

# Centre for Rural Health BULLETIN

**February 2021**

|  |    |
|--|----|
| <i>News and activities</i>             | 02 |
| <i>Graduate Research</i>               | 07 |
| <i>Publications</i>                    | 08 |
| <i>Projects, Grants &amp; Research</i> | 11 |
| <i>Director's Report</i>               | 16 |

## Ophthalmologist training

The Specialist Training Program (STP) is a Commonwealth Government Department of Health initiative that aims to support and extend the vocational training provided to registrars by specialist medical colleges. The program helps address the maldistribution of the specialist medical workforce by supporting clinical training in rural and remote settings. It aims to enhance availability of the specialist workforce in areas of unmet community need on the basis that positive clinical training experiences in rural and remote settings can encourage trainees to consider a rural career upon qualification.

Eye health is a significant problem in many rural and remote communities. In part, this is because there are too few ophthalmologists and other eye care practitioners working outside of our major cities. The Royal Australian and New Zealand College of Ophthalmologists (RANZCO) receives funding for a number of ophthalmology STP posts throughout Australia. Whilst the overall STP program has been reviewed by the Commonwealth, the ophthalmologist component of the program has not been fully evaluated. Consequently, the University is working with RANZCO to investigate the impact of the training on achieving its broader goal and how it may be improved by talking with participants and other key stakeholders. The evaluation commenced late in 2020 and will explore the issues faced by STP supervisors and the trainees rotated to STP posts, how the STP program can be made more attractive and on ways to improve the existing STP postings for trainees and

supervisors. As part of this process, we are talking with trainees, supervisors, chairs, and directors of training networks, RANZCO Fellows, administration and management staff in training networks and departmental staff about the program.

Whilst a great deal of research has been conducted into the training, distribution and retention of the general medical workforce (especially General Practitioners), comparatively little work has been published on the training and its impact on the subsequent work location of medical specialists. Living and working in a rural area can be very different and challenging for a medical specialist. A positive workplace culture and sense of being a part of the community are particularly important, though factors such as excessive workload, difficult collegial relationships and lack of contract flexibility can make a good work-life balance very difficult to achieve.

The quality of specialist ophthalmology training and the positive experience of trainees and their supervisors is critical to addressing current regional and rural workforce shortages. This evaluation will contribute to an evidence base around specialist medical training so that decision-making about the program can be better informed and cognisant of the real work context in which training occurs.

**Project team:** Tony Barnett, Penny Allen, Kehinde Obamiro, Belinda Jessup, Santosh Khanal, Victoria Baker-Smith



### Further Information

A/Prof Tony Barnett

**P** 03 6324 4011

**E** [tony.barnett@utas.edu.au](mailto:tony.barnett@utas.edu.au)



# News and Activities

## A national study on the impact of COVID-19 on student placements

The coronavirus pandemic (COVID-19) has affected everyone's lives, including students studying at university. In 2020, due to the risk of COVID-19, associated travel restrictions and the constraints within health services, planned rural placements for both nursing and allied health students were either cancelled or changed to various degrees. However, student responses to these placement changes were not well understood. The Australian Rural Health Education Network (ARHEN) has provided an opportunity for researchers from UTAS Centre for Rural Health to join their colleagues from the other 15 UDRHs (University Department of Rural Health) across Australia to work collaboratively on a national project examining the impact of COVID-19 on student rural and remote placements during 2020. Led by the University of Melbourne with involvement from all 16 UDRHs, all students with a planned rural placement facilitated by any UDRH between February and October 2020 were invited to complete a questionnaire and participate in interviews. Data collection has been completed, with around 1500 student responses and a report is underway. Findings from this project will potentially identify support needed for students on future rural placements and minimise the impact of COVID-19 on their experiences. Further, students were grateful for these placements as many are concerned about progress through their course, clinical learning and work after graduation. The study also found that many students have multiple commitments and responsibilities, and therefore the pandemic and resulting uncertainties surrounding their studies created stress in their lives.



### Further Information

Dr Ha Hoang  
P 03 6324 4031  
E thi.hoang@utas.edu.au



### Further Information

Dr Belinda Jessup  
P 03 6324 4474  
E belinda.jessup@utas.edu.au



### Further Information

Dr Kehinde Obamiro  
P 03 6324 3830  
E kehinde.obamiro@utas.edu.au

## Student placements in Tasmania

It goes without saying that 2020 was one of the most challenging years in recent history. Plans were put on hold, studies disrupted, and the workplace changed beyond recognition. Students from interstate universities who were looking forward to undertaking placements in rural Tasmania were asked to stay home. Students from the University of Tasmania on placement in the North West were asked to go home and isolate. Students who were due to graduate at the end of the year could only hope that the situation would improve quickly. University staff said goodbye to their colleagues as they relocated their offices into their homes and Zoom became an indispensable part of our lives. We met via Zoom, we consulted via Zoom, and some of us even exercised via Zoom! A nationwide lockdown began.

If we ever doubted that we live in one of the best places in Australia, the virus proved beyond all doubt that we live in one of the safest places as well. With our borders firmly closed, cases were quickly brought under control and life gradually

took on a 'new normal'. The University cautiously welcomed staff back onto campus – in a COVID Safe manner - with daily temperature checks, increased cleaning, and limits on how many people could occupy offices.

Our rural accommodation was empty for many weeks. The University-owned property at Latrobe was leased (at no cost) to the Tasmanian Health Service in case it was needed as an isolation centre (luckily it wasn't) and we helped a health worker relocate to Tasmania by allowing her to quarantine in one of our houses. As placement programs resumed mid-year, demand for accommodation quickly returned to pre-virus levels and the Centre for Rural Health supported a total of 640 health students by providing them with free accommodation and/or a Rural Placement Allowance. The accommodation at Campbell Town, George Town, Nubeena, Oatlands and Scottsdale was used more in 2020 than in 2019 while at Burnie and Latrobe numbers were down considerably. This is due to nursing students being required to undertake placements in their region, thereby reducing potential exposure had Tasmania experienced a second wave.

Pharmacy placements in rural Tasmania were particularly hard hit: they simply didn't happen, nor did Social Work placements with rural agencies. Most placements for students studying at interstate universities were cancelled as well, except for a few lucky students who happened to live here.

2021 is promising to be a much better year. We began the year by securing a lovely rental property in Swansea and have increased our placement allowances to \$50 per week. We are beginning to welcome back interstate students as our borders have reopened and students are returning to face-to-face teaching on campus, bringing with them vitality and optimism for the future. There will still be challenges, but with COVID safe plans and protocols in place for each of our properties, we are well placed to deal with another outbreak.



### Further Information

Ms Karla Peek  
P 03 6324 4012  
E k.peek@utas.edu.au



## CRH staff's contribution to teaching CXA309 Health Systems and Health Informatics

In Semester 2, 2020, several research academics from the Centre for Rural Health at UTAS contributed to the teaching of CXA309 (Health Systems and Health Informatics). This advanced level unit is available for study by distance only and aims to broaden students understanding of the Australian Health Care system and its operation.

As part of the unit, students critically examine and review the current and emerging trends in health care delivery. They explore topics such as the future of the healthcare workforce, global health challenges, management and prevention of chronic conditions with a multi-disciplinary team approach, mental illness, disabilities services, migrant and refugee health and Aboriginal and Torres Strait Islander health.

The unit also introduces Health Informatics (E-Health) and the way in which new

information and communication technologies could improve health services.

The student cohort represented varying health disciplines, with a prominence of paramedicine students and Australian Defence Force personnel. Dr Kehinde Obamiro (pharmacy), Dr Belinda Jessup (speech pathology) and Dr Ha Hoang (economics) valued the opportunity to facilitate discussion boards and guide student learning throughout the semester, particularly in relation to the inequities in rural and remote health.

Overall, the experience was overwhelmingly positive for both students and teaching staff, with students gaining an awareness of the need for increased health workforce in rural and remote areas of Australia and deeper understanding of the Australian Health Care system. It is expected that students would take the learnings from this unit and contribute positively to reducing health inequities in their sphere of influence.

For further information, please contact Drs Belinda Jessup, Kehinde Obamiro and Ha Hoang

## Winner of the ACEN Innovation and Excellence Award

A Case Study on HealthStop@Agfest as an innovative Work Intergrated Learning (WIL) practice was submitted by the College of Health and Medicine staff to the Australian Collaborative Education Network (ACEN) in July 2020, and was subsequently announced as the winner for the ACEN Innovation and Excellence Award in late 2020. This is further recognition of HealthStop as a valuable interprofessional WIL activity for students, health professionals and the community <https://acen.edu.au/wil-awards-2020-winners-announced/>



# News and Activities

## Health Practitioner Research Development Program

The primary aim of the Health Practitioner Research Development Program (HPDRP) is to provide an opportunity for health professionals with an interest in research to build their skills, experience and track record through training and involvement on an aspect of a research project designed to be completed within 140 hours.

In 2020, we welcomed 3 Health Practitioners on board. Despite the challenge of working in a world dealing with a pandemic, each practitioner was able

to fully engage with their projects and supervisors reporting that they enjoyed their valuable experience as is shown in the survey responses below.

We would like to wish them all well in their future research endeavours.



### Further Information

Dr Heather Bridgman

P 03 6324 4048

E heather.bridgman@utas.edu.au

## Fiona Woodcock - Remote clinical skills training of health care professionals using Augmented Reality (AR) technology



### What was the nature of work you undertook during your project?

- Basic training with an Augmented Reality device (Microsoft Hololens)
- Contribution to the development of clinical training scenarios.
- Source and review of literature

### What did you learn from your experience?

It was a very strong reminder of the important role academic study and research have in healthcare improvement. The subject focus broadened my mind to the use of technology in healthcare and the possibilities into the future.

### What did you enjoy the most?

- Learning about a subject (Augmented Reality) that I had very little understanding of before

and learning through the literature review, how people are using this technology throughout the world.

- Understanding the scope of the Rural Health area within the University.

### How has your experience impacted on your future interest in undertaking ongoing research/study?

It has certainly given me the confidence to investigate further study. I feel I have a better understanding of the supports available through the University.

### Do you have any suggestions for improving the health practitioner program?

I think that the program is very well managed. I had very minimal skills in formal research approaches so having experienced guidance was invaluable.

## My Experience with the Health Practitioner Research Development Program 2020 - Samuel van den Bosch

My experience in the Health Practitioner Research Development Program (HPRDP) provided me with a fantastic opportunity to hone my research skills and contribute to a meaningful health research project. As part of the HPP, I teamed up with Terry Cox and Ha Hoang to conduct a systematic integrative review into the impacts of epidemics and pandemics on the Tasmanian Aboriginal population throughout history. This project was particularly pertinent considering the current coronavirus pandemic and the aim was to inform future and current pandemic responses for Tasmanian Aboriginal people.

Working on this project provided me with valuable experience in health research. My background is in psychology research and having the opportunity to branch out in this way has helped broaden my skill set. This project involved starting an integrative review from scratch, a process I have not personally been involved in. Terry and Ha provided excellent guidance and support to me as I developed this skill for my researcher's toolbox.

Not only did this project help me develop valuable research skills, but we also extracted important findings regarding the research topic. This project helped identify a research

## Megan Blake-Uren - Understanding End of Life and Bereavement Care Experiences of Migrants, Humanitarian Entrants and Refugees in Tasmania



### What was the nature of work you undertook during your project?

Project title: Understanding End of Life and Bereavement Care Experiences of Migrants and Refugees in Tasmania

To develop educational resources to raise awareness and understanding regarding the needs and preferences of Tasmanian refugee and migrant community members in relation to end of life care (EOLC) bereavement support.

This included understanding some of the ethics approval process, a literature review, scoping of current resources and services available, developing a framework to draw out key themes, analysis and evaluation of the educational requirements gaps, collaboration with service providers, development of the resource and a pilot sample to evaluate feedback.

### What did you learn from your experience?

The project enabled me to embed the skills of research more generally using this topic as a framework. This was my first experience of the role of ethics in research. The use of a framework to inform key themes was a tool that I hadn't used before. The Literature Review process, I am familiar with, however, to cross reference with service providers feedback and current resources was made manageable by the use of this framework. Without this tool I am convinced that I may have felt overwhelmed by the range of data and how to focus on or identify the common themes.

The development of the educational resource also brought me new learning with discussions on websites, online resources and the use of images and providing resources that are accessible and useful for a range of service providers.

The guidance by my supervisors was paramount. This health practitioner research development program has enabled me to reflect on my own work practice and ensure that I value the opportunity that team meetings in my own work place produce rather than resent their regularity.

In addition, I reflected that as a practitioner I can make a difference on a micro level, whereas, as researchers you can make a difference to the system at a macro level. As Practitioners or community members it is vital to provide feedback of the current experiences to inform where changes are required and what changes to fund for best outcomes with reduced funding.

### Did you feel you were supported enough?

The expert support and guidance I received by my immediate supervisor – Suzanne Mallick was outstanding. The research timeline was discussed and modified as required. Suzanne shared her expert knowledge and enabled me to explore the skills of research under her gentle guidance.

Heather Bridgman and the team on this project also provided support with the broader processes of research with discussions about ethics approval and collaboration with a range of experts.

Support was also provided by and for all things relating to administration. Terri Stevens and Darren Grattidge provided expert support with sourcing and creating resources.

### What did you enjoy the most?

Being part of a productive team, developing knowledge about research projects and the ability to contribute to improving outcomes for EOLC in Tasmania for Migrants and/refugees.

The time frame for the project was manageable – 3 months is not overwhelming - especially for health practitioners who have regular working schedules.

I also valued the opportunity to network and collaborate with other service providers, thus adding depth and breadth to my own health practitioner role.

gap regarding pandemic responses in Tasmanian Aboriginal communities specifically. What literature we did find highlighted the importance of self-governance and co-developed responses and planning for pandemics. An increased Aboriginal voice on these health matters was also identified. Thorough planning was identified as important to outcomes, as was consideration of the social determinants of health.

I found participating in HPP to be an incredibly valuable and rewarding experience. The skills I developed will be valuable to my future endeavours and I have appreciated the chance to meaningfully contribute to an important area of health research.



# News and Activities

## Exciting times for UTAS Medical Radiation Sciences

Medical Radiation Science, traditionally referred to as 'Radiography', is a very dynamic discipline. Most advances in technology are bound to affect the profession in some fashion, so there are no dull moments.

The Medical Radiation Science course at UTAS received the first student intake in 2005 with only a handful of enrolments. Due to low numbers and limited teaching/clinical staff support in Tasmania, the University entered into a collaboration with Charles Sturt University. This partnership, still in place today, allows our students to study the first two years here at UTAS on the Launceston campus and then complete the final two years at Charles Sturt University.

There are three main streams in Medical Radiation Science and students would normally opt for one of these to specialise in at the beginning of third year. These options include medical imaging, radiation therapy or nuclear medicine/molecular imaging. Whatever specialisation students decide to embrace, they are guaranteed expert supervision mentoring and support from a team of experienced academics and clinical teachers. The goal is to guide students to learn the ropes in a very relaxed atmosphere.

The landscape has changed since those early years at UTAS medical radiation science and so is the work environment and job satisfaction that is guaranteed upon graduation. The evidence is that from our humble beginnings, this semester we are welcoming about 30 fresh faced, enthusiastic young people ready to explore the magic world of medical radiation science.

Need I add that the difference between this program and other degree programs is that not only do our students obtain a degree at the end of their studies, but also receive automatic recognition by the Australia Health Profession Regulatory Agency (AHPRA) in the form of professional registration ensuring our students are immediately workforce ready. There are also a variety of jobs and settings available in the field, from large public and private hospitals to radiology clinics or marketing/applications specialist, or even as an academic.

You are welcome to join us! Additionally, if you like overseas travel this might be the passport you need. So, if you like technology, love fun and are passionate about working with and helping people, we invite you to contact us for a chat about taking this future changing step and convince you that it is truly exciting times at UTAS Medical Radiation Sciences.



### Further Information

Dr Imo Inyang  
P 03 6430 1692  
E imo.inyang@utas.edu.au

## Rural Pharmacy Liason Officer update

Due to limited access to healthcare professionals and facilities, a rural and remote population represents a vulnerable group. Recruitment and retention of pharmacists for this population in Tasmania is an ongoing challenge. Our review of the literature suggests that there are several reasons for this. This includes family concerns such as spouse unemployment and concern about children's education. Other reasons uncovered include heavy workload demand and lack of career advancement and inadequate social and cultural facilities. Anecdotal information has also revealed additional issues, including inadequate financial support to cater for the additional time and care rural pharmacists provide to community members.

Analysis of the 2019 National Health Workforce data set suggests that nationally, there are several predictors of pharmacist practising outside of major cities. Males were more likely to practise outside metropolitan areas, while younger people tended to avoid regional, rural and remote locations. Pharmacists who had their primary qualification overseas and those who work more than 35 hours a week were more likely to practise outside metropolitan areas. Although the number of pharmacists who identify as indigenous Australian is small, the result suggests that there is a tendency for this group to practise outside of major cities.

Given that pharmacies in these disadvantage communities are very accessible and often function as a one-stop health hub, additional support is required for rural pharmacists and their families to help ensure retention over a long period of time. Such support can come from the community they service or from government across different levels.



### Further Information

Dr Kehinde Obamiro  
P 03 6324 3830  
E kehinde.obamiro@utas.edu.au

# Graduate Research

Despite a tough year with COVID 19 pandemic, our Higher Degree by Research (HDR) candidates at CRH have shown their strong commitment to their study and ability to adapt to a new situation. We acknowledge and thank them for their contribution to our research at CRH and are so proud of their wonderful achievements.

*We would like to congratulate all candidates for these wonderful achievements and look forward to other news in the brand new year 2021!*



### Further Information

Dr Ha Hoang  
P 03 6324 4031  
E thi.hoang@utas.edu.au

## Completions

Jacki Goode has joined another four candidates (Peter Mulholland, Shah Khan, Shoaib Hamrah, Deb Zwolsman) who completed their HDR studies in the year of 2020!

Jacki was supervised by A/Prof Len Crocombe and Dr Ha Hoang and her PhD thesis titled, "Improving Access to Dental Services and Promoting Oral Health for Adults Experiencing Homelessness in a Non-capital City Area of Victoria: A multi methods study".

Congratulations to those candidates and supervisors!



## Grant Success

Annika Wilson (PhD candidate) has been awarded a grant (~\$5,000) by the Australian Dental Research Foundation to support her project which investigates General Practitioners barriers and facilitators to implementing clinical practice guidelines on oral health during pregnancy. Well done, Annika!



## Conference presentations

Laura Smith (PhD candidate) presented an e-poster titled: "Developing best practice guidelines for youth suicide prevention in rural Australian communities" at the Society for Mental Health Research digital conference (9th October 2020).

Tamara Reynish (PhD candidate) presented at Tasmanian LGBTIQ+ Forum on 1 December 2020, organised by Kentish Regional Clinic, Working It Out, Queer Life Stories, and Connect4Life.

Dzung Bui presented his PhD project titled "Managing medical clinical scenarios remotely: Augmented Reality and the Situational Tele-mentorship" at the 2020 UTAS School of Technology, Environments and Design Research Showcase (25 Nov 2020).

## New HDR Candidates - Ben Knowles



We welcomed a new PhD candidate: Ben Knowles. Ben's project is titled "Fresh Air, Biodiversity and Company: Designing robust outdoor health services to

maximise multi-dimensional health and wellbeing". Ben is being supervised by Dr Pauline Marsh and Dr David Kendal (School of TED).

Ben will be exploring the health benefits of therapeutic interventions that

intentionally engage people with 'the outdoors' and bring them into contact with nature.

His project will build on existing and emerging research and practice. It will expand knowledge of the multidimensional benefits of bringing an ecological lens to health interventions, healthcare settings and healthy public policy development.

Our rural populations' persistent poorer health status calls for new and innovative ways to improve physical and mental health and wellbeing, and nature-based health interventions could be an easy and accessible option.

Over the last 20 years, Ben has traversed the fields of outdoor education, teaching,

training, bush adventure therapy and clinical therapy. His therapeutic training brings together neurosequential, narrative and experiential/embodied approaches.

He holds current membership with the Australian Association for Bush Adventure Therapy, the Australian Counselling Association and the Adventure Therapy International Committee. Ben sits as a co-director of Adventure Works Australia and has been significantly involved in the establishment of the Australian Association for Bush Adventure Therapy Inc. and was Chairperson 2010 - 2014.

His education includes a Master of Narrative Therapy and Community Work, a Graduate Diploma in Experiential Learning (Victoria University), and a Bachelor of Education.

# 2020 Publications

## Journal Publication list 2020

**In 2020, CRH staff (listed in bold) produced a total of 34 Peer Refereed Journal Articles with 19 of these published in Q1 journals (that's 56%!).**

Alston, L\* and Walker, T\* and **Kent, K**, "Characterizing dietary intakes in rural Australian adults: A systematic literature review", *Nutrients*, 12 pp. 1-21. doi:10.3390/nu12113515 ISSN 2072-6643 (2020)

**Bhagat, V** and **Hoang, H** and **Crocombe, L** and Goldberg, L, "Incorporating oral health care education in undergraduate nursing curricula - a systematic review", *BMC Nursing*, 19 pp. 1-13. doi:10.1186/s12912-020-00454-6 ISSN 1472-6955 (2020)

**Bridgman, H** and Todd, A and Maine, G and Hardcastle, S and Bird, ML and Radford, J and Marlow, A and Elmer, S and Murray, S and Norris, K and Dean, T and Williams, A, "Piloting an interprofessional chronic pain management program: Perspectives of health students and community clients", *Journal of Interprofessional Care* pp. 1-10. doi:10.1080/13561820.2020.1830047 ISSN 1356-1820 (2020)

**Bridgman, H** and Bird, ML and Heyworth, KJ and Maine, G and Hardcastle, SG and Murray, SL and Radford, J and Elmer, SL and Norris, KA and Dean, T and Marlow, AH and Williams, AD and Todd, AM, "Evaluating an interprofessional workshop on persistent pain: The role of Adult Learning and Social Identity theories", *Journal of Applied Learning & Teaching*, 3 (Special Issue No.1) pp. 129-139. doi:10.37074/jalt.2020.3.s1.11 ISSN 2591-801X (2020)

Brooks, KR\* and **Mond, JM** and Mitchison, D\* and Stevenson, RJ\* and Challinor, KL\* and Stephen, ID\*, "Looking at the figures: Visual adaptation as a mechanism for body-size and -shape misperception", *Perspectives on Psychological Science*, 15 (1) pp. 133-149. doi:10.1177/1745691619869331 ISSN 1745-6916 (2020)

Chidarikire, S and **Cross, M** and Skinner, I\* and Cleary, M, "Ethnographic insights into the quality of life and experiences of people living with schizophrenia in Harare, Zimbabwe", *Issues in Mental Health Nursing* pp. 1-14. doi:10.1080/01612840.2020.1770385 ISSN 0161-2840 (2020)

Chidarikire, S and **Cross, M** and Skinner, I and Cleary, M, "An ethnographic study of schizophrenia in Zimbabwe: The role of culture, faith, and religion", *Journal of Spirituality in Mental Health*, 22 (2) pp. 173-194. doi:10.1080/19349637.2018.1531366 ISSN 1934-9637 (2020)

de Deuge, J and **Hoang, Ha** and **Kent, K** and **Mond, J** and **Bridgman, H** and Skromanis, S and **Smith, LA** and **Auckland, S**, "Impacts of community resilience on the implementation of a mental health promotion program in rural Australia", *International Journal of Environmental Research and Public Health*, 17 (6) Article 2031. doi:10.3390/ijerph17062031 ISSN 1661-7827 (2020)

do Rosario, VA\* and Chang, C\* and Spencer, J\* and Alahakone, T\* and Roodenrys, S\* and Francois, M\* and Weston-Green, K\* and Holzel, N and Nichols, DS and **Kent, K** and Williams, D\* and Wright, IMR\* and Charlton, K\*, "Anthocyanins attenuate vascular and inflammatory responses to a high fat high energy meal challenge in overweight older adults: A cross-over, randomized, double-blind clinical trial", *Clinical Nutrition* pp. 1-11. doi:10.1016/j.clnu.2020.09.041 ISSN 0261-5614 (2020)

do Rosario, VA\* and Schoenaker, DAJM\* and **Kent, K** and Weston-Green, K\* and Charlton, K\*, "Association between flavonoid intake and risk of hypertension in two cohorts of Australian women: a longitudinal study", *European Journal of Nutrition Article Epub ahead of print*. doi:10.1007/s00394-020-02424-9 ISSN 1436-6207 (2020)

Fatt, SJ\* and **Mond, J** and Bussey, K\* and Griffiths, S\* and Murray, SB\* and Lonergan, A\* and Hay, P\* and Pike, K\* and Trompeter, N\* and Mitchison, D\*, "Seeing yourself clearly: Self-identification of a body image problem in adolescents with an eating disorder", *Early Intervention in Psychiatry* pp. 1-8. doi:10.1111/eip.12987 ISSN 1751-7893 (2020)

Fielder, H and **Marsh, P**, "'I used to be a gardener': Connecting aged care residents to gardening and to each other through communal garden sites", *Australasian Journal on Ageing* pp. 1-8. doi:10.1111/ajag.12841 ISSN 1440-6381 (2020)

Godrich, S\* and **Kent, K** and Murray, SL and **Auckland, S** and Lo, J\* and Blekkenhorst, L\* and Penrose, B and Devine, A\*, "Australian consumer perceptions of regionally grown fruits and vegetables: importance, enablers, and barriers", *International Journal of Environmental Research and Public Health*, 17 (1) Article 63. doi:10.3390/ijerph17010063 ISSN 1660-4601 (2020)

**Hamrah, MS** and **Hoang, Ha** and **Mond, J** and Pahlavanzade, B\* and Charkazi, A\* and **Auckland, S**, "The prevalence and correlates of symptoms of post-traumatic stress disorder (PTSD) among resettled Afghan refugees in a regional area of Australia", *Journal of Mental Health* doi: 10.1080/09638237.2020.1739247 ISSN 0963-8237 (2020)

**Hamrah, MS** and **Hoang, H** and **Mond, J** and Pahlavanzade, B\* and Charkazi, A\* and **Auckland, S**, "Occurrence and correlates of depressive symptoms among the resettled Afghan refugees in a regional area of Australia", *Early intervention in psychiatry* pp. 1-8. doi:10.1111/eip.12957 ISSN 1751-7885 (2020)

Kendal, D and Egerer, M\* and Byrne, JA and Jones, PJ and **Marsh, P** and Threlfal, CG\* and Allegretto, G and Kaplan, H and Nguyen, HKD and Pearson, S and Wright, A and Flies, EJ, "City-size bias in knowledge on the effects of urban nature on people and biodiversity", *Environmental Research Letters*, 15 pp. 1-9. doi:10.1088/1748-9326/abc5e4 ISSN 1748-9326 (2020)

**Kent, K** and Charlton, K\* and OSullivan, T\* and Oddy, WH, "Estimated intake and major food sources of flavonoids among Australian adolescents", *European Journal of Nutrition* doi:10.1007/s00394-020-02218-z ISSN 1436-6207 (2020)

**Kent, K** and Murray, S and Penrose, B and **Auckland, S** and Visentin, D and Godrich, S\* and Lester, EA, "Prevalence and socio-demographic predictors of food insecurity in Australia during the COVID-19 pandemic", *Nutrients*, 12 pp. 1-20. doi:10.3390/nu12092682 ISSN 2072-6643 (2020)

**Kent, K** and Godrich, S\* and Murray, S and **Auckland, S** and Blekkenhorst, L\* and Penrose, B and Lo, J\* and Devine, A\*, "Definitions, sources and self-reported consumption of regionally grown fruits and vegetables in two regions of Australia", *Nutrients*, 12 (4) pp. 1-20. doi:10.3390/nu12041026 ISSN 2072-6643 (2020)

Khan, S and Bettiol, SS and **Kent, K** and Peres, M\* and **Barnett, T** and **Crocombe, L** and Murthy, AM\*, "Association between obesity and periodontitis in Australian adults: A single mediation analysis", *Journal of Periodontology* ISSN 0022-3492 (2020)

Khan, S and Khalid, T\* and Bettiol, S and **Crocombe, L**, "Non-surgical periodontal therapy effectively improves patient-reported outcomes: A systematic review", *International journal of dental hygiene* doi:10.1111/idh.12450 ISSN 1601-5037 (2020)

**Kirschbaum, M** and **Barnett, T** and **Cross, M**, "Experiences of over-the-counter codeine misusers and accounts of recovery: A qualitative study in Tasmania, Australia", *Drug and Alcohol Review* pp. 1-9. doi:10.1111/dar.13081 ISSN 0959-5236 (2020)

Lonergan, AR\* and Bussey, K\* and Fardouly, J\* and Griffiths, S\* and Murray, SB\* and Hay, P\* and **Mond, J** and Trompeter, N\* and Mitchison, D\*, "Protect me from my selfie: Examining the association between photo-based social media behaviors and self-reported eating disorders in adolescence", *International Journal of Eating Disorders*, 53 (5) pp. 755-766. doi:10.1002/eat.23256 ISSN 0276-3478 (2020)

**Marsh, P** and **Mallick, S** and Flies, E and Jones, P and Pearson, S and Koolhof, I and Byrne, J and Kendal, D, "Trust, connection and equity: Can understanding context help to establish successful Campus Community Gardens?", *International Journal of Environmental Research and Public Health*, 17 (20) pp. 1-25. doi:10.3390/ijerph17207476 ISSN 1660-4601 (2020)

Mmako, NJ and Courtney-Pratt, H and **Marsh, P**, "Green spaces, dementia and a meaningful life in the community: a mixed studies review", *Health and Place*, 63 Article 102344. doi:10.1016/j.healthplace.2020.102344 ISSN 1353-8292 (2020)

**Mond, J** and Slewa-Younan, S\* and Gabriela Uribe Guajardo, M\* and Mohammad, Y\* and Johnson, E\* and Milosevic, D\*, "Self-recognition of trauma-related psychopathology and help-seeking among resettled Iraqi refugees in Australia", *Transcultural Psychiatry* pp. 1-11. doi:10.1177/1363461520901635 ISSN 1363-4615 (2020)

**Obamiro, K** and West, S and **Lee, S**, "Like, comment, tag, share: Facebook interactions in health research", *International Journal of Medical Informatics*, 137 Article 104097. doi:10.1016/j.ijmedinf.2020.104097 ISSN 1386-5056 (2020)

Oloidi, A\* and Nduaguba, SO\* and **Obamiro, K**, "Assessment of quality and readability of internet-based health information related to commonly prescribed angiotensin receptor blockers", *Pan African Medical Journal*, 35 pp. 1-9. doi:10.11604/pamj.2020.35.70.18237 ISSN 1937-8688 (2020)

Prnjak, K\* and Mitchison, D\* and Griffiths, S\* and **Mond, J** and Gideon, N\* and Serpell, L\* and Hay, P\*, "Further development of the 12-item EDEQS: identifying a cut-off for screening purposes", *BMC Psychiatry*, 20 pp. 1-7. doi:10.1186/s12888-020-02565-5 ISSN 1471-244X (2020)

Purseley, KM\* and Hay, P\* and Bussey, K\* and Trompeter, N\* and Lonergan, A\* and Pike, KM\* and **Mond, J** and Mitchison, D\*, "Diabetes and disordered eating behaviours in a community-based sample of Australian adolescents", *Journal of Eating Disorders*, 8 (1) pp. 1-9. doi:10.1186/s40337-020-0282-y ISSN 2050-2974 (2020)

**Reynish, T** and **Hoang, Ha** and **Bridgman, H** and Easpaig, BNG\*, "Barriers and enablers to sex workers' uptake of mental healthcare: a systematic literature review", *Sexuality Research and Social Policy* doi:10.1007/s13178-020-00448-8 ISSN 1868-9884 (2020)

Sahlan, RN\* and Taravatroy, F\* and Quick, V\* and **Mond, JM**, "Eating-disordered behavior among male and female college students in Iran", *Eating Behaviors*, 37 pp. 271-278. doi:10.1016/j.eatbeh.2020.101378 ISSN 1471-0153 (2020)

**Smith, L** and **Purton, T** and **Auckland, S** and Lees, D and **Mond, J**, "Local evaluation of the Tasmanian component of the National Suicide Prevention Trial - preliminary learnings", *Australian Journal of Rural Health*, 28 (2) pp. 218-223. doi:10.1111/ajr.12620 ISSN 1038-5282 (2020)

**Smith, L** and **Hoang, Ha** and **Reynish, T** and McLeod, K and Hannah, C and **Auckland, S** and Slewa-Younan, S\* and **Mond, J**, "Factors shaping the lived experience of resettlement for former refugees in regional Australia", *International Journal of Environmental Research and Public Health*, 17 (2) Article 501. doi:10.3390/ijerph17020501 ISSN 1661-7827 (2020)

\* denotes an author from another institution

# 2020 Publications continued

# Projects, Grants and Research

## Extracts....

### Experiences of over-the-counter codeine misusers and accounts of recovery: A qualitative study in Tasmania, Australia



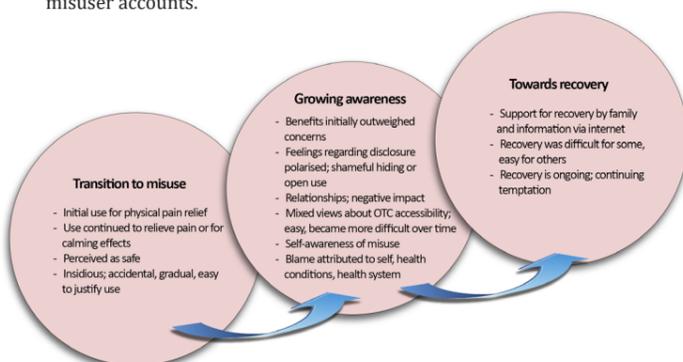
**Kirschbaum, M and Barnett, T and Cross, M,**  
*Drug and Alcohol Review* pp. 1-9. doi:10.1111/dar.13081 ISSN 0959-5236 (2020)

This study explored the experience of over-the-counter (OTC) codeine misuse and recovery in Tasmania. Semi-structured telephone interviews were conducted with 15 self-identified long-term users of OTC codeine. Thirteen categories emerged from the misuser accounts, which were aligned to three broad temporal phases: (1) transition to misuse; (2) growing awareness; and (3) towards recovery (Figure 1).

Salient features of the misuse experience included: initial use for the self-treatment of physical pain; ongoing use to self-medicate physical pain, stress or mental health conditions; a perception of safety of OTC codeine; an insidious and accidental transition from use to misuse; growing awareness of a problem over time; support provided by family, friends and the internet; and recognition that recovery is an ongoing process. An unexpected finding was that many participants had successfully self-managed their path to recovery without formal intervention. This is in contrast to other studies of OTC codeine misusers, which more commonly describe failed attempts to self-manage cessation, involvement of specialist addiction treatment centres and/or the use of pharmacotherapy.

The findings of this study suggest that misuse could be reduced through improved management of pain, stress and mental health, as well as mechanisms to promote self-awareness of problematic use. Inclusion of strategies that facilitate self-change may also be warranted, including increased utilisation of social and web-based supports.

Figure 1. Categories that emerged from over-the-counter (OTC) codeine misuser accounts.



### Prevalence and socio-demographic predictors of food insecurity in Australia during the COVID-19 pandemic



**Kent, K and Murray, S and Penrose, B and Auckland, S and Visentin, D and Godrich, S\* and Lester, EA,**  
*Nutrients*, 12 pp. 1-20. doi:10.3390/nu12092682 ISSN 2072-6643 (2020)

Researchers at the Centre for Rural Health, the School of Health Sciences and the Tasmanian Institute of Agriculture (TIA) at the University of Tasmania, in collaboration with researchers at Edith Cowan University, Western Australia, recently published a paper, 'Food access and availability and the relationship with food insecurity during the beginning of the COVID-19 pandemic', in Australia in the British Journal of Nutrition (BJN).

The paper is based on findings from a study aimed at determining the association between food access and availability, and food insecurity at the beginning of the COVID-19 pandemic in Tasmania during May-June 2020 when strict social distancing restrictions were in place. The study employed a cross-sectional survey based on the U.S. Household Food Security Survey Module: Six-Item Short Form and included twenty questions on food behaviours and perceptions of the food supply, two questions on food availability and eleven on socio-demographic and COVID-related income questions.

Survey data (n=1170) were analysed using binary logistic regression. The paper reported on key study findings which demonstrated that there was a disproportionate impact of the COVID-19 pandemic on food insecure households, in relation to food availability and access, with consequent effects on food-related behaviours. In particular, food insecure households reported greater challenges accessing food, reported consuming less fresh food and were more likely to agree that food was more expensive. The study also revealed that food insecure households had less money available for food than prior to the COVID-19 pandemic.

In addition to the paper's application to international, national and local food security policy, the findings have broader application for disaster preparedness as the study showed that food insecure households were less likely to have sufficient food stored in line with disaster preparedness recommendations. The paper concludes in its recommendations that future research should be conducted to determine the long-term impact of disruptions to availability and access to food during the COVID-19 pandemic, especially for food insecure households who may be vulnerable to poorer long-term health outcomes as a result of malnutrition and low diet diversity.

## Elders promoting cultural well-being: A remote Aboriginal community perspective



**Further Information**  
Dr Terry Cox  
P 03 6324 4064  
E [terrence.cox@utas.edu.au](mailto:terrence.cox@utas.edu.au)

Compared to other Australians, the health disparities experienced by Aboriginal people include higher rates of preventable chronic diseases, younger age of diagnosis, lower life expectancies and greater socio-economic marginalisation. To address these persistent health inequalities, Aboriginal Elders, community leaders and advocacy groups repeatedly call for community-based solutions and improved control over the determinants of health. To build on this call, our recent project investigated the contributions of Elders to the well-being of Aboriginal people in a remote Tasmanian community.

Our co-designed project adopted a participatory action research methodology. Twelve Elders were recruited through the community's kinship network to share their wisdom and concerns through individual yarning interviews and yarning circle discussions. The results were thematically analysed and presented to Elders as a community report for discussion and their endorsement. The central concept emerged to represent Elders promoting cultural well-being (Figure 1). The concept was founded on three inter-connected domains; Elder mentoring, their call for cultural healing and concerns with seeking balance between the community's cultural foundation and the health and service provider programs. These domains were deeply inter-connected and further embedded with themes representing cultural values, identity, community cohesion and maintaining connections to country.

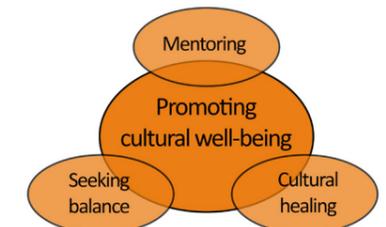


Figure 1. Central concept

The findings reflect the age-old wisdom of Elders promoting cultural well-being as vital to Aboriginal community health. The available scholarship acknowledges Elders as community leaders, cultural custodians and project consultants in various initiatives led by external stakeholders. This approach supports the notion of inclusivity and cultural safety, but paradoxically within mainly Western reductionist models of health and research from which Elders are disempowered from developing their own community well-being initiatives. There is increasing recognition that successful Aboriginal health promotion programs are designed to facilitate community control and empowerment, with approaches to healing led by Elders. Our project represents a small but positive step in this direction by acknowledging the vital contributions of Elders to Aboriginal community well-being - as they have for millennia.

A special thanks to the community Elders for sharing your wisdom, College of Health and Medicine (Research Enhancement Program) funding and the awesome Ha, Jon and Merylin at the Centre for Rural Health.

## Feasibility of a Veterans Wellbeing Centre in Tasmania

Heather Bridgman and Jon Mond have been successful with a grant funded by federal and state governments examining the Feasibility of a Veterans Wellbeing Centre in Tasmania. This project involves cross college collaboration with the School of Nursing, School of Psychology, Menzies Institute and School of Management and Marketing. This study aims to explore the potential for a Veteran Wellbeing Support Service (VWSS) located in Tasmania. VWSS will provide veterans and their families with greater access to health and wellbeing services and support in their local community.

This study is being undertaken to seek the feedback and opinions of key stakeholders to inform future decisions about services delivery for veterans and their families in Tasmania. The study objectives are: 1) Gather service provider insights into the current service delivery environment and potential gaps in wellbeing services to veterans and their families, and where appropriate civilian first responders, in Tasmania; 2) Identify needs of veterans and their family members, and how well these needs are being met in the current service environment, and 3) Gather stakeholder feedback about the feasibility and acceptability of establishing an integrated, nationally connected veteran support service in Tasmania and identify areas of crossover for civilian first responders. Findings of the project will be presented to the Department of Veterans Affairs in March 2021.



**Further Information**  
Dr Heather Bridgman  
P 03 6324 4048  
E [heather.bridgman@utas.edu.au](mailto:heather.bridgman@utas.edu.au)

# Projects, Grants and Research

## Cancer recovery and good nutrition

Good nutrition plays a vital role in helping the body during cancer treatment and the healing process. Eating well will help boost the immune system, help fight infection, boost energy levels, and maintain muscle and body strength, and help speed up recovery and manage side effects. Good nutrition can also help heal wounds and repair damaged tissue.

Information about nutrition and cancer treatment is available from the Cancer Council Australia website (for example, Nutrition and Cancer: A guide for people with cancer, their families and friends is located at [www.cancercouncil.com.au/wp-content/uploads/2016/07/UC-Nutrition-CAN756-MARCH-19.pdf](http://www.cancercouncil.com.au/wp-content/uploads/2016/07/UC-Nutrition-CAN756-MARCH-19.pdf)), though there is little specific information about meals that may be preferred by people from other cultures.

The aim of this project was to create nutritional resources that are culturally relevant for members of the Greek and Chinese community undergoing cancer treatment. In the first phase of this project, the project team collaborated with the local Greek community in Tasmania to develop a recipe booklet and 4 visual displays of nutritious, tasty, Greek meals.

Prior to the COVID19 restrictions, an information session was conducted at the Greek community of Tasmania, inviting Greek recipes from the community. The project team received more than 50 recipes. After initial analysis by our dietitian, 20 recipes were selected. We then held 'taste testing' sessions to evaluate the recipes at Cancer Council Tasmania in Hobart and Launceston. The recipes were adapted and adjusted according to feedback. A re-taste testing was then done, and community feedback sought in the subsequent development of the recipe booklet and visual display. The visual displays were developed with the Greek Community of Tasmania, who very kindly helped with the voice over as well as translation and interpretation.

This recipe booklet provides people undergoing cancer treatment and their families with some additional meal options to choose from, but you certainly don't have to be Greek or recovering from cancer to enjoy them! An electronic version of the recipe booklet and visual displays (in English) can be accessed for free at: <https://www.cancertas.org.au/health-professionals/resources-for-patients-carers/diverse-languages-cultures/>

We invite anonymous feedback and comments on these recipes and the resource materials. Please go to the survey link in the recipe booklet or scan the QR code below.

The project team (Pathma Namasivayam, Tony Barnett, Sophie Hofto, Suzanne Mallick, Christine Low and Terri Stevens) thanks the Tasmania Community Fund for financial support and the amazing support from UTAS, Greek Community of Tasmania, Cancer Council Tasmania and Eating with Friends.



**Further Information**  
 Dr Pathma Namasivayam  
 P 03 6226 8503  
 E [pathmavathy.namasivayam@utas.edu.au](mailto:pathmavathy.namasivayam@utas.edu.au)

## Increasing healthy eating and physical activity habits for young people accessing headspace Launceston

Healthy eating and physical activity habits during adolescence support normal growth and development and underpin the establishment of lifelong health and wellbeing. The eating habits of many young people are inconsistent with dietary recommendations and along with sedentary physical activity levels escalate risks of current and future obesity, type 2 diabetes and mental health issues. Mental health conditions predominantly emerge during adolescence and early adulthood. People with a mental health condition are more likely to be overweight and have metabolic complications.

Emerging research has demonstrated that healthy eating patterns (e.g. Mediterranean-style diets) based on whole-grains, fruit and vegetables, lean protein and nuts contributes to reducing obesity and metabolic chronic diseases and improving mental health. Early nutrition intervention for young people at risk of developing a mental health condition is needed.

Cornerstone Youth Services (CYS) delivers the *headspace* service and provides social and emotional support for young people in the greater Launceston area with mild to moderate mental health conditions. Cornerstone identified service needs for: 1) developing their capacity to provide brief nutrition and physical activity related interventions; 2) greater access to referral pathways and arrangements with community and government organisations that provide a specialist nutrition and physical activity support and 3) greater understanding of evidence-based resources they can use to consider and evaluate a client's dietary and physical activity habits, and to understand how to provide up-to-date advice and support.

Cornerstone has funded a multidisciplinary research team, including psychology, nutrition and dietetics, exercise science, exercise physiology and physiotherapy from the Centre for Rural Health and the School of Health Science to deliver the project.

- The project comprises multiple components including:
- The development, delivery and formal evaluation of training for CYS staff on nutrition and physical interventions for young people. Two of the three training sessions have been delivered.
  - A research project investigating the healthy eating and physical activity beliefs, behaviours and needs of young people accessing headspace Launceston via an online survey, focus group and individual interviews. An ethics application has been submitted for approval.
  - Brief mapping of accessible health care providers/ programs for young people and identification of potential opportunities to collaborate with CYS.

Project Outcomes will inform CYS about how to best support young people accessing their service with nutrition and physical activity needs, improving the quality of service delivery. Outcomes will also contribute to the limited literature in this area.



**Further Information**  
 Dr Heather Bridgman  
 P 03 6324 4048  
 E [heather.bridgman@utas.edu.au](mailto:heather.bridgman@utas.edu.au)



## Finding bowel cancer early in rural Tasmania: perspectives from general practice

Early detection of bowel cancer has been associated with better health outcomes, including a 5-year survival rate of up to 99% for stage 1 cancers. In other words, 9 in 10 people diagnosed with bowel cancer can be successfully treated if their cancer is found early. However, current Tasmanian participation rates in the National Bowel Cancer Screening Program (NBCSP) sit just below 47%.

General practitioners (GPs) have long been reported to play an important role in increasing bowel cancer screening rates. Our study aimed to identify the enablers

and barriers to bowel cancer screening in outer regional and remote Tasmanian communities from the perspective of GPs working in these areas. We spoke to eight GPs who told us that high workloads, competing priorities, and not knowing when a patient received a NBCSP kit were key barriers to supporting the Program, while practice reminder systems were seen to improve the likelihood of them recommending the Program to patients.

These findings informed a clinical trial testing the feasibility and effectiveness of a GP reminder system for bowel cancer

screening in rural Tasmania. While the results are yet to be finalised, preliminary qualitative data suggest that a patient reminder system may be more effective than one which prompts GPs. Working in partnership with rural general practice, the Centre for Rural Health is currently developing a research project to further test this concept.



**Further Information**  
 Dr Simone Lee  
 P 03 6324 4025  
 E [simone.lee@utas.edu.au](mailto:simone.lee@utas.edu.au)

# Projects, Grants and Research



## Remote clinical skills training of health care professionals using Augmented Reality technology

Many remote areas in Australia suffer from health workforce shortages. At times, a health care worker in a rural/remote site may not have someone close by to mentor them in an emergency or in performing a clinical procedure they may not be familiar with.

Tele-mentorship could be a solution to training and providing professional assistance at a distance. Communication technologies can aid mentoring in rural and remote settings where expert assistance may be difficult to access. During a healthcare procedure, advanced tele-communication technologies can support an expert to guide a less-experienced practitioner, who are at a different geographic location, in real time. Augmented Reality (AR) devices, such as HoloLens, can enhance the effectiveness of tele-mentorship and allow the expert to

receive information and provide guidance as if he or she were present with the mentee at a remote location.

Augmented Reality is an emerging form of experience in which the real world is enhanced by computer-generated content tied to specific locations and/or activities. Virtual graphics and audio are relayed in a three-dimensional space in the practitioner's view overlaying the physical environment and seamlessly blending them together.

Over the last several years, AR applications have become portable and widely available on mobile or wearable devices. AR is becoming more visible in health care service delivery and health professional training. It has great potential to provide opportunities for learners to undergo unique, customised,

personalised learning experiences, rather than learning through face-to-face interaction with a teacher or instructor.

In this project, we will assess the effectiveness of remote situational tele-mentoring on health professionals' responses to managing complex clinical case scenarios in a simulated learning environment using a wearable AR device, HoloLens. Health professionals will be recruited to the roles of mentor (expert) and mentee (less-experienced staff). The mentee wearing the HoloLens headset will respond to three different clinical emergency scenarios on SimMan 3G simulators. The mentor in a separate room, will guide the mentee using a laptop. The outcomes from the study will include an assessment of the mentor's and mentee's perception of the AR's usability, mentorship effectiveness, self-confidence and the mentees' skill performance. The long-term goal of the project is to improve the support and guidance available to students and health care professionals who may be working in more isolated settings.



### Further Information

Mr Dung Trung Bui

E [DungTrung.Bui@utas.edu.au](mailto:DungTrung.Bui@utas.edu.au)



## Investigating Suicide Postvention Support Needs in Northern Tasmania



Tasmania is one of 12 National Suicide prevention Trial Sites (NSPT). The Tasmanian component of the National Suicide Prevention Trial runs until June 2020 and is funded through Primary Health Tasmania (PHT) across three locations: Break O'Day, three north west municipalities (Burnie, Central Coast and Devonport) and Launceston. All three locations are using the Black Dog Institute's LifeSpan suicide prevention model – a systems-based approach that is aimed at reducing suicide and suicide attempts by building the capacity of the community to better support people facing a suicide crisis. Improving emergency and follow up care for suicide crisis is identified in the model, however there is limited emphasis on longer term support post suicide.

Formalised postvention support services are limited in rural Tasmania and have been identified as a service gap. Lifeline Tasmania has funded the Centre for Rural Health to investigate formal and informal support needs for community members affected by suicide in the three NSPT sites.

Understanding the service needs of people living in regional and rural areas is a critical component of contemporary health and

welfare service delivery. Information from those with lived experience of barriers to accessing suicide postvention support services can be used to provide feedback to both service providers and funding authorities. Information from service providers will assist to understand the service landscape and triangulate data gleaned from those with lived experience. This can then provide evidence to improve how and what is delivered to people and communities bereaved by suicide.

The aim of the research project is to understand what support and service options are needed by community members affected by suicide in the three Tasmanian NSPT trial sites, how these needs can best be met and the barriers and enablers influencing support access.

The research team will be collecting data until February 28th, 2021. Community members are invited to participate in an interview and service providers are invited to participate in focus groups in each of the three NSPT locations.



### Further Information

Dr Heather Bridgman

P 03 6324 4048

E [heather.bridgman@utas.edu.au](mailto:heather.bridgman@utas.edu.au)

## International Gardening During COVID Survey.

One thing that became very obvious during our experience of the COVID virus pandemic, was that many people were suddenly finding time and inspiration to turn to gardening. No doubt gardeners amongst you will have heard about the global shortage of seeds and gardening products.

Early on after restrictions had been introduced in Europe, USA and Australia, I was fortunate to join an international team of gardening researchers all of whom wanted to dig more deeply into this phenomena. We wondered, was this interest just because people were stuck at home with nothing better to do? Or were people using gardening as a coping strategy as has been traditionally the case, perhaps a way of finding peace and tranquillity in a tumultuous time? Maybe the fear of food shortages, exacerbated by climate change, was behind it all? And we wanted to know, was this experience shared by people living in rural and regional areas as well as those in large cities?

Together, Dr Jonathan Kingsley (Swinburne University of Technology), Dr Brenda Lin (CSIRO), Dr Alessandro Ossola (Macquarie University), Dr Monika Egerer (Technical University of Berlin), Dr Lucy Diekmann (University of California) and I designed a survey tool to answer these questions. To capture both quantitative and qualitative data, the tool provided plenty of opportunities for short answer responses. It was translated into three additional languages – Spanish, German and Vietnamese (without a budget, so mainly with the help of family and friends. Special thanks to our own Dzung Trung Bui for the Vietnamese version).

We received over 4500 responses from across the globe. The majority of these come from Australia, the USA and Germany, where the researchers are based, and from MM areas 1-3. Respondents lived across rural/urban gradients, were mainly women and generally represented older age brackets. They ranged from people who were new to gardening, had returned

to gardening, and who had gardened for many years. We are currently analysing the data, and my work is in the qualitative arena.

Early results emerging from our analysis are exciting and encouraging. For instance, in response to the question "Has COVID-19 changed how you think about the value of gardens for you and the community?", people talked about a myriad of ways in which gardening had become more important. Certainly, the garden and the act of gardening functioned as a haven, to provide solace and restoration from the stresses associated with the pandemic and the very real personal threat of the virus. It also provided the means for keeping connected with others – children at home, spouses who had lost their jobs, neighbours across the fence and a world-wide online gardening community. But the importance of this is not to be understated. People described the garden as 'life-saving' and 'vital' – expressions not to be sniffed at. Many people felt a heightened sense of value for a local food source, the quality of which they could control. Interestingly, the need for control permeated through other responses: gardening was something people could do when so much was out of our personal control.

We aim to have results finalised and papers published over the next few months. On the agenda is a paper that looks at particular issues pertaining to gardeners living in MM3-8 areas across Australia. We have been fortunate indeed to have outdoor spaces through which we can connect to nature and to each other over these challenging times.



### Further Information

Dr Pauline Marsh

P 03 6226 6905

E [pauline.marsh@utas.edu.au](mailto:pauline.marsh@utas.edu.au)

# Director's Report

The Rural Health Multidisciplinary Training (RHMT) program is one of several Commonwealth rural health workforce programs that aim to increase the number of health professionals working in rural, remote, and regional Australia. The program supports a national network of 16 University Departments of Rural Health (UDRHs) and 19 Rural Clinical Schools (RCSs) in rural and remote Australia.

Over 2019, the RHMT program was comprehensively evaluated to help inform future program design. It was found that the RHMT program has been an appropriate response to addressing rural health workforce shortage, was of clear value to rural communities and health services and had become a strong foundation for rural health workforce training and research. Areas for improvement were identified for the program and feedback obtained from a range of stakeholders to help shape the requirements and expectations for the program from 2022 and onwards.

Our fifth annual report under the RHMT to the Federal Government Department of Health captures key work activities and outcomes of staff from the CRH, the Rural Clinical School (RCS), the College of Health and Medicine's Professional Experience Placement (PEP) unit and from the medical "HUB" project. Unfortunately, the pandemic has meant that some student placements over 2020 were modified or post-postponed. It has been especially difficult for mainland students who had planned to come to Tasmania for their placement. Their plans have been affected by travel restrictions and quarantine arrangements.

Despite this, good progress was made against all our 'core requirements' of the program. Over the 2020 calendar year, the **RHMT program funding supported a total of 2,767 multidisciplinary (non-medical) rural placement weeks in Tasmania.** Amazingly, this was only 1 week less than last year's total! Some 569 nursing/midwifery and 53 allied health students have been placed in rural/remote Tasmania as part of their course. However, there was a significant decline in the number of mainland allied health students supported over the year because of COVID19 travel restrictions. Reflecting this decline and the increased number of nursing placements, the average length of placement was a little lower than targeted (4.4 weeks vs 5 week target).

Whilst local **research projects** were affected by the pandemic over the course of 2020, a number were modified for safety reasons and, thankfully, many were able to continue. Staff and students have also been busy grant writing and working on reports and manuscripts for publication. In 2020, we published a total of 34 research articles in peer reviewed journals. Over 55% of these appeared in Q1 ranked journals (source: Clarivate Analytics).

The **Australian and New Zealand Standard Research Classification (ANZSRC)** is a set of classifications developed for use in the measurement and analysis of research and experimental development statistics. ANZSRC allows the comparison of data to be made across countries, sectors and organisations for example. A review of ANZSRC was recently undertaken to ensure the classification reflected current practice and to improve coverage, coherence, and consistency. As part of the review process, researchers, academics, professional associations and peak industry bodies across Australia and New Zealand were consulted. As a result, several changes were made. Happily, for all rural health researchers, the revised set of classifications (ANZSRC 2020) include four new six-digit Fields of Research (FoRs) codings that can be used to better capture rural health research activity and outputs. This has not previously been possible. To some extent, much rural health research has been hidden. The new codes can now be used by researchers and others to better report, celebrate and make this work much more visible. Examples of some of the new codes introduced are listed below.

|        |                                  |
|--------|----------------------------------|
| 320224 | Rural clinical health            |
| 420321 | Rural and remote health services |
| 440406 | Rural community development      |
| 440609 | Rural and regional geography     |

Funding provided by Tasmanian Community Fund over the past 3 years has enabled work of the Tasmanian **Bereavement Care Network (BCN)** to continue under the auspices of Palliative Care Tasmania (PCT) with the employment of a Project Officer for 1 day per week over this period. The Tasmanian Bereavement Care Network (BCN) was established in 2017 and aims to link and improve support for people working in bereavement care across rural, regional and remote areas of Tasmania. Network members subscribe to a set of values and principles that underpin the provision of high-quality bereavement care by both formal and informal service providers in Tasmania (<https://www/bcntasmania.org.au/>). Staff from the CRH are evaluating the BCN in preparation for a report to be submitted to the TCF. Current members are keen to continue the work and activities of the BCN. How to take the network forward is being led by members Danielle Conlan and Madeleine Ball.

At the end of last year, we bid the fondest of farewells to three staff members. **Merylin Cross** who contributed to a range of education and training projects, **Len Crocombe** who led our initiatives in oral health, including the establishment of the Centre for Research Excellence in Primary Oral Health Care and **Katherine Kent** who came to Tasmania as a post doc with expertise in nutritional science. We thank them greatly for their contributions and wish them the very best for the future.

Sadly, we mourn the loss of **Caroline Deakin**, who recently passed away after a battle with illness. Caroline was the energetic and enthusiastic project manager of the HWA funded simulation project at the CRH for a number of years and will be missed by everyone who had the pleasure of knowing her.

**Tony Barnett (Director)**



**Centre for Rural Health**

Contact: Terri Stevens

**P** 03 6324 3318

**E** [terri.stevens@utas.edu.au](mailto:terri.stevens@utas.edu.au)



**Centre for  
Rural Health**



**Further Information**

A/Prof Tony Barnett

**P** 03 6324 4011

**E** [tony.barnett@utas.edu.au](mailto:tony.barnett@utas.edu.au)