



**TACTICS Centre of Research Excellence**  
**PhD and Masters of Research Scholarships**  
**INFORMATION SHEET**

## 1. Background

The vision of the Centre for Research Excellence (CRE) in Targeted Approaches to Improve Cancer Services for Aboriginal and Torres Strait Islander Australians (TACTICS) is to improve cancer outcomes for Aboriginal and Torres Strait Islander people and their communities. The TACTICS CRE is achieving this vision through an Indigenous-led program of innovative, high-quality, applied research aimed at improving a broad range of cancer-related health services.

TACTICS is funded by the National Health and Medical Research Council (NHMRC) from 2019-2023 and administered at Menzies School of Health Research (Menzies).

A core component of TACTICS is building capacity in the health research workforce by training future research leaders, practitioners, and research users. The program is building the capacity of Indigenous and non-Indigenous early-career researchers to carry out innovative, collaborative, outcomes-focused work in partnership with Indigenous people.

The TACTICS CRE is offering scholarships to support PhD candidates and Masters of Research students. Several projects have been outlined below for potential candidates; however, we also encourage the design and development of new projects consistent with any of the TACTICS program's three key areas:

1. Increase cancer prevention and early detection through immunisation and screening;
2. Improve diagnosis and treatment through health service innovation; and
3. Provide appropriate care to enhance psychosocial wellbeing of Indigenous cancer survivors, their partners and carers across the cancer continuum.

For more information on the TACTICS CRE visit [www.tactics-cre.com](http://www.tactics-cre.com)

## 2. Value of the Scholarship

The scholarship will be offered for 1 year (subject to satisfying course academic requirements) and will include a tax-free living stipend of up to \$27,580. The candidate will be encouraged to seek scholarship funding elsewhere for the duration of their candidature.

Alternatively, if the candidate has already secured scholarship funding, we can provide a top-up scholarship to increase their existing stipend by \$9,000 per year. A top-up scholarship is available for a maximum of three years or for the remaining life of the CRE, whichever term is less.

## 3. Scholarship Provisions

In addition to the financial provisions of the award, scholarship holders will benefit from a range of professional development opportunities throughout their TACTICS CRE scholarship tenure (e.g. writing retreats, webinars, research roundtables, TACTICS travel & training grants).

The student will also have access to academics and practitioners at participating institutions of the CRE, including Aboriginal and Torres Strait Islander researcher mentors.



#### 4. Eligibility

- Applicants must be enrolled in, or satisfy the admission requirements for entry to, a PhD program or Masters by Research at an Australian university
- The student must have one of the Chief Investigators (CIs) or Associate Investigators (AIs) of the TACTICS CRE as their supervisor or co-supervisor. A list of CIs and AIs can be obtained by visiting [www.tactics-cre.com](http://www.tactics-cre.com)
- Must be a citizen or permanent resident of Australia
- Part-time candidature may be acceptable with negotiation
- **Aboriginal and Torres Strait Islander candidates are strongly encouraged to apply**

#### 5. Application process

Applicants should submit the following:

- Completed application form
- Current CV
- Copies of certified academic transcripts
- Proof of Residency (not required for Australian citizens)
- Copy of submitted PhD or Masters by Research Candidature Application or proof of enrolment (if applicable)

**Please send your application and supporting documents to Dr Bronwyn Morris by COB Friday 14<sup>th</sup> August 2020 at [Bronwyn.Morris@menzies.edu.au](mailto:Bronwyn.Morris@menzies.edu.au)**

#### 6. Current project opportunities

Project Title	Summary	Supervisors
Quantifying inequalities in health service use and costs of people with gynaecologic cancer	<p>While the overall mortality rate for cancer has declined, marked differences still remain in the likelihood of survival. By one estimate 13% of cancer deaths were attributable to socioeconomic inequalities. Part of the quest to overcome these stark discrepancies involves understanding how patterns of health service use differ between sub-population groups, if there is equal investment in health care, and how out of pocket fees may effect access. This project will focus on gynaecologic cancers, and utilise a linked administrative data, CancerCostMOD. CancerCostMOD links records from the Queensland Cancer Registry with their Admitted Patient Data Collection, Emergency Department Information System, Medicare Benefits Schedule and Pharmaceutical Benefits Scheme claims records. This project aims to:</p> <ul style="list-style-type: none"> <li>• Quantify the health system use, government expenditure and patient out of pocket fees for gynaecologic cancer, including hospital admitted patient services, out-of-hospital services and prescription pharmaceuticals;</li> <li>• Determine any inequalities in health system use, government expenditure and patient out of pocket fees between Indigenous and non-Indigenous women diagnosed with gynaecologic cancer;</li> <li>• Identify contributing factors to these inequalities, such as: staging at diagnosis; uptake and compliance with therapy; and differences in therapy type;</li> <li>• Quantify the cost-effectiveness and equity impacts of proposed treatment options, which have clinical trial evidence of clinical efficacy.</li> </ul>	<p>AProf Emily Callander (Griffith University)</p> <p>Dr Abbey Diaz, Prof Gail Garvey (Menzies School of Health Research)</p>



<p>Adverse Cardiovascular Events After Cancer for Aboriginal and Torres Strait Islander people</p>	<p>Cardio-oncology is a new clinical field that aims to prevent, monitor, and treat cardiovascular disease (CVD) among people who have been diagnosed with cancer. This project aims to use a combination of epidemiological, health economic, and qualitative methods to provide the first comprehensive Australian evidence of:</p> <ol style="list-style-type: none"> <li>1. The prevalence of pre-existing and treatment-induced CVD in people diagnosed with cancer and its effect on their clinical course, outcomes and health care use and costs.</li> <li>2. Variations in the above between under-served populations (Aboriginal and Torres Strait Islander people, migrants to Australia, and people living in non-urban and/or the most socioeconomically disadvantaged areas) and other Australians.</li> <li>3. Patients' and health professionals' experiences of cancer treatment-related decision-making in the context of heightened cardiovascular risk.</li> </ol> <p>Such information is necessary to develop optimal and equitable cardio-oncological care in Australia.</p> <p>The aims will be achieved through the epidemiological analysis of linked administrative data (Cancer Registry, Hospital, Emergency and Death Registrations data) and in-depth qualitative interviews with patients and health professionals. Under the supervision of Professor Gail Garvey, Professor Joan Cunningham, and Dr Abbey Diaz, the successful student will lead a review of the literature, data collection, management and analysis, and write-up of scientific manuscripts that will contribute towards their thesis. The successful student will also be expected to engage in professional activities and dissemination of research findings, such as the presentation of their work at scientific and community meetings.</p>	<p>Dr Abbey Diaz, Prof Gail Garvey, Prof Joan Cunningham (Menzies School of Health Research)</p>
<p>Understanding survivorship amongst Aboriginal and Torres Strait Islander cancer survivors</p>	<p>This study aims to gain an in-depth, comprehensive understanding of what survivorship means to Aboriginal and Torres Strait Islander cancer survivors. The proposed study will use qualitative in-depth, open-ended interviews to elicit a range and depth of individual values, perspectives, beliefs and experiences relating to survivorship in Aboriginal and Torres Strait Islander cancer survivors. Participants from across the survivorship continuum (1-2 years, 3-5 years and &gt;5 years after completion of treatment) who have completed active treatment will be eligible. This study has the potential to improve the wellbeing of Aboriginal and Torres Strait Islander cancer survivors across Australia. It will help us to understand the contributors to the known inequities in cancer outcomes experienced by Aboriginal and Torres Strait Islander cancer survivors, and will inform support programs and future work for culturally-appropriate survivorship care.</p>	<p>Prof Gail Garvey, Prof Joan Cunningham, Dr Kate Anderson (Menzies School of Health Research)</p>
<p>Patterns in end-of-life care in Aboriginal and non-Aboriginal people who have died of cancer who were admitted into hospital</p>	<p>There is a requirement to address the end-of-life care needs of Aboriginal and Torres Strait Islander people with cancer. The burden of cancer impacting Aboriginal and Torres Strait Islander people is almost twice as high as non-Aboriginal people, with higher rates of high fatality cancers (e.g. lung and liver) and lower incidence of cancers with better survival (e.g. breast and melanoma). In addition to cancer screening, prevention, treatment and survivorship, there is also a need to assess the end-of-life care utilised by Aboriginal and Torres Strait Islander people. As the demand for palliative care services in Australia increases due to the increasing prevalence of cancer and other chronic conditions, the assessment of the ability of hospital services to meet varying needs of specific population groups with a range of cultural, geographic and socio-demographic characteristics requires consideration. Due to the disproportionate burden of</p>	<p>Dr Kalinda Griffiths (University of NSW); Prof Gail Garvey, Prof Joan Cunningham (Menzies School of Health Research)</p>



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<p>in NSW 2000-2014</p>	<p>cancer impacting Aboriginal people, exploring the patterns of palliative care and palliative care-related services can provide important information on the service requirements for this population.</p> <p>This project will identify and explore patterns of palliative care and palliative care-related services for Aboriginal and Torres Strait Islander people with cancer.</p>	
<p>New Projects To Be Developed</p>	<p>We encourage the design and development of new projects consistent with the TACTICS program's three key areas:</p> <ol style="list-style-type: none"> <li>1. Increase cancer prevention and early detection through immunisation and screening;</li> <li>2. Improve diagnosis and treatment through health service innovation; and</li> <li>3. Provide appropriate care to enhance psychosocial wellbeing of Indigenous cancer survivors, their partners and carers across the cancer continuum.</li> </ol> <p>Please contact Dr Bronwyn Morris <a href="mailto:Bronwyn.Morris@menzies.edu.au">Bronwyn.Morris@menzies.edu.au</a> to discuss your project ideas and to identify potential TACTICS supervisors.</p>	<p>A TACTICS Chief and/or Associate Investigator as part of your supervisory team, with other supervisors as appropriate</p>