

# CENTRE FOR RURAL HEALTH BULLETIN

JULY 2015

NEWS	02
PUBLICATIONS	05
PROJECTS	08
GRANTS/RESEARCH	10
EVENTS	14
DIRECTOR'S REPORT	16

## In this Issue:

07

### Graduate Research

Winter elegantly marks the end of the four season cycle of nature and it is also a window for new developments.

09

### Cultural Safety

A whole – of – university approach is to resolve and reduce culturally unsafe practices.

## Student Survey Shows Positive Outcomes for Rural Clinical Placements

The Centre for Rural Health supported more than 350 students on clinical placement in rural Tasmania last year. Some were provided with accommodation at one of the sixteen Rural Health Teaching Sites while others received a payment to assist with the cost of travel. Supporting students can mean the difference between a good or not so good experience. It allows students to work in some of the more remote parts of the State without prohibitive costs, and it allows remote communities and health care facilities to reap the benefits of student placements in the same way as the larger centres.

In Semester 2, a new student survey tool was introduced which has provided richer and more comprehensive data than collected previously. The tool is being used by 11 UDRH across the country. While scoring experiences on a scale of 1 to 5 may be useful in gaining an overall impression of student satisfaction, the comments provide depth and understanding.

Students were asked: **“What were the things you most enjoyed about your placement?”**

### Education and skills

Many students appreciated the opportunity to not only learn new skills but to practise and consolidate them in a supportive environment. They were provided with “plenty of learning opportunities” and enjoyed “practicing in a way that promoted holistic patient-centred care.” Some students enjoyed working with a range of health professionals within a multi-disciplinary team: “What I enjoyed the most is about how a multidisciplinary approach

“

Life as a rural general practitioner was pretty unappealing to me before undertaking this placement – it showed me how dynamic rural medical practice is, and how there are many lifestyle perks to practicing medicine rurally – being close to nature, being involved with the community.

is used in the context of rural areas especially in chronic disease management.” For some students it was their first hands-on experience treating real patients, “putting into practice skills developed through the course of my degree.” A paramedic student commented:

*I enjoyed learning about the dynamics and logistics of how Paramedics operate. There is a lot more to it than meets the eye, which is something I really appreciated.*

### Clinicians and quality of supervision

Many students rated their supervisors and other staff

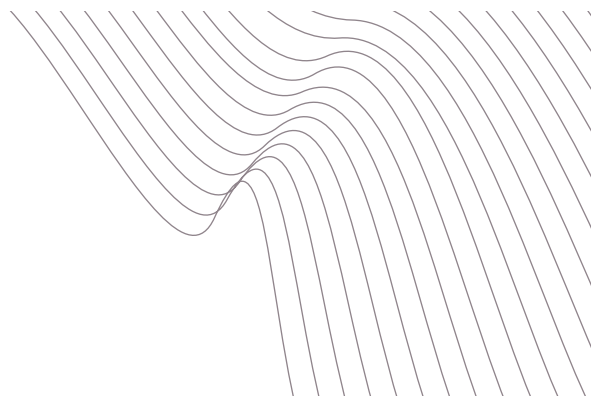


Ms Karla Peek – CRH Rural Health Placement Coordinator

very highly: they “were very warm and welcoming and very open to questions and sharing their knowledge.” They were “incredibly supportive and very knowledgeable” and students appreciated being welcomed into the facility: “They really wanted us and appeared to enjoy teaching us!” One student described a nurse as someone who “has really inspired me to continue with post-graduate education and gain qualifications to be able to work as a nurse practitioner in a rural area sometime in the future.”

STORY CONTINUED ► Page 04

# NEWS & ACTIVITIES



## Welcome our new Rural Health Lecturers



**Dr Terry Cox** recently commenced with the Centre for Rural Health after several years with Sociology, Nursing, Aboriginal and Torres Strait Islander education and student support at Newnham and Cradle Coast. He received his PhD in 2012 for a study that examined primary carers of childhood cancer survivors. He comes with a background in health sociology and qualitative research and looks forward to working with the Centre for Rural Health team.

Terry recently developed the Faculty of Health: Indigenous Health Strategic Plan 2014-2016 and is intent on advancing the health of Aboriginal and Torres Strait Islander peoples. He sees future health professionals requiring advanced clinical and cultural competencies, an increase in Aboriginal students pursuing health careers, greater engagement between health professionals and Aboriginal communities and research aimed at improving Aboriginal health at individual, family and community levels. Terry is currently scoping a pilot study around Aboriginal men, masculinities and health pathways. And from little things, big things grow.

Outside academia, Terry enjoys exploring the landscape with his metal detector and expects to find that big gold nugget 'next' time.



**Dr Simone Lee** recently joined the Centre for Rural Health as Research Assistant and Lecturer, having moved to Launceston with her family from Adelaide in 2013. Prior to her role at UTAS, she worked as the Northern Education and Training Coordinator for Epilepsy Tasmania and Coordinator Aboriginal Health for Tasmania Medicare Local.

In Adelaide, Simone held numerous health promotion positions including 14 years at Cancer Council SA. She received her PHD in 2005 which examined lipid metabolism in people at risk of developing heart disease. On the days she's not working at CRH, Simone works as a Research Fellow for Active Tasmania, and is also collaborating on a Health Literacy project called Ophelia through the School of Health Sciences. Her research interests are varied and include health promotion, health literacy, rural health, epilepsy support and cancer epidemiology.

When she's not working, Simone enjoys spending time with her family, exploring this stunning island that is Tasmania. She's also been known to sing a jazz tune or two at various Arts Festivals in Adelaide and is currently enjoying the local music scene here in Launceston.



**Dr Pauline Marsh** has a strong interest in Tasmania's social, cultural and community life. This is reflected in her work history: in consumer consultation, social research and policy development, community and remote area nursing and university teaching and research. She has published articles on her PhD topic, Reconciliation Cinema, and her current research interest is in the representation of rural health workers in popular culture.

In addition to her two days at the CRH, Pauline also works part-time with TasCOSS, in health and early years policy and research, and has recently set up the Bottom Line Blog as an online site where people living on low incomes tell their stories. Pauline lives in a small, beautiful beach-side community 40 kms out of Hobart.

# Centre for Rural Health – Primary Health Care Practitioner Program (CRH-PHCPP)

## A Call for Expressions of Interest

Each year, the University of Tasmania Centre for RuralHealth (CRH) offers a small number of part-time work opportunities for health professionals with an undergraduate degree in a health related field, to build their skills, experience and track record through hands-on involvement with a project.

The exact scope of the activities will depend on the particular project but will likely cover many of the skills required to undertake research and/or evaluation such as research design, data collection, data analysis, and reporting.

Expressions of Interest for 2015, including a current CV and a brief covering letter nominating your

preferred project, should reach:

**Dr Martin Harris**

**Email:** Martin.Harris@utas.edu.au

**Phone:** (03) 6324 4029

**Post:** Centre for Rural Health,  
School of Health Sciences, Faculty of Health University of Tasmania  
Locked Bag 1322  
Launceston 7250

We are now seeking expressions of interest for the short-term work in the following areas:

1. Educational development of virtual orientation tours
2. The Life Support program
3. GP and community development
4. Mental Health Road Art Show
5. Evaluation of better oral health in residential aged care facilities
6. Prevention, detection and management of early childhood caries: A systematic review of clinical practice guidelines
7. A systematic review of clinical practice guidelines on waiting list for Oral Health Services: consistent and equitable?
8. Virtual education for clinical practice (Helping Hands)
9. The International Student Experience
10. Feasibility of a rural based tele-psychology clinic
11. Circle of Security: parent attachment study

## Primary Health Care Practitioner (PHCP) – Scholars

Each year the University of Tasmania Centre for Rural Health (CRH) offers a small number of project-based, research training linked to CRH research projects. These placements provide an opportunity for primary health care professionals with an interest in research to build their research skills, experience and track record through hands-on involvement under the guidance of an experienced researcher.

Many previous participants in this program have moved on to study for higher degrees, have found positions with a research component or have done further research as practitioners. We are pleased to provide an outline of the projects undertaken in 2014.

### Further Information

**Dr Martin Harris**  
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Scholar	Project Title	Supervisors
<b>Winnie Nguyen</b>	Workplace Health & Safety	Dr Quynh Le Dr Ha Hoang
<b>Sally Page</b>	Relationship of dental practitioners to rural care primary networks	Assoc/Prof Tony Barnett Dr Ha Hoang
<b>Kerry Fleming</b>	Skill decay and Life Support training for health care professionals	Assoc/Prof Tony Barnett
<b>Ashlea Furlan</b>	Readability characteristics of oral health information literature provided to the Australian public	Assoc/Prof Tony Barnett Dr Ha Hoang
<b>Kate Cross Frances Stewart</b>	Referral Mapping for community youth mental health services – north west	Dr Heather Bridgman
<b>Anthony Carnicelli</b>	Skill decay in Life Support training for (paramedic) health care professionals	Dr Merylin Cross
<b>Cherie Hazlitt</b>	Longitudinal mapping of the impact of the CRS e-health program on access to health services in rural and remote communities	Dr Sue Whetton
<b>Zoe Hingston</b>	The Community Friends and Alumni Project	Mark Kirschbaum
<b>Amy Isham</b>	Information-seeking behaviours of dentists	Dr Len Crocombe
<b>Jennifer Kraatz</b>	Chronic Disease Dental Scheme	Dr Len Crocombe
<b>Suzanne Feike</b>	The oral health needs of older people with Culturally And Linguistically Diverse backgrounds in Australia.	Dr Len Crocombe



## ▶ COVER STORY (CONTINUED)

**Rural community**

This was the first time many students had lived and worked in a rural community and it often challenged their preconceptions of rural life. They experienced first-hand the strong sense of community which can be found in many rural communities, meeting “friendly and welcoming people.” One pharmacy student described the benefits of living and working in a close-knit community:

*The staff at the pharmacy knew 90% of the people that came in and knew their stories – meaning better health outcomes and advice can be given!*

Placements take place in a range of geographical locations and this was an added bonus for many students, providing them with opportunities to explore the area on weekends. A nursing student undertaking a community placement loved the landscape, “the amazing Tassie countryside is your office!”

One Physiotherapist stated:

*I really enjoyed it. The town was very welcoming and so was the hospital and staff.*



Rural Health Teaching Sites Map

**The staff at the pharmacy knew 90% of the people that came in and knew their stories – meaning better health outcomes and advice can be given!**

*Very different to home but a great experience. Made me consider working in a rural setting more than previously thought.*

**Diversity of conditions**

Rural sites offer a range of working environments and

exposure to a diversity of clinical conditions. Nursing students on community placements enjoyed working with clients in their homes, listening to their stories, and came to appreciate and understand a lifestyle far different from their urban experiences. Other students

were impressed with the quality of the facilities, including the accommodation: “The motel (Latrobe RHTS) and the facilities were absolutely excellent.” Having both emergency and community nursing in one centre gave nursing students the “opportunity to maximise a wide range of nursing skills” while one paramedic student added that “a wide variety of jobs and people... certainly had a positive impact on my learning experience.” Social work placements in rural areas allowed students to observe “how there is not just one way to do social work” and provided exposure to work within a range of environments. A rural placement often provides students with the chance to “understand the complexities of working in rural areas with often limited resources.”

One of the key learnings from our analysis of the data was that it didn’t matter whether students were on placement for a week, a month or even longer – most of them enjoyed working in a rural location. This suggests there is value in a rural placement, that a taste of rural life is better than no taste at all!

**Further Information**

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## Primary Health Care Practitioner Scholarship recipients’ success

**Anthony Carnicelli**, a Paramedic educator and Intensive care Paramedic with Ambulance Tasmania used his PHCP scholarship to add a Paramedic context to a study on learning decay and Life Support Training being undertaken by the Centre for Rural Health.

On the basis of his pilot study, Ambulance Tasmania will include in their next professional development course a session reviewing cardiac arrest management. The session will include a simulated practical component during which CPR and defibrillation will be assessed and accredited.

**Zoe Hingston** one of CRH PHCP scholarship recipient has been accepted into the University’s Honours Program. Zoe will continue to work on The Rural and Remote Community friends Alumni project – A Community and University partnership to support allied health students on placement.

The study will recruit a network of local community members referred to as Community friends, who are willing to provide local knowledge and friendship to health students undertaking clinical placements in Tasmania. By becoming student’s Community Friend during their placement period, local community members can offer personal insight into the professional and personal benefits of living and working in rural communities.

This relationship between the community friend and student can be mutually beneficial.

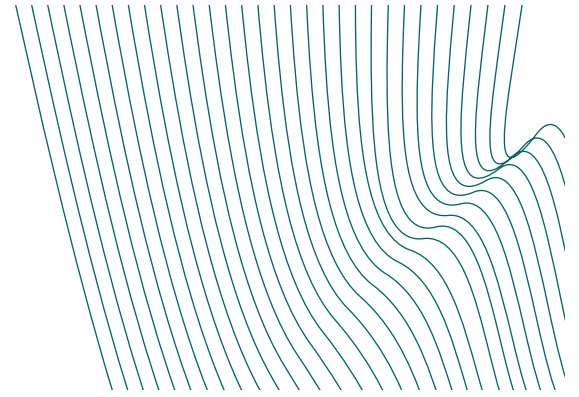
Activities may include inviting the student to social and sporting activities, bushwalking, sightseeing, and inviting them to participate in community events. Increasing students’ involvement in local communities may encourage the community’s exposure to higher education pathways and to promote continuing education beyond year 10 to community youth.

**Further Information**

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# 2014 PUBLICATIONS



## Journal Articles

**Barnett, AP., Hoang, Ha., Stuart, J., Crocombe, LA.,** and Bell, E.J., "Utilisation of oral health services provided by non-dental health practitioners in developed countries: A review of the literature", *Community Dental Health*, 31(4) pp. 224-233. ISSN 0265-539X (2014) [Refereed Article]

Bell, E.J., **Crocombe, LA.,** Campbell, S.J., Goldberg, L.R., and Seidel, B.M., "Understanding the Research-Policy Divide for Oral Health Inequality", *Healthcare Policy*, 10(1) pp. 64-81. ISSN 1715-6572 (2014) [Refereed Article]

**Bridgman, H.,** and Mercer, J., "Why doing diabetes 'by the numbers' doesn't always work", *Australian Diabetes Educator*, 17(2) pp. 16-18. (2014) [Professional, Refereed Article]

Cheek, C.G., **Bridgman, H.,** Fleming, T., Cummings, E.A., Ellis, L., Lucassen, M.F.G., Shepherd, M., and Skinner, T.C., "Views of Young People in Rural Australia on SPARX, a Fantasy World Developed for New Zealand Youth With Depression", *Journal of Medical Internet Research*, 16(1) pp. 1-12. ISSN 1438-8871 (2014) [Refereed Article]

**Crocombe, LA.,** Brennan, D.S., Slade, G.D., Stewart, J.F., and Spencer, A.J., "The effect of lifetime fluoridation exposure on dental caries experience of younger rural adults", *Australian Dental Journal* ISSN 0045-0421 (2014) [Refereed Article]

**Crocombe, LA.,** Slack-Smith, L., Bell, E.J., and **Barnett, AP.,** "The Changing Oral Health Situation in Australia and Moving Towards Primary Oral Health Care", *Asia Pacific Journal of Health Management* 9(1) pp. 45-49 ISSN 1833-3818 (2014) [Refereed Article]

Fleming, T.M., Cheek, C., Merry, S.N., Thabrew, H., **Bridgman, H.,** Stasiak, K., Shepherd, M., Perry, Y., and Hetrick, S., "Serious games for the treatment or prevention of depression: A systematic review", *Revista de Psicopatologia y Psicologia Clinica*, 19(3) pp. 227-242. ISSN 1136-5420 (2014) [Refereed Article]

**Godwin, D., Hoang, Ha., Crocombe, LA.,** and Bell, E.J., "Dental practitioner rural work movements: A systematic review", *Rural and Remote Health*, 14(3) Article 2825. ISSN 1445-6354 (2014) [Refereed Article]

Ha, D.H., **Crocombe, LA.,** and Mejia, G.C., "Clinical oral health of Australia's rural children in a sample attending school dental services", *Australian Journal of Rural Health*, 22 pp. 316-322. ISSN 1038-5282 (2014) [Refereed Article]

**Hoang, Ha, Le, Q.,** and **Terry, DR.,** "Women's access needs in maternity care in rural Tasmania, Australia: A mixed methods study", *Women and Birth*, 27(1) pp. 9-14. ISSN 1871-5192 (2014) [Refereed Article]

**Hoang, Ha., Le, Q.,** and Ogden, K., "Women's maternity care needs and related service models in rural: A comprehensive systematic review of qualitative evidence", *Women and Birth* pp. 9. ISSN 1871-5192 (2014) [Refereed Article]

**Kraatz, J., Qin, D., Hoang, Ha., Godwin, D.,** and **Crocombe, LA.,** "Regional use of the Australian Chronic Disease Dental Scheme", *Australian Journal of Rural Health*, 22(6) pp. 310-315. ISSN 1038-5282 (2014) [Refereed Article]

**Le, Q., Auckland, SRJ., Nguyen, HB.,** and Murray, S.L., and Long, G., and **Terry, DR.,** "Food Security in a Regional Area of Australia: A Socio-economic

Perspective", *Universal Journal of Food and Nutrition Science*, 2(4) pp. 50-59. ISSN 2333-2727 (2014) [Refereed Article]

**Le, Q., Auckland, SRJ., Nguyen, HB.,** and **Terry, DR.,** "Views and Perceptions of Local Council Partners Concerning a Regional-scale Health Promotion Initiative in Rural Australia", *Universal Journal of Public Health*, 2(7) pp. 181-188. ISSN 2331-8880 (2014) [Refereed Article]

**Loudon, A., Barnett, AP.,** Piller, N., Immink, M., and Williams, A.D., "Yoga management of breast cancer-related lymphoedema: A randomised controlled pilot-trial", *BMC Complementary & Alternative Medicine*, 14 Article 214. ISSN 1472-6882 (2014) [Refereed Article]

**Mulholland, P., Barnett, AP.,** and **Spencer, J.,** "Interprofessional learning and rural paramedic care", *Rural and Remote Health*, 14(3) Article 2821. ISSN 1445-6354 (2014) [Refereed Article]

Muzoora, M., **Terry, DR.,** and Asimwe, A.A., "The Valorisation of African Languages and Policies in the African Education Systems: A Case of Uganda", *Universal Journal of Educational Research* 2(1) pp. 42-50 ISSN 2332-3213 (2014)

**Spencer, J., Woodroffe, JJ., Cross, M.,** and Allen, P.L., "A golden opportunity": Exploring interprofessional learning and practice in rural clinical settings", *Journal of Interprofessional Care* Article 970250. ISSN 1356-1820 (2014) [Refereed Article]

**Terry, DR., Le, Q.,** and **Hoang, Ha.,** "Satisfaction amid professional challenges: International medical graduates in rural Tasmania", *Australasian Medical Journal*, 7(12) pp. 500-517. ISSN 1836-1935 (2014) [Refereed Article]

**Terry, DR.,** and **Le, Q.,** "Social capital among migrating doctors: The 'Bridge' over troubled water", *Journal of Health Organization and management*, 28(3) pp. 315-326. ISSN 1477-7266 (2014) [Refereed Article]

**Yeoh, JSW., Le, Q.,** and **McManamey, RM.,** "Challenges of Food Security for Migrants Living in a Regional Area of Australia: Food Availability, Accessibility and Affordability", *Journal of Food Security*, 2(3) pp. 72-78. ISSN 2372-0107 (2014) [Refereed Article]

**Yue, Yun., Le, Q.,** and **Terry, DR.,** "Transition to an unfamiliar environment: International Students' living experiences in an Australian regional area", *Journal of the Australian and New Zealand Student Services Association (JANZSSA)*, 23(April 2014) pp. 10-20. ISSN 1320-2480 (2014) [Refereed Article]

## Chapter in a Book

**Terry, DR.,** and **Terry, MM.,** "The globalisation of health care and health care professional acculturation", *Acculturation psychology, processes and global perspectives*, Nova Science Publishers, Inc, Jack Merton (ed), New York, pp. 235-250. ISBN 978-1-63321-348-7 (2014) [Research Book Chapter]

## Conference Publications

Barrett, A., **Terry, DR** and **Le, Q.,** "Challenges and contributions of rural community nursing into Tasmanian health workforce and services: A qualitative study", 20-21 November 2014, Western Australia (2014) [Conference Extract]

Bell, E., **Crocombe, LA.**, "Data Mining and Dentograms: Some Possibilities for using 21st C Computational Linguistic to Reinvent Oral Health Research" The 6th International Meeting of Methodological issues in Oral Health Research, Adelaide, April 2014

Bird, ML., Millar, J., Clark, BD., **Whetton, SG.**, and Smith, SA., "Engaging older adults in technology to improve balance", 16-18 November, 2014, Sydney, Australia (2014) [Conference Extract]

**Boyer, K., King, A., Orpin, P.**, and Rubie, K., "We Didn't Think about it much: Screening for nutritional risk" Australian Association of Gerontology National Conference, Adelaide 26-28 November

**Bridgman, H.**, and Cheek, CG., "Community Service Mapping for Young People Referred for Mental Health and/or Behavioural Problems in North West Tasmania – Preliminary Findings", Sept 16, 2014, University Department of Rural Health North Coast (2014) [Conference Extract]

Carroll, M., Walker, J., **van der Ploeg, W., Orpin, P., Boyer, K.**, and Bartlett, H., "A Review of Rural Ageing Well Interventions" 3rd Annual NHMRC Symposium on Research Translation, Melbourne 12-13 November 2014

**Crocombe, LA.**, Brennan, DS., Slade, GD., Stewart, J., and Spencer, AJ., "The Effect of Lifetime Fluoridation Exposure on Younger Rural Adults" The 6th International Meeting of Methodological issues in Oral Health Research, Adelaide, Australia April 2014

**Crocombe, LA.**, "Population Oral Health" Primary Care Theme Meetings Menzies Research Institute, University of Tasmania, Hobart May 2014

**Harris, M.**, and Mendoza, J., "Ready, willing and able to have THAT conversation: A conversation for life", 15th International Mental Health Conference, 25-27 August, Gold Coast, Australia ISBN 978-1-922232-16-8 (2014) [Non Refereed Conference Paper]

**Hoang, Ha., Crocombe, LA., Kraatz, J.**, and Qin, D., and **Godwin, D.**, "A retrospective analysis of Medicare rebate claims over time and region of the Australian Chronic Disease Dental Scheme for the period 2008–2012", 1-3 April 2014, Adelaide, Australia (2014) [Plenary Presentation]

Ingles, J., Sarina, T., Connell, V., Kozlovski, J., Yeates, L., **Kawa, J.**, Hunt, L., Ogden, K., Davis, A., Weintraub, R., McTaggart, D., McGaughan, J., and Semsarian, C., "The Australia Genetic Heart Disease Registry: The first 5 years", Heart, Lung and Circulation, 7 – 11 August, 2013, Gold Coast, Australia ISSN 1443-9506 (2014) [Conference Extract]

**King, AC., Orpin, P., Woodroffe, JJ.**, and **Boyer, K.**, "Food security and insecurity in older adults: A phenomenological ethnographic study", November 2014, Adelaide, Australia (2014) [Conference Extract]

**Kirschbaum, M.**, Page, A., Khalil, H., and Taylor, S., "Through the farm gate: Pharmacy students' intention in pursuing a rural career", conference proceedings, 21-23 May 2014, Brisbane, pp. 1. (2014) [Conference Extract]

**Kirschbaum, M.**, Khalil, H., and Page, A., "Clinical placements by Australian University School of Pharmacy: A mapping study", Conference proceedings, 21-23 May 2014, Brisbane (2014) [Conference Extract]

**Le, Q.**, "Challenges facing vulnerable young adults in food security: Health disparities and regional disadvantage", 17 – 20 August 2014, Anchorage, Alaska, USA (2014) [Conference Extract]

**Le, Q.**, "Spatial analysis of access to healthy food in a rural area of Australia", 17 – 20 August 2014, Anchorage, Alaska, USA. (2014) [Conference Extract]

**Marathe, J.**, Lim, WH., Dekker, GA., and Hague, WM., "Gestational Diabetes and Obstetric Cholestasis – a 10-year retrospective cohort review of outcomes and predictors", Diabetologia: clinical and experimental diabetes and metabolism, 15-19 September, 2014, Vienna, Austria ISSN 0012-186X (2014) [Conference Extract]

**Marathe, J.**, and Ogden, K., and **Woodroffe, J.**, "Health literacy, genetic literacy and outcomes in patients with genetic cardiac disease: A review of the literature", Heart, Lung and Circulation, pp. e12, 23 (Suppl 2). (2014) [Conference Extract]

**Marathe, J.**, and Ogden, K., "Knowledge and perceptions of genetic cardiac diseases amongst medical students – a pilot survey", Heart, Lung and Circulation, 7 – 11 August, 2013, Gold Coast, Australia ISSN 1443-9506 (2014) [Conference Extract]

**Marathe, J., Woodroffe, J.**, and Ogden, K., "Knowledge and perceptions of genetic cardiac disease amongst general practitioners: The Tasmanian experience", Heart, Lung and Circulation, pp. e13, 23 (Suppl 2). (2014) [Conference Edited]

**Marathe, J., Woodroffe, JJ.**, and Ogden, K., "Directing patients to reliable web-based information about genetic cardiac disease: An example using the HONCode", Heart, Lung and Circulation, 6-8 August, 2014, Brisbane, Australia, pp. e12-13. ISSN 1443-9506 (2014) [Conference Extract]

**Terry, DR.**, Barrett, A., **Le, Q.**, and **Hoang, Ha.**, "Rural Community Nurses: Insights into Health Workforce and Health Service Needs in Tasmania", Conference proceedings, 14-15 March 2014, Vancouver, Canada, pp. 58. (2014) [Conference Extract]

## Contract Report/ Consultants Report

**Auckland, SRJ., Woodroffe, JJ.**, and Allen, P., Tasmania Medicare Local Social Determinants of Health Project: Thematic Analysis of Community Proposals, University of Tasmania (2014) [Contract Report]

**Barnett, AP., Auckland, SRJ., Bridgman, H., Cross, DMG., Dennis, S.**, and **Kirschbaum, M.**, Rural Health Benchmarking Project 2013/14 Final Report and Recommendations, CRH, Tasmania (2014) [Contract Report]

**Barnett, AP., Cross, DMG., Hills, NJ., Kirschbaum, M., Bridgman, H., Valk, M., Deakin, C.**, and **Spencer, J.**, Simulated Learning Environments Distributed Simulation Project: Final Report University of Tasmania, HWA, Adelaide (2014) [Contract Report]

Barrett, A., **Terry, and DR, Le, Q.**, "Rural community nurses: Insights into health workforce and health service needs in Tasmania" (2014) [Report]

Cleland, V., Squibb, K., **Hughes, C.**, Venn, A., Thornton, L., and Ball, K., "Creating environments that support active living in rural Tasmania: Findings from a qualitative study", pp. 1-18. (2014) [Report]

**Eyles, KJ., Wild, AL.**, and Eversole, R., Retirement Living in Tasmania: Expanding choices, informing decisions, Institute for Regional Development, University of Tasmania (2014) [Contract Report]

**Eyles, KJ., Wild, A.**, and Eversole, R., Retirement living in Tasmania: Expanding choices, informing decisions, Institute for Regional Development, University of Tasmania (2014) [Consultants Report]

**Eyles, KJ.**, Eversole, R., and Broun, DJ., West Coast: Place Based Workforce Planning Project, Department of Education Employment and Workplace Relations and the Cradle Coast Authority (2014) [Consultants Report]

**Harris, MW.**, and **Auckland, SRJ.**, "Senate Select Committee on Health", Senate Select Committee, Parliament of Australia, Australia (2014) [Government or Industry Research]

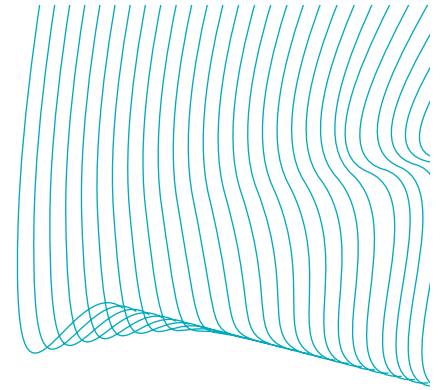
**Harris, MW.**, "Intentional self-harm and suicidal behaviour in children", Submission to the National Children's Commissioner (2014) [Report]

Long, G., Peaty, G., **Auckland, SRJ., Le, Q.**, and **Nguyen, HB.**, Dorset community health and wellbeing survey, Tasmanian Health Organisation-North, Dorset Primary Health, Department of Health and Human Service, 1 (2014) [Contract Report]

Long, G., Peaty, G., **Auckland, SRJ., Le, Q., Nguyen, HB.**, Dorset community health and wellbeing survey, Tasmanian Health Organisation-North, Department of Health and Human Services (2014) [Contract Report]



# GRADUATE RESEARCH



Winter elegantly marks the end of the four season cycle of nature and it is also a window for new developments. In the garden of our Rural Health Graduate Research, it is the time of reflection on the past and preparation for the future pathway in the narrative landscape of our students' research journeys. There are always fascinating stories to share among us as a dedicated community of learning and researching!

First of all, we would like to welcome Lucio Babo Soares, Sancia West, and Deborah Zwolsman to the Rural Health research discourse. Lucio's research is an "Oral/Dental health survey" and is supervised by Dr Len Crocombe (CRH, Faculty of Health) Dr Silvana Bettiol (SoM, Faculty of Health) Dr Penny Allen (SoM, Faculty of Health). Sancia is conducting a study entitled "How does public policy affect the accessibility of cancer services in North West Tasmania?" and supervised by A/Prof Tony Barnett and Dr Elaine Crisp. Deborah is examining the "Work ability in an Australian context" and is supervised by A/Prof Tony Barnett and Dr Lisa Dalton.

We would also like to warmly welcome back Melissa Kirschbaum from her maternity leave. We really missed you greatly, Melissa. It is great to have you back. Melissa continues her research on "Over-the-counter (OTC) codeine addiction in rural Tasmania" and is under the supervision of A/Prof Tony Barnett and Dr Merylin Cross. Congratulations to Joanne Yeoh who has obtained the Graduate Research Travel Grant to present a paper entitled "Food security of migrants in a regional area of Australia: A qualitative study" at the 12th Asian Congress of Nutrition at Pacifico Yokohama, Japan on 13th – 18th May 2015. This presentation reported the qualitative results of Joanne's PhD thesis. Joanne is at the final stage of her research journey and this conference was a great opportunity for her to communicate with international scholars from different research fields.

Year 2015 has marked the first School of Health Sciences (SHS) Graduate Students Support program. These workshops are additional to seminar series organised by the UTas Research Domain and/or learning materials offered from the Grad Cert in Research, such as NVivo training (qualitative data analysis software), SPSS and STATA (quantitative data analysis tools), thesis formatting style, how to write a thesis abstract and publications, etc. For further details about these upcoming workshops, contact [Research.HealthSciences@utas.edu.au](mailto:Research.HealthSciences@utas.edu.au)

## On candidature progress, publication and research networking matters, congratulations to the following wonderful achievers:

**Anna Spinaze** (PhD Candidate) had submitted her thesis entitled "Being a rural health professional and working with people with chronic conditions" for examination. Anna was supervised by Prof Douglas Ezzy (Sociology), Dr Peter Orpin (CRH, Faculty of Health) and Prof Sue Kilpatrick (The Centre for University Pathways and Partnerships). We hope to hear from her good news soon.

**Deb Carnes** (PhD Candidate) has recently submitted her thesis entitled "Getting the Truth: A Qualitative Comparative Analysis of Rural Nurses' Attitude to Safety Climate and their Views of reporting a Hypothetical Medication Error" for examination. Deb was supervised by A/Prof Erica Bell and

Prof Sue Kilpatrick until Erica's passing in 2014 when Prof Rick Ledema became one of her supervisors. Good luck Deb.

**Joanne Yeoh** (PhD Candidate) has recently submitted her thesis entitled "Food security and cultural identity of migrants in the rural Context" for examination. Joanne's supervisors were Dr Quynh Le, Dr Thao Le and Dr Rosa Maria McManamey. We wish you all the best with the result.

**Jessica Marathe** (Masters Candidate) was successfully transferred to PhD degree.

**Christine Matera and Melissa Terry** have expressed their intention to submit their theses for examination.

**Diana Godwin** (PhD Candidate) had her joint paper entitled "Costly chronic diseases: a retrospective analysis of Chronic Disease Dental Scheme expenditure" published in the *Australian Health Review* (2015), pp. 1-5.

**Joanne Yeoh** (PhD Candidate) had her two joint papers: "Having enough cultural food? A qualitative exploration of the experiences of migrants in a regional area of Australia" published in the *Journal of Food Research* (2015), Volume 4, Issue 2, pp. 16-26; and "Effective strategies adopted by migrants to improve food security in Tasmania" published in *Food Studies: An Interdisciplinary Journal* (2015), Issue 4, pp. 1-13.

While reflecting and writing their research in progress, it is hard for our graduate research students not to perceive autumn and winter passing by magnificently and creatively through their window! Yes, they can be comforted by Leonardo da Vinci that "all our knowledge has its origin in our perceptions."

## Further Information

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# PROJECTS

## CRE Events & Project Update

The oral health needs of older people with culturally and linguistically diverse backgrounds in Australia –

*'A needle in a haystack'*



Suzanne Feike a CRH Oral Health Practitioner Scholarship recipient conducted a research into literature on the dental care of seniors in Australia. According to

Suzanne, "searching for research relating to the oral health of CALD communities in Australia has been like looking for a needle in a hay stack."

Through her work at the Migrant Resource Centre, where she provides information, resources and support to adults and seniors in CALD communities, Suzanne noticed that many seniors suffered from poor oral health. "I became concerned by the lack of oral health in the seniors I was seeing, and wondered if their CALD background might have been a contributing factor to poor access to dental care." Suzanne pointed out finding information on seniors from Australian CALD communities is particularly hard.

### Her research findings are:

- There were gradual positive changes in the oral health outcomes of the specific cultural groups over the period 2001-2013, but the reason for this was unclear.
- The growing acculturation of CALD communities may have been a contributing factor to this positive influence, or the use of culturally sensitive and appropriate services with relevant information targeted toward particular communities.
- There has been an increased use of appropriate resources available in various languages, both written and oral, and a growing use of free qualified interpreters through dental services.

### Further Information

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## RPLO Activity Update

The Rural Pharmacy Liaison officer (RPLO) positions are funded through the Pharmacy Guild of Australia and provide ongoing support to rural pharmacists through education and access to rural support packages. There are RPLOs located in every UDRH throughout Australia.

This year Mark Kirschbaum has been active in supporting the Rural Pharmacy Support Network (RPSN), which is the collective group of RPLOs and invited honorary members that provide significant contribution to rural pharmacy in Australia. Mark was elected as the chair of this group and has provided advice and support to AHREN on pharmacy's contribution to the UDRH programs.

One of the RPSN core achievements this year was the production of the RPSN booklet, which showcases our role within the UDRH and has been used to promote rural placements throughout Australian. An additional significant achievement was the signing of an MOU between the National Pharmacy Students Association, the peak pharmacy student body, and the RPSN. This has led to research opportunities into rural placements and providing an insight into students' perceptions on rural careers. Mark's was also elected to the Pharmaceutical

Society of Australia as a branch committee member and this has allowed him to assist in the coordination of continuing education for pharmacists throughout Tasmania and in particular rural areas.

The RPSN would like to congratulate Mrs Lindy Swain the former chair and member of the RPSN for her award as the Australian Pharmacist of the year. This acknowledges the importance of rural pharmacy to the whole profession and her award is a demonstration of the need to rural Australians that often experience reduced services in rural areas.

### Further Information

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# Better Oral Health for Older People

Dr Hai Ping Tan, a Senior Lecturer at the Australian Research Centre for Population Oral Health (ARCPOH) recently visited Tasmania under the Visiting Scholarship Scheme as a guest of the Centre of Research Excellence in Primary Oral Health Care (CRE) and the Centre for Rural Health (CRH) at the University of Tasmania, and Oral Health Services Tasmania (OHST) of the Department of Health and Human Services.

She teaches Geriatric Dentistry to both Bachelor of Dental Surgery and Bachelor of Oral Health students at the University of Adelaide.

Her presentations on better oral health for older people were well received. She gave the presentation to OHST clinical staff in Hobart, Devonport and Launceston. Dr Ioan Jones kindly drove her around the state and introduced her to the

OHST staff. Dr Stephen Pohan also invited her to speak to the northwest study group. She spoke about her research and practical applications of Silver Diamine Fluoride in treating Geriatric patients who have difficulty accessing dental care.

Dr Tan has obtained six competitive research grants since 2010, including the 2015 International Association for Dental Research Unilever Social Entrepreneur Approach to Change Oral Health Behaviour Award and two Australia NHMRC project grants and the 2013 International Association for Dental Research (IADR) Australian and New Zealand Division Award in Preventive and Community Dentistry.

## Further Information

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**L-R:** Ms Lyndsey Kinsmen (CRH), Dr Hai Ping Tan, Dr Ha Hoang (CRH), Dr Ioan Jones (OHST)



Dr Hai Ping Tan

## E-health survey: Results

The December 2014 Bulletin reported that the Centre for Rural Health was investigating the impact of the E-Health (Health Informatics) graduate program. In a recent study, the Centre for Rural Health investigated the impact of the E-Health (Health Informatics) program. The survey has been completed and results analysed.

The aims of the survey were to:

- Map the location of health informatics graduates and current students in health services across Australia
- Map their professional location, differentiating between health professionals and health informatics professionals
- Explore the impact of the program on graduates' approaches to the practice of health informatics

Potential participants were primarily contacted via email and invited to complete an anonymous online survey. They were also given the opportunity for a follow-up interview. The responses, while small (57% of a total of 60 delivered emails), indicated that the health informatics program is making an impact. Respondents were located in every state and territory in Australia where they are primarily employed by state and territory health services. The

majority of respondents (70%) are working in the area of health informatics, with almost half describing their roles as being at the tactical and strategic planning level of departments and organisations. Eighty per cent of those working in the area attributed their appointment and/or promotion to their participation in the course. Respondents felt that the course had provided them with a richer understanding of the domain of health informatics, particularly the need to consider social factors as well as technical factors when planning information systems. Respondents emphasised the need for strong leadership to promote cultural change while emphasising that a focus on the technology while ignoring cultural and organisational factors acted as a barrier to successful implementation of electronic information systems.

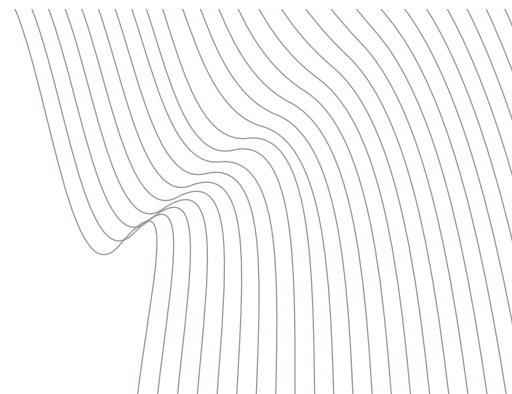
These results indicate that the program is having an impact on the health informatics workforce. This is indicated by the spread of graduates across all states and territories where they are increasingly taking up health informatics roles, adopting senior positions and contributing to the professional activities of health informatics organisations. The results also point to the success of the program in producing graduates who strongly advocate and seek to implement a socio-technical approach to health informatics.

The study was funded by the Centre for Rural Health's Primary Health Care Practitioner Scholarship Scheme.

## Further Information

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# GRANTS / RESEARCH



## University of Tasmania Projects of Institutional Significance for Aboriginal and Torres Strait Islander Peoples

### Cultural Safety: a whole-of-university approach

The intention of the Aboriginal and Torres Strait Islander Peoples Cultural Safety: a whole – of – university approach is to resolve and reduce culturally unsafe practices and the repeat of unsafe practices.

The resolution of cultural issues will provide a positive and inclusive experience for Aboriginal and Torres Strait Islander staff and students as well as enable all of the University's staff and students to identify unsafe practices and change practices towards inclusion. To be able to raise an Aboriginal and Torres Strait Islander cultural safety issue any staff and students can access the Work Health and Safety (WHS) web page. Under the WHS reporting structure there is an

Aboriginal Cultural tab in the drop down box on the Notify, Incident, Near Miss or Hazard web page heading. Once a cultural issue is reported it is referred to the Aboriginal and Torres Strait Islander Cultural Safety Officers. The issue is reviewed and a resolution is advised with an approach that involves all staff. The Aboriginal Cultural reporting site may not be used often, but the promotion and assurance that there is a way of identifying a cultural issue that a whole-of-

university approach can resolve, offers Aboriginal and Torres Strait Islander people an assurance that a safe environment is a university priority along the same principal as working and studying in a Healthy and Safe environment.

WHS issues are required to have a resolution and reporting structure. Any issues raised are acted on in a very short time frame and if a change needs to occur to ensure safety it becomes a practice that requires

a commitment to the change from all staff. Employees and students are expected to abide by WHS processes. WHS is promoted and there is information about WHS at all inductions. The Aboriginal and Torres Strait Islander Peoples Cultural Safety; a Whole-of-University Approach is based on the same principals.

#### Further Information

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## 'Getting in Early':

Improving early detection of Autism Spectrum Disorder in infants and toddlers through the implementation of the Social Attention and Communication Surveillance program (SACS).

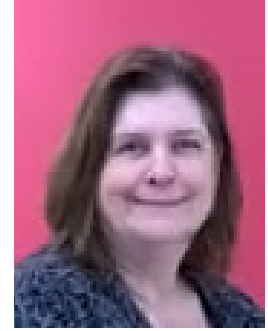
Through the support of a University of Tasmania community engagement grant Dr Lyndsay Quarmby was successful in securing funding to partner with the Olga Tennison Autism Research Centre (OTARC), La Trobe University, Melbourne to deliver training in the Social Attention and Communication Surveillance (SACS) tool. The SACS tool is

already being widely used across other states in Australia and is designed for professionals working with the 0-2yr old population. SACS is an evidenced based surveillance measure that supports professionals to monitor infants and toddlers for abnormal development through skilled observations to identify early indicators of an Autism Spectrum Disorder

so that children may receive more timely diagnostic assessment and intervention. The SACS program is positive step to more timely diagnosis and access to early intervention services for infants and toddlers across Tasmania. The training will be offered across three locations including Hobart, Ulverstone and Launceston and extended to professionals working with the paediatric population.

#### Further information

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**Project Team L – R:** Dr Merylin Cross (Project leader), Dr Lyndsay Quarmby, Associate Professor Tony Barnett and Dr Heather Bridgman (CRH) and Ms Louise Earwaker, Specialist Librarian

## Research literacy for health professionals

A team of researchers in the Centre for Rural Health and a specialist librarian have been awarded a small UTAS community grant to run a series of two half day workshops for practising health professionals in the North and North – west of the state to equip them with the basic skills to locate, analyse and translate quality research to update and/or refine a policy, procedure or practice guideline consistent with contemporary

research evidence. The workshops, titled ‘Real world research for health professionals’ are free and available to a range of health professionals. Workshop 1 focuses on increasing participants’ confidence and ability to search, locate and critically review the current evidence about a topic of interest to them. Workshop 2 addresses the level of evidence, suitability of applying the evidence to the local context, developing an

evidence-based case justifying the change, the barriers and facilitators to translating research into Evidence-Based Practice (EBP), managing the change and evaluating and reporting the outcomes.

The first two workshops were conducted in Launceston in April and May. Fifteen participants from five disciplinary backgrounds participated in the workshops with a view to reviewing

their practice against the contemporary research evidence and where appropriate, proposing a change to their practice, service delivery or organisational policy. Future workshops are proposed for Burnie and Launceston and, subject to interest, can be arranged in other areas.

### Further Information

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## New project takes innovative approach to reducing family violence

A new research project aimed at reducing the harmful effects on children resulting from exposure to family violence is currently being undertaken by a team of researchers at the University of Tasmania. The project will build on research conducted by the late Associate Professor Erica Bell (formerly of the Centre of Rural Health), which informed the development of the nationally recognised Safe from the Start project.

The Salvation Army (Tas) has been granted \$70,000 from the Tasmanian Community Fund to collaborate with the University of Tasmania on the research component of the project. University of Tasmania Research Fellow, Dr Peter Lucas, is the principal researcher with the project. Dr Lucas is supported by an experienced team of academics including Professor Ken Walsh, Dr Clarissa Hughes and Dr Romy Winter.

The primary aim of this research is to develop a suite of evidence-based resources to support men’s behaviour change programs

and to make a significant contribution to Australia’s efforts to reduce family violence.

A key strategy in family violence prevention has been to work with perpetrators (primarily males) although evidence of the efficacy of these interventions remains contentious. Further, evidence shows men are often unwilling to seek help to change violent behaviours, in part because of social and cultural constructions of masculinity and family violence. However, recent research has shown that a strong motivating factor for encouraging men to seek treatment and

engage with behaviour change programs is learning about the impact of their abusive behaviour on their children, as well as how their abusive behaviour negatively impacts on their children’s perception of them as fathers.

There is a growing body of evidence that strengths-based approaches, which adopt the language of positive solutions rather than focusing on problematic behaviours, show promise in effecting meaningful change among male perpetrators of family violence. A program in the United Kingdom that has demonstrated some promising results adopted an approach that minimised stigmatisation and blame, instead emphasising that seeking help to change abusive behaviours was a sign of strength rather than weakness, thereby challenging traditional constructs of masculinity.

### Further Information

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## The Rural Art Roadshow: Promoting Positive Mental Health in Rural Communities through Art

The World Health Organisation attributes 14% of the global burden of disease to mental health conditions. In particular, mental health conditions account for 50% of the total disease burden among young people, with anxiety and depression being the leading causes.

Despite this, young people do not access health care at levels commensurate with this need. Rural communities across Tasmania are also often socially disadvantaged, characterised by high rates of unemployment and social isolation. Challenges in accessing rural mental health support include lack of reliable transport, lack of qualified professionals; long wait lists, lack of after-hours services, and stigma in small communities.

Through art, however, people affected by mental illness may experience enhanced perceived control, the building of a sense of self, transformation of the illness experience, a sense of purpose and increased social support.

The Centre for Rural Health, in collaboration with MI Fellowship Aspire Services, was recently successful in gaining a UTAS community engagement grant as well as funding from the School

of Health Sciences, to facilitate a travelling Rural Roadshow showcasing art submitted by Tasmanian community members affected by Mental Illness, to the annual Aspire 'Minds Do Matter' art exhibition. The Rural Roadshow will travel over four weeks in November/December 2015 and visit four rural communities (Smithton, Queenstown, Scottsdale, and Georgetown). The Rural Roadshow team will capitalise on existing relationships with local networks and engage with local government, community groups, schools, health care organisations and media to facilitate and support the project. In partnership with MI Fellowship Aspire Services, we will identify

and invite local artists that have entered into the Minds Do Matter art exhibition to participate in the Roadshow. They will offer talks in each community visited by the Roadshow, to offer insight into their experience as an artist and as a person affected by Mental illness and promote a positive image of mental health and well-being. Team member, Dr Martin Harris will be presenting a poster on the project at the National Suicide Prevention 2015 Conference, 26 – 29 July 2015 in Hobart.

### Further Information

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## Evaluation of Vinnie's Retail Store Outlets (final report)

The Centre for Rural Health has recently completed research relating to the 34 St Vincent De Paul (Vinnies) retail outlets in Tasmania. Vinnies has experienced a growth in its retail stores nationally, prompting a need to evaluate shopping habits, trends and practices across all of its 34 outlets in Tasmania.

A literature review undertaken as part of the project suggested that there is limited information about the impact that retail arms of charity organizations such as Vinnies have on the broader community. In particular, little is known as to whether outlets

such as Vinnies are offering the types, quality and range of goods and services needed by the community, or whether their presence has any broader benefit to the host community.

Working in collaboration with Vinnies staff and volunteers in the retail outlets customers at each of the outlets were surveyed over a six week period. Focus groups comprising customers at five different outlet sites were also held in different regions to help inform the research. A total of 664 surveys were completed which represented an overall response rate of 50.3%.

The research presented a number of key findings including the fact that in small rural communities it's not so much about selling products as the outlets play a key role in social inclusion and providing a sense of community support. For some customers their visit to the local Vinnies outlet was the only opportunity they have for interaction with others. The social interaction between staff and customers, and between customers themselves, was highly valued by many in the survey.

Other findings from the research revealed that customers to the outlets were drawn from

a diverse cross section of the community with an increasing appeal to a younger clientele who valued the ethical and environmentally sustainable retail practices adopted by Vinnies.

For more information about the research please contact Stuart Auckland via email on [stuart.auckland@utas.edu.au](mailto:stuart.auckland@utas.edu.au) or Dr Jess Woodroffe, [Jess.woodroffe@utas.edu.au](mailto:Jess.woodroffe@utas.edu.au)

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## Kentish project update

Building on its extensive experience in working in partnership with Local Government the Centre for Rural Health has recently completed a whole of population Health needs assessment on behalf of the Kentish Municipal Council. The needs assessment was initiated by the Kentish Council following significant investment in health services through the development of the Kentish Health Care Centre. The study was conducted over a nine month period commencing in August 2014 and concluding in April 2015.

The study applied a Social Determinants of Health framework as the specific objective of the study was to design a methodology that took account of the social, environmental, cultural, economic and institutional contexts of community health and

wellbeing of the residents of the Kentish municipality. Applying a range of data collection processes including demographic profiling, questionnaires and focus group information was collected from 621 households representing a 23.5% response rate. In addition 33 focus groups were conducted with service providers, schools and community groups.

The findings informed the development of an integrated Framework for Action model based on the Social Determinants of Health. The model was used as the basis for identifying and prioritising collaborative action to address existing challenges and service gaps towards the improved health and wellbeing of local residents.

### Further Information

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## Keeping them: Factors that contribute to the long term retention of the allied health workforce in rural and remote areas

There is a shortage of Allied Health Professionals (AHPs) in many rural areas of Australia. Contributing to this shortage is staff turn-over or churn. A high turn-over of staff has some benefits but also a cost.

New staff take time to orientate, adjust to the work setting and to settle into a new community. Losing highly skilled and experienced staff, especially those with a great deal of local knowledge built up over a period of years, can impact on service provision, continuity of care, and also disrupt local networks and channels of communication.

This study aims to identify and better understand factors that keep allied health care professionals working in rural and remote areas of Tasmania. It is being conducted by Dr Tony Barnett, Dr Lyndsay Quarmby and Dr Winifred van der Ploeg. The study commenced in early 2015 and involves an on-line survey component then a follow-up interview with those participants

interested in talking a little more about what has kept them working in a rural or remote area for 5 years or more.

A health professional may be attracted to a rural area and recruited by an employer – but what makes them stay for the longer term? Retention of an individual relies on a combination of different personal, professional and work-related factors. All of these may change over time though must be balanced or the reasons to stay may be outweighed by the pressure or incentive to leave.

Research into retention (and not just recruitment) issues will broaden our knowledge of strategies that will help retain and sustain an experienced allied health workforce in rural areas. Ultimately, “keeping them” can strengthen rural health service delivery and improve the health of rural communities.

### Further Information

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**L-R:** Dr Jessica Woodroffe, Dr Winifred van Der Ploeg, John Aitken, Dr Shandell Elmer, Diane Webb and Dr Simone Lee

## Improving health literacy in Tasmania

As many as two in three Tasmanians have difficulty finding their way through the health system as a result of low levels of health literacy, according to Australian Bureau of Statistics figures.

It is an issue that can lead to mismanagement of health conditions, hospitalisation and increased health costs; and it is an issue that a new pilot project will address. Launched in April by the School of Health Sciences, the project plans to test a new approach – known as OPHELIA – to improving health literacy.

OPHELIA stands for *OPTimising HEalth Literacy and Access to health information and services* and tackles health literacy at the local level by applying a three-step approach. This includes:

The project teams, led by Dr Shandell Elmer, are working with health practitioners at the Northern Integrated Care Service to look specifically at health literacy in the Cardiac Rehabilitation Program in Launceston. The project, funded by the University with in-kind support from the Department of Health and Human Services, will be run for the remainder of this year and will involve 60 patients. Dr Jessica Woodroffe, Dr Winifred van der Ploeg and Dr Simone Lee, all lecturers with the University's Centre for Rural Health, will work with Dr Elmer.

*OPHELIA has been developed and supported by a range of research and government bodies including Deakin University, the Australian Research Council, the Victorian Department of Health and Monash University. Eight sites in Victoria are currently applying the OPHELIA process and it is being used in countries including Thailand, South Africa, England and Denmark.*

### Further Information

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# EVENTS

## The 2015 World Organization of Family Doctors' (WONCA)

Asia Pacific Regional Conference,  
4 – 8 March 2015, Taipei, Taiwan

Family medicine cannot be separated from its cultural environment. It was most appropriate for the 2015 WONCA Asia Pacific Regional Conference to be held in Taipei at the time of the unique traditional Lantern Festival, the most important and colourful festivals in Taiwan. The concept 'family' has been deeply rooted in almost every aspect of life in this fascinating society.

With the main theme on "Family medicine: New horizons and challenges", this conference was designed for those who wanted to share innovative practices, concepts and challenges in health from around the world. It was a wonderful opportunity for me to learn from other researchers, experts and leaders in the field of family medicine, preventive services, and medical research and education. I did two presentations at the conference. The first presentation entitled "Patient-held logbooks for cancer care treatment at a rural hospital: A contribution to patients-centred social practice" aimed at providing evidence in support of the patient-centred approach to healthcare management and better communication between health professionals in cancer treatment. The second presentation "Promoting positive sexual health in a rural community: An evaluation of teenage pregnancy programs"

reported on the evaluation of a teenage pregnancy program conducted by the Family Planning Tasmania in the Southern and the North West regions of Tasmania, Australia to address the high levels of teenage pregnancy and sexually transmitted infections in these areas. My presentations went well and I was appreciative of the positive feedback from other colleagues. Another highlight of my time in Taipei was the opportunity to interact with other researchers in the same area of my research interests. This helps to facilitate my development of a network of international scholars who are interested in extending research boundaries through combined innovations and multi-disciplinary collaborations.

### Further Information

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## International Research Conferences

I recently travelled to the United Kingdom and Ireland to present work from our joint University of Tasmania/Monash University National Health and Medical Research Council Partnership Project 'Aged Support and Aged Care: program and policy structures to support ageing well in rural and regional Australia' at two large international conferences. The very different nature of these two conferences reflects the diversity of outputs from this project.

### The International Research Society for Public Management conference

was held in a very cold and windy Birmingham from 30th March to 1st April 2015. This was a very large conference drawing delegates from around the globe with multiple concurrent streams covering every aspect of what we would call 'public service improvement'. Our own paper 'Evidence in Policy and Programs: Supporting critical thinking within the development process' was concerned with developing a tool to empower policy and practice developers to identify the questions for which they needed evidence informed answers. There was an acknowledgement in our session of the potential of our approach but there was a certain overall air of resignation through the whole 'research into policy' stream about the long hard road still to be travelled to bring the worlds of research and policy making closer together. This was highlighted for me in other sessions I attended where researchers were trying to bring a 'full scientific approach' to understanding the operation of public policies and services. Most of these researchers appeared to see qualitative methodologies as not 'real' science and therefore were only every able to construct fragmented and incomplete pictures of what are very complex social phenomenon. One of the strongest themes in the conference concerned 'third sector' and 'co-production' in public administration. That is, how to increase the input of

outside parties – individuals, community and business – into the design and administration of public services. A highlight for me was a very lively public debate on the topic 'Is opening up public services to competition the least worst way of improving efficiency?' For those interested, our full paper can be found at <http://irspm2015.com/index.php/irspm/IRSPM2015/paper/viewFile/895/341>

Our second presentation was a poster at the **European International Association of Geriatrics and Gerontology (IAGG) conference** in Dublin 23rd – 26th April: 'Evidence in Rural Ageing Well Policy and Practice'. This poster reported on an extensive review of the evidence available to policy makers concerning the particularities of the rural ageing experience. We found that while there is very robust statistical evidence for general rural and regional inequality and disadvantage, the evidence around the actual experience of ageing in rural areas is very sparse, fragmented and of variable quality. We concluded that while the statistical evidence justified greater government attention and resources, there is currently limited evidence about how best to utilise those resources most effectively and called for greater attention to building a more sophisticated understanding of the rural ageing experience at the community and individual level. Due to the fact that the conference program was dominated by pre-arranged symposia with few independent concurrent papers, there were large number of posters and we were only able to have ours on display for one day. Overall the program, for me at least, revealed incremental rather than major advances in understanding the social – as against the medical – experience of ageing although I was pleased to see a general move away from the narrow notions of 'healthy', 'active' or 'productive' ageing towards a more holistic 'ageing well' understanding of the ageing experience.

### Further Information

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## 112th Asian Congress of Nutrition (ACN) 2015 in Yokohama, Japan

It was a great opportunity for me to attend and present my study in ACN that held on 14<sup>th</sup> – 18<sup>th</sup> May 2015 in Yokohama, Japan. This conference was attended by over 4,000 participants from different part of the world which provided an opportunity for all to expand their knowledge, interact with others, and enhance their collaboration. Under the theme of “Nutrition and Food for Longevity: For the Well-being for All,” the congress offered a full scientific program, featuring 5 plenary lectures, 13 educational lectures, 48 symposia with 174 lectures, luncheon and evening seminars, as well as oral and poster sessions with nearly 1,500 presentations.

Interestingly, I had a chance to take photos with a geisha before the opening ceremony. How lucky I am. In the congress, I attended the plenary lecture given by Dr Tontisirin from Thailand, who shared his ideas on approaches for food and nutrition security by multi-stakeholders and multi-strategies. The seminar contributed ideas and knowledge



Joanne Yeoh (PhD Candidate)

about the current actions and supports given to reduce hunger and under nutrition in all regions. Additionally, Dr Wahlqvist also provided significant information on how we as individuals contributed in food and nutrition security for healthy ageing in educational lecture. During my poster presentation, I shared and exchanged ideas with other participants that contributed to my study.

Overall, this congress was a successful one. I had a wonderful time, both attending the conference and travelling around Japan.

### Further Information

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## International Mental Health Congress (IMHC) in Lille, France

I recently had the privilege and pleasure of delivering an hour presentation titled “We need to know what’s out there!”: *The use of social networking analysis to describe referral pathways for youth with mental health problems in rural Tasmania* at the International Mental Health Congress (IMHC) in Lille, France. The IMHC was attended heavily by psychiatrist, General practitioners, mental health clinicians and researchers from across the world and there was a balanced mix of research and clinical skill development opportunities. This congress was a fantastic opportunity to learn more about mental health systems and approaches across Europe and to hear about innovative



The Old Town In Lille

and effective approaches to mental health treatment. This experience also made me appreciate the Australian health system and the progress we have made to increase access to mental health treatment for community members. I look forward to exploring how I can use these learnings to benefit rural mental health care here in Tasmania.

### Further Information

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## “Communicating with Confidence” for Health and Welfare Professionals

Rural health professionals, welfare workers and students in health professions face daily challenges in communicating with a range of consumers and colleagues. Common communication challenges identified include dealing with conflict, speaking in a group setting, self-doubt, communicating assertively and delivering ‘bad news’.

The Centre for Rural Health has been running free “Communicating with Confidence” workshops addressing these challenges, facilitated by Heather Bridgman (Clinical Health Psychologist and Lecturer in Rural Mental Health), Sharon Dennis (Associate Lecturer Indigenous Health), Lyndsay Quarmby (Clinical Psychologist and Lecturer in Rural Allied Health) and Hannah Peters (Clinical Psychologist, Adult Community Mental Health). Since November 2014, 115 rural and remote

based health and welfare professionals and health students have participated in five workshops held in Ulverstone and Launceston and on King Island. Workshops have been attended by a wide variety of health and welfare professionals and students with varying levels of experience.

The aim of the workshop has been to improve communication skills and increase confidence. The workshops focused on recognising helpful and unhelpful communication styles, the importance of validation, managing challenging communication situations, raising awareness of the historical journey of the Tasmanian Aboriginal people and culture and personal goal setting. Participants have expressed appreciation of the highly interactive format of the workshops (“I did enjoy the workshop and particularly liked the way the workshop was presented. It was engaging and interactive”). The format included group work, role play, video examples and personal goal setting with a healthy dose of humour. Workshops have been very popular and participants have offered positive

feedback about their experience including:

*“I found the information on particularly types of invalidation very helpful additions to my understanding of communication. This would be an area that I might like to follow up on.”*

*“(the workshop) has made me a lot more aware of myself during communication. In particular, I now frequently notice when I or others make comments that could actually be invalidating. I had not previously noticed how easy it was to inadvertently invalidate another’s thoughts or feelings or really thought how such comments might make someone feel.”*

*“I got a lot out the cultural awareness stuff! I found that informative and extremely thought provoking!”*

*“I will be more conscious of listening to friends, family and colleagues – trying to actively listen to what they’re really trying to say”*

### Further Information

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# DIRECTOR'S REPORT



Associate Professor Tony Barnett

We were delighted with the news that the **Minister for Health, the Hon Sussan Ley MP** has agreed to continue funding for the Rural Health Multidisciplinary Training Program for the next period (this program includes funding for rural clinical schools and university departments of rural health).

Whilst there will be changes with the new funding agreement that is due to come into effect in January 2016, including some consolidation, the primary focus of the program will remain on the recruitment and retention of medical, dental, nursing and allied health professionals in rural and remote Australia. Core areas of activity will likely be around: maintaining the rural training network (our rural health teaching sites); rural medical, multidisciplinary and dental training; developing the Aboriginal and Torres Strait Islander health workforce and; rural health research. The Department of Health has indicated that details around these new funding parameters will be finalised prior to the end of this year.

The welcome news should allow us to continue supporting students to undertake clinical placements at our 16 rural teaching sites across Tasmania. Last year, the CRH supported more than 350 health students including 7 Indigenous students. Approximately half of all students were provided with accommodation close to their placement facility while the remainder received a rural placement travel allowance. Nursing students accounted for the majority of students

supported and around 12% came from the allied health disciplines including psychology, radiography, occupational therapy, physiotherapy and social work. Overall, social work students had placements of the longest duration and the new, motel style accommodation at Latrobe accommodated the largest number of students. The National Broadband Network (NBN) was rolled out to a number of rural Tasmanian communities in 2014. As a consequence, students at Deloraine, George Town and St Helens benefited from faster and more reliable internet services.

Staff from the CRH have been successful in attracting competitive funding from the University of Tasmania in its recent round of Community Engagement Grant and Research Enhancement Grant Scheme. CRH Board of Management member **Clair Anderson** led a team that received funding to "Digitise an Aboriginal map of Tasmania". Support was also received for "The Rural Art Roadshow" (**Dr Heather Bridgman**), "Research Literacy for Clinical Health Care Professionals" (**Dr Merylin Cross**); "Getting in Early: Improving early detection of Autism Spectrum Disorder in

infants and toddlers through the implementation of the SACS" (**Dr Lyndsay Quarmby**) and "Optimising Health Literacy (OPHELIA) – A Process to address health literacy for Tasmanians with chronic disease" (Dr Shandell Elmer, **Dr Jess Woodroffe** and **Dr Winnie Van Der Ploeg**)

CRH staff have been members of collaborative teams that have recently attracted a number of external grants, including a "Category 1" grant: "Helping hands an innovative Tele assistance System for Clinical Skill Development with Health Science Students" from the Office for Learning and Teaching (OLT) \$50,000 (**Dr Tony Barnett**; Dr Tony Huang and Carey Mather); "Supporting students with Autism Spectrum Disorder in Higher Education" from the National Centre for Student Equity in Higher Education (NCSEHE) \$30,000 (**Dr Lyndsay Quarmby**); "Engaging Men and Women Who Use Violence" from the Tasmanian Community Fund \$70,000 (Nell Kuilenburg; Prof Ken Walsh; **Dr Clarissa Hughes** and Romy Winter).

**A/Prof Len Crocombe** and I attended an Australian Primary Health Care Research Institute (APHCRI) Centres of Research excellence (CRE) meeting in Canberra recently to talk with program managers, Department officials and other CRE chief investigators. Updates were presented on progress with our oral health research projects, feedback on program evaluation and on

an APHCRI monograph titled "Research-Policy Partnership". Now published, the document describes: "the respective roles, responsibilities and expectations of partners in the research / policy development process... and describes a framework for interaction, exchange of insights and information, and, the formation and development of linkages through formal mechanisms and informal networking." It will be drawn on to help guide the work of our CRE in primary oral health care.

Our **Primary Health Care Practitioner Scheme** managed by **Dr Martin Harris** will continue this year with applications being called for scholars to work on a number of projects with CRH staff. The scheme provides busy practitioners some time out from their mainstream job to work one day a week with us to gain skills in research that they can apply within their professional and local work environments.

We have welcomed a number of new faces to the CRH team this year. **Dr Terry Cox** (Aboriginal health/sociology), **Dr Simone Lee** (public health and health promotion) and **Dr Pauline Marsh** (general practice, rural and remote nursing). Terry and Simone are based in Launceston and Pauline in the South of the State. We all look forward to working with them in contributing to the rural health agenda.

## Further information

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