

CENTRAL AUSTRALIA ACADEMIC HEALTH SCIENCE CENTRE



Central Australian
Aboriginal Congress



Centre for Remote Health
A joint centre of Flinders University and Charles Darwin University



DEPARTMENT OF HEALTH
CENTRAL AUSTRALIA
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UNDER STRICT EMBARGO

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Media Release

Federal Government recognises Aboriginal-led collaboration in driving better health in Central Australia

An academic health science centre in Central Australia is the first Aboriginal-led collaboration to achieve Federal Government recognition for leadership in health research and delivery of evidence-based health care.

The Federal Minister for Indigenous Health and Aged Care, the Hon Ken Wyatt MP, today announced that the Central Australia Academic Health Science Centre (CAAHSC) was one of only two consortia nationally to be recognised as a Centre for Innovation in Regional Health (CIRH) by Australia's peak funding body for medical research, the National Health and Medical Research Council (NHMRC).

To be successful in their bid, the 11-member consortium was required to demonstrate competitiveness at the highest international levels across all relevant areas of health research and translation of research findings into health care practice.

With NHMRC recognition, the CAAHSC joins an elite group of Australian academic health science centres that have so far all been based in metropolitan areas including Melbourne, Sydney and Adelaide. The CAAHSC is also in good company internationally, with long established collaborations including Imperial College Healthcare in the UK and Johns Hopkins Medicine in the USA.

The CAAHSC, whose membership includes Aboriginal community controlled and government-run health services, universities and medical research institutes, was formally established in 2014 to improve collaboration across the sectors in support of health. Such synergy is vital in order to make an impact in remote central Australia, considering the vast geographical area (over 1 million square kilometres) and the health challenges experienced particularly by Aboriginal residents.

The CAAHSC consortium reflects the importance of Aboriginal leadership in successful research and health improvement in Central Australia. The Chairperson of CAAHSC is Mr John Paterson, CEO of the Aboriginal Medical Services Alliance Northern Territory, the peak body for the Aboriginal community controlled health services sector in the NT. With the leadership of CEO Ms Donna Ah Chee, Central Australian Aboriginal Congress was the lead partner on the group's bid to become a CIRH. The CAAHSC is a community driven partnership, where Aboriginal people themselves have taken the lead in identifying and defining viable solutions for the health inequities experienced in the Central Australia region.

The CAAHSC partners have a long and successful track record of working together on innovative, evidence-based projects to improve health care policy and practice in the region. Such projects include a study that examined high rates of self-discharge by Aboriginal

patients at the Alice Springs Hospital, which in many cases can lead to poor health outcomes. This research was used to develop a tool to assess self-discharge risk which is now routinely used in care, and to expand the role of Aboriginal Liaison Officers within the hospital. Another collaborative project designed to address the rising rates of diabetes in pregnant women involves the establishment of a patient register and birth cohort in the Northern Territory to improve antenatal care in the Aboriginal population.

Ms Donna Ah Chee said it was satisfying to achieve recognition for the strong health leadership and collaboration that already exists in Central Australia.

“One of the clear innovations that our Centre already offers is acknowledging that the principle of Aboriginal community control is fundamental to research, university and health care partnerships with regional and remote Aboriginal communities,” Ms Ah Chee said.

CAAHSC Chair, Mr John Paterson agrees, saying the CIRH would serve as a model for other regional and remote areas both nationally and internationally, particularly in its governance, capacity building, and culturally appropriate approaches to translational research.

Mr Paterson said he hoped NHMRC recognition would attract greater numbers of highly skilled researchers and health professionals to work in Central Australia, and that local Aboriginal people would become more engaged in medical education, research and health care delivery.

He also hopes that achieving status as a CIRH will be instrumental in attracting further resources to the region, including government, corporate and philanthropic support.

Mr Paterson said the consortium is now focussed on building a plan across its five priority areas: workforce and capacity building; policy research and evaluation; health services research; health determinants and risk factors; and chronic and communicable disease. This will include development of research support ‘apprenticeships’ for Aboriginal people and pursuit of long-term financial sustainability.

The partners of the Central Australia Academic Health Science Centre include: Aboriginal Medical Services Alliance Northern Territory (AMSANT); Baker Heart and Diabetes Institute; Charles Darwin University; Centre for Remote Health (A joint centre of Flinders University and Charles Darwin University); Central Australian Aboriginal Congress; Menzies School of Health Research; Central Australia Health Service (Northern Territory Health); CRANaplus; Flinders University; Ngaanyatjarra Health Service and the Poche Centre for Indigenous Health and Well-being. <https://centralaustraliaahsc.org/>

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