



14th Australasian Viral Hepatitis Conference

1-3 August 2024

Darwin Convention Centre, Garamilla (Darwin), Larrakia Country, Northern Territory

"Strength in Unity"

Session: Strength in Unity

Title of Talk : Unity Through Pathways

Presenter Mark Mayo



Acknowledgement of Country

I acknowledge the Larrakia people as the Traditional Custodians of the land on which we meet today. I pay my respects to their Elders past and present.



Descendent of the Mudburra (Aboriginal) people, from the Northern Territory, and Mabuiag and Badu (Torres Strait Island) people, from Queensland.



Grandmother and Father are part of the "Stolen Generation" in the Northern Territory.





https://australian.museum/learn/cultures/atsi-collection/cultural-objects/indigenous-australia-flags

Mother is from England Nurse for 45 years



Health Heritage Science Health Researcher 32 years (2024)







Menzies School of Health Research



Menzies Mob NAIDOC March Darwin, NT, 2024



- Menzies School of Health Research is located on the grounds of the Royal Darwin Hospital.
- Medical Research Institute focused on improving health and wellbeing of people in the Northern Territory and our work expands nationally and internationally through our research collaborations.
- Menzies works with over 60 Aboriginal communities across The Northern Territory.
- Menzies has been doing Medical research in the Northern Territory and overseas for the past 38+ years.
- We collaborate broadly with other researchers, policy makers and health and service providers.
- We provide research training and engage a growing number of Masters and PhD students to help build tomorrow's health workforce.
- Menzies is a major partner of Charles Darwin University.
- Largely funded through competitive research grants in addition to funding from the Northern Territory Government.



Research at Menzies











Ear Disease in Children in the NT

> Petrol Sniffing in the NT

Mapping the Malaria Genome

Kidney Disease

COVID

Melioidosis



Burkholderia mayonis

New Bacterial Species!!!



Artwork by Jayde Hopkins



Growing a Local Health and Research Workforce in the Northern Territory

- The NT has some of the greatest disparities in health outcomes nationally.
- It also has some of the greatest disparities in education outcomes with fewer than 50% of NT youth completing high school.
- The Northern Territory faces both a health and health workforce crisis, due in part to its reliance on costly fly-in-fly-out health care workers.
- The current fly-in-fly-out model, does not train or develop a local NT health workforce.
- With a majority of Aboriginal people living in remote locations throughout the territory and high percentage of Aboriginal Territorians having no paid employment. There is potential to grow a local health workforce by overcoming the educational barriers faced by our widely dispersed NT population.
- Young Territorians are eager to learn and want to make a difference to their communities but have the fewest opportunities to do so due to remoteness, health, and social disadvantages.
- Developing the future NT health workforce requires sustained innovative, adaptive, and systemic changes to deliver education and local training opportunities.







The Ramaciotti Regional and Remote Health Sciences Training Centre

(Menzies Ramaciotti Centre)



alth Management Asset Management Corporate Trust About Sustainability Insights C



Funding and Establishment of Training Centre:

- Menzies wanted to develop a Centre that would facilitate growing a local health and research workforce through educational and training pathways for youth
- In early 2019 Menzies applied for the 1 million dollars Perpetual Ramaciotti

Biomedical Research Award.

- In late 2019 Menzies was successful and awarded the funding.
- In 2020 the The Ramaciotti Regional and Remote Health Sciences
 Training Centre also called the Menzies Ramaciotti Centre was established.







The Ramaciotti Regional and Remote Health Sciences Training Centre



Creating pathways

Providing opportunities

Training tomorrow's health workforce

enzies

Menzies Ramaciotti Centre Vision and Aims and Partnerships



The Centre's **vision** is "to design and deliver innovative training models that build the capabilities of the health and biomedical workforces in regional and remote Australia"

Our aims :

- To achieve systemic and sustainable health and education improvements across the Northern Territory (NT).
- Engage with youth throughout the Northern Territory.
- Provide Training programs and pathways for youth into the Health and Research workforce.
- Collaborate with existing youth training partners and programs that support youth into further education or the workforce.
- Current partners are IAHA, SEDA, NT Government, CDU and Darwin High School.

Partnerships













Remote Community Engagement



MENZIES HealthLAB

Celebrating 10 year's 2014 to 2023

The Menzies HealthLAB has been running for 11 years.

Health Lab started in 2014 with funding from the Rotary Club of Darwin.

Health Lab is an innovative, interactive and educational travelling health program which measures biomedical risk factors for chronic diseases from a mobile laboratory.

HealthLAB aims to directly engage the public, with a focus on youth and Aboriginal communities, to educate people about positive lifestyle choices and taking ownership of their health.

HealthLAB works closely with the Menzies Ramaciotti Centre to engage youth and show them opportunities the Centre has for future learning.





Community Engagement – Activities







• CSIRO Young Indigenous Women's STEM Academy students

- Visit to schools to talk with year 11 and 12 students about pathways into health careers
- Attend public events such as the "Deadly Cup Carnival " "NAIDOC Week"
- Take part in the CDU National Science Week event called "Bite of Science"
- Other events





Pathways and Training Opportunities







The Centre allows us to be flexible and has currently been providing training to students on different pathways:

- Work experience
 - Traineeships
- Pre-university training
- University cadetships
- Postgraduate training and research

The Centre looks to find and offer scholarships to support students during their study.







Pathways and Training Opportunities





We have a student-centered approach and offer laboratory and nonlaboratory training programs. Training is tailored for each student's interests, background, and skill level.







The Menzies Ramaciotti Centre Leadership and Confidence



- The Youth Advisory Group advises the Centre on the direction, progress, and functioning of the Centre, from a youth perspective.
- It also provides advice on the design and suitability of training and career development resources.
- It provides the opportunity for youth to develop leadership skills.

Student Pastoral Care



- Pastoral care is facilitated by our Co-Leads, the Centre staff.
- We facilitate mentorship during and after the training experience.
- We want to create a safe and friendly environment for all our students and staff.



Pathways and Training Outcomes



60% (55)

youth engaged continue education pathway or have moved into the workforce or both

* 50% of the students have identified as Aboriginal and or Torres Strait Islander.

* 95% of our scholarships have been awarded to Aboriginal and or Torres Strait Islander. As per funders requests.



IN FOCUS https://doi.org/10.1071/MA22031

Building health workforce capacity in Northern Australia

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In late 2023 we received news that we had new funding from The Ian Potter Foundation to run the Centre for 5 more years.



Towards Equity in health for Aboriginal and Torres Strait Islander people

Achieving equity in health for Aboriginal people involves addressing the unique challenges they face and implementing strategies tailored to their needs. Key actions include:

1.Incorporating Aboriginal voices: Ensuring that First Nations peoples are central in health decisionmaking processes and frameworks

2.Supporting Indigenous health campaigns: Initiatives like the "Close the Gap" campaign aim to achieve health and life expectancy equality

3.Empowering Indigenous healthcare providers: Increasing the number of Aboriginal and Torres Strait Islander health professionals to provide culturally competent care

4.Strengthening Aboriginal knowledge and sovereignty: Recognizing and integrating traditional knowledge and practices within the health system



What are some of the Social Determinants of Health

Health is influenced by social determinants and some of the social determinants of health that we are confronted with in the training Centre are:

- 1. Levels of educational attainment is lower among First Nations people than non-Indigenous Australians
- 2. The employment rate remains considerably lower among First Nations people than non-Indigenous Australians
- **3.** First Nations people have less access to affordable or secure housing than other Australians and are considerably more likely to live in overcrowded conditions, or to experience homelessness
- **4. First Nations people experience contact with the criminal justice system** as both offenders and victims at much higher rates than non-Indigenous Australians.

https://www.aihw.gov.au/reports/australias-health/social-determinants-and-indigenous-health

Disproportionate burden of viral hepatitis

The burden of **HEP B** disease In Australia is disproportionately carried by



than non-Indigenous Australians



Amongst Indigenous Australians, HEP B is the LEADING CONTRIBUTOR TO LIVER CANCER. Liver cancer is the FASTEST GROWING CAUSE OF CANCER DEATH in Australia. FIGURE 6. HEPATITIS C TREATMENT UPTAKE AMONG ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE AND NON-INDIGENOUS PEOPLE WITH A HEPATITIS C NOTIFICATION IN NSW, 2016-2018, BY INCARCERATION HISTORY



Liver disease is the

3RD LEADING CONDITION

CONTRIBUTING TO THE

MORTALITY GAP

between Indigenous and

non-Indigenous Australians.

8xiiiiiiiiiiiiiiiii

Liver cancer rates are

8X HIGHER IN

AUSTRALIAN INDIGENOUS

than non-indigenous people and over half of all Indigenous liver cancer

cases are due to Hepatitis B.

Proportion of people living with CHB according to priority population, by PHN, / CHB prevalence (in brackets), 2022



0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100% Proportion of all people living with CHB (%)

- Aboriginal and/or Torres Strait Islander people
- Australian-born non-Indigenous people
- People born overseas

Local solutions

Open Access

Teresa De Santis

RESEARCH



Check for "The most culturally safe training I've ever had": the co-design of a culturally safe Managing hepatitis B training course with and for the Aboriginal health workforce of the Northern Territory of Australia

Kelly Hosking^{1,2*}, Teresa De Santis¹, Emily Vintour-Cesar^{1,2}, Phillip Merrdi Wilson¹, Linda Bunn¹, George Garambaka Gurruwiwi²³, Shiraline Wurrawilya¹, Sarah Mariyalawuy Bukulatipi³, Sandra Nelson¹, Cheryl Ross², Paula Binks², Phoebe Schroder⁴, Joshua S. Davis^{2,5}, Sean Taylor^{1,2}, Christine Connors¹, Jane Davies^{1,2} and on behalf of the Hep B PAST partnership



Stuart McGrath

	Ep1: Get to know your patient
	Ep2: Communicating with your patient
Ask the	Ep3: Communicating with patients & interpreters
Specialist	Ep4: Patient centred care
Larrakia, Tiwi and Yolngu stories to inspire better healthcare	Ep5: Informed consent
	Ep6: Recognising and addressing racism
	Ep7: Perspectives on health and wellbeing

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