



RESEARCH
ADVANTAGE

HEALTH PROFESSIONALS RESEARCH EDUCATION PROGRAM –

Session 4:

ABORIGINAL HEALTH RESEARCH



12.30 – 2.00pm Friday 15 November 2019
HOST: John Hunter Hospital – Large Lecture Theatre [6026]
Zoom – Meeting ID: 458726079



PROFESSOR FRANCES KAY-LAMBKIN

Acting Pro Vice-Chancellor Research and Innovation, UON



INTRODUCTION



WELCOME TO COUNTRY

AUNTY JUNE ROSE



ACKNOWLEDGEMENT OF COUNTRY

**We acknowledge and pay respect to the Awabakal people,
traditional custodians of the land
on which the John Hunter Hospital is situated
and also acknowledge and pay respect to other Aboriginal and
Torres Strait Islander nations from which our students,
staff and community are drawn**



SCENE SETTING

JOHN WIGGERS



*Director
Clinical Research and Translation
HNELHD*



ASSOCIATE PROFESSOR KELVIN KONG



***Head of Paediatric and Adult Otolaryngology
Neck Surgeon - John Hunter Hospital
Conjoint, School of Medicine and Public Health - UON***



Aboriginal Research

A/Prof. Kelvin Kong

Oto-Rhino-Laryngology, Head & Neck Surgeon

John Hunter Hospital/ HMRI/ University of Newcastle

Awabakal Country



@KelvinKongENT





Disclosures



ORL Surgeon



Royal Australasian
College Surgeons

IHC

FSC

Examiner

TIPS



Worimi Nation



HNELHD



Cancer Australia



Conjoint @ UNSW + University of Newcastle



Affiliated with Menzies

Conflicts of Interest

Deliberate, Potential or Real

I benefit 😊

- **Worimi man**
- **Hard to separate conflict of work from personal conflict.**
- **Who I am?**
- **My work**
 - **My representations**
 - **My goals**
 - **My family**
 - **My children**
 - **My life**

Broad view in this presentation

Passed my fellowship in 2007

Never Convocated

“Kelvin, How can we get more Aboriginal Research?”

Aboriginal Research



Baxter
AMB1324
1000 mL
PRANS EXP SEP-11
STERILE SYRINGE

Baxter
AMB1324
1000 mL
PRANS EXP SEP-11
STERILE SYRINGE

Baxter
AMB1324
1000 mL
PRANS EXP SEP-11
STERILE SYRINGE

Clear plastic bin containing various medical supplies, including boxes and bottles.

MENZIES TEAM
DONT TOUCH !!
OR YOU'LL GET A WALKING STICK UP
YOUR ARSE LOVE DIB

KEEP ON
HANDLE CAREFULLY

Two yellow containers with labels, likely containing disinfectant or cleaning solution.

Yellow box with text, possibly a medical supply box.

Box with handwritten text: "Gly Epsy"

Box with text: "1000 mL"

Box with text: "EP"

Box with text: "EP"

Box with text: "1000 mL"

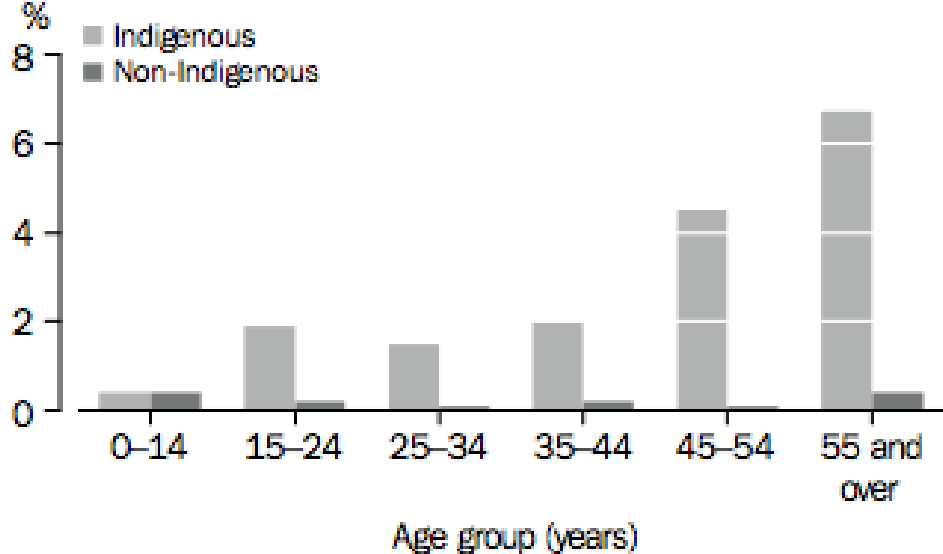
30-503
HANDLE WITH CARE
STORE IN A COOL DRY
AND CLEAN PLACE
DUPONT Sontara
LOW LEAD
ALL PURPOSE TOWELS
SMALL - 100 TOWELS
2000 x 2000
DUPONT Sontara
LOW LEAD
ALL PURPOSE TOWELS
SMALL - 100 TOWELS
2000 x 2000

MENZIES. TEAM

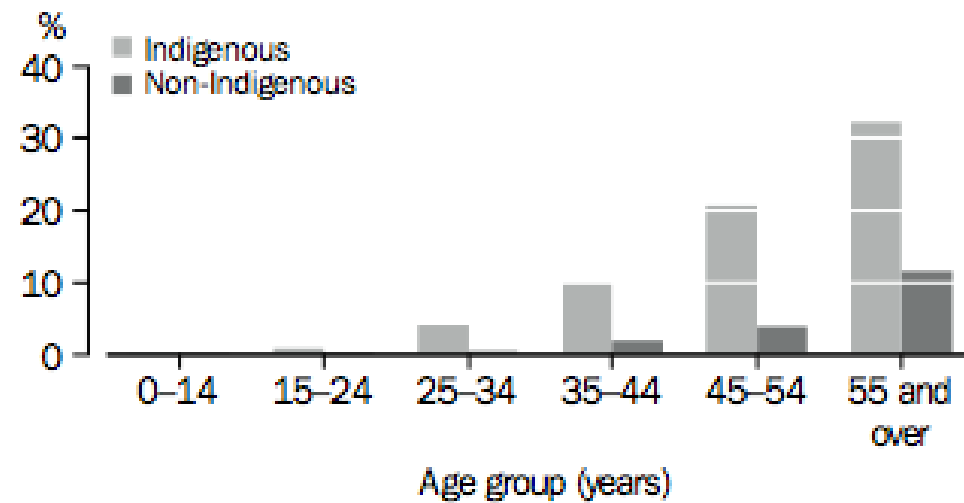
DONT TOUCH !!

OR YOU'LL GET A WALKING STICK UP
YOUR ARSE. LOVE DEB.....

PREVALENCE OF KIDNEY DISEASE

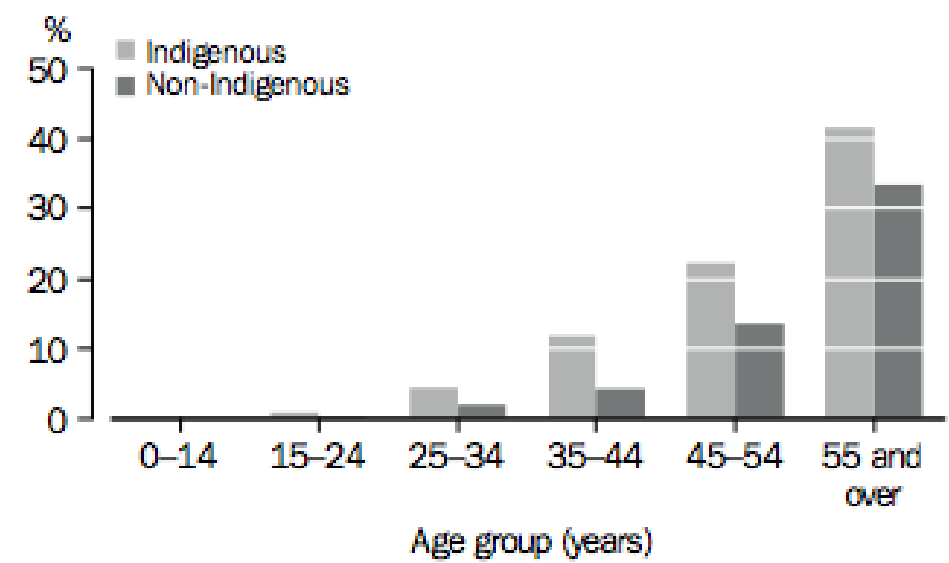


PREVALENCE OF DIABETES (a)

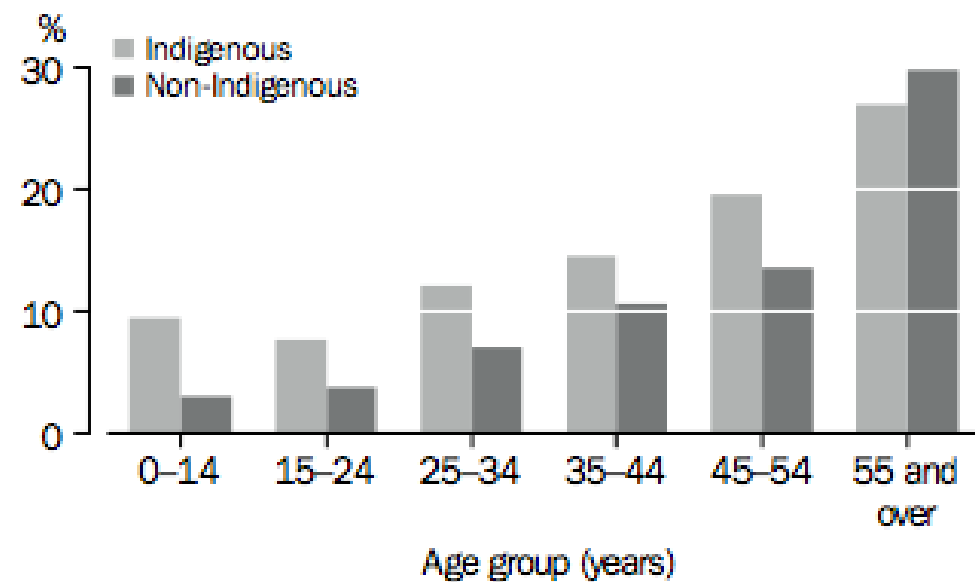


(a) Includes persons who reported high sugar levels.

PREVALENCE OF HYPERTENSIVE DISEASE



PREVALENCE OF HEARING LOSS/DISEASES OF THE EAR



Delivering patient-focused translational research is our major goal, which means seeding start-up studies & fostering a flow of information and innovation back & forth between scientists, clinicians and public health professionals. Attracting top medical specialists & collaborating with other leading institutes and industries helps to fast-track the provision of new & better health.

Closing the Gap





Do you think we should
commit to
“Closing the Gap”?

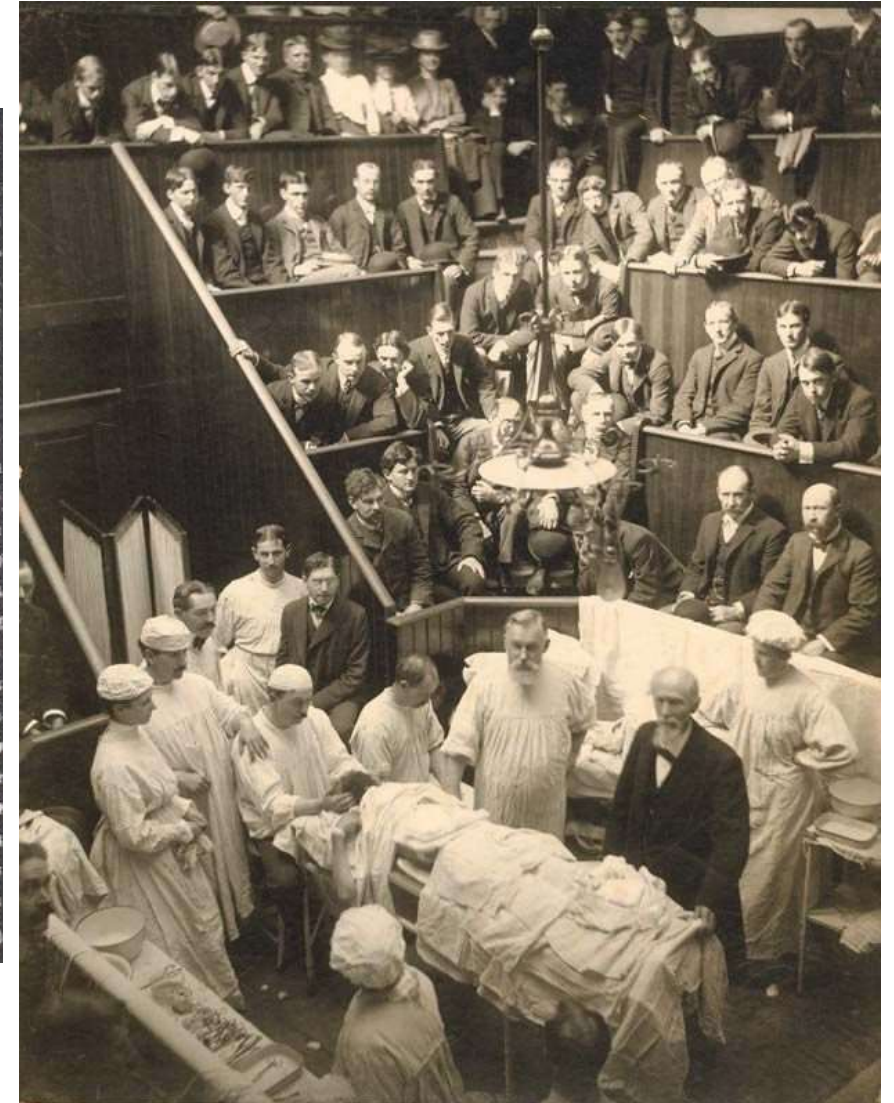


Courage



Good sense of
momentum in
Medicine

- **First Australian female doctor**
 - **Emma Constance Stone 1888**
- **First Maori Doctor**
 - **Mauī Pomare 1889**
- **First Indigenous Canadian Doctor**
 - **Oronhyatekha 1866**





- 1. First Aboriginal doctor
- 2. First Ophthalmologists
- 3. First Dermatologists
- 4. First Obstetrician & Gynaecologists
- 5. First Surgeon



- 1. First Aboriginal doctor
- 2. First Ophthalmologists
- 3. First Dermatologists
- 4. First Obstetrician & Gynaecologists
- 5. First Surgeon

- 1. Prof. Helen Milroy 1983
- 2. Dr. Kris Rallah-Baker 2018
- 3. Dr. Dana Slape 2019
- 4. Dr. Marilyn Clarke 2008
- 5. A/Prof. Kelvin Kong 2007



Australia's First Ophthalmologists

- My own dealings with blatant racism, degradation, training delays, bullying, harassment and racial vilification are unfortunately considered an unremarkable experience amongst my Indigenous medical brethren. To many of us, racially motivated workplace violence is the norm. Institutionalised racism, unconscious bias and cultural insensitivity might sound like buzzwords people kick around, but they are real and their impact is real.

Public debate

- While it is true that more Indigenous ophthalmologists would be a positive step, it is not true that only Indigenous ophthalmologists can be dedicated to, and culturally sensitive in, providing excellent eye health services and promotions for Indigenous people.



Australia's first Aboriginal Dermatologists

- Despite graduating as dux of her Sydney high school, she took the advice of her year 9 careers counsellor who suggested she study education. She soon found teaching wasn't her thing, dropped out of university and sold cosmetics. After seven years and many over-the-counter conversations with customers who nurtured her doctor dream, she applied for medicine as a mature age student.



Australia's First Obstetrician & Gynaecologists

- Very little media exposure
- Very quiet from RANZCOG
- Represents foundation for many



Are we ready for CI-A in
Aboriginal research

My experience

**Public forum
looks for
compartmental
approach**

**Very linear and
not very
complex**



“Kelvin, How can we get more
Aboriginal Research?”

Get the house in Order!

“Getting the house in order”



**INCREASE THE NUMBER OF
INDIGENOUS RESEARCHERS**



**INCREASE RESEARCHER
PARTICIPATION IN
INDIGENOUS HEALTH**



REMOVE SYSTEMIC BARRIERS

Research in Indigenous Health

1. Improve
Aboriginal, Torres
Strait Islander
Health Health

2. Improve
Awareness of white
privilege = remove
systemic barriers

3. Improve
Professional
representation
across diverse
backgrounds

4. Journey that is
shared and
championed by all

White Privilege is
a phrase for
systemic barriers

- I am NOT saying all non-indigenous people are racists
- I am NOT saying our research institutions are racists
- **System of structural advantage** that devalues and adds unnecessary barriers for Aboriginal, Torres Strait Islander in the research arena
- E.g. NHMRC

Living Aboriginal in Australia



Digress to explain how shallow such a request can be, not in an offensive way, but a disheartening manner



The premise of graduating as Australia's first Aboriginal Surgeon, not dissimilar to many of my family and friends in their respective workplace.

Must have been by positive affirmation
You must speak for all Aboriginal people
You represent the defense of the college for racism and lack of diversity
You increase the street cred of the college



Many daily examples of experiencing life as an Aboriginal man.

Diversity
improves
outcomes!



Communities depend on a diversity of talent



Not a singular concept

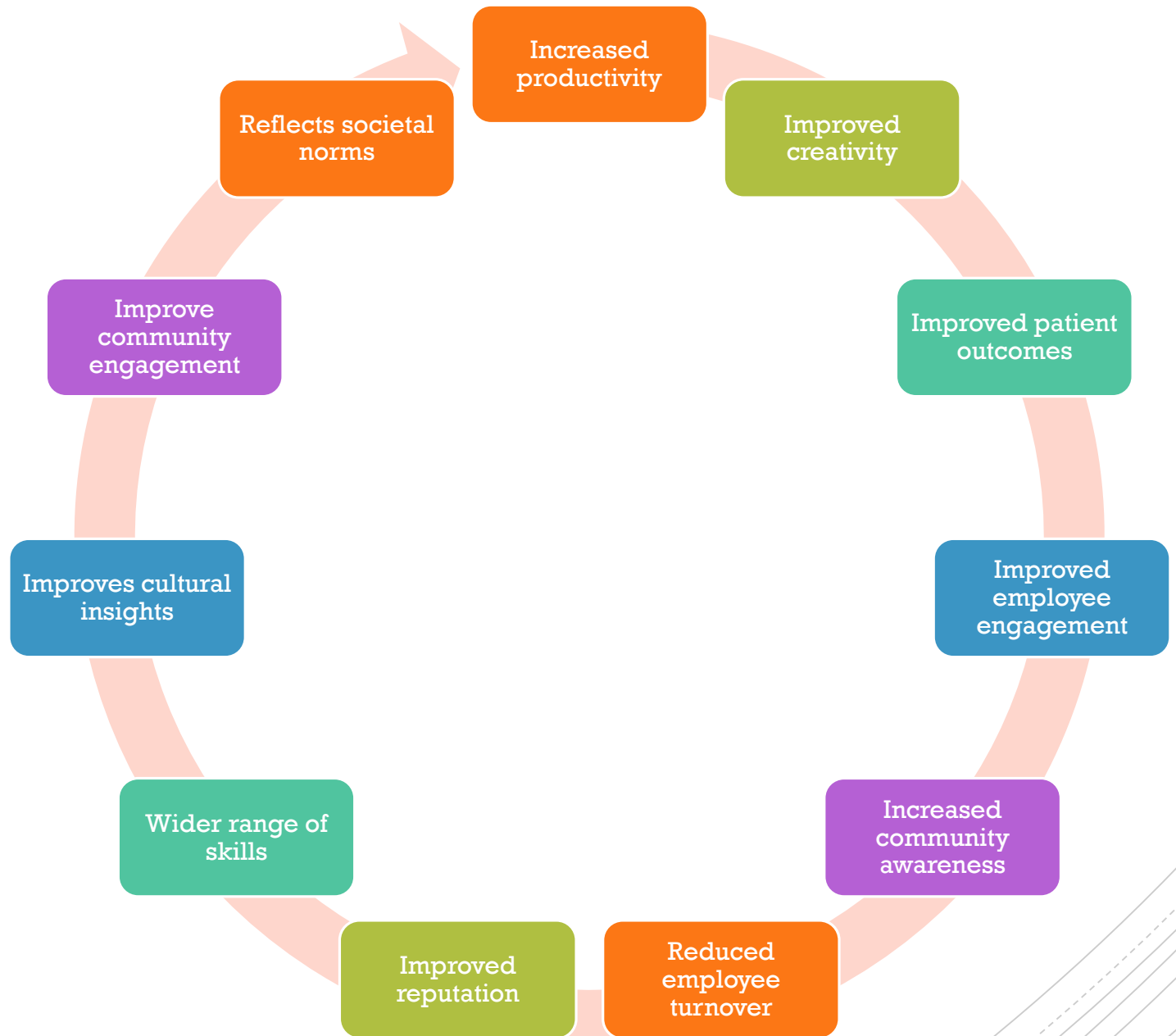


The Heart of the challenge, is the need to reconstitute our sense of ability



Linearity is a problem

Diversity does not
lower the
standard of
Surgical training!



Change in Research!

- Have we taken too linear an approach?
- Kindergarten and high school applications!
- School represents a fast food model of education

Lacks sense of Indigenous knowledge



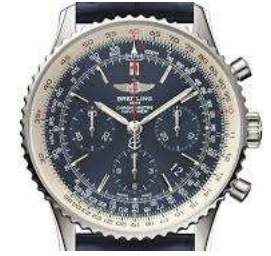


Mastery

- Capable of learning
- Martial arts
- School, group together and shepard together at similar pace
- Homework and all progress together
- Then test

1. Structural Change

Revolution V Evolution



Need transformative change
Lateral thinking
Indigenous framework



Move out of comfort zone
What we take for granted



Understand different paradigms but appreciate from different lenses



Tyranny of common sense, can't do anything different
Obsession with linear progression

Passion V Assessment

- Spirit and energy hard to articulate is required
- Time takes a different course
- Industrial / efficient model needs to be molded to principles of human flourishing.
- Create conditions in which it flourishes. You don't know the the end product but create a robust model to lead itself
- People develop their own solutions and it requires a supported environment
- We need to revolutionize our education
- Visit to Vatican

White Privilege in Research

System of Structural advantage

- Awareness of systems and approaches
- “Insider knowledge”
- Costs and starting points for many
- Cohorts of information sharing (HSC, University, AST)
- Reversing injustice does not equate justice

Narrative of racial difference

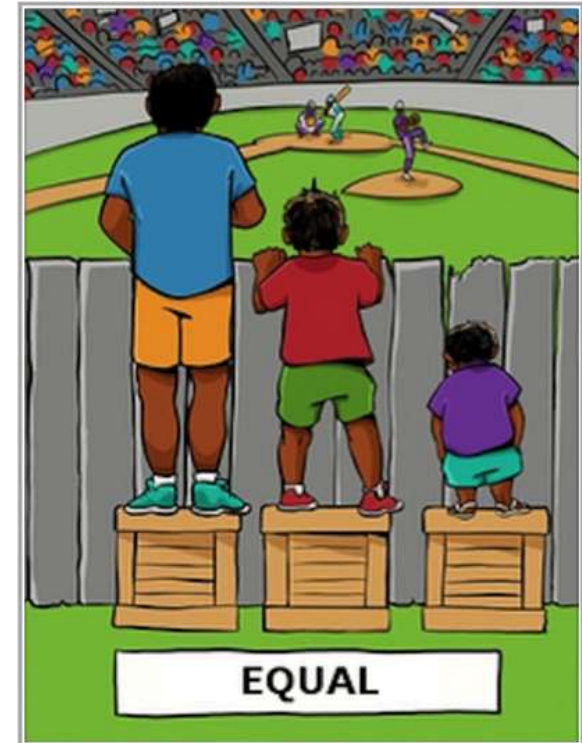
- Why we feel like this
- Why we endure and tolerate the lateral violence
- Always tend to be negative

Tends to support non-Indigenous people in social, political and economic areas

- NHMRC grants
- Lack of Indigenous Strategy

What does that
privilege look
like in society?

- Australia boasts world health development
- Devastating disparity between First nation and Non-Indigenous Australians
- Historical Injustice
- Institutional injustice



Social injustice

Stereotyped

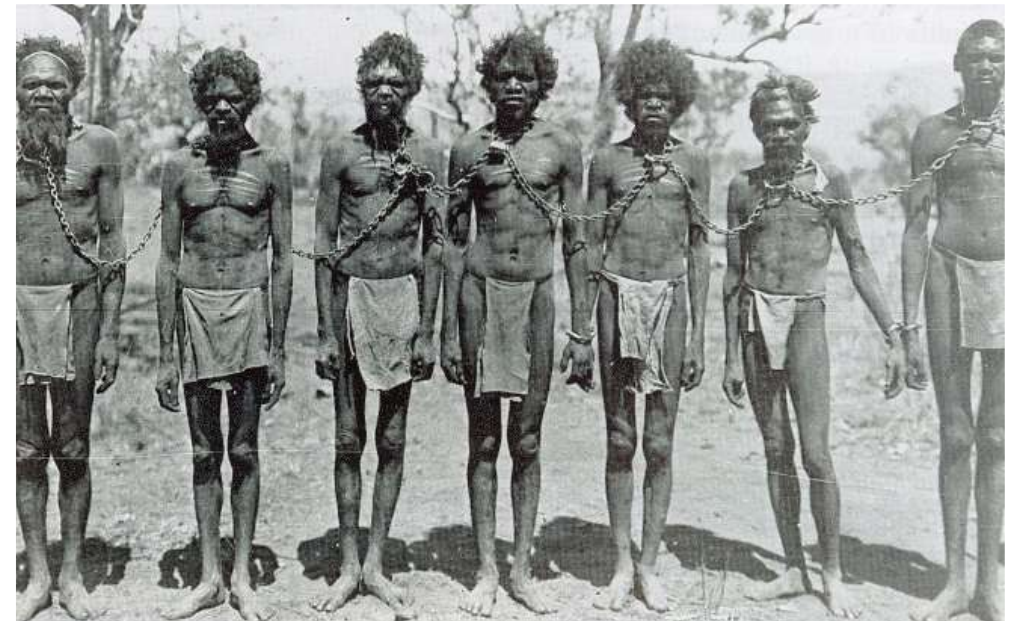
Lazy, alcoholic, violent

Social Media Troll

Surgical Access



Mass media



WELCOME TO RAMINGINING

Fly Tiwi

8427 0000

Ramingining

FLIGHT DEPARTURES AND ARRIVALS

to and from

MANINGRIDA AND DARWIN

0 000

Interpretation





Paediatric Illustration of voice in structural disadvantage

- **Hearing and Incarceration rates**
- **27% gaols Aboriginal and Torres Strait Islander**
- **Kids being kept in Adult watch houses**
- **All juvenile kids in NT incarcerated are Aboriginal**
- **Most if not all have some form of ear disease including hearing loss**



Change the Narrative

- Need a broader based educational experience
- Aboriginals as scientists, doctors, surgeons
- Arm our fellowship with inspirational stories
- Highlight disparities with concrete solutions

3. Improve professional representation - Basis of Success

- Strong
- Healthy
- Confident
- Supported
- Innovation
- Non-discriminated
- Educated
- Admired



3. Improve professional representation



Need to support researchers



Go out of road to help



Positive discrimination in a mindset that is supportive



Convening a meeting



Use Experts



Inclusion !!!!

Not standing alone

Need to be the
champion for those
less fortunate

Appreciate the
different views and
because they are not
the same cannot be
discounted

Look at changes all
the time to see how
we can improve

Be the champion

Get involved

Passion drives
passion


Journey Shared

Do you think we should commit to
“Closing the Gap”?

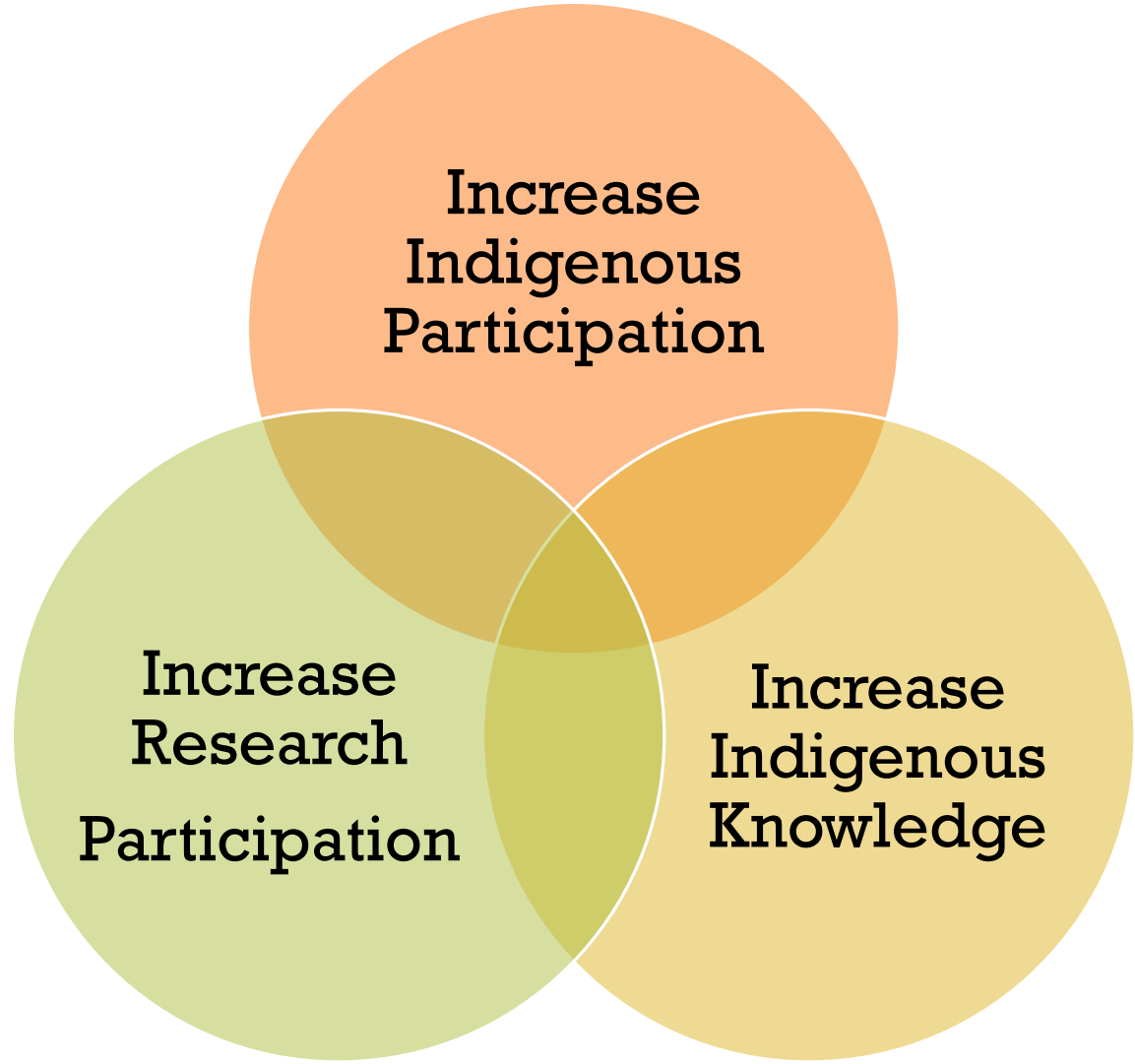
Or...



Should our goal be that the health status of the rest of Australians be the same as Aboriginal people?



Do you think we
should “ELIMINATE
the gap”



**Increase
Indigenous
Participation**

**Increase
Research
Participation**

**Increase
Indigenous
Knowledge**

“Kelvin, How can we get more Aboriginal Research?”

Summation

We can change the action,
that changes the course of our
organization,
that changes the system we operate
in,
that changes the outcome of what we
partake in,
that creates diversity and equity!



Q&A PANEL



KELVIN KONG



NICOLE GERRAND



TONY MARTIN



NATHAN TOWNEY



AIMEE SMITH



Health
Hunter New England
Local Health District



**RESEARCH
ADVANTAGE**
connecting and empowering



Health
Central Coast
Local Health District

WHAT'S NEXT



2019

RESEARCH & INNOVATION SYMPOSIUM

CENTRAL COAST LOCAL HEALTH DISTRICT

University of Newcastle,
Central Coast Campus,
Ourimbah
20th November

An opportunity to support and network with colleagues. Hear about the Research & Quality Improvement projects they have been working on through a variety of oral presentations, lightning talks and posters.

General Admission \$60
Student Admission \$30
8 CPD Points



Keynote Speaker
LUKE ESCOMBE

Health Advocate
Award-winning singer-songwriter,
comedian and speaker

Lunch, Morning Tea
& Afternoon Tea
included

Register via Eventbrite: <http://bit.ly/CCLHDRIS2019>

Contact the CCLHD Research Office for more information
4320 2085 or CCLHD-ResearchSymposium@health.nsw.gov.au

19 & 20 November 2019
Central Coast Campus, Ourimbah



Health
Hunter New England
Local Health District



Health
Central Coast
Local Health District

Grant Accelerator Program: Session 14: 2020 ARC Discovery Projects Rounds

– What's New & Lessons Learnt
Thursday 21 November 2019
[ATC 210, Callaghan Campus]

Zoom <https://uonewcastle.zoom.us/j/478873489>
[Meeting ID: 478 873 489]



WHAT'S NEXT in 2020

Health Professionals Research Education Program:

Session	2020 Date
1	12.30 – 2.00pm Thursday 12 March 2020
2	12.30 – 2.00pm Thursday 11 June 2020
3	12.30 – 2.00pm Thursday 3 September 2020
4	12.30 – 2.00pm Thursday 12 November 2020