Annual Report 2010

menzies
school of health research

discovery for a healthy tomorrow
The Menzies School of Health Research was established in 1985 as a body corporate of the Northern Territory (NT) Government under the Menzies School of Health Research Act 1985 (Menzies Act). This Act was amended in 2004 to formalise the relationship with Charles Darwin University (CDU). Menzies is now a school within CDU’s Institute of Advanced Studies.

In the spirit of respect, the Menzies School of Health Research acknowledges the people and elders of the Aboriginal and Torres Strait Islander Nations, who are the Traditional Owners of the land and seas of Australia.

For the purposes of this document, ‘Indigenous’ refers to Australia’s Aboriginal and Torres Strait Islander peoples.
Menzies School of Health Research is a proud leader in Indigenous and tropical health research, having made a difference in people’s lives for a quarter of a century. Through scientific excellence, education and research, the team at Menzies continues to discover ways of breaking the cycle of disease and improving the health and well-being of Australian society and beyond.

An important focus of our research is to address the appalling disparity between the health and well-being of Indigenous and non-Indigenous people, taking into account a broad range of social factors, including childhood development, education and housing. Menzies works in collaboration with leading global health and research organisations, to ensure our ground-breaking findings can be shared with the rest of the world while allowing us to benefit from the latest international research.

Menzies’ headquarters are in Darwin, with offices in Alice Springs, Brisbane, Adelaide and Indonesia. We employ more than 300 staff and have an annual turnover of approximately $30 million, mostly funded through competitive research grants. We carry out research in almost 60 Indigenous communities across Australia and in developing countries in our region; working with locals to find better ways of treating common problems.

Menzies operates in the following areas:

**Child Health** – we are working to combat ear, lung and skin infections that affect the healthy development of Indigenous children. We are also focusing on the links between health and education from pre-birth to leaving school.

**Healing and Resilience** – our researchers are helping to prevent, diagnose and treat mental illness and substance misuse among Indigenous people.

**Global Health** – we are world leaders in research into major health problems in our region including rheumatic heart disease, malaria and tuberculosis.

**Preventable Chronic Disease** – we are working to discover the causes of chronic disease, including diabetes, heart and kidney disease, and find the best ways to diagnose, treat and prevent them.

**Tropical and Emerging Infectious Diseases** – we are unearthing new health threats so we can improve treatments, prevent the spread of disease and help develop vaccines.

**Centre for Primary Health Care Systems Research** – our researchers are investigating what works and what can be changed to improve the health care system, and the environments people live in, and in which health care is delivered.

**Education and Training** – we are training the researchers, clinicians and policy-makers of the future to help improve the quality of life of disadvantaged people across our region.

The Menzies strategic plan (2007-2011) reflects a commitment to research, education and training, and translating research outcomes into policy and practice. The plan underpins our pledge to work hand-in-hand with Indigenous communities as we strive to achieve a healthy tomorrow. It addresses the urgent need to improve recruitment, development and retention of Indigenous staff and research leaders of the future. The plan outlines our commitment to broaden the range and scope of courses on offer and increase the number of students enrolled at all levels. In 2011, Menzies will start work on its next strategic plan.

**Vision**

To improve health outcomes in Aboriginal and Torres Strait Islander communities and in disadvantaged populations throughout the world, through excellence and leadership in research and training.

**Values**

**Communication** – to undertake an ongoing dialogue with partners and stakeholders during the research process, from conception to completion.

**Innovation** – to be willing to take risks, embrace new approaches, and pursue ground-breaking research.

**Responsiveness** – to be responsive to health needs and shared priorities, particularly of Indigenous Australians, disadvantaged populations and others living in central and northern Australia.

**Quality** – to be excellent in everything we do.

**Collaboration** – to work in partnership with communities, other researchers, policy-makers and those who deliver health and other services.

**Integrity** – to act with honesty and according to our values.

**Relevance** – to concentrate on solving problems that matter, whether they be big or small.

**Building Research Capacity** – to foster and develop researchers of the future, with a particular emphasis on Indigenous researchers.
In 2010, Menzies received total funding of $35,893,000; including $28m in research funding; $7.7m in non-research funding; and $4m in NT Government core funding.

In 2010 Menzies received $9.5 million from the Australian Government’s National Health and Medical Research Council; a 14.6% increase from 2009.

In 2010 Menzies researchers produced 208 publications (including all journals and book chapters); an increase of 18.86%.

In 2010, 76% of Menzies staff were female.

In 2010, 81% of Menzies staff were engaged in Research and Education roles.

In 2010, 14% of Menzies staff identified themselves as Indigenous.

In 2010 Menzies had 351 staff; making up 225 full-time equivalent staff.
Menzies School of Health Research has had another successful year securing research grants and continuing to influence policy and practice in the Northern Territory, around the country, and internationally. We are proud of our continued growth and influence, but even more of the very high quality research that our staff and students produce.

Menzies received the fifth highest competitively awarded grants of all medical research institutes that received funding from the National Health and Medical Research Council (NHMRC) in 2010. This excellent result confirms that we are punching above our weight and reaffirming our reputation as a significant institution in the national health research field. Menzies achieved a 44% success rate for NHMRC grants commencing in 2010 and secured a total of $8.4 million in new funding. Two successful project grants with a combined value of $3.4 million commenced in 2011.

In 2010, 30 Menzies research students received scholarships to assist with their work in Indigenous, tropical and global health. These included scholarships from the Australian Academy of Science, the Australian Postgraduate Award, the National Health and Medical Research Council and the University Postgraduate Research Scholarship.

We have provided further support to our students and young researchers through the creation of four new scholarships, including two combined Charles Darwin University and Menzies scholarships for Timor-Leste students to complete their PhDs involving medical research; and two scholarships, funded by Perpetual trust, for Indigenous students studying full-time Masters in Public Health.

Research Highlights
Menzies research has continued to directly influence policy and health care practice in many ways, for example:

- We supported the work of the NT Child Protection Inquiry and the Northern Territory Government response. We will continue to focus on producing evidence in this critical field.
- We have collaborated with senior NT Government staff to co-produce a draft Early Childhood Plan.
- Menzies research has prompted the introduction of a new tobacco licence condition by the NT Government, obligating licensees to monitor wholesale orders of tobacco.
- Our published study about the impact of income management on store sales in some remote communities sparked significant interest.
- NHMAustralia is the national coordination unit to support better implementation in this area; this is the direct result of 15 years of Menzies research. It is an integral part of the National Rheumatic Fever Strategy.
- The Strong Teeth for Little Kids research project has directly led to children in NT remote communities receiving fluoride varnish to improve their oral health. It is recognised as one of the ten best NHMRC research projects in Australia.
- One of the most exciting developments is the major success of our high-resolution genetic fingerprinting methods for characterising bacteria. Quick, effective, simple and low cost, these methods have already been used to identify the nature of a cluster of antibiotic-resistant infections at Royal Darwin Hospital and have resulted in a number of publications.

Awards and Other Recognition
Many Menzies researchers have been recognised this year:

- Professor Anne Chang and the Menzies Tobacco Team both received Charles Darwin University Vice-Chancellor’s Awards for Exceptional Performance in Research.
- Menzies Leishmania Project Team won the prestigious Chief Minister’s Performance in Research.
- In the NHMRC Research and Innovation Awards, the Menzies Audit and Best Practice in Chronic Disease Project was a finalist in the Minister for Business and Employment Innovation Award, while the Healthy Skin Research Group was a finalist in the Tropical Knowledge Award.
- The Asia Pacific Melanoma Elimination Network (APMEN) has appointed Associate Professor Ric Price as Chairman of the Thax Working Group. He has also been awarded a prestigious five-year Senior Fellowship by the Wellcome Trust.
- PhD student Asha Bowen was awarded the Lola Douglas Australian Business and Employment Innovation Award, while the Healthy Skin Research Team is a finalist in the Chief Minister’s Performance in Research.
- Professor Jonathan Carapetis, Director of the Menzies School of Health Research, is the national coordinator to support better implementation of the National Rheumatic Fever Strategy.
- Professor Carapetis is also the inaugural recipient of the Fieldwork Trust National Public Health Research Award.
- In other developments during 2010, the Global Health division took steps to diversify into new projects including Sabah in Malaysia, as well as Vietnam and Timor-Leste. The team is continuing its work in Indonesia, commencing a new collaboration with the Papuan Health and Community Development Foundation.
- The Lowitja Institute was established in 2010 and has taken over permanent management of the Cooperative Research Centre for Indigenous and Torres Strait Islander Health. Menzies was a founding partner in creating this centre, and retains a close link with the Lowitja institute.
- The Menzies’ Biennial conference provides a model of research translation in Menzies.
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- PhD student Asha Bowen was awarded the Lola Douglas Australian Academy of Science scholarship.

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Other new initiatives
To help us manage our growth and change, Menzies revised its organisational structure in 2010. This included the appointments of Associate Director of Research and Education, Ross Andrews; Chief Operating Officer Vicki Taylor; and Associate Director of Aboriginal Programs, Heather O’Donnell. These positions provide support to the Director as part of a streamlined Executive team. The new structure will support a framework for quality research and allow Menzies to adapt to change and meet future challenges.

During the year, NHMRC carried out two on-site audits at Menzies. One was a general and financial audit; the other certified the Menzies and NT Government Human Research Ethics Committee to consider multi-site ethics review applications. Furthermore, we progressed plans for our new buildings, with confirmation of funding from the Australian and NT governments and Charles Darwin University for significant new facilities at Royal Darwin Hospital and the Casuarina CBD campus. Construction is scheduled to commence in the second half of 2012.

Overall, we are well advanced in our goal to create a Centre for Child Development and Education, which we hope to launch during 2011. This would be the culmination of a dream held by many of us at Menzies to establish this as an area of key research at Menzies over the coming decades.

- Paul Burgess won the 2010 Australian Journal of Primary Health prize for the best paper (with co-authors). The contribution of the Adult Health Check to preventative care in a remote Aboriginal primary care service.
- Alke Rumbold was awarded the Future Justice Medal 2010 for her significant work improving the health of Indigenous women and children.
- Jacqui Hughes was awarded the inaugural University of Newcastle Indigenous Alumni Award, a wonderful achievement considering the stellar line-up of Aboriginal and Torres Strait Islander alumni.
- Jana Lai received the NT Young Achiever Award in the science and engineering category for her work on improving the diagnosis of two key bacteria in childhood pneumonia.
- Kate Mounsey was awarded the inaugural NT Young Tall Poppies Award. This award is designed to recognise exceptional young scientists who conduct high calibre research and spread the word about science to a broader audience.
- Menzies Researcher Kalinda Griffin was named Young Territorian of the Year, and Jana Lai was a finalist for the award.
- Menzies Researcher Alice Rumbold was awarded the Lola Douglas Australian Business and Employment Innovation Award, while the Healthy Skin Research Team is a finalist in the Chief Minister’s Performance in Research.
- Professor Gary Robinson has brought his parenting research expertise to the Professor Jonathan Carapetis, Director
A healthy childhood is key to a healthy life. Unfortunately, many Indigenous children face chronic ear infections, respiratory problems, skin sores and other health problems in their earliest years. Not only do such health issues have a direct impact on a child’s health, they also affect their ability to grow, develop and learn. Menzies’ research investigates how we can improve the health of Indigenous children so they can get the best start in life.

The Child Health division is made up of researchers who work with communities and government agencies to produce evidence to address the current poor health, education and social outcomes of Indigenous children.

Life Course

The Aboriginal Birth (Short ABC) study began in 1987 and tracks trends of chronic disease from childhood to adulthood by observing the life course of a group of Indigenous Australians. Significantly, the study will help identify critical intervention points in the lives of the chronically ill. Data from the ABC study has enabled Menzies researchers to carry out the first ever analysis of iodine status – essential for healthy brain development – in a defined Indigenous population. This study identified iodine deficiencies in Aboriginal people of reproductive age in the Northern Territory. The research team now plans to measure iodine levels in this group after the introduction of bread fortified with iodine.

A project to improve the environmental health of children in remote communities was completed in 2010. The project developed and trialled a Healthy Community Assessment tool, which is used to evaluate whether remote communities have the infrastructure needed to promote good health and prevent chronic disease. The tool can be used to help those involved in planning, service provision and promoting improvements in community social determinants of health. Maximum benefit will be gained when this tool is applied across different sectors and used as part of a continuous quality improvement program. As part of this research, evidence has identified indicators that can be translated for use in a remote Indigenous community context and a Household Assessment Form has been developed. This form is now used in one remote community by Aboriginal Community Workers as part of an early invention system to prevent infants from falling to their death. Researchers are also involved in a project that investigated antenatal screening in remote communities to ensure Aboriginal women have access to the same standard of reproductive and maternal health as other Australian women.

Ear Health

Researchers are conducting an important trial to prevent and manage the high rate of Asymptomatic Acute Otis Media (AOM) – or middle ear infection – among Aboriginal children. The trial involved the prescription of azithromycin to randomly selected Indigenous children with AOM and tested the benefits of this drug. Once available, the results will become the best available evidence to guide the medical management of asymptomatic AOM in high-risk children. In 2010, we provided additional training to clinics and support for appropriate diagnosis and management otitis media in Aboriginal children. We are also researching pneumococcal carriage and disease to help design appropriate treatment. Pneumococcal disease can cause serious illnesses such as pneumonia and middle ear infections.

Menzies is applying the new science of Metagenomics to ear health, in order to understand how ear disease develops and why some children do not respond to therapy. By involving the simultaneous study of numerous bacteria, this method will allow the design of better interventions to improve ear health for Indigenous children.

Researchers are also undertaking a project to monitor changes in bacterial respiratory pathogens in response to the pneumococcal conjugate vaccine. These results will inform recommendations for the best use of newly licensed vaccines.

Menzies is studying the impact of the Mobile Phones for Improving Untreated Perforations (MOP-UP) project. MOP-UP provides an educational multimedia messaging service to families, including information about the importance of ear cleaning and clinic check-ups for children. This is specifically designed to prevent cases of Chronic Supportive Otitis Media (CSOM), involving a perforation in the tympanic membrane and active bacteria infection in the middle ear for several weeks or more. Researchers are studying the impact of the mobile phone education campaign on children with CSOM, compared to families who only received routine care and a mobile phone message. This is the first study of its kind in an Indigenous setting.

Unique research is underway into the impact regular swimming in chlorinated pools has on the transmission of CSOM among Aboriginal children. This is the first study of its kind in the Northern Territory, and the first ever randomised control test. Indigenous children with tympanic membrane perforations underwent medical checks after swimming in a chlorinated pool every day for a month. Results included some health improvements in children with otitis media, with a model trend in the clearance of pathogens from the nasopharynx. This confirms the potential for swimming in chlorinated pools to reduce the spread of ear infections among Aboriginal children.

The PREV-OT (COMBO) study is comparing two new pneumococcal conjugate vaccines (Prevenar vs Synflorix) with a four-dose combination schedule for maximum protection from pathogens that cause ear infections. Ethical approvals have been granted, and several Aboriginal Medical Services have received preliminary information with trials to start soon.

The MICROHOME project is a PhD study using new technology to investigate cases of polymicrobial otitis media in Aboriginal children with AOM and eardrum perforation. Results are currently being analysed, but are expected to improve understanding of the microbial communities involved in middle ear infections and eventually pave the way to better treatment options.

Another project is investigating pneumococcal epidemiology with nasopharyngeal samples from Aboriginal children with AOM and the number of dental cavities, with tooth brushing reducing total bacterial loads. Additionally, oral health was significantly better in children who received the fluoride varnish intervention as part of the study.

Rheumatic Heart Disease

The SneRHE project investigated the causal microbiology that contributes to tooth decay, including the most implicated cariogenic bacteria, Streptococcus mutans. Analyses showed a strong connection between Streptococci mutans and the number of dental cavities, with tooth brushing reducing total bacterial loads. Additionally, oral health was significantly better in children who received the fluoride varnish intervention as part of the study.

Respiratory Health

Researchers are currently studying the impact influenza and other respiratory viruses have on the high burden of disease among Aboriginal children. Key to this research is establishing whether viruses and bacteria work together to cause severe disease. The study also looks at the potential role of influenza in the development of future viral vaccines. The project met its recruitment target in 2010 and laboratory data analysis is now underway.

Several studies are also underway into bronchiolitis, the most common cause of hospitalisation in Aboriginal infants. It is caused by a viral infection of the lower respiratory tract and results in inflammation of the airways, causing respiratory distress and hospitalisation. We are working in conjunction with the Darwin and Townsville hospitals along with researchers from the Queensland Children’s Medical Research Institute to investigate new treatments for bronchiolitis and understand issues that may increase the severity of the illness.

Children with bronchiectasis (BE) usually present with a persistent moist cough, asthma-like symptoms and recurrent respiratory tract infections. The prevalence of BE in Northern Territory children is disproportionately high compared with urban Australia. Researchers are exploring whether the immune system in children with BE is compromised early in their development, predisposing them to respiratory infections and chronic airway inflammation.

Another study into BE among Indigenous children aims to define the natural history of the infection and chronic moist cough, and identify the associated risk factors. It will also evaluate the impact of the antibiotic treatment on antibiotic resistance.

Researchers are trying to better understand the bacterial causes of the condition by investigating children with suspected BE undergoing bronchoscopy under anaesthetic. Airway bacteriology studies are carried out comparing bacteria in the lung with that found in the upper airway. We are also looking at the antibiotic resistance of these organisms, particularly to azithromycin. The study will also look at the influence long-term azithromycin has on nasophasyntrical respiratory bacteriology, by examining Northern Territory children enrolled in the international Multi-centre Bronchiectasis Study. Both of these studies will contribute to the understanding of the aetiology of BE and influence the management of children with the illness.

Menzies researchers are working in conjunction with Dr Peter Boustead and Dr Paul Bautem from the Royal Darwin Hospital to establish why children with bronchiectasis have high levels of airway eosinophilia that cannot be explained by the presence of parasitic infections. This group of researchers is also looking at ways to improve the translation of respiratory research into better health practice and has been working with Edith Cowan University to establish lung health resources to help improve the education, prevention and treatment of lung issues in Indigenous children and adults.
Immunisation

The Pneumon randomised controlled trial is looking at how effective the pneumococcal polysaccharide immunisation (PMW) for Indigenous mothers is in protecting their babies from ear disease. We have had strong community support for the study, which has been aided by the active participation of the Indigenous Reference Group and Data Safety Monitoring Board. The immune response to vaccine has been promising, showing:

- a good maternal immune response to the vaccine
- significantly higher cord blood antibody levels for infants whose mothers were immunised while pregnant, than infants who were vaccinated post birth.

The expansion of the study to Alice Springs was instrumental in achieving target recruitment, as well as forming ongoing relationships with Alakura, the women’s health and birthing centre at the Central Australian Aboriginal Congress. We will continue to work closely with all communities, medical service providers and study participants to determine whether maternal vaccination can help prevent infant ear disease.

The Pneumococcal Protection Project aims to determine whether vaccinations generate an adequate immune response in Indigenous adults and whether previous vaccinations impact on the effectiveness of future immunisations. Following ethical approval, the study commenced recruitment in November 2010. This study’s laboratory component has proved challenging to establish but we now have our quality assurance in place and are ready for a busy year ahead.

Rotavirus hospitalisations are more prevalent in the Northern Territory than anywhere else in Australia. They are also more likely to involve young infants, with longer periods of hospitalisation. The rotavirus vaccination was introduced into the routine vaccination schedule for NT infants in October 2006. The project is looking at the effectiveness of the rotavirus vaccine in the NT. It is important to confirm vaccine effectiveness not only against rotavirus-confirm gastroenteritis, but also against all-cause hospitalisations for gastroenteritis. The project has met its recruitment target in both Darwin and Alice Springs, with results expected in 2011.

Child Development, Education and Wellbeing

In conjunction with the NT Department of Education and Training, Menzies is working with the NT’s 20 Growth Towns to help boost educational opportunities in remote communities. Researchers are helping schools, communities, service providers and other stakeholders develop frameworks to encourage school–community planning, support ongoing processes of whole school reform, and establish transparent and accessible systems to enable schools and communities to monitor education outcomes. Initial planning workshops were held in 2010 to re-think how to achieve community and school goals, and work began on the technical design and support of the web-based data collection and reporting systems.

The Care for Child Development (CCD) program is a World Health Organisation (WHO) and UNICEF initiative designed to optimise children’s psychosocial development and physical growth in resource-poor developing nations. The program aims to strengthen bonding and attachment and enhance responsive care giving. The CCD program has potential benefit for Aboriginal children at risk of developmental problems or neglect and the possibility to foster optimal parent–child interactions and relationships. A trial of CCD professional training was conducted in a remote NT community with the support of WHO/UNICEF consultants. Potential positive outcomes include better training of health workers and the opportunity for higher level of inter-departmental collaboration for child and family services professionals. Results from this trial will inform policy regarding the rollout of CCD across the NT.

The Mobile Preschool Study explores how preschool attendance can lead to better health and prepare a child to learn more in their first year of school. Researchers gathered information during community visits in 2010. Feedback will be provided to mobile preschool workers, families and organisations in 2011.

The Developmental Screening Tool Evaluation is examining whether enhanced training of Aboriginal Health Workers is linked to improved early childhood development practice. The program involves training Aboriginal Health Workers to use tools to better monitor the development of young children in remote communities.

The Child Protection program is jointly funded by Menzies and the NT Department of Health and Families. We aim to build strong evidence for child protection policy and practice in the NT, develop research capacity within the department through the delivery of training and promote collaboration between key stakeholders. The research team was involved in supporting the Inquiry into the Child Protection System in the Northern Territory, a role that was expanded to include providing content expertise in the latter stages of the Inquiry. Our literature reviews formed the basis for two chapters of the Board of Inquiry’s final report.

Researchers are also evaluating the role and effectiveness of the NT’s Mobile Child Protection Team, which was introduced as part of the Australian Government’s Indigenous Children’s Protection Policy. The project will provide valuable information about the development and implementation of mobile teams in remote areas with sparse populations. These findings will help improve services in the Northern Territory and could assist child protection systems in other regions facing similar challenges.

Menzies is evaluating the effectiveness of the Family Group Conferencing pilot in Alice Springs. Family Group Conferencing gives a child’s immediate and extended family decision-making power over child protection issues and develops a partnership plan with the family. While family group conferences are used extensively throughout the world, little information has been obtained about the short and long term outcomes of this approach.

Chlamydia trachomatis is one of the most commonly sexually transmitted diseases and a key cause of eye infection in Indigenous communities. The research team will examine the potential for false positives in the detection of chlamydia trachomatis in Aboriginal children in the NT.

Menzies is collaborating with researchers and service providers in Australia, Canada and the US to back evidence-based decision-making in the child protection system. This project aims to identify and map the evidence that can be used to inform decision-making at specific points. It is hoped this information will be useful for families, practitioners and policy-makers. It will also help identify gaps in the knowledge base for decision-making in child protection.

Let’s Start is an early intervention program for at-risk children and families and has been running on the Tiwi Islands and in Darwin since 2005. In June 2010, it was formally transferred to the Menzies School of Health Research, where it has undergone redevelopement following the Review of Child Protection and the introduction of the Integrated Children and Family Services Agenda. The program manual has been adapted to better suit the needs of Aboriginal families and children and streamline delivery of prevention programs for at-risk children and families in remote settings.

Research Translation

The Child Health division seeks to translate its research to improve patient care and treatment outcomes for children with disabilities including ear infections, pneumonia, respiratory conditions, skin disorders and rheumatic heart disease. Our clinical trials are performed in collaboration with Royal Darwin Hospital and other health facilities.

- Galiwin’ku’s Ngalkanbuy Health Service is using the Healthy Community and Household Assessment tools to develop and implement an early intervention system to prevent young children from failing to thrive.

- A Menzies’ initiative, the Australian Indigenous EarInfoNet is a national ear health and hearing web resource to increase communication and collaboration in this area. Established in conjunction with the Australian Indigenous Health Info Net, the website is funded by the Australian Government.

- The Lung InfoNet is a web-based resource providing health professionals and the community with information about improving lung health. This is a joint project initiated by Menzies, in partnership with Professor Neil Thomson from Edith Cowan University.

- Menzies developed a guideline to improve the treatment of children with bronchiectasis. This is now an accepted national guideline for health professionals.

- Menzies research has shown the benefits of health worker education on asthma outcomes, which is expected to improve service delivery and policy. This is the first study to provide high-level evidence of the benefits health worker education sessions have on families with chronic disease.

- Menzies held the first national Australian Online Media workshop, ‘Are you listening?’, to create a better understanding of otitis media. The workshop reinforced that ear infections are a major concern in Australia, identified important research advances and highlighted future research areas and strategies for long-term solutions.

- Menzies Associate Professor Fiona Arrey and Gary Robinson led the development and organisation of the Effective Integration of Child and Family Services Symposium. This brought together senior academics, policy and practice organisations to support plans for integrated service delivery for early childhood in the Northern Territory. Menzies has also formed relationships with the University of Toronto and child protection services in Ontario and Manitoba in the areas of evidence-based child protection policy and practice.
Mental and Child Nutrition

Undernutrition is the underlying cause of 3.5 million child deaths and 16% of the total global burden of disease. While the causes of this condition are mostly predictable and preventable, countries with a high burden of undernutrition often lack the knowledge, capacity and resources to prioritize and deliver effective nutrition interventions. As part of the AusAID-funded Compass: Women’s and Children’s Health Knowledge Hub, Menzies will develop a simple, evidence-based tool to enable nutrition stakeholders to prioritize, appraise, plan and deliver effective nutrition interventions using integrated, comprehensive approaches.

International Child Health

Pneumonia is the most common cause of death in children, accounting for at least 18% of global child mortality, and 50% of deaths in some countries in the region. Most pneumonia deaths occur due to lack of simple antibiotic therapy. In Vietnam, our researchers are conducting a clinical trial on the most effective, least expensive dosage of pneumococcal conjugate vaccine. In Cambodia, we are evaluating community case management of pneumonia. Early data suggests that this community-based, low-cost method of management could have a profound impact on pneumonia-related child deaths.

Tuberculosis

Tuberculosis (TB) remains a leading cause of illness and death in the Asia Pacific. The overlapping pandemics of TB and HIV create major challenges in under-resourced settings. Our broad TB research program ranges from improving understanding of physiological responses to TB infection, to helping TB programs implement treatment guidelines more effectively. We are using supplemental nutritional treatments to improve outcomes in people with TB. Proposed studies include investigating ways to expand TB screening and preventive therapy in people exposed to the infection, and to optimise the integration of TB and HIV care for people with both infections.

Bacterial Infections

Bacterial infections and sepsis continue to be major causes of death in our region. We have identified a major burden of sepsis and severe sepsis in the tropical north of Australia. We are identifying predictors of death and new mechanisms underlying severe infection. Currently we are studying new ways to treat and improve the outcome of sepsis.

Rheumatic Heart Disease (RHD)

Coordinated by Menzies, this programme works to support Pacific Island nations to strengthen and develop RHD prevention activities while undertaking research to:
- define and improve primary health care strategies
- establish baseline epidemiology
- undertake echocardiography screening research.

This year the project provided support for programs in Fiji and Tonga with remote support for the Polynesian Island nation of Tuvalu. More than 3,000 children were screened using echocardiography in 2010, and 4 training workshops were held for health professionals.

The Fiji GoSP project, the research arm of the national RHD program, aims to facilitate a feasible evidence–based approach to screening for the disease, and improve delivery of secondary prophylaxis medication.

Research Translation

The primary goal of the Global Health division is to translate research into practice. In Papua, Indonesia, our studies have led to policy change for uncomplicated and severe malaria; recent evidence suggests that both malaria–related morbidity and mortality have declined significantly. Our studies on how malaria parasites cause severe disease and death have now led to new treatment trials in severe malaria.

The RHD programme completed a pilot study in Fiji to train nurses in echocardiography. As a result of a brief and focused training, the nurses were able to screen children to identify and refer those with abnormal cardiac pathology. This project has provided the basis to build local capacity and eventually facilitate national guidelines for echocardiography screening in primary care. Funding has been secured to undertake a larger study, with the aim of defining and developing a training model that can be used in resource–poor regions across the world where there is a high prevalence of RHD.

Awards and Highlights

1. As a key member of the Asia-Pacific Malaria Elimination Network, Menzies leads the Vaxx Work Group. We are undertaking capacity building research activities on vivax malaria through a combination of workshops, small grants and technical assistance to 11 countries across the Asia-Pacific.
2. Menzies has entered into an important partnership with the Queen Elizabeth Hospital in Eastern Malaysia, on the study of a new form of severe malaria caused by P. knowlesi.
3. Menzies has signed a twinning arrangement with the Research Cabinet of Timor Leste’s Ministry of Health. The collaboration focuses on research support and mentoring, with the aim of fostering independent research, aligned to the nation’s health priorities.
4. Menzies has received an AusAID Australian Leadership Awards Fellowship Grant to host six Timorese nutritionists for in-service training at Royal Darwin Hospital and remote communities.
5. PhDs were successfully awarded to team researchers, Joshua Davis and Anna Ralph.
6. The problems of poverty, poor nutrition, and limited service delivery are shared by both developing countries and many areas within Indigenous Australia, particularly in the area of maternal and child nutrition. In these regions many stakeholders have limited or no prior training in nutrition and food security, and have few opportunities to learn from past experiences, reflect on best practice, and recognise appropriate interventions. With support from the Fred Hollows Foundation, Menzies researchers are using knowledge gained working in developing countries to developed Nutrition and food security – approaches to improving the health of women and children. This evidence–based short course is designed to enable nutrition stakeholders to identify, implement and advocate for effective approaches to improving nutrition and food security.

Towards a Healthy Tomorrow

The coming year will see an expansion in the breadth and depth of Menzies’ collaborations. We will work in more countries, on diverse health needs, from scientific laboratory-based research to working with developing government health departments on surveillance and disease monitoring.
The Healing and Resilience division aims to improve the health of Indigenous Australians through its research into the management of mental illness, substance abuse and other major factors that impact overall wellbeing. Our research helps us to better understand the “pratitative factors”, including connection to culture and family, which help build resilience to mental illness, and problems arising from substance abuse and gambling. This research is then used in practical ways to help develop Indigenous youth and adults into strong, resilient people.

Within the division, the Aboriginal and Islander Mental Health initiative (AIMhi) explores approaches to understanding Indigenous perspectives of wellbeing and translates them into youth-focused and culturally adapted strategies, which can be used in community and service settings.

Brain Recovery Research

This project investigates brain function patterns in substance abusers during periods of abstinence and identifies psychosocial factors that affect relapse post-treatment. Recovery was observed in petrol and alcohol abusers within six weeks of abstinence, however petrol sniffer showed residual impairments even after 12 months of abstinence. The study found that cognitive and psychological problems and drug availability were key risk factors in causing relapse after treatment. The results highlight the importance of detecting, managing and monitoring cognitive and psychological problems during treatment. The information gained has been developed into educational resources and used to inform clinical practice.

Screening and Treatment of Alcohol Related Trauma Brief Interventions Trial (START)

This two-year project will introduce screening and brief interventions for high-risk drinkers admitted to hospital with facial trauma. Working with the NT Department of Health and Families, this research aims to determine whether at-risk drinkers treated for alcohol-related facial trauma experience improved health outcomes following culturally adapted brief interventions. The results of this project will guide hospital management of substance misuse in high-risk Indigenous youth and adults.

Gambling Worries: Attitudes to Gambling in NT Remote Communities

The ‘Gambling Worries’ project investigates ways of measuring the impact of gambling interventions in remote Indigenous communities. Using focus groups and key informant interviews, the research aims to determine whether at-risk drinkers treated for alcohol-related facial trauma experience improved health outcomes following culturally adapted brief interventions. The results of this project will guide hospital management of substance misuse in high-risk Indigenous youth and adults.

Train the Trainer Project

The Train the Trainer Project is exploring the factors that influence the uptake of evidence-based mental health tools in service organisations. One of the areas we are exploring is how local knowledge, which is used in practical ways to help develop Indigenous youth and adults into strong, resilient people.

Best Practice in Early Intervention, Assessment and Treatment (BEAT) of Depression and Substance Misuse

The AIMhi BEAT Depression Project aims to improve wellbeing in remote Indigenous communities by strengthening pathways to care and support for people at risk of depression and substance misuse. We are testing the AIMhi low intensity motivational intervention to help people deal with their worries and bad feelings. We are developing best practice pathways to care for the two communities involved in the project, at the same time as testing the intervention using experimental research methods. As communication is such an important issue in remote communities, the AIMhi team developed a talking poster that explains the BEAT depression project. The poster is embedded with voice recordings that play at the press of a button. The talking poster was presented at the 2016 Creating Futures conference in Cairns.

The Grog Brain Story Animation Video

Menzies has created a short video to communicate to an Aboriginal audience the dangers of drinking too much alcohol, and the impact it has on your brain and behaviour. The animated movie shows how a healthy brain works, and how alcohol affects your brain and behaviour. The animation is available in alternate language versions including Warlpiri, Katherine Kriol and Djambarrpuyngu (Yolngu). This project communicates the findings from our Brain Recovery Research project to individuals and communities affected by alcohol.

Tobacco Multimedia Project

This project uses innovative technology to promote the cessation and prevention of tobacco use in Indigenous youth. An e-health website will feature multimedia resources, including educational animations, video messaging and interactivity through blogging, podcasting and social networking sites. The website encourages community interaction by providing instructions for people to contribute locally created digital stories about quitting smoking. Innovative marketing techniques will be used to promote the site, including social marketing on mobile devices, as well as more traditional modes of popular Indigenous media and websites.

Youth Diversion in Wadeye

This three-year project is exploring the youth gang culture in the remote community of Wadeye. Population data was collected and analyzed to understand the cultural diversity of the area. Local leaders and other community members guide this process through a reference group. Our early findings show that youth activity, sometimes portrayed as gang involvement, has stimulated positive social change and community resource development on a broad scale.
Chronic disease is the most significant contributor to the ‘gap’ in life expectancy and disability between Indigenous and non-Indigenous Australians. Many chronic diseases suffered by Indigenous Australians, such as diabetes, cardiovascular and kidney disease, are preventable to some degree. Our researchers are investigating ways to reduce risk factors, such as smoking, unhealthy diet and physical inactivity and are researching ways to prevent and treat conditions such as diabetes, chronic kidney disease and cancer. We have a special interest in the social determinants of health.

**Healthy Starts**
This international study is testing whether a family based tobacco control program about second-hand smoke will reduce the number of Indigenous infants presenting to clinics for respiratory illness. Participants will include Indigenous families living in Darwin and Maori families from Auckland. In 2010, we presented at the Asia Pacific Conference on Tobacco or Health, with our Auckland collaborators.

**Tobacco Research in California**
David Thomas spent a 10-week sabbatical with Professor John Pierce at the University of California, San Diego. California is a world leader in tobacco control policy, and Professor Pierce has been involved in evaluating the effectiveness of these efforts in reducing smoking and the harm it causes. Dr Thomas worked with Professor Pierce on describing the dramatic decline and, now, near disappearance of pack-a-day smokers in California.

**Cancer Australia**
Joan Cunningham and John Condon contributed to a Cancer Australia-commissioned review of research on cancer control in Aboriginal and Torres Strait Islander Australians. The review provided a comprehensive summary of the evidence base and included 31 recommendations relating to improvements in data infrastructure, screening and prevention, cancer control programs and service delivery models. These recommendations are currently being considered by Cancer Australia. The review prompted the convening of a National Round Table on Priorities for Aboriginal and Torres Strait Islander Cancer Research.

**Socio-Economic Status and Chronic Diseases**
Joan Cunningham researched the relationship between socio-economic status and self-reported chronic disease (diabetes, heart disease, asthma and arthritis) in Indigenous, compared with non-Indigenous, Australians. Using data from national health surveys, Professor Cunningham found that relationships varied across diseases. Socio-economic status had strong correlation with diabetes and heart disease, but made very little difference in asthma patients. Patterns were generally similar to those seen in the non-Indigenous population, but all four diseases were substantially more common among Indigenous people than non-Indigenous people.

**Darwin Regional Urban Indigenous Diabetes (DRUID) Study**
Analysis of data from the DRUID study continues. During 2010, academic papers were published or accepted on a range of topics, including:
- racism and depression
- socio-economic status and carotenoids (a marker of dietary quality)
- C-reactive protein (a marker of inflammation)
- fibrinogen (a marker of heart disease risk)
- subjective measures of social status.

In addition, Jacqui Boyle successfully completed a PhD thesis using DRUID data on women’s health. Over the course of the year, researchers began planning a follow up of the DRUID Study group to look at factors associated with the development of heart disease, diabetes, and premature death among urban Indigenous adults. Liz Barr was awarded a post-doctoral fellowship to lead this work.

**Cancer Outcomes for Indigenous Australians**
Analysis of data on cancer incidence, survival and mortality continued as part of the studies on Cancer Outcomes for Indigenous Australians. Kalinda Griffiths undertook an Indigenous cancer epidemiology traineeship as part of this project.

**Phase two** of an investigation of a cluster of women’s cancer, the SISTER Study, was completed and the results were fed back to the communities involved. Phase three of this investigation has recently been funded and work will commence in 2011.

**Good Food Systems, Good Food For All**
This collaborative project aims to help build capacity in remote stores and develop continuous quality improvement (CQI) tools that will improve food security in remote communities. We are testing the feasibility of supporting store communities in using CQI processes to build evaluation capacity and strengthen community decision-making. These tools and processes are currently being developed, tested and will be finalised in 2011 with the development of CQI for a better food systems facilitation guide.

**Evaluating Store-Based Interventions**
A study into the impact of income management on sales in ten remote NT community stores was published in 2010. It provided the first empirical evidence on the impact of one of the Australian Government’s NT Emergency Response measures. This study found that the income management had no apparent effect on spending habits of people in the ten communities. Research concluded that such a mandatory restriction of people’s income would be unlikely to positively influence people’s spending or improve diet while issues of availability, quality, affordability and home storage remained.

**STORES Project**
We are collaborating with Outback Stores (ORS) and the University of SA to evaluate the impact of a range of pricing interventions on purchasing patterns across 24 remote community stores. This study commenced mid 2010 and has examined the impact of the Australian Government’s excise on tobacco sales and initiatives to affect the sale of soft drinks, fruit and vegetables in OBS stores. This project has contributed to developing quality assurance processes in using point of sales data from stores.
Research Translation
Our use of point of sale data to monitor and report trends in the type and volume of food sold in remote stores has helped public health nutritionists and store associations better monitor trends in sales of key indicator foods and evaluate store-based interventions.

David Thomas has been invited onto several national and NT committees that are working to increase awareness of the harm smoking causes in Aboriginal communities and seeking funding for measures to reduce its incidence.

Awards and Highlights
1. Jaqui Hughes was awarded the inaugural University of Newcastle Indigenous Alumni Award.
2. David Thomas was awarded a National Heart Foundation Career Development Award Fellowship, and was appointed the inaugural Head of the Northern Australian Health Research Unit and Associate Director of the Lowitja Institute.
3. Kalinda Griffiths was named the NT Young Australian of the Year.
4. Joan Cunningham was appointed a Visiting Scientist at the Harvard School of Public Health and spent three months in residence at the Harvard Center for Population and Development Studies.
5. The Tobacco Control Research Team was awarded the 2010 CDU Vice-Chancellor’s Award for Exceptional Performance in Research Team Category.

Towards a Healthy Tomorrow
The clinical research group is planning follow up for the DHIUD and eGR studies to look at factors contributing to heart disease and related conditions, as well as progression of kidney damage markers in the high-risk Indigenous Australian population. This new knowledge will contribute to clinical guidelines in an area where evidence is currently lacking. We are also working with Dr Christine Connors from NT Department of Health, Dr Alex Brown from Baker IDI and the NT Aboriginal Medical Services Alliance in setting up the NT Diabetes in Pregnancy Study, which aims to improve clinical care and outcomes of diabetes in pregnancy for both the mother and her baby.

In conjunction with NT Renal Services, Menzies researchers are planning a prospective study of the origin and transmission of serious and potentially life-threatening infections in people on dialysis. This study complements the renal program within the research division.

Building on past work, the nutrition research program is planning a randomised trial to examine the impact and cost-effectiveness of reducing the prices of fruit and vegetables, low joule drinks and water in remote NT communities, together with an in-store nutrition education strategy. We believe this could be the first study to provide empirical evidence on the potential impact and cost-effectiveness of a store level fiscal policy and combined education strategy on influencing purchasing patterns at a population level.

There is little evidence on the effectiveness of store-based nutrition education strategies in influencing spending patterns. A project to determine the feasibility and sustainability of a system for in-store healthy food promotion and labelling to enhance the consumer’s ability to select healthy foods in the remote community context will commence in 2011.

The tropical environment of northern Australia provides an enviable lifestyle, but also some particular microscopic hazards. The Tropical and Emerging Infectious Diseases division conducts research into bacteria and parasites that are a particular threat to the human inhabitants in this region. These include the bacterial agents of skin disease golden staph and streptococcal, the scabies parasite, and the soil borne bacterium that causes melioidosis. In addition, researchers in this division are engaged in developing robust and cost-effective genetic fingerprinting technologies for bacteria, and these are finding wide application at Menzies and further afield.

Novel Technologies for the Genetic Analysis of Bacteria
We have developed a new approach for the genetic fingerprinting of bacteria. This is based on technology termed “high resolution melting” (HRM) analysis. To design these methods, we use a variety of computerised techniques to analyse large amounts of gene sequence data to identify particularly informative combinations of gene fragments, precisely predict the performance of methods and provide computerised tools for data analysis.

This technology allows for very cost-effective tracking of bacterial transmission and dissemination, and has been applied to a range of important bacterial pathogens, including golden staph (Staphylococcus aureus), Streptococcus pyogenes and Enterococcus faecium. This approach is now used routinely for genotyping bacteria in Menzies research projects, and in collaborative projects with other institutions from around Australia.

Staphylococcus Aureus in the Top End
Menzies’ genetic fingerprinting methods were applied to describe the patterns of disease caused by S. aureus (golden staph) and determined that many strains circulate in the Top End. The type of disease caused depends on the strain and carriage of a toxin called Panton-Valentine Leukocidin (PVL). The research found that approximately 50% of isolates in the Top End carry PVL and these caused disease in younger patients and had a tendency to cause large boils and abscesses, often requiring surgery. We are now considering using additional antibiotics to treat patients with severe staphylococcal disease caused by PVL+ strains.

Genome Sequence of the Novel Staphylococcus Taxon “CC75”
An isolate of the Staphylococcus lineage, CC75 was first identified in the NT as a common cause of skin lesions. It has now been reported at several locations around the world. CC75 resembles golden staph in many respects, and it is currently classified as such. In 2010, we completed a detailed analysis of the complete genome sequence of CC75 and discovered that it is only distantly related to other S. aureus. Remarkably, CC75 lacks the golden pigment that is a defining feature of S. aureus.

Chlamydia Trachomatis
Population Structure
Chlamydia trachomatis is an important agent of genital and eye infections. In a new initiative, we’ve started research...
Effects of Changes in Land use Practices Upon the Melioidosis Bacterium

Evidence is mounting that soil disturbance and changes in land use practices are associated with an increased occurrence of the melioidosis-causing soil bacterium *Burkholderia pseudomallei* in the environment. We are analysing the occurrence of the bacterium on construction sites, in residential gardens and rural bore water. As a next step, we will investigate ways to decrease the load of these bacteria in soil and water to reduce the risk of exposure.

**Darwin Prospective Melioidosis Study**

Now in its 20th year, this study aims to understand the clinical and microbiological aspects of melioidosis in the Darwin region and use this information to lessen the burden of the disease. There has been a large decrease in the mortality associated with melioidosis in that time.

2000/2001 saw a record number of confirmed melioidosis cases in the Top End, with 16 cases (75% fatal) from October 2000 to September 2001. This compares with a median of 21 cases yearly over the previous 20 years. The increased case numbers continued, with 50 cases between October 2010 and 5 April 2012. There has been a statistically significant rise in the proportion of cases from the Darwin urban region and we are assessing the reasons for this. We are also analysing the genetic diversity of the *Burkholderia pseudomallei* strains from the various locations over recent years; in particular, strains from higher risk urban Darwin suburbs. In 2012, we have analysed and published a comprehensive clinical analysis of the 350 culture-positive cases from this study.

**Melioidosis in Sarawak**

In 2010, our team will continue research into melioidosis in Sarawak, which is one of the two Malaysian states on the island of Borneo. This study is being carried out by PhD student Yvonne Poh in collaboration with the University of Malaysia, Sarawak. In 2011, this team had investigated melioidosis samples from the Sarawak region and were able to detect the presence of the bacterium. By 2012, the team had published a comprehensive study of the 350 culture-positive cases from this study.

**Scabies Research**

Scabies is a parasitic infestation of the skin with the parasite "itch mite" *Sarcoptes scabiei*. It is a significant disease worldwide in humans, wildlife, livestock and domestic animals. In 2011, our team will continue research into scabies in the Top End by modelling its distribution using remotely sensed data and data from previous field studies at 210 sites in northern Australia. Model validation includes the use of independent test data sets and subsequent sampling in areas with predicted high and low probability of infection. This study contributes to understanding the environmental distribution of *B. pseudomallei* in tropical Australia and will help identify areas of increased risk.

**Combination Antibiotic Therapy for MRSA**

Methicillin – Resistant Staphylococcus Aureus (MRSA) is a major cause of severe community and hospital acquired infections at Duke University in the United States.

2. Deborah Holt and her Leishmanz team were the 2011 winners of the NT Research and Innovation Board Tropical Knowledge award and also the prestigious Chief Minister’s award as the overall winner across all categories.

**Australian Leishmaniasis Life Cycle Investigation**

Leishmaniasis is an infection caused by Leishmania parasites and ranges from asymptomatic or self-limiting infections of the skin to infection of abdominal organs (which can be fatal if untreated). The discovery of a novel type of Leishmania parasite infecting kangaroos in the Northern Territory in 2009 was entirely unexpected. Prior to this, Australia and Antarctica were thought to be the only regions of the world free of this disease. We have continued to build on our previous work, which implicated a biting midge in the transmission of the disease. This was the first evidence anywhere in the world of transmission by an insect other than a phlebotomine sandfly.

**Towards a Healthy Tomorrow**

In 2011, our team will continue work in scabies, melioidosis-causing bacteria, golden staph and other skin infections to better understand tropical and infectious diseases, and improve treatment and patient care.
Established in 2010, the Centre focuses on research into primary health care systems and applies evidence from research to implement better health care systems, and provides a model of research translation. It is home to One21seventy, which provides quality improvement services to Indigenous primary health care centres. The Centre also supports two of the Australian Government’s Indigenous health projects.

An independent review in 2010 identified that this area of Menzies had become a successful and recognised research translation unit delivering benefits to Indigenous Australians. As a result of this review, the Centre now operates under the governance of an Executive Committee.

Its focus is on developing research and evidence to help improve the quality of services provided by health clinics to Indigenous clients. This includes investigations into how to improve systems to deliver high quality primary care, implement and evaluate change in health systems policy and practice and the impact of system change on the quality of care.

Audit and Best Practice for Chronic Disease Extension (ABCD) The Audit and Best Practice for Chronic Disease Extension project (ABCD) was conducted over a five-year period, finishing in 2010. This built on the findings of the ABCD project, which demonstrated the effectiveness of a continuous quality improvement (CQI) model in supporting Indigenous primary health care centres to use evidence-based good practice. The ABCDE refined the CQI process to adapt it to a more diverse range of Indigenous primary health care settings across Australia. The project collected and analysed indicators of quality of care, health outcomes and processes from 69 health centres. The research found the CQI process achieved measurable improvements in chronic disease care for Indigenous clients.

ABCD National Research Partnership

This project continues the research focus on improving the quality of care in Indigenous primary healthcare systems. It’s a partnership between Australian health service providers, researchers and policy-makers designed to improve the quality of care in Indigenous primary health care settings – achieving better practice through research. The project explores the factors associated with variation in quality of care, examines effective strategies in improving the delivery of care and works with partners to enhance the effective implementation of successful strategies. It also incorporates the key principle of research transfer, bringing together service providers, government agencies and researchers to determine research priorities and build relationships to pave the way for future partnerships.

Rheumatic Heart Disease ABCD

Under this project, research has been used to develop CQI tools to improve the prevention and management of rheumatic heart disease (RHD), based on newly developed national guidelines for treatment. Clinical audits and assessments helped refine the tools and the development of health centre systems to support RHD prevention and care. A similar program of research was supported in Fiji where tools were adapted for the local context. The project included a high level of stakeholder involvement and resulted in findings that contributed to the development of new intervention programs.

Improving Health Promotion

This project is a three-year study aimed at lifting the quality of health promotion practice to prevent chronic disease through CQI. Data collection is complete and work has started on refining the tools and protocols that have been developed as part of this research. An Indigenous advisory group, mainly made up of Aboriginal Health Promotion Officers from the NT Government, has provided valuable advice and feedback. One of the project’s earliest findings was a lack of existing systems to support the documentation of health promotion activity. The NT Government is exploring changes that will address this situation.

Housing Improvement and Child Health

The Housing Improvement and Child Health project looked at the complex relationships between housing infrastructure, child health and a number of social and environmental factors. The research focused on ten NT communities that received substantial government investment in housing from 2004 to 2005. Data is still being analysed, but an initial finding is that large-scale housing programs focusing on infrastructure alone appear unlikely to lead to more hygienic living environments. A broader ecological approach to housing is needed in remote Indigenous communities, including better access to health hardware, hygiene promotion and by creating a broader enabling environment in communities.

Research Translation

The ABCDE project has had significant influence on Indigenous primary health care:

- It has informed the development of the Australian Government’s Healthy for Life program. ABCD system and clinical audit tools are included in the Healthy for life toolkit and have been used more widely by health centres to meet a range of reporting and other requirements.
- The NT Government has adopted the CQI process as routine practice across all government-funded health centres and has created regionally based co-ordinator positions to support its implementation. Many of the NT’s community controlled health services have also adopted the model.
- Queensland Health is implementing the ABCD process across all government-funded health centres.
- South Australia has adopted ABCD tools and processes in government-managed primary health care centres.
- NSW’s Maari Ma Aboriginal Health Corporation has been using the ABCD processes to support and evaluate implementation of its chronic disease strategy over the past four years.
- The ABCD model is being adapted by Menzies researchers for use in other settings and areas of practice, including health promotion and food security. Improving health promotion CQI tools are being trialled by health services in New Zealand and Tonga.

One2seventy

One2seventy was Menzies’ first foray into providing services to improve Indigenous primary health care, as a way of translating research into practice. The unit provides health services with access to continuous quality improvement (CQI) tools, including web-based data and information services, training, facilitation and support systems.

At the end of 2010, Menzies was providing CQI services to 149 health centres across the Northern Territory, Queensland, South Australia and New South Wales.

One2seventy provides health services with access to tools that are evidence-based and regularly updated to assess the quality of care. Health services use these tools to audit client records and examine the quality of care being provided. As many staff as possible within the health service team are encouraged to participate in a whole-of-health-centre discussion about the systems that support the quality of care, and rate them using a systems assessment tool.

Data from the tools are entered onto the web-based information service, which generates easy-to-read graphs and reports of the service’s performance. Health centres are then able to use the information to identify priorities for change and, importantly, monitor the resulting improvement in care over time.
The One21seventy model not only provides a system that supports health centres to improve the quality of care in a sustained way, it ensures evidence is translated into practice. This is done by exposing staff to best practice standards through the audit process, increasing the data available, engaging staff in clinical governance and looking for ways to integrate improvements into day-to-day practice and clinical systems.

An independent review in 2010 found a high level of customer satisfaction with this service, with clients describing its tools, training and training manual as ‘excellent’.

One21seventy continues to expand its client base and will begin providing services to a small number of health centres in WA, SA, NSW and, potentially, Victoria in 2011. This will be done in conjunction with the Audit and Best Practice for Chronic Disease (ABCD) Research Partnership, thanks to funding from the Lowitja Institute. We will continue to develop new QI tools to meet client demand and expand our suite of training resources and services.

The One21seventy program name reflects our aspiration to improve health for increased life expectancy beyond one year, 21 years and 70 years of age.

SCARF
The Support, Collection, Analysis and Reporting Function (SCARF) project aims to implement a Continuous quality improvement approach to the delivery of chronic disease management and maternal and child health care. SCARF is part of the Evaluation and Outcomes Framework of the Australian Government’s Healthy for Life (HfL) program. Menzies has been providing support to SCARF services since 2007, and this year continued to provide support to HfL Services nationally by assisting them to report data on a web-based reporting tool (OSCAR). They also provided training to health services through clinic visits and workshops, with the opportunity for networking and sharing experiences about the HfL Program.

Sentinel Sites
In March 2010, Menzies School of Health Research was awarded a contract to undertake formative evaluation for the Australian Government’s Closing the Gap initiative the Indigenous Chronic Disease Package (ICDP). The ICDP aims to reduce the burden of chronic disease among Aboriginal and Torres Strait Islander people. Evaluation of the ICDP will involve analysis of its impact on 24 Sentinel Sites across Australia, and provide feedback to inform the ongoing rollout of the package.

Eight sentinel sites were established across Australia in 2010, with a further 16 to be set up by mid-2011.

Awards and Highlights
- The ABCDE project team was a finalist in the Chief Minister’s Research and Innovation Award.
- Professor Ross Bailie and Damin Si were joint winners of the Australian Association of Academic Primary Health Care’s award for Distinguished Paper for Improving quality of preventative care for well adults in indigenous community health centres.
- Nikki Clelland and Lyn O’Donoghue were swamped with interest from international health services and researchers following their presentations about the Improving Health Promotion project at the IUHPE World Conference on Health Promotion in Genova.

Towards a Healthy Tomorrow
In 2011, Menzies will focus on expanding its base of senior researchers in the area of Primary Health Care Systems. The Centre will continue to build capacity and experience in managing and delivering quality, evidence-based evaluation and service delivery programs in the area of primary health care systems.
Three new postgraduate short courses were developed and offered:

- to broaden audience. In 2010, 178 people participated in nine short courses.
- with students and provide an opportunity to share research findings with a broader audience.
- with Menzies’ short courses enable researchers to share their wisdom and expertise with Menzies’ Higher Degree Research students and Professional Doctorate enrolment in public health courses continued to increase with a total of 90 students across the three courses. An increase in the support provided to Menzies’ Higher Degree Research students and Professional Doctorate in health studies has been led by the arrival of Dr Suzanne Belton. In conjunction with the Evaluation and Research Support Unit, this division has facilitated the inaugural Research Skills Training Fortnight to further support training.

Menzies’ short courses enable researchers to share their wisdom and expertise with students and provide an opportunity to share research findings with a broader audience. In 2010, 178 people participated in nine short courses. Three new postgraduate short courses were developed and offered:

- A Strength Based Approach to Indigenous Mental Health;
- Tropical Child Health; and
- Current Issues in Tropical Health.

The division also offers courses in:

- Promoting Aboriginal and Torres Strait Islander Health;
- Issues in Indigenous Health Research and Community Development; and
- Public Health.

The Alan Walker Series on Improving Aboriginal Child Health and the Youth Futures symposium continue to showcase local research and explore new directions in these fields.

2010 Graduates

Doctor of Philosophy

Annette Dougall: Australian Leishmania Lifecycle Investigation

William Ivory: Kumanungur, Legend and Leadership: A study of Indigenous leadership and succession focusing on the northwest region of the Northern Territory of Australia

Steven Torg: The clinical and molecular epidemiology of community-associated Staphylococci courses in Northern Australia

Anna Ralph: Tuberculosis project in Timika (INDO)

Bachelor of Science Honours

Jarah Kaisis

Jana Yun Reng Lai

Master of Public Health

Greg Rizanik

Nigel Green

David Metcalfe

Margaret Stewart

Graduate Diploma of Public Health

Jeanette Boland

Angela Booth

Dranne Burke

Hazel Clarke

Cliveel Gibson

Nigel Green

Bridgette Hutchinson

Gorana Kosanovic

Laetitia Prior

Tracy Spillman

Graduate Certificate in Public Health

Joanne Fox

Melanie Legg

2010 Higher Degree research students

Doctor of Philosophy

Anita D’Apremo: Developmental surveillance of Indigenous children Northern Territory Research Innovation Board, Australian Postgraduate Award

Anna Stephen: Ways of improving outcomes of severe ear infections in Aboriginal children living in the NT

Anna Sava: Household decision-making and child nutrition interventions Australian Postgraduate Award

Asha Bowen: Randomised controlled trial of co-trimoxazole versus intramuscular penicillin for impetigo in Aboriginal children National Health and Medical Research Council, Australian Academy of Science.

Bart Currie: The Darwin prospectve melioidosis study

Bridge Barber: A prospective study of the epidemiology, clinical features and pathogenesis of human Plasmodium knowlesi infection National Health and Medical Research Council

Christabelle Darcy: The role of arginine and tryptophan metabolism in severe infections Australian Postgraduate Award

Gabrielle McCallum: Bronchiolitis in Indigenous children

Georgina Rutter: Mobile Preschool Program participation and the health, developmental and learning outcomes in the short and medium term

Jacklyn Ng: MRI-based potential diagnostic tools for the early and rapid identification of carriers NT Research Innovation Board, International Postgraduate Research Scholarship

Jaqueline Hughes: The relationship of obesity, insulin resistance and inflammation in Aboriginal and Torres Strait Islanders with diabetes and renal impairment National Health and Medical Research Council, Australian Academy of Science.

Jeanne (Rini) Poespoprodjo: Assessing the Efficacy and Safety of DP for the Treatment of Uncomplicated Malaria AusAid

Kathryn Roberts: Population-based echocardiographic screening for rheumatic heart disease in northern Australian children Australian Postgraduate Award

Kim Harris: Bacteriology of respiratory pathogens in Aboriginal Indigenous children

Laurel Trench: Paediatric respiratory medicine

Leisa McCarthy: Exploring Indigenous Australians’ perceptions of health in relation to health promotion activities and type 2 diabetes Ian Potter Foundation Scholarship

Matthew Stevens: Socio-economic and environmental determinants of health in Indigenous communities in the Northern Territory

Megan Lawrance: An evaluation of intersectoral action for suicide prevention in the Northern Territory: Does collaboration facilitate better outcomes National Health and Medical Research Council

Naor Bar-Zeev: The vaccine-preventable burden of influenza and other respiratory viruses among Aboriginal children in the Top End National Health and Medical Research Council, Australian Academy of Science

Nicole Greenall: Improving Health Promotion through Continuous Quality Improvement National Health and Medical Research Council

Nitin Kapoor: Defining exacerbation in non cyclic fibrosis bronchiectasis Australian New Zealand Bank

Paul Burgess: Where the dream changed shape: The Aboriginal and Torres Strait Islander Adult Health Check in a remote Aboriginal community

Rachael McMahon: Does case referencing improve quality of life at the end of life for end-stage renal/palliative care clients from remote communities in the Top End of the NT National Health and Medical Research Council

Robyn Marsh: Nasopharyngeal micro ecology: correlations with otitis media in Indigenous children National Health and Medical Research Council

Robyn Williams: Integration of indigenous health into nursing curricula Australian Postgraduate Award

Samantha Calpoulon: Epidemiology, prevention and control of rheumatic heart disease in Pacific Island countries—filling the gaps Menzies Scholarship

Santie Du Plessis: Adaptive behaviour assessment scale Indigenous adaptation study

Sarah Ireland: Rosie’s, ovaries and the rainbow string: Aboriginal women’s experiences of reproduction and fertility in Wadeye Australian Postgraduate Award

Sue McMullen: Family fighting - domestic violence in a remote Aboriginal community Australian Postgraduate Award Industry Scholarship

Susan Pizzuto: Immune function in children with chronic suppurative lung disease Australian Cochrane Airways Group

Theree Reams: Epidemiological study of scabies and staphylococci infections in a remote indigenous community in the NT before and after a community-wide treatment intervention with ivermectin National Health and Medical Research Council, Australian Academy of Science, Sydney Myer Health Scholarship

Tina Noobux: Toxinoiology and Haematology (coagulopathy) University Postgraduate Research Scholarship

Tom Smelling: Rotavirus gastroenteritis in the Aboriginal population and the effect of immunisation Menzies Scholarship, National Health and Medical Research Council

Wajahat Mahmood: Characterisation of “Sarcopes Scabes” sporting proteases Pakistan Scholarship

Yowana Pedie: An epidemiological investigation on melioidosis and Buntkholdeo pseudomallei in Sabah and Sarawak, East Malaysia University Postgraduate Research Scholarship

Education and Training

The Education and Training division coordinates and delivers Charles Darwin University’s post-graduate public health courses and supports higher degree research students. Offerings include the Graduate Diploma in Public Health, Master and Doctor of Public Health and a range of short courses. The division also offers courses in:

- Promoting Aboriginal and Torres Strait Islander Health;
- Issues in Indigenous Health Research and Community Development; and
- Public Health.

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Anna Stephen: Ways of improving outcomes of severe ear infections in Aboriginal children living in the NT

Anna Sava: Household decision-making and child nutrition interventions Australian Postgraduate Award

Asha Bowen: Randomised controlled trial of co-trimoxazole versus intramuscular penicillin for impetigo in Aboriginal children National Health and Medical Research Council, Australian Academy of Science.

Bart Currie: The Darwin prospectve melioidosis study

Bridge Barber: A prospective study of the epidemiology, clinical features and pathogenesis of human Plasmodium knowlesi infection National Health and Medical Research Council

Christabelle Darcy: The role of arginine and tryptophan metabolism in severe infections Australian Postgraduate Award

Gabrielle McCallum: Bronchiolitis in Indigenous children

Georgina Rutter: Mobile Preschool Program participation and the health, developmental and learning outcomes in the short and medium term

Jacklyn Ng: MRI-based potential diagnostic tools for the early and rapid identification of carriers NT Research Innovation Board, International Postgraduate Research Scholarship

Jaqueline Hughes: The relationship of obesity, insulin resistance and inflammation in Aboriginal and Torres Strait Islanders with diabetes and renal impairment National Health and Medical Research Council, Australian Academy of Science.

Jeanne (Rini) Poespoprodjo: Assessing the Efficacy and Safety of DP for the Treatment of Uncomplicated Malaria AusAid

Kathryn Roberts: Population-based echocardiographic screening for rheumatic heart disease in northern Australian children Australian Postgraduate Award

Kim Harris: Bacteriology of respiratory pathogens in Australian Indigenous children

Laurel Trench: Paediatric respiratory medicine

Leisa McCarthy: Exploring Indigenous Australians’ perceptions of health in relation to health promotion activities and type 2 diabetes Ian Potter Foundation Scholarship

Matthew Stevens: Socio-economic and environmental determinants of health in Indigenous communities in the Northern Territory

Megan Lawrance: An evaluation of intersectoral action for suicide prevention in the Northern Territory: Does collaboration facilitate better outcomes Australian Postgraduate Award

Naor Bar-Zeev: The vaccine-preventable burden of influenza and other respiratory viruses among Aboriginal children in the Top End National Health and Medical Research Council, Australian Academy of Science

Nicole Greenall: Improving Health Promotion through Continuous Quality Improvement National Health and Medical Research Council

Nitin Kapoor: Defining exacerbation in non cyclic fibrosis bronchiectasis Australian New Zealand Bank

Paul Burgess: Where the dream changed shape: The Aboriginal and Torres Strait Islander Adult Health Check in a remote Aboriginal community

Rachael McMahon: Does case referencing improve quality of life at the end of life for end-stage renal/palliative care clients from remote communities in the Top End of the NT National Health and Medical Research Council

Robyn Marsh: Nasopharyngeal micro ecology: correlations with otitis media in Indigenous children National Health and Medical Research Council

Robyn Williams: Integration of indigenous health into nursing curricula Australian Postgraduate Award

Samantha Calpoulon: Epidemiology, prevention and control of rheumatic heart disease in Pacific Island countries—filling the gaps Menzies Scholarship

Santie Du Plessis: Adaptive behaviour assessment scale Indigenous adaptation study

Sarah Ireland: Rosie’s, ovaries and the rainbow string: Aboriginal women’s experiences of reproduction and fertility in Wadeye Australian Postgraduate Award

Sue McMullen: Family fighting - domestic violence in a remote Aboriginal community Australian Postgraduate Award Industry Scholarship

Theree Reams: Epidemiological study of scabies and staphylococci infections in a remote indigenous community in the NT before and after a community-wide treatment intervention with ivermectin National Health and Medical Research Council, Australian Academy of Science, Sydney Myer Health Scholarship

Tina Noobux: Toxinoiology and Haematology (coagulopathy) University Postgraduate Research Scholarship

Tom Smelling: Rotavirus gastroenteritis in the Aboriginal population and the effect of immunisation Menzies Scholarship, National Health and Medical Research Council

Wajahat Mahmood: Characterisation of “Sarcopes Scabes” sporting proteases Pakistan Scholarship

Yowana Pedie: An epidemiological investigation on melioidosis and Buntkholdeo pseudomallei in Sabah and Sarawak, East Malaysia University Postgraduate Research Scholarship
Master by Research Students
Emily Bailey: Improving the management of respiratory health in Indigenous children
Gregory Wills: At preschool and ready to learn? An assessment of prerequisite skills for writing and reading in children entering preschool in the Darwin, Palmerston and rural areas
Sara Noonan: The development and evaluation of a continuous quality improvement model for rheumatic heart disease control and prevention in Fiji
Louise Boyle: The PROMPT Follow Up Study: Long term outcomes of otitis media in remote Aboriginal children in remote NT schools: An assessment framework
Sue Edwards: Psycho-educational assessment of Indigenous students in Palmerston and rural areas
Lachlan Brennan: Are hospital acquired infections due to endogenous S aureus infections due to acquisition carried by the patient at the time of admission?

Awards and Highlights
1. Menzies commenced the re-accreditation of the Graduate Diploma and Masters in Public Health for 2012.
2. We introduced new marketing strategies including an electronic newsletter Learnvine, advertising in regional newspapers and through social media.
3. We developed new Short Courses in the areas of Indigenous mental health, youth health and tropical health and an online module in Indigenous mental health for remote health staff.
4. We identified several scholarship opportunities: Scholarship funding for Indigenous students at Masters level in course work or research (funded by the estate of the late Arthur Hutt Cook, The Bridge Business College Gift Fund and the Ellen Violet Broan Scholarship); Future leaders to fund course work or research students studying Indigenous health; and Menzies’ Ros Bracher Scholarship opportunity for research training.
5. Dr Suzanne Belton was awarded a $10,000 teaching grant for software training from QSR International.

Towards a Healthy Tomorrow
One of our key goals is to build the educational pathway between public health education and research, and to better equip people with research skills in the health sector. We will introduce a new Graduate Diploma of Health Research to meet this need from 2012. The Graduate Diploma in Health Research will include core units in Research Skills, Research Design, Qualitative Research Methods, Epidemiology and Biostatistics with new elective units in Indigenous Health Research, Health Promotion and Clinical Trials.

The Evaluation and Research Support Unit (ERSU) aims to improve the quality of research projects and evaluations by supporting researchers through training and one-on-one assistance. Our team includes experts who support the various stages of the research process, including statistics, data management, epidemiology, evaluation and administration. We aim to ensure best quality design, implementation and monitoring of research projects, along with high quality interpretation, communication and translation of results into action.

In 2010, training opportunities included:
- monthly Research Skills Training Seminar Series
- the Research Skills Training fortnight
- biostatistics and Data training
- evaluation training.

Training events were well attended by both Menzies and external staff working in research with 800 people attending the training fortnight. Feedback indicated a high level of satisfaction and demand for similar events. We improved our outreach in 2010 by developing an extensive training network, communicating with external offices through video-link and making our seminar series available on the web.

ERSU established a centralised system for managing and monitoring requests, with 6702 separate research projects in areas including project and evaluation design, database development and maintenance, statistical analysis planning and conduct and grant applications. ERSU provided over 1600 hours of assistance for more than 6400 consultations. In liaison with NT Department of Health and families, Menzies also worked to improve collaborative research efforts, access to training and consulting in research methods and updated processes for undertaking and conducting research.

Towards a Healthy Tomorrow
In 2011 ERSU will proactively engage with researchers and project managers to provide input at the very start of projects and at key times throughout the research process.

In-house training in data and project management will be offered for the first time. By using a train-the-trainer model, we will embed expertise within all research divisions. We also plan to revise training in biostatistics and Stata to improve quality and accessibility.

2011 is likely to bring further changes in staffing to improve our capacity to assist researchers and those conducting evaluations. A potential new area will be capacity building of clinical trials through new links with the National Health Medical Research Council Clinical Trials Centre. A research staff induction pack will also be developed.
Menzies has implemented a new organisational structure to help support a framework for quality research. This includes the appointment of a Chief Operating Officer to oversee the corporate and research support functions. The new arrangements will enable us to develop key initiatives to ensure Menzies receives the support needed as the organisation grows and evolves. Many of the new initiatives in corporate support focus on providing better services to research and education activities, including the allocation of specific administration support staff and better business support to research divisions.

Key initiatives for 2010 include:
- Putting a comprehensive set of policies and procedures together to provide stronger corporate support and systems
- Implementing performance management and development framework and training that was specifically designed for Menzies’ needs
- Establishing internal legal services and processes for contract management and collaborative research agreements
- Developing systems to meet the new requirements of the Australian Code for the Responsible Conduct of Research
- Certification of the Human Research Ethics Committee under the National Health and Medical Research Centre Harmonisation of Multi-Centre Review (HoMEC) initiative.

The Aboriginal Ethics Sub-committee continues to play an essential role in the review of research project applications submitted for ethics approval. Menzies is now better able to coordinate remote research, with an improved ethics database identifying communities that have agreed to participate in projects.

This year the NHMRC also conducted a site audit to monitor Menzies’ governance, research administration, financial procedures and other processes. A final report has yet to be provided.

In order to undertake malarial parasite work as part of our Global Health research, we have begun the process of seeking certification approval from the Australian Quarantine Inspection Service for Menzies’ Darwin Laboratory Facility. A site inspection also took place at the Laboratory Radiation Lab with no problems identified.

Recent growth at Menzies has prompted the relocation of more research teams to the new Darwin office space in Winnellie and an upgrade of IT storage arrangements.

Goals for next year include working rapidly towards completion of the new buildings, creating a computerised records management system and formalising a centralised data management system.

Menzies will soon commence the construction of two new buildings, featuring state-of-the-art facilities, to meet the organisation’s growing needs. The two sites chosen, Charles Darwin University (CDU) and Royal Darwin Hospital (RDH), recognise Menzies’ important links to medical research and academic excellence. Building works will commence later in 2012.

Menzies has made good progress on its new building project during the year. We have secured a total of $45.2 million (including GST) for the project, including $30.6 million from the Health and Hospital Fund, $6.4 million from the Australian Government, $4.5 million from the Northern Territory Government and $1.2 million from Charles Darwin University, with an additional $0.8 million in additional facilities support over the next decade. The two new facilities at CDU and RDH will strengthen existing relationships and support our research outcomes. The design process is expected to be complete by February 2012, with both buildings scheduled for Practical Completion by June 2013.

The building on the hospital site will be adjacent to the existing John Matthews Building (JMB). It will be approximately 3000 square metres, and will accommodate an additional 177 staff. This will bring the total number of Menzies people on this site to 343. The functions of the building will include:
- Office accommodation
- Clinical trials
- Improved field trip preparation and sample processing
- Increased staff amenities
- Reimbursement of the expansion of the PI2 laboratory
- Refurbishment of the John Matthews Building
- Car parking and improved traffic flows
- Cafes
- Boardrooms
- Various sized meeting rooms
- 200 person seminar room
- Community recognition wall.

The building on the Charles Darwin University site will strengthen education and learning ties. It will be co-located with CDU’s Office of Research Innovation and house Menzies’ proposed new Centre for Child Development and Education. The 2960 square metre building will accommodate 180 staff. The functions of the building include:
- Teaching spaces
- Office accommodation
- Interview/observation room
- Various sized meeting rooms.

The projected timeframes for the major milestones are:
- Engaging architects May 2011
- 36 week design period May 2011 – February 2012
- Build new facilities April 2012 – March 2013
- Refurbish JMB January 2013 – June 2013
The Menzies Indigenous Development Unit (MIDU) plays a unique role in supporting Aboriginal and Torres Strait Islander staff and research at Menzies. One exciting initiative this year is the creation of a Certificate II in Child Health, and the training of five staff to deliver the course in remote communities, upon completion of a Certificate IV in Training and Assessment. This is part of Menzies’ commitment to ensure our research and training reaches the people who are most affected.

This year MIDU helped promote science as a potential career through NT career days and establishing science awards to secondary school students in partnership with the NT Science Teachers Association.

Menzies now has three Indigenous reference groups who provide valuable input into research direction: the Aboriginal and Torres Strait Islander Advisory Committee, the Healing and Resilience Indigenous Reference Group and the Child Health Indigenous Reference Group. They are all supported by MIDU.

As part of the Menzies restructure, an Associate Director of Aboriginal Programs position has been established within the Executive team. This position is responsible for developing, implementing and evaluating strategies, projects, and policies that realise the Aboriginal and Torres Strait Islander focused outcomes of the Menzies Strategic Plan. Associate Professor Heather D’Antoine has been appointed to this position.

Finally, we thank the staff of MIDU, including Normie Grogan, Nadine Lee, Lindy Quall and Bilawara Lee. Bilawara, the previous manager of MIDU, established many initiatives that are now in place at Menzies. Bilawara has left Menzies to take up a senior position with the Flinders NT Medical Program.

RHD Australia is the national coordination unit for rheumatic heart disease (RHD) and was established by the Menzies School of Health Research in partnership with James Cook University and the Baker ID Heart and Diabetes Institute. The unit is funded through the Australian Department of Health and Ageing’s National Rheumatic Fever Strategy. Its primary function is to work with rheumatic heart disease control programs and other partners throughout Australia to reduce death and disability from acute rheumatic fever (ARF) and RHD among Aboriginal and Torres Strait Islander people and other high-risk populations. The activities of RHD Australia focus on providing support for existing RHD programs, standardising disease information and reporting, and improving quality and access of education and training for health professionals. RHD Australia also promotes awareness of RHD at meetings and workshops, and supports research to help develop a better understanding of the disease and its impact in Australia.

RHD Australia is working to establish national ARF/RHD guidelines, develop key performance indicators to help evaluate RHD program performance, establish a national data collection system and strengthen education and training to improve health outcomes.

**Achievements**

- In April 2010, RHD Australia held a clinical workshop for RHD program staff and other interested individuals from across Australia to increase awareness of ARF and RHD, and to develop clinical expertise in the field.
- In August 2010, RHD Australia hosted a workshop for a wide range of experts and organisations to share knowledge and reflect on the work that is being done, and recommend future strategies to help reduce the burden of RHD in Australia. Researchers from Australia and throughout the world also had an opportunity to discuss a wide variety of current and future research projects across the ARF/RHD disease spectrum.
- In RHD Australia staff presented at conferences hosted by the Australian Disease Management Association and Australian Centre for Remote and Rural Medicine.
Menzies is active in the community. We hold events to raise awareness about our work, share important information with the community and raise funds for our research.

Thank-you Day Gunbalanya
Menzies researchers have been working hand-in-hand with the Gunbalanya people for more than 20 years. The community’s participation in our research has allowed us to make significant gains in understanding health issues facing Indigenous Australians, not only in the Territory but also across Australia. In August 2010, Menzies hosted a barbecue in Gunbalanya to thank the community for their ongoing support. The NRL’s One Community ambassadors Hazem El Masri, Mario Fenech, David Peachey and Wendell Sailor and OPSM’s One Sight Foundation also attended the celebrations.

25th Anniversary Celebrations
In 2010, we celebrated Menzies’ 25th birthday. We held several community events throughout the year to mark the occasion and reflect on 25 years of groundbreaking research.

Fundraising
Thanks to our generous donors and 25th anniversary partners, we raised money to support a new Youth Health and Wellbeing Research Program, which will focus on issues such as mental, sexual and reproductive health, substance misuse, education and chronic disease.

Menzies Medallion
A special 25th Anniversary Menzies Medallion was awarded to long-term collaborator with the School, Professor Michael Good. Professor Good works at Griffith University and last year won Australia’s top award for science leadership, the Eureka Prize. The medallion was presented by the Administrator Mr Tom Pauling AO QC to honour Professor Good’s considerable contributions to global and Indigenous health through research and leadership.

If you are interested in raising funds for Menzies or being involved in future community events please contact: supportus@menzies.edu.au or visit our website.
The Menzies School of Health Research is an independent body corporate under the control of a governing Board. Menzies is also a controlled entity of Charles Darwin University. Menzies accounts are subject to audit by the Auditor-General of the Northern Territory.

Professor Simon Maddocks (Chair)
Professor Maddocks is the South Australian Chief Scientist, South Australian Research Development Institute Livestock Systems, Roseworthy Campus, University of Adelaide. His research interests are in reproductive immunology and cell biology, and epigenetic influences on foetal development.

Professor Clare Martin (Deputy Chair from August 2010)
Professor Clare Martin is a fellow at the Northern Institute of the Charles Darwin University. Prior to this appointment in August 2010, Clare was the CEO of the Australian Council for Social Service, the peak body for the community services sector and national voice for Australians on low incomes.

Professor Jonathan Carapetis
Professor Carapetis has been Director of the Menzies School of Health Research in Darwin since 2006. He is a paediatrician, infectious diseases and public health physician and a leading mind in the Australian health field, with particular expertise in Indigenous child health.

Professor Barney Glover
Professor Barney Glover is Vice-Chancellor, Charles Darwin University in Darwin, NT. He also holds an Adjunct Professorial Fellowship in the Wa Centre of Excellence in Industrial Optimization. Barney has held various Board positions on Cooperative Research Centers and other research organisations and maintains a strong interest in research management and professional development.

Mr Gary Barnes
Gary Barnes was appointed as Chief Executive, Department of Education and Training, in May 2009. He came to this position from the role Deputy Chief Executive, Queensland Public Service Commission where he led sector-wide reform in the area of Workforce Performance.

Mr Richard Ryan AO (Treasurer from August 2010)
Deputy Chancellor of Charles Darwin University since November 2009. Previously, Richard was the Chancellor of the Charles Darwin University from 26th November 2003 to November 2009. Mr Ryan is a professional company director who is a member of a number of public and government boards.

Professor David Celermajer
Professor Celermajer is Scandrett Professor of Cardiology, University of Sydney Director of EchoCardiography and Cardiologist, Royal Prince Alfred Hospital, Clinical Director, The Heart Research Institute, Sydney and Chairman, Research Committee, National Heart Foundation.

Mr Robert Wells
Robert is Co-Director of the Menzies Centre for Health Policy and Executive Director of the College of Medicine and Health Sciences at the Australian National University, Canberra. He works on a range of health policy and systems issues, including primary care, private health insurance, rural health and health workforce. He has participated in national advisory committees on neurosciences research and attracting greater private sector investment in health and medical research.

Ms Kate George
Ms Kate George is from the Murchison District of Western Australia and belongs to the Putejurra people. Kate is the Principal Consultant of Claypan Seniors Pty Ltd. Kate holds a law degree from the Australian National University and was admitted to practice as a barrister and solicitor in Western Australia in 1992 and New South Wales in 1989. Kate has provided national consultancy services to private and government sectors as well as Aboriginal communities.

Professor Shane Houston
Shane Houston is a Gangulu man from Central Queensland. Shane is the Executive Director of Systems Performance and Aboriginal Policy. He has worked in Aboriginal Affairs for more than 30 years mainly in the health and employment areas. Shane has held a range of positions at local, state, national and international levels including thirteen years in senior public sector management roles and a stint with the World Council of Indigenous Peoples.

Mr Jeff Moffett
Mr Jeff Moffett commenced in the position of Chief Executive, Department of Health and Families in September 2010 after acting as the Chief Executive of WA Country Health Service, the largest country health service in Australia. He is a highly experienced health administrator who has occupied senior leadership and management roles in the health sector for the past decade.

Mr Peter Carew – Deputy Chair until April 2010
Mr Michael Martin – Treasurer until April 2010
Mr Ken Davies – Board member until April 2010
Dr David Ashbridge – Board member until April 2010
Ms Cindy Shannon – Board member until August 2010

Observers of the Board
Secretary to the Board – Ms Adrienne Farago
Menzies Staff Representative – Ms Emma Bevington

Board committees
The Governing Board was assisted by the following committees.

Finance and Risk Committee
renamed Finance Committee in August 2010
Mr Michael Martin (Chair until June 2010)
Mr Richard Ryan (Chair from August 2010)
Mrs Sue Bradley (Independent member)
Professor Jonathan Carapetis
Mr Peter Carew (until June 2010)
Mr Shane Smith (Financial Controller and Secretary until June 2010)
Mr David Blair (Financial Controller and Secretary from August 2010)

Audit Committee (Renamed Risk and Audit Committee in August 2010)
Mr Michael Martin (Chair until June 2010)
Prof Shane Houston (Chair from August 2010)
Mr Peter Carew (until June 2010)
Mrs Sue Bradley (Independent member)
Prof Clare Martin (from August 2010)
Mr Shane Smith (Secretary until June 2010)
Ms Vikkie Taylor

Academic Standing Committee
Prof Bob Wason (Chair until March 2010)
Prof Jonathan Carapetis
Prof Robyn McDermott
Prof Bart Currie
Prof Lesley Barclay

Development Committee
Mr Michael Martin (Chair)
Dr Brandon Carp
Prof Clare Martin
Mr Daniel Monteith
Mr Dean Rioli
Mr Ben Raimiers
Ms Pauline Wobell
Secretary
Ms Patricia Pinto
Ms Zoe Malone

Joint NT Department of Health and Menzies School of Health Research
Human Research Ethics Committee
Dr Michael Nixon (Chair)
Mr Matthew Antcliff
Ms Colleen Atkinson
Mr Hugh Bradley
Mrs Ruth Billany (until April)
Dr Peter Brown
Dr Joshua Davis
Assoc Prof Pascale Oettlinder
Assoc Prof Prii Cifford
Dr James Macdonald
Ms Kathleen McDermott
Dr Rodney Omond
Rev Stephen Orme
Mr Scott Piel
Ms Jenny Scott
Dr Gurmeet Singh
Ms Helen Spiers (until June)
Ms Leonique Swart
Ms Karyl Taylor
Ms Rik Thorndiiff
Ms Victoria Walker
Major Geneen Wright (until June)
Secretary
Ms Maria Scarlett
Ms Emma Bevington
Aboriginal Ethics Sub Committee
Ms Kalinda Griffiths (Chair)
Ms Kerry Ganley
Ms Vanessa Harris
Ms Sandra Nelson
Mr Peter Pangque
Ms Diane Walker
Secretary
Ms Maria Scarlett
Ms Emma Bevington
Dr Jacqueline Boyle
Dr Malcolm Macdonald (until July 2010)

Aboriginal and Torres Strait Islander Advisory Committee
Ms Kate George (Chair)
Mr Marius Puruntatameri
Dr Alex Brown
Prof Cindy Stannoon
Ms Paula Arnold
Assoc Prof Jacinta Elston
Ms Heather O’Antoine

Child Health Division Indigenous Reference Group
Mr Geoffrey Barnes
Mr Dennis Bonney
Assoc Prof Ngaree Brown
Ms Christine Campbell
Ms Eyvette Hawthorne
Ms Bilawara Lee
Mr Marius Puruntatameri

Healing and Resilience Division Indigenous Reference Group
Mr Allan Randall
Ms Beverley Dorschow
Mr Charles Hodgson
Mr Charlie Dhamamandji
Ms Cindy Paardekooper
Mr Edward Mulholland
Ms Gwen Paterson-Walley
Mr John Boneham
Ms Muriel Jarabga
Ms Regina Bennett

Darwin Regional Institutional Biosafety Committee
Assoc Prof Phil Giffard (Chair)
Dr Valerie Asche
Mr Michael Howard
Dr Lorna Mehlville
Ms Pamela Tidman
Mrs Maria Scarlett (Secretary)

Laboratory Safety Committee
Mrs Susan Hutton (Chair)
Ms Jo Bex
Ms Kim Hare
Mr Mark Mayo
Assoc Prof Phil Giffard
Ms Rachael Lilliebridge

Occupational Health and Safety Committee
Mrs Susan Hutton (Chair)
Ms Joanne Be (Secretary)
Mr Annette Dougal
Ms Tegan Harris
Ms Melita McKinnon
Ms Johanna Bell
Ms Julie Green
Ms Rachael Lilliebridge
Mr Wajahat Mahmood
Mr Joseph McDonnell
Assoc Prof Phil Giffard
Ms Tanja Poul
Ms Emma Bevington
Ms Lisa Bartlett
Dr Gabriela Winigo
Ms Lee Upton
Mr Tony Gero
Ms Maria Hakides
Mr Michael Binks
Ms Kim Hare
Ms Trish Gaff
Ms Fiona O’Neill
Ms Ella Curry
Ms Jacklyn Ng
Ms Vijaya Joshi
Mr Matt Hughes
Ms Sanjaya Gunung
Dr John McKenzie
Ms Margaret Landigan
Ms Jane Nelson
Books
Chang AB. Health issues in Indigenous Children: an Evidence Based Approach. 2010

Chapters in Books


Conferences
Bailie R; Clelland N. Acting on the social determinants of health: the potential of systematic continuous quality improvement processes for health promotion [Oral Presentation] 20th IUHPE World Conference on Health Promotion, Geneva, Switzerland, 2010

Bailie R; Clelland N. Can quality improvement approaches be applied to health promotion in Australian Indigenous primary health care settings? [Oral Presentation], 20th IUHPE World Conference on Health Promotion, Geneva, Switzerland, 2010

McDonald, E. Preventing Childhood Infections, Health for Life and New Directions Mothers and Babies Services Conference, Brisbane Queensland, 2010

Mernagh G; Ezzati M; Anderson L, Carapetis J; Chugh S; Criqui M; Feigin V; Forbes G; Andrew M; Tiley E. The Global Burden of Cardiovascular Disease: Methodology
primary care services, 2010, 192, 10, p597

Int Dent J, the reduction of dental caries in remote Indigenous Australian children: a comprehensive approach to health promotion for Aboriginal and Torres Strait Islander children and adults, 2010, 60, 3 Suppl 2, p245

Vaccine, 2010, 28, 5301

Acquired pneumonia in the central desert and north-western tropics of Australia, 2010, 9, p302

Pediatr Infect Dis J, 2010, 47, 50-51


Austral Med, 2010, 47, 1, p109

BMC Health Serv Res, 2010, 10, 569

Health Lett Rev, 2010, 8, 115

Aust NZ J Public Health, 2010, 34, Suppl 1, S93

Aust NZ J Psychiatry, 2010, 44, 9, 504

BMC Health Serv Res, 2010, 10, 569
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<tr>
<th>Funding Body</th>
<th>Chief Investigators</th>
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<td>THOMAS, David</td>
<td>Smoking and tobacco control amongst Aboriginal and Torres Strait Islander people.</td>
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<td>A Pilot Study to Assess the Presence of Circulating Respiratory Viruses and Bacteria in a Remote Indigenous Community Using Different Specimen transport methods and sensitive molecular techniques.</td>
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<td>NAGEL, Tricia; THOMPSON, Valerie; GRIFFIN, Carolyn</td>
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<td>NT Department of Health</td>
<td>ARNEY, Fiona</td>
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<td>Arizona Board of Regents for and on behalf of Northern Arizona University MBgYCR-01</td>
<td>CURRIE, Bant; MARY, Mark</td>
<td>High Resolution/Highly Sensitive Assays for Forensic Analysis and Attribution of Bacterial Biothreat Agents.</td>
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<td>NAGEL, Tricia</td>
<td>BEAT: Best Practice in Early Intervention Assessment and Treatment of Depression and Substance Misuse</td>
<td>Contract</td>
<td>16 September 2009</td>
<td>31 December 2009</td>
<td>$801,340.00</td>
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<td>Brotherhood of St Laurence</td>
<td>NUTTON, Georgie</td>
<td>HIPPY Evaluation - Hebrew University of Jerusalem</td>
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<td>18 October 2010</td>
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<td>$44,940.00</td>
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<td>Children’s First Foundation</td>
<td>CARAPETIS, Jonathan; KELME,薰薰</td>
<td>Getting Every Child’s Heart Okay (GCHOK)</td>
<td>Contract</td>
<td>28 May 2008</td>
<td>30 September 2008</td>
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<td>Department of Health and Ageding</td>
<td>BAILIE, Ross; GOODARD, Marco; THOMAS, David; CLELAND, Nikki; BRIMBLECOMBE, Julie; KELVEN, Margaret; ANDERSON, Ian; O’DONOHUE, Lyn; MCCARTHY, Lexie; ROWLEY, Kevin</td>
<td>Sentinel Sites Program as part of the monitoring and evaluation of the Indigenous Chronic Disease Package.</td>
<td>Contract</td>
<td>1 March 2010</td>
<td>30 November 2012</td>
<td>$650,290.00</td>
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<td>Department of Prime Minister and Cabinet 090222</td>
<td>CURRIE, Bant; KASTLI, Mirjam; MARY, Mark</td>
<td>National Security Program to Undertake Burkhoderra pseudolesnae Sampling – United States Department of Homeland Security.</td>
<td>Contract</td>
<td>1 January 2010</td>
<td>30 April 2010</td>
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<td>Lifeline Australia</td>
<td>NAGEL, Tricia</td>
<td>Review ‘ Indigenous-specific Lifeline toolkits: Coping with sorrow; help when you’re feeling down; and Aboriginal suicide prevention information.</td>
<td>Contract</td>
<td>22 December 2010</td>
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<td>Integrated Services Symposium</td>
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<td>University of Queensland</td>
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<td>Asia Pacific Malaria Elimination Network (APMEN)</td>
<td>Contract</td>
<td>30 November 2009</td>
<td>31 December 2010</td>
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<td>Olive and Vera Ramaciotti Foundation 3072/2010</td>
<td>BOURKE, Peter</td>
<td>Equipment Grant for BD FACs Cantor Flow Cytometry System with BD FACs Guava</td>
<td>Equipment</td>
<td>1 October 2010</td>
<td>2 October 2010</td>
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<td>NHMRC 462017</td>
<td>FALLS, Gabrielle</td>
<td>NHMRC Standard Equipment Grant – 2009</td>
<td>Equipment</td>
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<td>SOKOL, Kate</td>
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<td>NHMRC 387310</td>
<td>BAILE, Ross</td>
<td>Fellowship in Indigenous Environmental Health and Health Services Research.</td>
<td>Fellowship</td>
<td>1 January 2009</td>
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<td>NHMRC 4697027</td>
<td>ANSTEY, Nicholas</td>
<td>Pathophysiology and treatment of malaria and other tropical infectious diseases in our region.</td>
<td>Fellowship</td>
<td>1 January 2008</td>
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<td>NHMRC 545200</td>
<td>CUNNINGHAM, Joan</td>
<td>Fellowship on Social and System Determinants of Indigenous Health.</td>
<td>Fellowship</td>
<td>1 January 2009</td>
<td>31 December 2010</td>
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<td>NHMRC 545216</td>
<td>CHANG, Anne</td>
<td>Clinical research and evidence-based approaches to management of respiratory illnesses.</td>
<td>Fellowship</td>
<td>1 January 2009</td>
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<td>NHMRC Centre of Clinical Research Excellence in Clinical Science in Diabetes</td>
<td>HUGHES, Jaquelyne</td>
<td>Fellow of the Centre for Clinical Research Excellence in Clinical Science in Diabetes.</td>
<td>Fellowship</td>
<td>1 January 2010</td>
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<td>BOURKE, Peter</td>
<td>Father Frank Flynn Fellowship</td>
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<td>Swiss National Science Foundation Fellowship</td>
<td>MARFURT, Jutta</td>
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<td>Fellowship</td>
<td>1 February 2009</td>
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<td>CDR Aboriginal Health</td>
<td>BAILE, Ross; SMITH, Shane</td>
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<td>Department of Health and Ageing</td>
<td>CARAPETIS, Jonathan; DOUGLAS, Brendan; SMITH, Shane</td>
<td>Menzies Building Extension Project</td>
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<td>1 July 2007</td>
<td>30 September 2012</td>
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<td>CSL Biotherapies</td>
<td>ANDREWS, Ross; CARAPETIS, Jonathan</td>
<td>Annual Sponsorship for Menzies School of Health Research to assist with communicating its Research on Paediatric and Adult Vaccines.</td>
<td>Network</td>
<td>25 March 2009</td>
<td>25 March 2012</td>
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<td>Ian Potter Foundation</td>
<td>STEPHEN, Anna</td>
<td>Understanding the association between otitis media and educational outcomes for Aboriginal children living in a remote Northern Territory community.</td>
<td>Pilot Project</td>
<td>1 March 2010</td>
<td>30 April 2011</td>
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<td>Lowitja Institute</td>
<td>BAILE, Ross</td>
<td>Quality of Care Product</td>
<td>Priority Driven Research</td>
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<td>NHMRC 490900</td>
<td>THOMAS, David; JOHNSTON, Vanessa; FITZ, Joe</td>
<td>Monitoring tobacco consumption to evaluate Indigenous tobacco control.</td>
<td>Priority Driven Research</td>
<td>1 January 2008</td>
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<td>NHMRC 490944</td>
<td>MCPHISON, Rachael; SENIOR, Kate; BOUGHEY, Mark</td>
<td>User centred, quality of life and palliative care for clients from remote communities in the Northern Territory.</td>
<td>Priority Driven Research</td>
<td>1 January 2009</td>
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<td>AusAID</td>
<td>ANSTEY, Nicholas; DOUGLAS, Brendan; PRICE, Ric</td>
<td>Strengthening the Timika Translational Research Facility (AusAID Timika)</td>
<td>Program</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$1,222,487.00</td>
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<td>Caritas</td>
<td>CARAPETIS, Jonathan; OUIHOUJIN, Samantha</td>
<td>Rheumatic Heart Disease Control and Prevention Programme</td>
<td>Program</td>
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<td>Department of Health and Ageing</td>
<td>CARAPETIS, Jonathan; FARAGO, Adrienne; GREEN, Brenda</td>
<td>Rheumatic Fever Strategy – National Coordination Unit</td>
<td>Program</td>
<td>1 January 2009</td>
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<td>Department of Health and Ageing Rhearing Research and Prevention Program REI-2341/010B</td>
<td>MORRIS, Peter; LEAN, Amanda; ANDREWS, Ross</td>
<td>Single versus combination pneumococcal conjugate vaccines (SPCV and PHIL-0) for high-risk Aboriginal children (COHIBO).</td>
<td>Program</td>
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<td>NHMRC 460660 (Administered by Queensland Institute of Medical Research)</td>
<td>KEMP, David J; GOOD, Michael; MCPHISON, Donald Donald T; TOOTH, Ildiko; ANSTEY, Nicholas M; SRIVARAKSET, Kadiya S; DOUGAN, Denise L; ENGWERDA, Christian R; LEUKI, Alexander L; WOODBERRY, Tony</td>
<td>Immunity and Pathogenesis in Tropical and Infectious Diseases: Implications for Vaccines and Drug Development.</td>
<td>Program</td>
<td>1 January 2008</td>
<td>31 December 2012</td>
<td>$6,972,357.80</td>
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<td>NT Department of Education</td>
<td>CARAPETIS, Jonathan; NUTTIN, Georige</td>
<td>Transforming Indigenous Education</td>
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<td>NT Department of Education</td>
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<td>Transforming Indigenous Education 09-17 DET variaton NT AEDI data release.</td>
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<td>1 December 2009</td>
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<td>NT Department of Health</td>
<td>SILBURN, Sven</td>
<td>Child Protection Research and Education</td>
<td>Program</td>
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<td>NT Department of Health and Department of Justice</td>
<td>D’ARABS, Peter; SENIOR, Kate</td>
<td>Substance Abuse Research</td>
<td>Program</td>
<td>1 July 2008</td>
<td>30 June 2011</td>
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<td>World Heart Foundation/Telethon</td>
<td>CARAPETIS, Jonathan</td>
<td>World Heart Federation Rhematism Fever/ Rheumatic Heart Disease Secondary Prevention Programme in the Pacific Island Nations - COORDINATION COSTS.</td>
<td>Program</td>
<td>1 July 2005</td>
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<td>AusAID</td>
<td>MILLHOLLAND, Kim; CARAPETIS, Jonathan; AMSTEE, Nick; DODGAS, Brendon</td>
<td>Women's and Children's Knowledge HUB</td>
<td>Project</td>
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<td>Cabrini</td>
<td>CARAPETIS, Jonathan</td>
<td>Cabrini Contribution to eCHO Project</td>
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<td>1 July 2008</td>
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<td>Channel 7 Children’s Research Foundation of SA Inc 114</td>
<td>CHANG, Anne</td>
<td>Does azithromycin improve the clinical recovery of hospitalised brochiolids in Indigenous and non-Indigenous infants: A randomised controlled trial.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>30 June 2010</td>
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<td>Channel 7 Children’s Research Foundation of SA Inc 117</td>
<td>LEACH, Amanda</td>
<td>Study of microbiology linked to evaluation of strong teeth for little kids (SMILE_STLX).</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
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<td>Channel 7 Children’s Research Foundation of SA Inc 42</td>
<td>BAR-ZEEV, Naor</td>
<td>Burden of severe disease due to influenza and other respiratory viruses in Aboriginal children in the Northern Territory.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2009</td>
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<td>Community Benefit Fund</td>
<td>NAGEL, Tricia</td>
<td>Gambling worries: attitudes to gambling in NT remote communities.</td>
<td>Project</td>
<td>1 January 2009</td>
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<td>CRC Aboriginal Health</td>
<td>MORRIS, Peter; LEACH, Amanda; SMITH-BAUGHAN, Heidi; CHANG, Annie; VAILEY, Patricia; TORDUOL, Paul</td>
<td>Azithromycin versus placebo in the treatment of asymptomatic acute otitis media in young Aboriginal children: A RCT.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2010</td>
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<td>Criminal Research Council</td>
<td>SENIOR, Kate; CHENHALL, Richard; VOPSY, William; NAGEL, Tricia; CUNNINGHAM, Teresa</td>
<td>Developing successful diversification schemes for youth from remote Aboriginal communities.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>1 January 2012</td>
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<td>Criminal Research Council</td>
<td>SENIOR, Kate; CUNNINGHAM, Teresa; VOPSY, William</td>
<td>Drinking Paddocks Research</td>
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<td>31 December 2011</td>
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<td>Department of Agriculture, Fisheries and Forestry (administered by Tiangga Conservation Society Australia)</td>
<td>ROSE, Karrie; DOUGALL, Annette; MOLT, Deborah; WALTON, Shelley; SHELTON, Cath</td>
<td>Field Surveillance and monitoring Leishmania transmission by the blood-sucking midge Forcipomyia subgenus, Laoshilelea in the Northern Territory.</td>
<td>Project</td>
<td>1 January 2010</td>
<td>30 June 2010</td>
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<td>Department of families, Community Services and Indigenous Affairs</td>
<td>ROBINSON, Gary; GUNTHORPE, Wendy; SILBURN, Sven; ZUBRICK, S; RUHMBO, Isham; GRAY, B; QUING, T</td>
<td>Let’s Start Indigenous Preschool Evaluation Project: Links between behaviour and outcome.</td>
<td>Project</td>
<td>1 February 2010</td>
<td>31 December 2011</td>
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<td>Department of Health and Agering</td>
<td>CAREY, Sheree</td>
<td>Innovative and interactive multimedia communication strategies aimed at reducing tobacco consumption among Indigenous young people.</td>
<td>Project</td>
<td>1 January 2000</td>
<td>31 December 2012</td>
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<td>Department of Health and Agering</td>
<td>THOMAS, David</td>
<td>Senior Evaluation Researcher for Indigenous Tobacco Control Initiative at Nembré – Talking about the smokes.</td>
<td>Project</td>
<td>1 October 2009</td>
<td>30 September 2011</td>
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<td>Department of Health and Agering Office of Aboriginal and Torres Strait Islander Health</td>
<td>CARAPETIS, Jonathan; MCDONALD, Malcolm; CURRIE, Bart; ILTON, Marcus; MAGUIRE, Gaeame</td>
<td>Screening for rheumatic heart disease in Indigenous children.</td>
<td>Project</td>
<td>1 January 2007</td>
<td>30 April 2011</td>
<td>$1,365,338.00</td>
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<td>Financial Markets Foundation for Children 2009-2014</td>
<td>CHANG, Annie; MACLENNAN, Carolyn; MORRIS, Peter</td>
<td>Improving the management and outcomes for infants hospitalised with bronchiolitis.</td>
<td>Project</td>
<td>1 June 2009</td>
<td>30 May 2011</td>
<td>$131,644.00</td>
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<td>Giaxomkimline Australia 13313</td>
<td>LEACH, Amanda</td>
<td>Surveillance of ear disease and nasal carriage of respiratory pathogens in the NT in 2009.</td>
<td>Project</td>
<td>1 May 2009</td>
<td>31 March 2010</td>
<td>$416,356.08</td>
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<td>National Institute of Health</td>
<td>WEINBERG, JH; AMSTEE, Nick; YEO, Ton</td>
<td>Arginine, Nitric Oxide, and Severe Malaria</td>
<td>Project</td>
<td>2008</td>
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<td>National Rural Health Alliance Inc; Queensland Health, NT Department of Health</td>
<td>BRIMBLECOMBE, Julie</td>
<td>Remote Indigenous Stores and Take away Project and tool enhancement.</td>
<td>Project</td>
<td>5 February 2007</td>
<td>31 December 2010</td>
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<td>NHMRC 138187</td>
<td>MORRIS, Peter; VAILEY, Patricia; CHANG, Annie; GRIMWOOD, Keith; SINGLETAY, Rosie; TORDUOL, Paul</td>
<td>MULI-CENTRE BRONCHIECTASIS STUDY: A collaborative and international study of bronchiectasis in Indigenous children.</td>
<td>Project</td>
<td>1 January 2006</td>
<td>31 December 2011</td>
<td>$1,444,500.00</td>
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<td>NHMRC 496014</td>
<td>CONDON, John; JELS, Paul; RODER, David; CUNNINGHAM, Joan; COOPY, Michael; THRELLICA, Tim</td>
<td>Health system performance and outcomes for Indigenous Australians with cancer: A national study.</td>
<td>Project</td>
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<td>31 December 2011</td>
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<td>MORRIS, Peter; LEACH, Amanda; SMITH-VAUGHAN, Heidi; CHANG, Anne; VALERY, Patricia; TORZILLO, Paul</td>
<td>Azithromycin versus placebo in the treatment of asymptomatic acute otitis media in young Aboriginal children: A RCT.</td>
<td>Project</td>
<td>1 January 2007</td>
<td>30 June 2011</td>
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<td>NHMRC 469032</td>
<td>BAILLIE, Ross; CELLODAN, NVAN; TAY, Kimnt; SITHORPE, Beverly</td>
<td>A structured systems approach for improving health promotion practice for chronic diseases in Indigenous communities.</td>
<td>Project</td>
<td>1 January 2008</td>
<td>31 December 2010</td>
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<td>NHMRC 470035</td>
<td>IBSTEIN, Geoffrey; BROWN, Simon; BRICKLEY, Nicholas; SELLON, Michael</td>
<td>A randomised controlled trial of factor replacement therapy in snake bite coagulopathy.</td>
<td>Project</td>
<td>1 January 2008</td>
<td>31 December 2010</td>
<td>$1,407,075.00</td>
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<td>NHMRC 471034</td>
<td>RUMBOLD, Alice; BOYÈDE, Jacqueline; KIDEWA, Sue; WALLACE, Iuan; THOMPSON, Robyn</td>
<td>Antenatal screening for fetal anomalies in Indigenous women: views of Indigenous people and their health care providers.</td>
<td>Project</td>
<td>1 January 2008</td>
<td>31 December 2011</td>
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<td>NHMRC 472032</td>
<td>ANDREWS, Ross; LEACH, Amanda; MORRIS, Peter; TORZILLO, Paul; TANG, Jimmy; MULHOLLAND, Edward</td>
<td>A randomised controlled trial of a family tobacco control program to reduce respiratory illness in Indigenous infants.</td>
<td>Grant</td>
<td>1 January 2008</td>
<td>31 December 2011</td>
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<td>NHMRC 473031</td>
<td>CHANG, Anne; MORRIS, Peter; ROBERTSON, Colin; VAN ASEF, Peter; GLASSON, Nicholas; MASTERS, Ian</td>
<td>Multi-centre evaluation of a clinical pathway for chronic cough in children - can it use improve clinical outcomes.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$1,323,895.00</td>
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<td>NHMRC 474030</td>
<td>MAPLE-BROWN, Louise; LAWTON, Paul; HEN, Wendy; CASS, Alan; JERUMS, George; MACGAA, Richard; VWAARD, Leigh; THOMAS, Mark</td>
<td>To improve the accuracy and precision of estimated GFR (eGFR) measurements in Indigenous Australians.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
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<td>NHMRC 475039</td>
<td>THOMAS, David; JOHNSTON, Vanessa; BROWN, Ngiare; CHANG, Anne; SEGAL, Cathy</td>
<td>A randomised controlled trial of mobile pre-school for child health and development in remote Aboriginal communities.</td>
<td>Project</td>
<td>1 April 2009</td>
<td>31 December 2012</td>
<td>$1,126,875.00</td>
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<td>NHMRC 476038</td>
<td>RUSSELL, Fiona; BALLOCH, Anne; MULHOLLAND, Edward; RUSSELL, Fiona; CARAPETIS, Jonathan; TONG, Steven; BOWEN, Asha</td>
<td>Improving capacity of Aboriginal and Torres Strait Islander communities to influence food systems for food security.</td>
<td>Project</td>
<td>1 January 2009</td>
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<td>$1,177,650.00</td>
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<td>NHMRC 477037</td>
<td>HOIT, Deborah; WATSON, Shelley; BAKER, Ro; DUNN, Ben</td>
<td>Towards novel therapies for scabies: functional analysis of Sarcoptes scabiei aspartic proteases.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$975,150.00</td>
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<td>NHMRC 478036</td>
<td>LEACH, Amanda; CHANG, Anne; CHENG, Allen; MCDONALD, Malcolm; TORZILLO, Paul; BROWN, Ngiare; HARE, Kim</td>
<td>To is long term weekly azithromycin use for bioinformatics in Indigenous children associated with antibiotic resistance?</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$878,855.00</td>
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<td>NHMRC 479035</td>
<td>CARAPETIS, Jonathan; ELLIOT, Alison; ALPERSTEIN, Garth; ANDREWS, Ross; LUDEN, William; NUTTEN, George; MCTURK, Nicholas</td>
<td>Evaluation of the effectiveness of mobile pre-school for child health and development in remote Aboriginal communities.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$926,200.00</td>
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<td>NHMRC 480034</td>
<td>LEACH, Amanda; SMITH-VAUGHAN, Heidi; ANDREWS, Ross; RILEY, Mr D; O'GRADY, Kerry-An</td>
<td>Community based surveillance of bacterial respiratory pathogens in the NT and WA.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$915,150.00</td>
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<tr>
<td>NHMRC 481033</td>
<td>ANDREWS, Ross; CARAPETIS, Jonathan; KIRKWOOD, Carl; RALPH, Anna; SNELLING, Thomas</td>
<td>A case control study of rotavirus vaccine effectiveness against gastroenteritis hospitalisation of children in the NT.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$942,276.00</td>
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<td>NHMRC 482032</td>
<td>CARAPETIS, Jonathan; CURRIE, Bart; MCDONALD, Malcolm; ANDREWS, Ross; TONG, Steven; BOWEN, Asha</td>
<td>A randomised controlled trial of alternative treatments to improve outcomes in pulmonary tuberculosis.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$689,500.00</td>
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<td>NHMRC 483031</td>
<td>MULHOLLAND, Edward; RUSSELL, Fiona; CARAPETIS, Jonathan; TANG, Jimmy; BALLOCH, Anne; DUNN, Ben; YOSHIDA, Yay; SAT technique, Catherine; LUCARDO, Paul</td>
<td>Impact of GFR thresholds on the immunogenicity of 2 doses of r13v-PCV followed by an early booster.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2013</td>
<td>$1,168,925.00</td>
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<td>NHMRC 484030</td>
<td>ANDREWS, Ross; SPARKS, Richard; CARAPETIS, Jonathan; MCGARRY, James; CHENG, Allen; KUROKO, Therese; MARKEY, Peter; MULHOLLAND, Eddie; HOIT, Deborah</td>
<td>Impact of an influenza and pneumococcal conjugate vaccines (13v-PCV and PnHo-01 vaccines for high-risk Aboriginal children (EPAH).</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
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<td>Funding Body</td>
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<td>NHMRC 609280</td>
<td>CURRIE, Bart; CHENG, Alien; GIFFARD, Philip; MAMP, Mark; KEMP, Paul; SPARRI, Brian</td>
<td>Diversity and virulence determinants among 1000 clinical and environmental isolates of Burkholderia pseudomallei.</td>
<td>Project</td>
<td>1 January 2010</td>
<td>31 December 2012</td>
<td>$499,500.00</td>
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<tr>
<td>NHMRC 491635 (administered by Queensland Institute of Medical Research)</td>
<td>Mc keever, James, WATSON, Shelley F, PASAI, Ciara, HOLT Deborah</td>
<td>Diagnostics for drug resistance in Vibrio cholerae</td>
<td>Project</td>
<td>1 January 2008</td>
<td>31 December 2010</td>
<td>$48,437.50</td>
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<td>NT Department of Health</td>
<td>MOON, Liz</td>
<td>Research to develop children’s environmental health frameworks, indicators and survey tool.</td>
<td>Project</td>
<td>1 March 2010</td>
<td>31 June 2010</td>
<td>$1,525.00</td>
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<td>NT Department of Health</td>
<td>NAGEL, Tricia</td>
<td>BEAT Project: Best practice in early intervention Assessment and Treatment of depression and substance misuse.</td>
<td>Project</td>
<td>1 July 2009</td>
<td>31 June 2010</td>
<td>$15,000.00</td>
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<td>NT Department of Health</td>
<td>ROBINSON, Gary; GUTHRIE, Wendy; SILBURN, Sven; ZUBERK, S; RHUMBOLO, Johna; GARY, B</td>
<td>Let’s Start Indigenous Preschool Evaluation Project: Links between Behaviour and Outcome.</td>
<td>Project</td>
<td>1 June 2010</td>
<td>30 June 2011</td>
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<td>NT Department of Health</td>
<td>SENIOR, Kate; CHENHALL, Richard</td>
<td>Negotiation of Young People’s Understandings of Sexual Behaviour and Sexual Risk.</td>
<td>Project</td>
<td>22 April 2009</td>
<td>30 June 2010</td>
<td>$20,000.00</td>
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<td>Research and Innovation Board</td>
<td>BAR-ZEEV, Naor; CARAPETIS, Jonathan; ANDREWS, Ross; CHANG, Anne; NISSEN, Michael; KRAUSE, Victoria; GUTHRIE, Steve</td>
<td>Burden of influenza and respiratory viruses among Aboriginal children in the Top End.</td>
<td>Project</td>
<td>1 January 2008</td>
<td>30 June 2010</td>
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<td>Research and Innovation Board</td>
<td>BAR-ZEEV, Naor; O’GRADY, Kerry-Ann; CARAPETIS, Jonathan; ANDREWS, Ross; LAMBERT, Stephen; TUDOR, Paul; SMITH-VAGHAN, Heidi</td>
<td>Impact of bacterial colonisation and viral co-infection on rates of respiratory illness among Aboriginal children.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2010</td>
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<td>Research and Innovation Board</td>
<td>DAVIES, Joshua; TONG, Steven; ANSTY, Nicholas; MAHONNAY, Krupin</td>
<td>CHARIO: Gastroenteritis: Nodular Resolution with Ibuuprofen adjunctive Therapy.</td>
<td>Project</td>
<td>1 September 2010</td>
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<td>Research and Innovation Board</td>
<td>DAVIES, Joshua; TONG, Steven; CURRIE, Bart</td>
<td>Combination antibiotic treatment for methicillin-resistant Staphylococcus aureus.</td>
<td>Project</td>
<td>1 September 2010</td>
<td>30 September 2011</td>
<td>$24,250.00</td>
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<td>Research and Innovation Board</td>
<td>GIFFARD, Philip; TONG, Steven; SPENCER, Emma; JOHNS, Tracy</td>
<td>Urine surrogates in the quality control of Chlamydia diagnosis</td>
<td>Project</td>
<td>30 September 2010</td>
<td>30 December 2010</td>
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<tr>
<td>Research and Innovation Board</td>
<td>KAESTLI, Mirjam; CURRIE, Bart; MAYO, Mark</td>
<td>The microbiota of the melioidosis bacterium Burkholderia pseudomallei in Darwin.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2010</td>
<td>$2,000.00</td>
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<td>Research and Innovation Board</td>
<td>KEARNER, Thomas; ANDREWS, Ross; CARAPETIS, Jonathan; CURRIE, Bart; CHENG, Alien; MCEVOY, James; SPEARE, Richard; SHELID, Jenny; PITTMAN, Barbara; CONNORS, Christine</td>
<td>Breaking the cycle of resistance in Galleria mellonella.</td>
<td>Project</td>
<td>1 January 2009</td>
<td>31 December 2011</td>
<td>$46,000.00</td>
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<td>Research and Innovation Board</td>
<td>TONG, Steven; GIFFARD, Philip; CURRIE, Bart; MOGGER, Ralf</td>
<td>High-throughput SNP based molecular typing of Burkholderia pseudomallei.</td>
<td>Project</td>
<td>1 October 2009</td>
<td>1 August 2010</td>
<td>$25,000.00</td>
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<td>Queensland Government (administered by Queensland Institute of Medical Research)</td>
<td>MCEVOY, James, WATSON, Shelley F, PASAI, Ciara, HOLT Deborah</td>
<td>The mechanism of acaricide resistance.</td>
<td>Project</td>
<td>1 March 2007</td>
<td>31 December 2010</td>
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<tr>
<td>Sydney Myer Fund</td>
<td>MORRIS, Peter; STEPHEN, Anna</td>
<td>Swimming Study for Severe Otitis Media</td>
<td>Project</td>
<td>1 January 2010</td>
<td>31 December 2010</td>
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<td>The Fred Hollows Foundation</td>
<td>BRIMBLECOMBE, Julie</td>
<td>Nutrition Promotion and Education in Remote Stores – What really works?</td>
<td>Project</td>
<td>18 October 2010</td>
<td>31 December 2010</td>
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<td>The Fred Hollows Foundation</td>
<td>GRIEVE, H</td>
<td>The development and implementation of a short course &quot;Evidence based nutrition approaches to improve the health of women and children&quot;</td>
<td>Project</td>
<td>18 October 2010</td>
<td>31 December 2010</td>
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<td>UNICEF</td>
<td>BAILIE, Ross; MCDONALD, Malcolm; CARAPETIS, Jonathan; EDWARDS, Keith</td>
<td>Proposal for integrating the principles of the National Guidelines for Rheumatic Fever and Rheumatic Heart Disease into the Audit and Best Practice for Chronic Disease (ABCD) program.</td>
<td>Project</td>
<td>1 March 2008</td>
<td>31 December 2010</td>
<td>$19,888.00</td>
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<td>Western Australia Department of Health</td>
<td>SENIOR, Kate; CHENHALL, Richard</td>
<td>Investigation of Young People’s Understandings of Sexual Behaviour and Sexual Risk.</td>
<td>Project</td>
<td>22 April 2009</td>
<td>31 December 2010</td>
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<td>AusAID</td>
<td>POPOVIC Mioth, Jeanne Rini</td>
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<td>Australian Academy of Science</td>
<td>BAR-ZEEV, Naor</td>
<td>Vaccination strategies to reduce ear disease in Aboriginal and Torres Strait Islander children in the Northern Territory.</td>
<td>Scholarship</td>
<td>1 January 2007</td>
<td>23 January 2010</td>
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<td>Funding Body</td>
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<td>Australian Academy of Science</td>
<td>HUGHES, Jaquelyne</td>
<td>The relationship of body composition, renal impairment and inflammatory cytokines in Indigenous persons with diabetes.</td>
<td>Scholarship</td>
<td>1 January 2008</td>
<td>31 December 2010</td>
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<td>Australian Academy of Science</td>
<td>KEARNS, Therese</td>
<td>Epidemiological study of scabies and strongyloides infections in a remote Indigenous community in the NT before and after a community wide treatment intervention with Ivermectin.</td>
<td>Scholarship</td>
<td>23 February 2009</td>
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<td>Menzies School of Health Research</td>
<td>COQUIHOUN, Samantha</td>
<td>The epidemiology and control of Rheumatic Heart Disease in Pacific Island countries (PICs), filling the gaps.</td>
<td>Scholarship</td>
<td>1 July 2009</td>
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<td>NHMRC 545239</td>
<td>BOYLE, Jacqueline</td>
<td>Polyuria and/or polydipsia in Australian Indigenous children.</td>
<td>Scholarship</td>
<td>28 June 2008</td>
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<td>NHMRC 490337</td>
<td>BABES, Imbraus</td>
<td>Endothelial function and adjunct therapies in sepsis.</td>
<td>Scholarship</td>
<td>1 January 2007</td>
<td>30 March 2010</td>
<td>$94,266.00</td>
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<td>NHMRC 490321</td>
<td>SNEILLING, Thomas</td>
<td>Rotavirus gastroenteritis in the Aboriginal population and the effect of immunisation.</td>
<td>Scholarship</td>
<td>1 June 2007</td>
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<td>NHMRC 490339</td>
<td>BAR-ZEEV, Naor</td>
<td>Vaccination to reduce ear disease in Aboriginal and Torres Strait Islander children in the Northern Territory.</td>
<td>Scholarship</td>
<td>1 January 2007</td>
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<td>NHMRC 490341</td>
<td>DINGWALL, Kyle</td>
<td>The nature of brain function recovery following abstinence from petrol sniffing.</td>
<td>Scholarship</td>
<td>1 January 2007</td>
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<td>NHMRC 490331</td>
<td>CLELAND, Nikki</td>
<td>Improving Health Promotion Practice through Continuous Quality Improvement.</td>
<td>Scholarship</td>
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<td>$66,721.00</td>
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<td>NHMRC 490339</td>
<td>MARSH, Robyn</td>
<td>Nasopharyngeal metagenomics in Indigenous children: correlations with otitis media aetiology and treatment failure.</td>
<td>Scholarship</td>
<td>1 January 2008</td>
<td>31 December 2010</td>
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<td>NHMRC 490341</td>
<td>HUGHES, Jaquelyne</td>
<td>The relationship of body composition, renal impairment and inflammatory cytokines in Indigenous persons with diabetes.</td>
<td>Scholarship</td>
<td>1 January 2008</td>
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<td>NHMRC 545239</td>
<td>KEARNS, Therese</td>
<td>Community treatment intervention with Ivermectin to reduce the prevalence of scabies and strongyloides.</td>
<td>Scholarship</td>
<td>1 January 2009</td>
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<td>NHMRC 600242</td>
<td>BARBER, Bridget</td>
<td>Improving the diagnosis, treatment and outcomes of patients infected with Plasmodium knowlesi.</td>
<td>Scholarship</td>
<td>30 June 2010</td>
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<td>NHMRC 600245</td>
<td>BOWEN, Asha</td>
<td>Randomised controlled trial of co-trimoxazole versus intramuscular penicillin for impetigo in Aboriginal children.</td>
<td>Scholarship</td>
<td>1 January 2010</td>
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<td>$79,077.00</td>
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<td>NT Research and Innovation Board</td>
<td>D’APRANO, Anita</td>
<td>TRAK Study: linking alcohol use and respiratory infections in Australian Indigenous children.</td>
<td>Scholarship</td>
<td>1 November 2010</td>
<td>31 October 2011</td>
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<td>NT Research and Innovation Board</td>
<td>HARE, Kim</td>
<td>Bacteriology of respiratory infections in Australian Indigenous children.</td>
<td>Scholarship</td>
<td>30 November 2010</td>
<td>31 December 2011</td>
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<td>NT Research and Innovation Board</td>
<td>McCALLUM, Gabrielle</td>
<td>Improving the understanding and management of bronchiolitis in Indigenous children.</td>
<td>Scholarship</td>
<td>30 November 2010</td>
<td>31 December 2011</td>
<td>$2,500.00</td>
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<td>Sidney Myer Fund</td>
<td>KEARNS, Therese</td>
<td>Ngurranguru: a developmental monitoring instrument for use with Australian Indigenous children.</td>
<td>Scholarship</td>
<td>1 January 2009</td>
<td>31 March 2012</td>
<td>$50,049.00</td>
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<td>NHMRC 336271</td>
<td>BURGESS, C; JOHNSTON, Fay; CONNORS, Christine; MODERMOOTT, Robyn; ROBINSON, Gary; BAILE, Ross</td>
<td>Implementing the Aboriginal and Torres Strait Islander Adult Health Check. Improving early detection and evaluating innovative prevention activities in remote areas.</td>
<td>Strategic Research</td>
<td>1 April 2006</td>
<td>30 June 2010</td>
<td>$229,875.00</td>
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<tr>
<td>NHMRC 336271</td>
<td>BURGESS, C; JOHNSTON, Fay; CONNORS, Christine; MODERMOOTT, Robyn; ROBINSON, Gary; O’DEA, Kerin</td>
<td>Implementing the Aboriginal and Torres Strait Islander Adult Health Check. Improving early detection and evaluating innovative prevention activities in remote areas.</td>
<td>Strategic Research</td>
<td>1 January 2005</td>
<td>31 March 2010</td>
<td>$229,875.00</td>
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<tr>
<td>NHMRC 545267</td>
<td>BAILE, Ross; SHANNON, Cindy; SEMMENS, James; ROWLEY, Kevin; SCHMIDT, David; NAGEL, Tricia; SI, Damin</td>
<td>National Research Partnership to Improve Primary Health Care Performance and Outcomes for Indigenous Peoples.</td>
<td>Strategic Research</td>
<td>1 January 2010</td>
<td>31 December 2014</td>
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<td>JTA International Pty Ltd</td>
<td>CHANG, Anne; D’APRANO, Anita; HARRISON, Nea; BAILIE, Ross</td>
<td>Australian Nurse–Family Partnership Program (ANFP) – Monitoring and Evaluation – Phase 1.</td>
<td>Sub-Contract</td>
<td>1 September 2008</td>
<td>30 June 2011</td>
<td>$318,838.00</td>
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<td>University of Queensland</td>
<td>DRABIN, Kabrina</td>
<td>A randomised controlled trial of medical prophylaxis for hypertension, renal disease and diabetes in Australian Aborigines.</td>
<td>Sub-Contract</td>
<td>2 June 2008</td>
<td>10 January 2015</td>
<td>$3,152,977.06</td>
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<tr>
<td>Department of Health and Ageing RFT 071/0607</td>
<td>BAILIE, Ross</td>
<td>The Healthy for Life Support, Collection, Analysis and Reporting Function.</td>
<td>Tender</td>
<td>1 January 2010</td>
<td>30 June 2011</td>
<td>$6,931,345.18</td>
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<td>NHMRC 315248</td>
<td>CHENHALL, Richard</td>
<td>Best practice guidelines for evaluating Indigenous residential alcohol and drug programs.</td>
<td>Training Fellowship</td>
<td>1 July 2005</td>
<td>30 June 2010</td>
<td>$266,000.00</td>
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<td>NHMRC 410304</td>
<td>TUNERS, Rebecca</td>
<td>Investigation of cardiac autoantigens identified by screening a cDNA library with acute rheumatic fever sera.</td>
<td>Training Fellowship</td>
<td>1 January 2007</td>
<td>30 June 2011</td>
<td>$24,000.00</td>
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<td>NHMRC 437008</td>
<td>ANDREWS, Ross</td>
<td>Prevention of pneumococcal diseases, streptococcal disease and influenza among Indigenous populations.</td>
<td>Training Fellowship</td>
<td>1 January 2007</td>
<td>31 December 2010</td>
<td>$24,000.00</td>
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<tr>
<td>NHMRC 410335</td>
<td>MCDONALD, Elizabeth</td>
<td>The Better Environmental Health, Housing and Child Health Study (BEHHCH).</td>
<td>Training Fellowship</td>
<td>1 January 2008</td>
<td>31 December 2011</td>
<td>$279,000.00</td>
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<tr>
<td>NHMRC 410340</td>
<td>SMILL, Sue</td>
<td>Optimising prevention and vaccination policy for pneumococcal disease, influenza and RSV in Indigenous Australians.</td>
<td>Training Fellowship</td>
<td>1 January 2008</td>
<td>31 December 2011</td>
<td>$109,300.00</td>
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<td>NHMRC 542641</td>
<td>JOHNSTON, Vanessa</td>
<td>Researching effective strategies to tackle tobacco use in Indigenous populations in Northern Australia.</td>
<td>Training Fellowship</td>
<td>1 January 2009</td>
<td>31 December 2012</td>
<td>$96,000.00</td>
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<td>NHMRC 542645</td>
<td>MINIGI, Gabriela</td>
<td>Immune regulation during uncomplicated and severe P. falciparum and P. vivax malaria.</td>
<td>Training Fellowship</td>
<td>1 April 2009</td>
<td>31 March 2013</td>
<td>$285,000.00</td>
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<tr>
<td>NHMRC 542651</td>
<td>BRIMBLECOMBE, Julie</td>
<td>Improving food systems in remote Aboriginal and Torres Strait Islander communities for better food security.</td>
<td>Training Fellowship</td>
<td>1 January 2009</td>
<td>31 December 2012</td>
<td>$285,000.00</td>
</tr>
<tr>
<td>NHMRC 605839</td>
<td>TONG, Steven</td>
<td>Investigating the genomics of significant bacterial pathogens in northern Australia.</td>
<td>Training Fellowship</td>
<td>1 January 2010</td>
<td>31 December 2013</td>
<td>$65,000.00</td>
</tr>
<tr>
<td>NHMRC 605831</td>
<td>YEO, Tsin</td>
<td>Consequences of decreased vascular nitric oxide bioavailability in the pathogenesis of severe malaria</td>
<td>Training Fellowship</td>
<td>1 January 2010</td>
<td>31 December 2013</td>
<td>$245,022.40</td>
</tr>
<tr>
<td>NHMRC 605833</td>
<td>NAGEL, Tricia</td>
<td>Best practice of Early intervention, Assessment and Treatment (BEAT) of depression and co morbid disorders.</td>
<td>Training Fellowship</td>
<td>1 January 2010</td>
<td>31 December 2013</td>
<td>$185,500.00</td>
</tr>
<tr>
<td>NHMRC 605837</td>
<td>MAPLE-BRIONN, Louise</td>
<td>Improving management of diabetes and chronic kidney disease in Indigenous Australians</td>
<td>Training Fellowship</td>
<td>1 January 2010</td>
<td>31 December 2013</td>
<td>$265,000.00</td>
</tr>
<tr>
<td>NHMRC 605839</td>
<td>SINGH, Gurmeet</td>
<td>To identify markers of chronic disease, study their onset and progression over time in an Aboriginal birth cohort</td>
<td>Training Fellowship</td>
<td>1 January 2010</td>
<td>31 December 2013</td>
<td>$265,000.00</td>
</tr>
</tbody>
</table>
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AFL Foundation
Amart All Sport, Darwin
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Dr David Bernshaw
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Casuarina Shopping Centre
Channel 9
Channel 9, Darwin
Channel Ten
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The Hon Austin Asche AC QC
The Hon John Dawkins
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Hawthorn Football Club
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Mr Ray Martin
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Mr Ray Martin
Sir Gustav Nossal AC CBE
Prof Lowetja O’Donoghue CBE AM
Ms Dean Ricci
Mr Kevin Shedy
Mr David Smorgon OAM
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Ms Margaret Brewer
Prof Bart Currie
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Prof Michael Good
Prof Richard Gye AO
Dr John Hargrave AO MBE
Mrs Susan Hutton
Prof David Kemp FAA
Prof John Matthews AM
Mr Ray Norman AM
Dr Brian Reid
Dr K S Siriprakash
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Life Members
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Mrs Susan Hutton
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Mr Ray Wilson
Mr Bob Woodward
Mr Paul Zimmerman
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Crooze Restaurant, Cullen Bay
Goldsmith jewellers, Darwin City
Greater Western Sydney Football Club
Hugh and Sue Bradley
John Gamble/Boomisbary Equities
Mr Michael Gunness, Member for Fannie Bay
Holiday Inn Esplanade
Heidi Froehling
Jomar Bioscience
Kerry’s Automotive Group
Melville Island Lodge Pty Ltd
Night Riff Builders
QS Services
Redco Investments
Mr Richard Ryan AO
Supporters, and sponsors
Anniversary Partners
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Bob Woodward and Associates
Hugh and Sue Bradley
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Heidi Froehling
Jomar Bioscience
Kerry’s Automotive Group
Melville Island Lodge Pty Ltd
Night Riff Builders
QS Services
Redco Investments
Mr Richard Ryan AO
### Income Statement
Menzies School of Health Research for the Year Ended 31 December 2010

<table>
<thead>
<tr>
<th>Income from continuing operations</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australian Government Financial Assistance</td>
<td>$20,275,687</td>
<td>$14,389,998</td>
</tr>
<tr>
<td>NT Government Funding</td>
<td>$6,223,675</td>
<td>$4,327,545</td>
</tr>
<tr>
<td>Fees and Charges</td>
<td>$2,944,755</td>
<td>$3,400,238</td>
</tr>
<tr>
<td>Investment Income</td>
<td>$2,958,578</td>
<td>$3,374,229</td>
</tr>
<tr>
<td>Consultancy and Contract Research</td>
<td>$4,692,297</td>
<td>$4,936,950</td>
</tr>
<tr>
<td>Gain (Loss) on Disposal Of Assets</td>
<td>$(5,167)</td>
<td>$(1,374,229)</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>$1,782,085</td>
<td>$1,722,975</td>
</tr>
<tr>
<td><strong>Total Revenue from Continuing Operations</strong></td>
<td><strong>$37,341,903</strong></td>
<td><strong>$30,644,094</strong></td>
</tr>
<tr>
<td><strong>Total Income from Continuing Operations</strong></td>
<td><strong>$37,341,903</strong></td>
<td><strong>$30,644,094</strong></td>
</tr>
</tbody>
</table>

### Expenses from Continuing Operations

<table>
<thead>
<tr>
<th>Cash Flows from Investing Activities</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Related Expense</td>
<td>$20,595,903</td>
<td>$13,016,519</td>
</tr>
<tr>
<td>Depreciation</td>
<td>$(414,418)</td>
<td>$(654,549)</td>
</tr>
<tr>
<td>Repairs and Maintenance</td>
<td>$(537,763)</td>
<td>$(554,017)</td>
</tr>
<tr>
<td>Bad and Doubtful Debts</td>
<td>$(1,000)</td>
<td>$(3,100)</td>
</tr>
<tr>
<td>Other Expenses</td>
<td>$(10,789,037)</td>
<td>$(8,962,408)</td>
</tr>
<tr>
<td><strong>Total Expenses from Continuing Operations</strong></td>
<td><strong>$32,563,219</strong></td>
<td><strong>$29,495,573</strong></td>
</tr>
<tr>
<td><strong>Operating Result from Continuing Operations</strong></td>
<td><strong>$4,778,684</strong></td>
<td><strong>$1,149,521</strong></td>
</tr>
<tr>
<td><strong>Operating Result Attributable to Members of MSHR</strong></td>
<td><strong>$4,778,684</strong></td>
<td><strong>$1,149,521</strong></td>
</tr>
</tbody>
</table>
Statement of Financial Position
Menzies School of Health Research as at 31 December 2010

<table>
<thead>
<tr>
<th>Assets</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and Cash Equivalents</td>
<td>36,712,746</td>
<td>33,993,268</td>
</tr>
<tr>
<td>Account Held in Trust</td>
<td>-</td>
<td>803,069</td>
</tr>
<tr>
<td>Trade and Other Receivables</td>
<td>3,863,719</td>
<td>1,325,043</td>
</tr>
<tr>
<td>Other Non-Financial Assets</td>
<td>614,316</td>
<td>429,918</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>41,200,861</td>
<td>36,547,281</td>
</tr>
<tr>
<td><strong>Non-Current Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property, Plant and Equipment</td>
<td>868,234</td>
<td>980,790</td>
</tr>
<tr>
<td>Other Financial Assets</td>
<td>31,391</td>
<td>51,684</td>
</tr>
<tr>
<td><strong>Total Non-Current Assets</strong></td>
<td>909,625</td>
<td>1,032,474</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>42,100,486</td>
<td>37,580,055</td>
</tr>
</tbody>
</table>

| Current Liabilities            |          |          |
| Trade and Other Payables       | 652,586  | 662,738  |
| Account Held in Trust          | -        | 803,069  |
| Provisions                     | 2,300,107| 1,682,175 |
| Other Liabilities              | 82,075   | 15,916   |
| **Total Current Liabilities**  | 3,034,769 | 2,350,834 |

| Non-Current Liabilities        |          |          |
| Provisions                     | 217,790  | 372,599  |
| **Total Non-Current Liabilities** | 217,790 | 372,599 |
| **Total Liabilities**          | 3,252,559 | 2,723,433 |
| **Net Assets**                 | 38,828,928 | 36,075,194 |

| Equity                          |          |          |
| Reserves                        | 3,475,969 | 3,359,483 |
| Retained Earnings               | 35,352,959 | 30,915,711 |
| **Total Equity**                | 38,828,928 | 36,075,194 |

Statement of Changes in Equity
Menzies School of Health and Research for the Year Ended 31 December 2010

<table>
<thead>
<tr>
<th>Reserves</th>
<th>Retained Surplus</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,475,969</td>
<td>27,828,839</td>
<td>30,304,808</td>
</tr>
<tr>
<td><strong>Profit or Loss</strong></td>
<td><strong>3,739,521</strong></td>
<td><strong>3,739,521</strong></td>
</tr>
<tr>
<td><strong>Net Revaluation loss on Investments</strong></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Comprehensive Income</strong></td>
<td><strong>3,484,535</strong></td>
<td><strong>31,577,319</strong></td>
</tr>
<tr>
<td>Transfers</td>
<td>666,648</td>
<td>(666,648)</td>
</tr>
<tr>
<td><strong>Balance at 31 December 2009</strong></td>
<td><strong>3,118,887</strong></td>
<td><strong>30,910,671</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reserves</th>
<th>Retained Surplus</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,159,483</td>
<td>31,915,711</td>
<td>36,075,194</td>
</tr>
<tr>
<td><strong>Profit or Loss</strong></td>
<td><strong>4,778,684</strong></td>
<td><strong>4,778,684</strong></td>
</tr>
<tr>
<td><strong>Net Revaluation loss on Investments</strong></td>
<td>(24,951)</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Comprehensive Income</strong></td>
<td><strong>4,753,732</strong></td>
<td><strong>35,990,068</strong></td>
</tr>
<tr>
<td>Transfers</td>
<td>(341,437)</td>
<td>-</td>
</tr>
<tr>
<td><strong>Balance at 31 December 2010</strong></td>
<td><strong>3,417,695</strong></td>
<td><strong>35,651,995</strong></td>
</tr>
</tbody>
</table>

Total Equity | 38,828,928 | 36,075,194 |
## Statement of Cash Flows
**Menzies School of Health Research for the Year Ended 31 December 2010**

<table>
<thead>
<tr>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td><strong>Cash Flows from Operating Activities</strong></td>
<td></td>
</tr>
<tr>
<td>Australian Government Grants</td>
<td>18,956,901</td>
</tr>
<tr>
<td>NT Government Funding</td>
<td>6,003,374</td>
</tr>
<tr>
<td>Receipts from Student Fees</td>
<td>2,704,855</td>
</tr>
<tr>
<td>Interest Received</td>
<td>2,358,220</td>
</tr>
<tr>
<td>Other Grant Receipts</td>
<td>3,768,714</td>
</tr>
<tr>
<td>Other Receipts</td>
<td>1,918,962</td>
</tr>
<tr>
<td>Payments to Suppliers</td>
<td>(91,428,375)</td>
</tr>
<tr>
<td>Payments to Employees</td>
<td>(20,421,880)</td>
</tr>
<tr>
<td><strong>Net Cash Provided by Operating Activities</strong></td>
<td>2,934,793</td>
</tr>
<tr>
<td><strong>Cash Flows From Investing Activities</strong></td>
<td></td>
</tr>
<tr>
<td>Share Dividends Received</td>
<td>-</td>
</tr>
<tr>
<td>Proceeds from Sale of Plant and Equipment</td>
<td>9,591</td>
</tr>
<tr>
<td>Payments for Property, Plant and Equipment</td>
<td>(204,307)</td>
</tr>
<tr>
<td>Payment for Financial Assets</td>
<td>-</td>
</tr>
<tr>
<td><strong>Net Cash Outflow from Investing Activities</strong></td>
<td>(194,716)</td>
</tr>
<tr>
<td><strong>Net Increase in Cash and Cash Equivalents</strong></td>
<td>2,749,478</td>
</tr>
<tr>
<td><strong>Cash and Cash Equivalents at the Beginning of the Year</strong></td>
<td>33,993,268</td>
</tr>
<tr>
<td><strong>Cash and Cash Equivalents at End of the Year</strong></td>
<td>36,742,746</td>
</tr>
</tbody>
</table>

Menzies wishes to thank the many individuals and communities who have granted permission to use photographic images of themselves and their children throughout this publication.