Red Centre of medical innovation

Alice Springs is a new player in health research and delivery

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London, Boston, Toronto, Melbourne... and Alice Springs. Although there may be little in common between these major cities and the heart of Australia’s outback, an announcement this week brings the Red Centre into the company of international players in translational health research, including prestigious institutions such as Imperial College Healthcare in Britain and Johns Hopkins Medicine in the US.

This week, the Central Australia Academic Health Science Centre was given the official seal of approval by the National Health and Medical Research Council. The Central Australia consortium was one of only two centres recognised as a centre of innovation in regional health for its leadership in health research and delivery of evidence-based healthcare.

And now there's opportunity in the Red Centre to do even more. It may well be the most remote academic health science centre in the world, and perhaps the only academic health science centre in the world led by Aboriginal people. With such esteemed recognition for this remote, Aboriginal-led, evidence-based healthcare collaboration, it is hoped that public and private support will also follow.

As a model well established abroad and gaining momentum in Australia, academic health science centres are partnerships between health services, universities and medical research institutes whose collaborative work ensures that translational health research leads to evidence-based care and better health outcomes for patients.

For the 11 partners behind the Central Australia partnership, recognition as a centre for innovation in regional health acknowledges the outstanding collaboration that has existed in this region for several years, and particularly the leadership offered by the Aboriginal sector.

Working with the other partners in the consortium, Aboriginal community-controlled health services are taking the lead in identifying and defining viable solutions for the health inequities experienced in the region.

The work of the Central Australia partners is practical and responsive. Interested in resolving what had become a troubling issue at Alice Springs Hospital, a resident physician researcher initiated a study that found nearly half of all admitted Aboriginal patients had self-discharged from the hospital in the past, with physician, hospital and patient factors contributing to this practice.

The research findings were used to develop a self-discharge risk assessment tool that is now routinely used in hospital care, and to expand the role of Aboriginal liaison officers within the hospital.

Considering the vast and remote geographical area — more than one million square kilometres — and the health challenges experienced particularly by Aboriginal residents who make up about 45 per cent of the region’s population of about 55,000 people, the Central Australia consortium faces unique and significant challenges. In this respect, Alice Springs may be more like Iqaluit in the Canadian Arctic than London or Baltimore.

But in other ways this relatively small academic health science centre may be at an advantage. With its closely knit network of healthcare providers, medical researchers, medical education providers and public health experts working together, community-driven approaches to identifying issues and developing evidence-based solutions have become a standard approach in Central Australia.

In this setting of high need and limited resources, working collectively is sensible, practical and necessary. Importantly, there is the possibility to do a lot more.

The consortium hopes such recognition will help to attract top healthcare providers and researchers, to increase educational offerings and to develop local talent, especially Aboriginal people.

The evidence is resounding. A research oasis in the desert, this centre for innovation is fertile ground for investment by government, corporations and philanthropists alike.

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Alice Springs, a research oasis in the Territory desert