A DESKTOP REVIEW OF ABORIGINAL HEALTH PUBLICATIONS FROM SELECTED SOURCES

Executive Summary

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For

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EXECUTIVE SUMMARY

Introduction

The CRCAH is currently exploring options for a future entity to carry on the work of the CRCAH beyond June 2010. As part of this process, the CRCAH is exploring ways of developing a research agenda for any such new entity. The scope of this report is based on 12 identified Aboriginal health research providers, 12 identified priority research topics and a set of 6 questions.

Identified research providers

- Menzies School of Health Research
- Melbourne University, Onemda VicHealth Koori Health Unit
- University of Queensland
- Sax Institute
- Telethon Institute for Child Health Research
- Flinders University
- Australian Institute of Aboriginal and Torres Strait Islander Studies
- Latrobe University
- Queensland Institute of Medical Research
- University of NSW, Muru Marri Indigenous Health Unit
- Charles Darwin University
- Baker Institute

Identified priority research topics

- Life expectancy, morbidity and mortality – patterns and causes etc.
- Effectiveness of key policy instruments, such as Framework Agreements, Regional Plans.
- Primary health care expenditure; and methods for assessment of need
- Health care funding models
- Effectiveness and sustainability of community controlled health services
- Contribution of mainstream primary care services
- Effective (and efficient) strategies to reduce risk behaviours, including the costs and benefits of health checks
- Effective and (efficient) interventions in priority areas, including new MBS items
- Effective and (efficient) interventions in community-based health promotion
- Primary health care's contribution to resilience
- Workforce
- The social determinants of Aboriginal health

Questions

- Aboriginal health peer-reviewed research outputs in the past 5 years;
- Other Aboriginal health written research outputs in past 5 years
- Aboriginal health research projects underway and plans for the next 5 years
- Number of personnel currently involved in Aboriginal health research
- Priority of Aboriginal health research in organisation's strategic directions
- Current policy-relevant research in the 12 key topics or plans to be involved in policy-relevant research in any of these areas over the next 5 years

Summary of findings

What are the capacities and interests that potential research partners have to contribute?

This desktop review of publications and research projects suggests that:

- All institutions are actively collaborating in their research endeavours which will continue to enhance capacity.
- There has been a predominance of clinical research compared to social action research, policy research and policy impact assessment type research.
- More recently, there is a trend towards research projects that contribute to building an understanding of the structural and political Indigenous health context. Much of the work in the areas of social determinants of health and related policies appears to have been supported in collaboration with the CRCAH.
- Those institutions that seem to have a commitment to a future program of research in this structural/policy domain include: Flinders University (various structural determinants), IATSIS (especially national policy review), Onemda (Victorian policy focus) and Muru Marri. These institutions also have a track record in social determinants research and capacity to carry a program of such research in future. The Telethon Institute's focus on Indigenous Health funding models appears to be a significant contribution in this domain, one that few others are pursuing with this scale of project. Sax Institute has largely focused on clinical areas but is interested in pursuing policy research in future.
- Menzies continues to be very active in the evaluation of particular health services and initiatives. The extent to which this work is influencing future health service delivery models and practices is a furtive area for future research, particularly if a synthesis could establish effective influencing strategies.
- Institutions with a clinical research focus include: Baker, Qld Institute of Medical Research, Menzies and Flinders University. Generally, those institutions have a community development and empowerment approach built into their research. This is most explicit in the instance of Muru Marri and Onemda.
- Flinders University appears to have strong capacity to cover a broad range of research topics and models in the area of Indigenous Health.

What are the capacities that the Indigenous health sector has to contribute?

- All 12 institutions support Indigenous trainees.
- This review included only a couple of Indigenous health organizations. There is evidence of increasing evidence of the community-based Indigenous health /research organizations

taking an action research approach and working in close collaboration with Indigenous people.

- Indigenous health research in the 12 institutions appears to be dominated by non-Indigenous researchers. However, there is a pattern of those researchers often working closely with Indigenous people and communities in ways that build capacity and create community benefits.
- The research capacity and products of Flinders University and Maru Marri stand out in the area of building Indigenous health workforce capacity. Maru Murri is actively involved in sponsorship of Indigenous researchers and health professionals.
- While the research agenda of Sax Institute has largely focused on clinical areas, an interest in broader policy research leading to reforms in the health system appears to be an area of interest for future research.

How can these capacities be strengthened?

- Of the 12 research areas across the 12 institutions, the least amount of research is occurring in the following areas:
  - Effective health care expenditure models – this should be related to policy research and consider impact assessment approaches. The NHMRC longitudinal R&D being undertaken through Muru Marri could be an important input to this type of research program.
  - Effectiveness of community controlled health care models/approaches
  - Ill-health prevention/resilience – there is definitely an opportunity to develop a future research agenda that develops preventative strategies based on the learning from the existing body of social determinants and policy research.

- There may be a case for improving policy research models to ensure that key policy processes and decision-makers are engaged and that research/policy timeframes are better coordinated. This comment is based, in part, on this review and the fact that in most fields it has been challenging to effectively implement social action research in the policy domain in ways that have real influence on outcomes.
- Throughout this document, a few key researchers appear many times and across institutions. Collaborations are necessary and beneficial. It may also be necessary to adopt a mentoring and championing program for researchers to develop a greater number of 'star performers' in this field.
- More effort could be directed to developing Indigenous health workers across the board and to training and incentives to support retention of health professionals in Indigenous communities, particularly remote communities.
- Menzies is active in the evaluation of particular health services and initiatives. The extent to which this work is influencing future health service delivery models and practices is a furtive area for future research, particularly if a synthesis could establish effective influencing strategies.