

In this issue:

Page Two

MIPH students put theory into practice in Vietnam

Page Three

Affecting health policy: a doctoral student's experience

Page Four and Five

Student Graduation – December 2008

Page Six

Q&A with Petra Macaskill

Page Seven

Meet the Menzies Centre for Health Policy

Page Eight

Evidence Checks and RADAR at the Sax Institute
NHMRC Grant Success
What's on



Welcome Professor Lesley Barclay, Director of the Northern Rivers University Department of Rural Health.

Lesley Barclay (AO PhD), a maternal child health researcher, was the foundation Professor of Health Services Development at Charles Darwin University and led the Graduate School for Health Practice before coming to Lismore.

Our Graduates

By Professor Glenn Salkeld, Head of School

A recent news article in the New York Times declared Public Health as one of the 'hot topics' for students on campus. This demand is driven, in part, by students recognizing the need to understand the connectivity of people, institutions and nations in the global context. They also want to see action – action for better health and justice. It's a big agenda given the challenges posed by threats to the natural and built environment, threats to healthy living, the importance of trade and the role that our major institutions, such as education, justice and social security, play in securing improvements in health.

There is a challenge for us closer to home and that is how we intend to educate the next generation of public health practitioners and researchers. More than 12 months ago we embarked on a major review of our Master of Public Health degree, asking ourselves how we can best prepare our students for this changing environment. The result was a plan to articulate the underlying philosophy of the degree and revise the MPH curriculum accordingly. That underlying philosophy is based on the sequence of four key components:

Knowledge, Values, Action and Impact

In knowledge we reaffirm our commitment to the importance of an evidence-based approach to public health policy and practice. Knowledge of theory allows us to apply and compare while knowledge of methods allows us to analyse and act.

Values encompass the beliefs, ideologies and interests that mediate knowledge on the path to decision-making.



Our graduates need to have the knowledge, skills, and leadership to advocate for change.

Action and impact include the decision and evaluative sciences, capturing the translation of research into policy and practice. It recognizes that our graduates need to have the knowledge, skills, leadership to advocate for change, to understand intervention research and practice and to evaluate what we do in a systematic way.

Plans are now well underway to revise our MPH curriculum according to these four key components and further develop key areas of teaching and research strength in health promotion and disease prevention, chronic disease, qualitative research and the decision sciences. Our approach to these developments and more will be informed by a new 'Research Leaders' seminar series where our academic leaders will present their vision and strategy for teaching and research in the years to come.

This issue of The Bridge captures some of what it means for our graduates when they put their Public Health knowledge into practice. We also celebrate the news that the Australian Health Policy Institute and Menzies Centre for Health Policy have amalgamated as the Menzies Centre for Health Policy.

MIPH students put theory into practice in Vietnam

In December last year two students from the Master of International Public Health (MIPH) program departed Sydney for Vietnam to undertake their Praxis; a scholarship opportunity provided by Học Mã, the Australia Vietnam Medical Foundation. It is the first time this opportunity has been provided to public health students.

Jenny Park and Carolyn Sein, the successful scholarship recipients were chosen after a competitive selection process. For Jenny, a business graduate, and Carolyn, a doctor, the scholarship was a chance to put their MIPH study into practice and experience public health fieldwork first hand.

UNFPA, Hanoi

Jenny and Carolyn undertook different areas of research. Jenny was based in Hanoi working within the Reproductive Health Division of the UNFPA (United Nations Reproductive Health Division). She was most interested in investigating safe motherhood and newborn care. The UNFPA have been working in Vietnam for more than 30 years and have a well established network throughout the region.

Jenny was involved in a number of meetings and roundtable discussions both within the UNFPA and with other organizations in the region. She was also able to join a fieldtrip to the far northern province of Hà Giang; one of the poorest provinces in Vietnam. The field trip was an eye-opening experience. "It was a unique opportunity for me to see first hand the challenges faced by health workers in the field. I was really surprised to see, for example, that all information materials at the health centres were written in Vietnamese language in a province which has 22 different ethnic groups," said Jenny. Access was also a problem. "We travelled in comparative luxury - UN four wheel drive vehicles - and it was challenging for us on the bumpy roads to get to the health centres. It's hard to imagine just how difficult it is for the local population to travel to these centres."

Tu Du Hospital, Hanoi

Carolyn was based at the Tu Du hospital in Hanoi (Ho Chi Minh City) where she conducted surveys and interviewed local women and physicians, exploring the reasons for abortion in Vietnam; a country with one of the highest rates of abortion in the world. Carolyn devised a survey which was then translated into Vietnamese by native speakers. The survey needed to be approved by the hospital where she was based and also submitted to their ethics committee. "You really have to be mindful



Carolyn (left) with village ladies Ninh Tuan



Jenny with village boys at the Xin Man Commune Health Centre

"The highlight for me was by far being able to hear the narratives of the women in Vietnam. To hear their stories first hand was an eye opener and such a humbling experience." Scholarship recipient Carolyn Sein

of the culture and aware of sensitivities. Abortion is a sensitive issue so good preparation and research was essential," said Carolyn. Carolyn also visited two Marie Stopes clinics and a remote province some distance from Hanoi to observe reproductive health education sessions in a community. "The highlight for me by far was being able to hear the narratives of the women in Vietnam. To hear their stories first hand was an eye opener and such a humbling experience," said Carolyn.

Preparation

Both students agree that a key aspect of the trip's success lay in the preparation. They researched their areas of interest by conducting literature searches online, read reports from other Hanoi scholars, met with School staff and staff at relevant organizations in Vietnam to develop their research projects "I also read about the culture and history as I think it's important to be able to put everything into context," said Carolyn. "There was a lot of mental preparation," she said.

Rewards

The trip provided some interesting challenges. In addition to adapting to the local culture and coping with language difficulties, both students had to adjust to the local working environment and specific in-country reproductive/maternal health and public health system issues. "The experience certainly presents challenges and forces you to step outside your comfort zone. It's definitely a learning experience. It wasn't always easy; whether

it was talking to people or being invited to sit down with them and eat giant ocean snails. It was challenging. At the same time it's enriching to be invited to participate in that. The rewards far outweigh the difficulties," said Carolyn. "Even in the short time given to them, our students have been able to show remarkable resourcefulness, immerse themselves in numerous activities, collaborate and work with other public health and allied health professionals in their respective placements. They have shown their problem solving skills, creativity and their cultural competence in their interactions with the Vietnamese people," said Dr Giselle Manalo, Hanoi MIPH Scholarship Program Academic Coordinator at the School of Public Health.

About Học Mã

Học Mã, the Australia Vietnam Medical Foundation, is a non-profit organisation which was established in 1998 and became a Foundation of the University of Sydney in 2001.

The projects and programs within the Foundation continue to bring together the collective medical/healthcare knowledge and experience from Australia and Vietnam in an educational partnership. For more information and to donate: www.hocmai.org

Affecting health policy: a doctoral student's experience

Leigh Wilson's career has taken a very different turn since starting out as a school dental therapist. Now, 25 years later, the public health masters and doctoral graduate has had the pleasure seeing her research findings incorporated into government policy.

Leigh's curiosity in public health can be attributed to her early career as a school dental therapist posted to rural NSW. "There was no fluoride in the water. As a result I saw lots of children with poor oral health, and co-existing health conditions. Even as a new graduate, it was immediately obvious to me that there was a broader view of health than just one specialty area, and I became very interested in child health and preventable illness at a population level," said Leigh.

Build knowledge

Later she began working exclusively in the area of health promotion and afterwards began the Master of Public Health (MPH). Leigh enjoyed the MPH enormously - so much so, that she was keen to begin her doctoral studies immediately after completion. "One of the best memories I have of the MPH program is of the camaraderie and wealth of knowledge shared between students. As I entered the MPH program under 'special entry conditions' (as Dental Therapy was not an undergraduate degree in those days) I found the university culture both inspiring and daunting at the same time," she recalls. While personal circumstances did not allow her to begin her doctoral studies until four years after completing the MPH, she was motivated to build on knowledge gained in the masters program.

SUDI study

Leigh's doctoral research focused on sudden and unexpected death in infants (SUDI), particularly in relation to knowledge and practises of parents and those who care for infants, and the difference in infant care practise between cultures. Her study was conducted in the western suburbs of Sydney and, over a three-year period, surveyed over 60 GPs, 50 nurses and 150 parents. "As a researcher I was particularly interested in the reasons why many people still place infants to sleep on their tummies, even though this is a known risk factor for sudden infant death," explained Leigh. The results of her study highlighted key groups of participants who had poor knowledge of safe sleeping practice, in spite of National promotional campaigns held on an annual basis.

Research findings and impact

"I hope the results of my research have a positive impact on the reduction in the number of infants who die suddenly and unexpectedly," said Leigh. Indeed, Leigh's research may already be having a positive effect. "One of the key findings of the study was that when an infant dies in NSW, no data on cultural background is routinely collected by any agency. As a result of



Leigh Wilson at her graduation in December 2008

research recommendations, questions on cultural background have been included in the updated NSW Health SUDI Policy, and further research will ascertain whether particular cultural groups are in need of targeted education about SUDI in their native language," she explains.

Doctoral experience

Professor Susan Quine, Leigh's supervisor, believes that the doctorate has greatly increased Leigh's confidence in her ability to conduct research and has honed her research skills. "Leigh was a delight to supervise; always positive, diligent, inquisitive and genuinely interested in her thesis topic," said Professor Quine. "In addition, the examiners of her thesis were impressed by the calibre of her work and this has led to further networking and research opportunities," she said.

While Leigh acknowledges the demands of multi-tasking the different roles of part-time student, full-time employee, and parenthood, she is also quick to recall what she regards as the highlights of her student experience - "meeting regularly with my fabulous supervisors, going to the Postgraduate

Student Conferences, exploring the literature, collecting narrative data where people talked about their experiences as a parent, coming in to the School of Public Health always made me feel inspired and Graduation Day - realising that I had actually done it!"

Interested in research?

"The School has a very active research program with over 100 research students," said Professor Susan Quine Postgraduate Coordinator (Research Candidates).

The School offers the following research degrees:

- Doctor of Philosophy (PhD)
- Master of Philosophy (MPhil)

More information: www.health.usyd.edu.au/future/research

Graduation December 2008



Holly Seale, Tony Newell



Joan Henderson with family & friends



Gaston Arnolda, Glenn Salkeld, Michael Moodie



Graeme Miller, Joan Henderson, Helena Britt, Glenn Salkeld



Hueiming Liu and family & friends



Ann-Marie Boxall with family



Xingzhong Jin with family & friends

Alumni Web Community
Stay connected with former classmates and university life.
Update your contact information at www.usyd.edu.au/alumni



Katrina Loukas



Gaston Arnolda with family



Laal Farrokhzadi with family

Q&A with Petra Macaskill



Associate Professor Petra Macaskill

Q. Your first degree was in mathematics. How did you come to be interested in public health?

My first job was teaching high school mathematics in Adelaide. When my husband took a job in Cambridge in 1979, I turned down the only high school maths teaching job advertised there at the time. I couldn't really face working in a school that insisted I wear an academic gown every day in class. By chance, I ended up taking a job with the Medical Research Council Cancer Trials Office. Since there were only three of us in the group, I had the opportunity to get involved in designing and running multi-centre trials, writing statistical computer software, undertaking statistical analyses, and doing methodological research in statistics. The head of our little group saw potential

in me that I didn't know I had, and he encouraged me to pursue a career in biostatistics. My mathematics training gave me an excellent foundation for this work.

I came to Sydney in 1984 when my husband took a position at the University of Sydney. This required another career shift for me as there wasn't much funding for trials in Australia at that time. My focus gradually shifted to public health and I was fortunate to work with some outstanding researchers over the years, most notably Les Irwig who got me interested in diagnostic research. I completed a masters degree in statistics and also a PhD to allow me to move into an academic position.

Q. You are the unit coordinator for Introductory Biostatistics and also Categorical Data Analysis. What are the particular challenges in teaching these units?

The biggest challenge is Introductory Biostatistics which is a compulsory core unit for a large number of postgraduate degree programs in the faculty. After co-ordinating and teaching this unit for many years, the biggest challenge for me still is to ensure that students from such a diverse range of backgrounds engage with the subject and that individuals receive the support they need. A lot of work over the past few years has gone into upgrading course materials to allow for online as well as face to face delivery. The numbers grow every year and we are looking at about 340 for 2009. Good organisation

is the key, with procedures that have been developed and tested over time. (A sense of humour also helps on occasions.) I am pleased that most of the students seem to enjoy doing this unit despite the common fear of maths at the outset. A lot of the credit for this goes to the associate lecturers and tutors who do a great job. Categorical Data Analysis is also fun to teach as it has about 50 students who choose to do more advanced statistics. It is nice to be able to get to know the students individually in this relatively small unit of study.

Q. You are the Co-Convenor of the Cochrane Diagnostic and Screening Tests Methods Group. Who is involved in this group and what are the aims?

My co-convenors are Prof Constantine Gatsonis (USA), Dr Roger Harbord (UK) and Dr Mariska Leeflang (The Netherlands). All but one of us are statisticians. Our main objective is to develop and also evaluate methods for the systematic review and meta-analysis of studies of diagnostic test accuracy. With others, we have contributed to the development of a Cochrane handbook for diagnostic reviews. The first Cochrane diagnostic review was published recently which was very gratifying given the years of work that has gone into reaching a consensus on methodology. The ongoing role of the Methods group is to provide advice and leadership in an area where the methodology will continue to evolve.



**Early morning on Lake Nagambie at the Australian Masters Championship
May 2008. (Petra in the bow) Photo: L. Hayes**

Meet the Menzies Centre for Health Policy

From 2009, the Australian Health Policy Institute (AHPi) and the Menzies Centre for Health Policy (MCHP) have amalgamated and will be known henceforth as the **Menzies Centre for Health Policy**.

"The Institute and Centre have worked side by side and on the same work program for the last three years and we believe the merged Centre will have strength in numbers, output and an improved national focus", said Amanda Dominello, manager of the Centre. The Centre will continue to:

- operate as a joint venture between the University of Sydney and The Australian National University;
- produce and publish high-quality analyses of current health policy issues;

- deliver public seminars on a wide variety of health policy topics;
- offer outstanding postgraduate health policy education programs; and
- undertake comprehensive research projects on health policy issues.

The expanded Centre was launched on Tuesday, 17th February, 2009 by Lynette Glendinning, Chair, Menzies Centre for Health Policy Board at the seminar entitled *Health Literacy: Just what the doctor ordered?* Assembled guests heard Dr Jim Gillespie, Deputy Director of the Centre, present the findings on *health literacy* from a recent survey of 1200 Australians. Professor Don Nutbeam, Provost and Deputy Vice-Chancellor, University of Sydney, and Dr

Clive Aspin, Research Director, Serious and Continuing Illness Policy and Practice Study (SCIPPS), Menzies Centre for Health Policy, also spoke at the seminar.

The Centre is excited to be offering a new Masters of Health Policy in 2009. "It is the first health policy masters in Australia. We are hoping that some of the students will go on to work with us on our research programs and health policy analysis activities", said Amanda. **Find out more information at:** <http://www.health.usyd.edu.au/future/coursework/healthpolicy/masters.php>

Join the Centre mailing list to receive news and information on upcoming events: <http://mailman.med.usyd.edu.au/mailman/listinfo/mchpnews>



L to R: Clive Aspin, Jim Gillespie, Don Nutbeam, Judith Whitworth, Stephen Leeder

Q&A with Petra Macaskill (cont.)

Q. Tell us a little about your role as one of the Chief Investigators in the Screening and Test Evaluation Program (STEP) funded by the NHMRC. What do you hope will be some of the outcomes of your research?

STEP has four CI's who are all members of SPH (Prof Les Irwig, Prof Jonathan Craig, Prof Glenn Salkeld and myself). STEP also has a large number of research staff, research students and affiliates. I oversee the STEP biostatistics group who collaborate with other members of the program team on a wide range of applied, multidisciplinary projects. In addition to the applied projects, a major strength of STEP is its methodological work. I hope that we will continue to influence methods for diagnostic systematic reviews. I also hope that the work we have been doing on using tests for monitoring purposes will have an impact on how tests are used, and how the results are interpreted.

Q. As a supervisor of a number of PhD candidates, what do you think is

important in ensuring that both you and the candidate get the most out of the relationship?

I think that students need to be clear about why they are undertaking a PhD, and also be realistic about their strengths and weaknesses. Early on, a student may well need quite a lot of support and direction, but as time goes on they should begin to drive the work themselves to a large extent. My hope is that by the end of their PhD training, they will have the expertise and confidence to conduct their own research. An important part of the training in public health is learning how to function in research teams, and how to communicate effectively. Most students go through difficult patches for various reasons. Part of my role is to provide help and support at such times.

Q. Tell us about any sports you are involved in? Why do you like them? What led to your initial interest?

I started rowing about 8 years ago because a friend was keen to do it and she decided that I needed to as well. We both

got totally hooked. I have been rowing competitively for some years and train several times a week. It is hard sometimes getting up before dawn (particularly in winter), but it is worth it when I am on the water and see the sun coming up over the city. Rowing requires a high level of commitment in terms of fitness, training and working with a crew so it is a great way to switch off from work. I also took up tennis over ten years ago when I and some other parents got bored watching our kids being coached and decided to hire a court. Needless to say, the kids stopped playing years ago but we are still going. My husband and I have a weekly doubles match against two of the fathers. It is a lot of fun, but we do play to win!

Q. What is your favourite part of the university campus? Why?

The lawn tennis courts outside my window. Many grass courts have disappeared over the years, so I am very pleased that the university is maintaining this asset. This green space really adds to the beauty of the campus.

NHMRC Grants

Career Development Award 2009

Dr Philip Clarke

Economic evaluation of policies to manage type 2 diabetes using evidence from randomized controlled trials.

\$410,000

The research undertaken in the course of this award is intended to inform evidence based policy development regarding the management and prevention of diabetes in Australia. The main focus will be on developing tools such as computer simulation models that can be used to evaluate the costs and outcomes from interventions. These tools will assist in undertaking cost-effectiveness analyses of alternative interventions for people with type 2 diabetes as a way of assisting in allocation of resources in the health sector.

Capacity Building Grants for Population Health and Health Services Research

Professor Simon Chapman, University of Sydney, \$1,897,375

The Australian Health News Research Collaboration

News media are highly influential in setting health agendas and shaping health policy. The program builds multidisciplinary research capacity between 3 universities, including participation by some of Australia's leading health journalists, to examine the content and accuracy of news treatments of health issues, how key audiences understand and are influenced by news coverage, how journalists decide which issues to cover and how they approach this coverage. The program aims to improve media literacy and the

potency of policy advocacy among health professionals and so improve the quality of health news reporting in Australia.

Capacity Building Grant in Population Health and Health Services Research

Jan S, Clarke PC, Howard K, Salkeld G, Chalmers J, Leeder S.

Using health economics to strengthen ties between evidence, policy and practice in chronic disease. Total \$1,817,303

There is a major shortage of researchers

with health economics expertise in Australia. This grant will provide training and development for a team of health economists to research chronic diseases covering 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?

Evidence Checks and RADAR at the Sax Institute

There is increasing recognition of the potential value of research reviews to policy making. Reviews that synthesise research in a transparent way are more reliable than individual studies and are a time-efficient way for policy makers to manage a large body of information. Reviews are particularly useful for decision making when they focus on the broad sorts of questions of interest to policy makers, incorporate contextual information relating to complex health issues or systems, and are presented in user-friendly formats.

The Sax Institute developed the *Evidence Check* program to help policy makers commission targeted, policy-relevant reviews of research in a timely way. *Evidence Check* includes systems for diagnosing policy makers' research needs, identifying academics with relevant research expertise, and commissioning policy-friendly products. To date, over 20 research reviews worth over \$350,000 have been commissioned through *Evidence Check*. Recent commissions have included the cost effectiveness of health promotion interventions, strategies for managing older people at risk of long term hospitalisation, and the effectiveness of physical activity for preventing falls.

To help identify researchers who might be interested in undertaking commissioned *Evidence Check* reviews, the Institute maintains a database of health research expertise, known as RADAR. Researchers who register on RADAR are informed about new projects in their fields of interest as they arise. Twenty-five researchers from the University of Sydney have already joined RADAR, but registration is open to all researchers in health-related fields and new members are always welcome. Joining RADAR is simple and takes just a few minutes. Simply:

1. Complete the online RADAR Registration Form (see 'Latest News' at www.saxinstitute.org.au) to identify your research expertise
2. Click the 'Submit Form by Email' button at the bottom of the form
3. Attach a current CV to the email before sending

To find out more about the Sax Institute's work, contact Danielle Campbell at: Danielle.Campbell@saxinstitute.org.au, or visit: www.saxinstitute.org.au.

What's On at the School

School of Public Health Seminars

Controversies in Public Health. Public Lecture Series 2009

Wednesday 20 May

Testing to monitor chronic disease: less is more?

Les Irwig, Professor of Epidemiology, Screening and Test Evaluation Program,

School of Public Health, University of Sydney

5:30pm Refreshments 6-7:00pm Lecture

Eastern Avenue Auditorium, The University of Sydney

Cost: free

Registration opening soon



The University of Sydney

For more information

School of Public Health
Edward Ford Building (A27)
NSW 2006 Australia
Tel: 61 2 9351 4366
Tel: 61 2 9036 6247
Email: enquiries@health.usyd.edu.au
www.health.usyd.edu.au

Produced by the School of Public Health of The University of Sydney, March 2009. This information is correct at time of publication but information is liable to change. Please visit www.health.usyd.edu.au for the latest information on the School of Public Health. CRICOS Provider No. 00026A

Please send your stories and events for the next issue of *The Bridge* to Felicity Barry (fbarry@health.usyd.edu.au). Deadline: 8 May, 2009