Australian Democrats party (currently enrolled as a PhD student at the University of Sydney).

Social Determinants of Health Special Interest Group Forum
Friday, 27 July 2012, The University of Sydney

There are various underlying social determinants that affect the health of populations. The rhetoric surrounding the social determinants of health often focuses on the problem without providing actual solutions to the issue. The aim of the forum was to provide examples of “health in all policies”.

Guest speakers:
- Professor Peter Sainsbury, Director of Population Health in South Western Sydney.
- Deb Wildgoose, Senior Project Officer, Health in all Policies Unit, South Australia Health.
- Isobel Ludford, Project Officer, Health in all Policies Unit, South Australia Health.
- Dr. Stacy Carter, Centre for Values, Ethics & Law in Medicine, University of Sydney.
- Professor Alan Cass, Senior Director, Renal & Metabolic Division, George Institute for Global Health.
- Professor John MacDonald, School of Science and Health, University of Western Sydney.
- Dr Catherine Hawke, School of Rural Health, University of Sydney Centre for Population Health, NSW Ministry of Health.
Staff List

Directors

• Professor Stephen Leeder, The University of Sydney
• Associate Professor Adrian Kay, The Australian National University

University of Sydney

• Deputy Director: Associate Professor James Gillespie
• Health and Sustainability Unit: Associate Professor Ruth Colagiuri
• Manager: Emma Dupal
• Administrative and Research Officer: Alida Castelletol
• Events and Communication Officer: Diana Freeman
• Research Fellow: Joel Negin
• Lecturer: Anne Marie Thow
• Ian Potter Foundation Fellow: Beverley Essue

Research Students

• PhD Student: Jennifer Hunter (Supervisor: Professor Stephen Leeder)
• PhD Student: Ashley McAllister (Supervisor: Professor Stephen Leeder)
• PhD Student: Shauna Downs (Supervisor: Professor Stephen Leeder)
• PhD Student: Soraya Siabani (Supervisor: Professor Stephen Leeder)
• PhD Student: Adam Capon (Supervisor: Associate Professor Jim Gillespie)
• PhD Student: Angela Littleford (Supervisor: Associate Professor Jim Gillespie)
• PhD Student: John Hall (Supervisor: Associate Professor Jim Gillespie)

• PhD Student: Deborah Schaler (Supervisor: Associate Professor Jim Gillespie)
• PhD Student: Andrey Zheluk (Supervisor: Associate Professor Jim Gillespie)

Serious and Continuing Illness Policy and Practice Study

• Research Fellow, SCIPPS: Justin McNab

Care Navigation (RCT)

• Research Officer: Natalie Plant
• Research Assistant: Patricia Jonas
• Research Assistant: Kylie-Ann Mallitt

Hearing-Vision Project

• Postdoctoral Researcher: Rebecca Barton
• Research Assistant: Moira Dunsmore

Australian National University

• Deputy Director: Dr Amanda Smullen
• Manager: Sarah Geddes
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.

For more information
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