Trends shaping up

Research Australia recently released Shaping Up: Trends and Statistics in Funding Health and Medical Research, providing comprehensive data about the opportunities and challenges facing Australia’s health and medical research sector.

The Executive Summary of the report is reproduced here with the permission of Research Australia. The full report can be found at: researchaustralia.org/publications/trends-statistics

Research Australia’s analysis of the available economic data shows that the Australian health and medical research sector performs well at an international level.

- Australian Business Expenditure on research and development has exceeded average OECD growth since 2007.
- Australia is the leading location of biotechnology companies in the Asia-Pacific region with around 450 biotechnology companies.
- Australia is leading the venture capital market in the Asia-Pacific region.
- Despite having only 0.3% of the world’s population, Australia contributes 3% of the medical research publications.
- Of the twelve Australian Nobel Prize winners since 1915, ten have received these awards for science; of these, seven have been for physiology or medicine, with four of these in the last decade.
- Australian life expectancy at birth continues to rise and is among the highest in the world – almost 84 years for females and 79 years for males.

However, analysis points to a need for increased investment to maintain Australia’s position at the international level.

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continued page 2

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According to Lateral Economics: 24

"In this environment, the presumption would be that the health and medical research effort would also expand to [at least] keep pace with increased health spending. Indeed, if as many believe — and the evidence suggests — that investing in health and medical research leads to above-average returns compared with alternatives, then spending on Australian health and medical research should consistently exceed growth in health spending overall."

The argument is strong for increasing the amount of government expenditure on health and medical research in order to be able to respond to increased demands on the health system due to ageing, and to enable us to respond to demands for increased health services over the next 40 years. Our competitors in the US and elsewhere already commit a much greater percent of total health expenditure to health and medical R&D. Australia needs to enhance its spend on this area, not only to keep up with other countries but to ensure that we are able to reap returns from new products and services, rather than being wholly reliant on overseas-developed goods and services.

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Australia’s OECD ranking on health research funding as a percentage of GDP is declining in an international environment where there has been a rapid growth of research investment in emerging economies like China, India and Brazil.

China’s R&D spending now exceeds that of a large number of European Union countries.

Australian researchers have less access to sources of funding to cover the indirect costs of research than competitors in Europe and America.

During the global financial crisis Australia’s GDP increased by 2.7%. Yet, Australian spending on health and medical research did not gain any ground when compared with investment in the USA or UK, despite those economies exhibiting GDP growth of -2.4% and 0.4% over the same period.

Domestically, investment into health and medical research is provided by federal, state and territory governments, local and multinational companies and the philanthropic sector.

Australian Government spending on health has rapidly outpaced growth in GDP each year in the past decade and is set to continue due to an ageing population. Health and medical research spending only represents 3.4% of the total Australian Government spending on health.

State and territory government funding into health and medical research as a proportion of the total of the health and medical science funding declined from more than 15% to less than 10% in the decade to 2006-07.

Total expenditure by business on health research was $898 million in 2008-2009, up from just over $800 million the previous year.

The Australian biotechnology sector has demonstrated steady growth, with strong market capitalisation growth since 2006.

The medicine industry invests over $1 billion in research and development every year and total annual revenue is estimated to be in the order of $7.6 billion for 2009-2010.

Philanthropic investment it is estimated to be $800 million to $1.4 billion per year.

An analysis of NHMRC expenditure and output indicate a number of trends:

- The NHMRC, the major national vehicle for Australian Government funding for health and medical research, has experienced a five-fold increase since 1995.
- Victoria receives the largest proportion of NHMRC grants (39.80%), followed by NSW at 26.80%.
- There has been strong growth in funding for public health, health services and clinical research.
- The quality of research proposals has steadily increased over the past decade, but increasing numbers of research projects are failing to be funded.

Research Australia proposes that a 4% real rate of growth to the NHMRC appropriation – which is equivalent to the ratio of health expenditure to GDP growth over the period 1997-2008 – would provide certainty to the Australian health and medical research sector and ensure it maintains its global leadership position in an increasingly competitive international environment.

At a minimum, in the context of current deficit reduction strategies, a 4% real increase in research investment at federal and state levels, would drive continued improvements in community health and also encourage investment from industry, state and territory governments and philanthropy.

Increased investment will also promote long term career opportunities for Australian researchers (in an internationally competitive global labour market), facilitate research development and innovation and address global health issues.

Research Australia also supports a more consistent funding base for the indirect research costs. This would facilitate the development of an approach that removes current inequities to avoid duplication of assessments and allocations, avoid the risk of competition impeding collaboration and strengthen transparency and accountability.

News

In form – volunteer database

Community members are now able to register their interest in volunteering for clinical research and trials on the IHMRI website.

By completing the details required on this form, individuals will be sent information about some or all of IHMRI’s upcoming trials. They can then choose to contact our clinical trial coordinators about participating in the trial.

The participant register has been established to provide the local community an opportunity to be a part of IHMRI and its research program, according to Dr Kellie Ridges, Operations Manager Clinical and Laboratory Research.

“There are many reasons why people decide to take part in clinical trials. It may be a desire to help others, to play an active role in their own health, or to gain access to new medicines or treatments not otherwise available.”

“This online registration is a convenient way for people to express their interest and then receive information about relevant trials, which they can then contact us for further information.”

“It’s a fantastic step forward for the Clinical Research and Trials Unit and really enhances engagement in health and medical research in the Illawarra.”

All residents of the Illawarra are eligible to register their interest:

www.ihmri.uow.edu.au/participate

Current studies recruiting at the Clinical Research & Trials Unit at IHMRI

- Study of an investigational mouth wash to reduce cold sore episodes
- Investigational treatment for high blood cholesterol

For more information on both of these studies, go to ihmri.uow.edu.au/crtu or call us on 02 4221 4333
Keeping scholarship local

A generous donation by the Bomaderry Rotary Club to support a student from the Shoalhaven area has been awarded to PhD student, Sarah Norris, whose project is investigating Alzheimer’s disease.

Sarah grew up in Nowra and attended Bomaderry Primary School and Nowra High School. The scholarship will support Sarah to travel to international conferences in 2012 as part of her PhD investigating brain membrane lipid changes during ageing and Alzheimer’s disease.

Every donation counts, and Bomaderry Rotary’s contribution is much appreciated by Sarah, by IHMRI and by the University of Wollongong. These contributions are crucial for furthering the quantity and quality of health and medical research in our region. Sarah’s studies are supervised by Dr Todd Mitchell.

CSIRO visit

A potential new food innovation collaboration was discussed following a visit to IHMRI by the CSIRO’s Director of Innovative Processing, Food and Nutritional Sciences, Keith Cullen.

His visit on 7 September included presentations by a range of nutrition and food researchers under IHMRI’s Nutrition theme, including Professor Xu-Feng Huang, Dr Pia Winberg and Professor Linda Tapsell, who hosted Mr Cullen.

He is exploring the feasibility of a new, collaborative National Food Innovation Network to support and enhance innovation across the Australian food manufacturing industry and was keen to draw on the experience of UOW researchers.

Checking in for men’s health

For the second year running, over 850 local men had free health checks including blood pressure, weight, cholesterol and blood sugar tests, as part of the ahm CHECK IT event.

University of Wollongong students from UOW's medical, nursing, exercise science and health and medical sciences courses worked as volunteer clinical assistants, playing a key role in the free mass health screening.

The event also included 20 information stands hosted by local profit and non-profit health organisations including IHMRI, the Illawarra Shoalhaven Local Health District, the UOW Graduate School of Medicine, the Red Cross, Diabetes Australia, the Cancer Council and Southern IML Pathology.

The IHMRI information stand aimed to provide more information about its research and clinical trials, and to encourage visitors to add their name to the new register of interest register for clinical trials on the spot.

Over 20 visitors to the event added their name to the new register on the day, with many more taking information.

The 2011 CHECK IT event was organised by Healthier Illawarra Men (HIM) - a committee of business, community, medical and UOW representatives formed to promote greater awareness of health issues among the region’s male population. IHMRI Executive Director Professor Don Iverson is a member of the HIM committee.

CHECK IT was run under the auspices of the Illawarra Division of General Practice, with sponsorship support led by health fund ahm, UOW and the Illawarra Shoalhaven Local Health District.

Dual reviews

The structure and funding of health and medical research is currently under review at both a national and state level.

The Minister for Mental Health and Ageing, the Hon Mark Butler, announced a national review as part of the release of the federal budget in May. Feedback on draft terms of reference for an expert panel has been sought. A final report is expected by 31 August 2012.

At the State level, the Minister for Health and Medical Research, the Hon Jillian Skinner, has announced a strategic review of health and medical research which will review the current performance of health and medical research in NSW and recommend a strategic plan for the next ten years.

The review is being led by Peter Wills AC, supported by an expert committee which includes IHMRI Executive Director Professor Don Iverson. There are a number of rounds of submissions and consultations, the dates of which can be found at: www.health.nsw.gov.au/omr/review/key_dates.asp.

A final report to the NSW Government is expected by 30 November 2011.
Congratulations

Blazing a trail for food tracking

Dr Yasmine Probst, from the Food and Health SRI/Smart Foods Centre, won the highly commended prize in the open section of the UOW UniQuest Trailblazer competition in August for her innovative concept of the ‘e-Food Traka for better health management’.

eFood Traka will streamline the process of recording the foods people eat and links it directly to feedback on the amount of calories, fat and carbohydrates eaten. It can also feed directly to a dietitian to help manage weight or chronic diseases such as diabetes or high blood pressure.

The annual Trailblazer competition was developed to reward innovative ideas and early-stage research that has the potential to benefit the community, industry or business, as well as generate a financial return.

Psychology news

Dr Nadia Solowij, from the School of Psychology, was featured in the cover story of the August edition of Cosmos magazine on drugs and the brain, whilst Dr Retta Andresen, Dr Lindsay Oades and Associate Professor Peter Caputi celebrate the publication of Psychological Recovery: Beyond Mental Illness (Wiley Blackwell 2011).

Alzheimer’s disease boost

Dr Jenny Wong has been awarded a $30,000 grant from Alzheimer’s Australia Research for her project How is BDNF/TrkB Signalling Reduced in Alzheimer’s Disease?

Jenny’s project aims to show how expression of a gene that is important for normal brain development is reduced in brains affected by Alzheimer’s disease, by defining the process by which non-functional variants of the gene are increased.

It is anticipated this research project will contribute to a better understanding of Alzheimer’s disease and specifically multiple novel avenues for molecular targeting to enhance neurotrophic support in Alzheimer’s disease brains.

Vice Chancellor’s Fellow

Cancer researcher Dr Kara Perrow is one of three academics awarded a Vice Chancellor’s Postdoctoral Research Fellowship for 2011.

Awarded earlier this year, the Fellowship is allowing Kara to continue her work developing targeted, combined therapeutics for treating malignant tumours, with the ultimate goal of developing chemotherapy treatments without the side effects.

The Vice Chancellor’s Fellowship Scheme was established to support outstanding early career researchers to undertake full-time research, with a focus on applicants with a highly competitive track record relative to opportunity, and proposing an innovative program of research.

MBC

Congratulations to IHMRI Chief Operating Officer, Sue Baker-Finch, who graduated in July with a Master of Business Coaching, with distinction through the Sydney Business School at UOW.

IHMRI Grants Open

Small Grants Program

Eight grants of $5,000 - $10,000 are available to support small projects or preliminary studies that collect data to be used to support a competitive research application in areas aligned with IHMRI’s strategic goals, objectives and priorities. Collaborations linking academic and clinician researchers will be favourably considered.

The grant program is open to IHMRI Research Network members who are active in one or more research themes and who are working together with at least 3 other network members on the proposed research. One of the CIs must be a UOW employee who will administer the receipt and expenditure of grant funds within the UOW through a cost centre either held within IHMRI or within a Faculty/School.

Applications are due by 18 November 2011. Funding for the IHMRI Small Grant Program has been provided through UOW fundraising and the UOW’s Health and Medical Research Support Fund.

IHMRI Summer Scholarship Program for Dementia Research

Due to a very generous donor, funds have been made available for IHMRI to offer four scholarships for dementia research during the 2011/2012 Summer. The aim of the IHMRI Summer Scholarship Program for Dementia Research is to attract prospective higher degree research students with an interest in dementia related research, providing them with research experience.

Four scholarships of $3,000 are available for six to eight weeks over the summer 2011/2012.

Students were eligible to apply for a scholarship if they had been accepted into a course at the University, or in the Graduate School of Medicine (and completed one year), and an academic, who is a member of the IHMRI Research Network, had agreed to supervise the student for the term.

Applications closed in late October. Results will be announced in mid-November.

Grant information

A link to the application form for these grants is available to download on the Research Network blog http://it-innovation.uow.edu.au/pilot/ihmrihub/

Grant enquiries

Enquiries about IHMRI Grants can be directed to IHMRI Professional Officer, Pat Frencham on patf@uow.edu.au
Research trial focus

Exercise study more than physical

Before Maria del Carmen received a letter in the mail looking for volunteers for a study about physical activity in older people, she says she “did nothing”.

“I didn’t do any exercise and I would complain about moving around because of [stiffness in] my back and legs,” Maria says.

That all changed after Maria took part in a mailed survey on her physical activity, and was then asked to take part in a follow up study which involved participating in exercise classes.

The study is being undertaken by UOW School of Health Sciences PhD student Chaiya Noradechanunt and is examining appropriate exercises to inspire the ageing population to keep active. The classes were the first exercise study to take place in the IHMRI Clinical Research and Trials Unit.

Noradechanunt is undertaking the first international study of the effectiveness of a Thai style of yoga in helping older people to get moving again. These days, Maria practises this yoga once a week and says she feels much more positive.

Like Australia, Thailand faces the health challenges of an ageing population. Noradechanunt has a scholarship from the Thai Ministry of Public Health to study the impacts of a traditional Thai-style of yoga across both cultures.

“We have the same problem and the same trend in Thailand. The number of older people is increasing, and keeping people active helps prevent chronic disease and costs the health system less money.”

Following a mailed survey to around 800 Illawarra residents over the age of 50, Noradechanunt found around 50 per cent of older people have insufficient physical activity, with between 30 – 40 percent of respondents classified as sedentary.

He invited those in the sedentary group to participate in the physical activity study, which assigned 39 volunteers to either a modified Thai Yoga class twice a week, a Tai Chi class twice a week, or a control group.

“For my intervention study, I wanted to offer a new form of activity for people who are sedentary. In my country I had been teaching Thai yoga exercise for older people, so I offered the people here this form of exercise we specifically modified for older people to practise.

Remembering the movements from classes is important, with participants encouraged to practise for at least 20 minutes every day.

Judy Georgiou was marked ‘active’ in the original survey by Noradechanunt, but after discussing her chronic health problems with the PhD student, she was pleased to be accepted into the study in order to apply another exercise option.

“My history is unusual, the way I got into [the study] is unusual too. I exercise nearly every day, I don’t consider myself sedentary. But we spoke about how I don’t sleep well and have shortness of breath. I have to work hard to improve my functional fitness including balance and mobility.

“Since I started to do yoga I have gotten more feeling in my toes and feet. I can do little hops and jumps now. I have become more mobile but the best benefit is my improved sleep pattern.

“I have tried Tai Chi before but I prefer yoga because it involves more disciplined, deeper, slower breathing and this has been particularly helpful I think.”

According to Noradechanunt, follow up surveys of the participants show that yoga is more easily remembered to practise on their own.

“One aspect of a survey the participants completed about satisfaction, I asked how confidently they could practise on their own. I found that participants in Thai yoga were confident to practise on their own more highly than the Tai Chi group.”

Noradechanunt tested six functional fitness measures including muscular strength, balance and flexibility before and after the 12-week study period. In the two strength tests, for example, which included arm curls and chair stands, there was a significant difference in improvement between participants in the Thai yoga group – who became stronger – and the control in both measures.

In addition to the other four tests on balance and flexibility, the yoga group also showed a significant improvement over the control group.

Although the 12-week exercise study held at IHMRI is now over, many of the participants from the yoga group continue to attend the Thai Yoga classes Noradechanunt teaches for the Illawarra Older Women’s Network (OWN) at the Coniston Community Hall on Tuesday mornings.

According to Fiona Puri, another study participant, this ongoing commitment is due to the benefits of exercise, friendship and a good instructor.

“I’m very happy with these classes. There is lots of stretching, flexibility and balance which you don’t get in other sports or activities. The people are also very friendly, very happy and Chaiya teaches us patiently and calmly,” she says.

Chaiya Noradechanunt’s PhD supervisors are Professor Tony Worsley and Dr Herb Groeller

The Illawarra OWN, for women 50 years and over, can be contacted on 0425 057 452.
Borderline Personality Disorder day

The team behind the IHMRI based Project Air Strategy for Personality Disorders marked the national awareness day for Borderline Personality Disorder by transforming the UOW duckpond lawn into an information and support centre.

Borderline Personality Disorder is a serious mental illness that affects between 2-5% of the Australian population.

Project Air is a personality disorders strategy headed by NSW Health and implemented by staff within the South Eastern Sydney and Illawarra Shoalhaven Local Health Districts, and Justice Health.

Representatives from the Project Air Strategy for personality disorders, ARAFMI, Headspace and the Students Health Alliance for Rural Populations (SHARP) supported the event, handing out leaflets, prizes and manning a free barbeque.

With thanks to Melissa Coade, UOW Media Unit

Student drives support

Witnessing first-hand the devastating impact of Motor Neurone Disease, UOW medical student Mariam Chaalan resolved that she would help do something to fight it – and in September, she presented the School of Biological Sciences with a $1635 donation to aid MND research.

Her donation followed weeks of extensive planning to pull off a charity fun night, all compelled by an encounter with an MND patient during her first stint of medical placement.

“I made a pact with myself that if I passed my phase one exams I’d raise as much money as I could and donate it to research,” she said.

Mariam presented her donation to Dr Justin Yerbury, whose Motor Neurone Disease research is conducted at IHMRI.

With thanks to Melissa Coade, UOW Media Unit

Coming up – IHMRI Events

Final IHMRI Seminar for 2011

All IHMRI Research Network members are welcome to join us for the final IHMRI seminar for 2011 to be presented by Professor Brett Garner. Complimentary refreshments will follow

Alzheimer’s disease: the lipid connection

Professor Brett Garner, Principal Research Fellow, Illawarra Health and Medical Research Institute

Tuesday 18 October 2011
6pm – 7pm, Lecture Theatre, IHMRI, Building 32, Northfields Ave, UOW

About the seminar

Dementia affects around 250,000 people in Australia at an estimated cost of close to $7 billion per annum. Alzheimer’s disease (AD) is a progressive, neurodegenerative disease and is the major cause of dementia (accounting for ~60 to 70 per cent of all cases). The number of people with AD is predicted to quadruple by 2050 due to our ageing population. There are currently no therapeutics that will cure or even slow the progression of AD, although drugs such as the cholinesterase inhibitors can help alleviate symptoms for a limited period. There are two types of AD: familial or “early-onset” AD, which accounts for ~5 per cent of all cases and can occur as early as 30 to 40 years of age; and “late-onset” AD, which accounts for ~95 per cent of cases and usually appears in people older than 60 years. Both conditions are associated with brain shrinkage (due to neuron death) and both are also associated with certain pathological hallmarks, one of which is the accumulation of a neurotoxic peptide called amyloid-beta. All known mutations that cause early-onset AD are associated with genes that increase the amount of toxic amyloid-beta produced in the brain. In contrast, in late-onset AD there is no distinct genetic cause, rather a number of genes confer a “degree of risk”. Three of the four top candidate genes conferring risk for late-onset AD are involved in brain lipid transport. This, along with the fact that amyloid-beta is generated in the lipid membranes of neurons, has prompted our focus on understanding how lipid transport and metabolism in the brain may be related to AD. Our objective is to better understand the role that lipids may play in AD in order to identify novel pathways that may be therapeutically targeted.

Summer Networking Evening

Join us for our final networking evening for 2011 in Wollongong’s newly refurbished town hall.

Wednesday 30 November 2011
5.30pm – 7.30pm, Wollongong Town Hall, Cnr Crown and Kembla Sts, Wollongong

RSVP required: ihmri@uow.edu.au / 02 4221 4333

We are now planning for our 2012 series of seminars and networking evenings. We’d like to hear from any IHMRI Research Network members who would like to suggest a speaker for our 2012 program of event.

Contact Pat Frencham for more information: patf@uow.edu.au
Meet a Network Member

Lucia Appollini
Nurse Manager, Clinical Transition to Practice, Illawarra Shoalhaven Local Health District

Thank you to Lucia, who among her very busy role in the local health district and postgraduate studies in public health found time to answer a few questions for IHMRI News.

Describe your work?

Over the past 10 years I have worked in various management and research positions with the local health district. Currently, I am employed as the district’s Nurse Manager for Clinical Transition to Practice. The main focus of this role is managing the transition of newly graduated nurses into the hospital system. This role is diverse and involves managerial, operational, educative and supportive functions.

What do you enjoy the most about your work?

I enjoy most aspects of my work, particularly the strategic functions and working through the many challenges that present.

You are a trained nurse but have done postgraduate education. What motivated you to do further study?

I commenced further study in the field of psychology when working as a Community Health Nurse. I realised that nursing was more than attending to the physical and felt I needed a better understanding of the psychology of individuals, and the sociology of groups and communities. After completing an honours degree and registering as a psychologist, I commenced work as the Primary Health Care Clinical Nurse Consultant. This led me to work in population health which sparked a yearning for a better understanding of population and public health. The degree Doctorate of Public Health offered me the opportunity to complete the post-graduate course work for Public Health as well as undertake research. The area of research that interested me most was behaviour change for the prevention or amelioration of cardiovascular disease risk factors. I chose to explore the ways nurses try to bring about patient behaviour change in the context of cardiac rehabilitation.

What areas, in terms of research or clinical support, are required in your area of work, in your opinion?

The research aspect of my current role is primarily evaluative and focuses on the review of clinical transition to practice. I find this quite a challenge as the implementation of the NSW Health Transition Framework, here or in any other health district needs to be tied to an understanding of the continually changing organisational context. I am also a member of the Illawarra and Shoalhaven Local Health District research community of practice and have provided education in quantitative and qualitative research methods for nursing and allied health professionals, as well as providing support and supervision for nurses undertaking post-graduate studies.

What’s the last most recent event you’ve been to or information you’ve read about your area of work that’s interested you?

I enjoy reading articles that focus on research methodology and related methods, and those that debate rigour in qualitative research. What I find motivating and challenging is being part of a working party responsible for the planning, proposal writing and implementation of research. The most recent event that greatly interested me was the Bridging the gap between clinical practice and research seminar, organised by Dr Chris Georgiou and held at IHMRI. I found his talks on his research projects very interesting: the scope and process of implementing the study was commendable.

Why did you join the IHMRI Network and what do you hope to get out of membership?

I joined the IHMRI network out of interest and a desire to be part of a broader research community. What I hope to get of membership is stimulation, motivation and continuing opportunities for collaborative research between our health service and the University.

Equipment in focus – Malvern Zetasizer Auto Plate Sampler

A new piece of scientific equipment that is currently the only one of its type installed in Australia will soon be housed at IHMRI.

The Zetasizer Auto Plate Sampler is a dynamic light scattering-based instrument which automates nanoparticle and biomolecule measurements. It will be exploited by UOW researchers to quickly and accurately analyse protein aggregates under particular conditions. It is one of three new items of equipment that will be housed in the IHMRI laboratories following the second round of Research Infrastructure Block Grant funding awarded earlier this year by UOW. The successful Zetasizer APS grant was led by Dr Heath Ecroyd.

The Zetasizer APS has application across research in chemistry and biology, and is expected to particularly enhance the work of the UOW group researching the role of protein aggregation in diseases such as dementia, Parkinson’s disease and Motor Neurone Disease. Broadly, it will enable researchers to monitor the overall size, shape and stability of proteins and nanoparticles under certain conditions. Using only a small sample volume – as small as 20µL – and a microplate-based format, this instrument will also enable high-throughput screening of samples to test the effects of environmental factors (such as temperature and pH) and the presence of certain ligands on particle stability. Moreover, as this technique is non-invasive, and the particles do not need to be tagged or modified for analysis the same samples can be directly used in other assays, saving the researcher time and resources.

The Zetasizer APS will be directly used in studies into the protein aggregation associated with Motor Neurone Disease currently being undertaken by members of the Proteostasis and Disease Research Centre. The instrument will enable real-time measurements of protein aggregation and aggregate size, and the effects of chaperones and drug candidates on these parameters. Discovering agents that can prevent aggregation may lead to new therapeutic strategies for the treatment of this disease.
Population Health flagship project
Call for expressions of interest

IHMRI was created with a commitment to apply research findings, discovered at the Institute or elsewhere, with the intent of improving the health status of Illawarra residents.

This commitment has been reaffirmed on multiple occasions since IHMRI’s establishment and is what differentiates it from other health and medical research institutes in Australia.

One of the ways to achieve this commitment has always been IHMRI’s population health research program. To strengthen its contribution to our region, IHMRI’s Scientific Advisory Committee (SAC) and the Board of Directors have indicated the importance of the Institute developing a ‘flagship’ population health project.

The intent of the flagship project is to address a major health problem facing Illawarra residents and, over a period of approximately five years, demonstrate that a population-based approach can significantly reduce the prevalence and impact of the problem on Illawarra residents. Expressions of Interest for this project were called for at the end of September.

Examples of possible problems that could be addressed by a flagship population health project include: reducing the incidence of stroke through the identification and management of hypertension within the community; reducing the impact of alcohol on the community; and reducing the prevalence of overweight and obesity in the community, among others.

The flagship project selected will:

- Concern an area identified at the national and/or state levels, as well as the local level, as being a priority;
- Address a problem that is prevalent within the community and that has demonstrated health, social and economic impacts at the general population level as well as on the health system;
- Present significant potential to secure funding support from government, the private sector or philanthropy;
- Be based around evidence already in place which confirms the problem can be affected by various interventions within a 3-5 year period; and
- Draw on scientifically acceptable strategies to measure the impact of interventions on the problem.

To ensure strong development of the flagship project, IHMRI will commit resources as well as provide assistance in securing additional resources. Proposed resources would allow employment of a post-doctoral researcher - who would function as the lead investigator of the project, employment of a full time project manager, access to IHMRI resources (for example office space) based on negotiations with IHMRI’s executive team, and a budget of $100,000 per year for intervention development and implementation.

It is envisaged that both UOW and the ISLHD will provide support for the flagship project budget through direct financial support and/or the secondment of personnel to the project.

A significant portion of the activities will be expected to be developed and implemented with government and community agencies and volunteers who are committed to the project, with the ‘core project team’ supporting the implementation of the flagship project expected to be small.

A briefing session for prospective project leaders was held at IHMRI Headquarters on 12 October, and proposals are due on 11 November. These will be assessed by members of the SAC and the IHMRI Board, and announcements will be made in mid December 2011 regarding the outcome of the EOI period. The commencement of the flagship project is expected in 2012.

More information on Expressions of Interest for the IHMRI Population Health flagship project is available from Pat Frencham: patf@uow.edu.au / 02 4252 8948

The Healthy Heart, Healthy Mind campaign to educate the community and health professionals about the link between hypertension and dementia, has been a successful population health project in the Illawarra.