Faculty of Medicine and Health

Proud sponsors of the Western Health Research Network (WHRN) 2025 Symposium

- Academic Implementation Science Network
- Cancer Research Network
- The Cardiovascular Initiative
- Community and Primary Health Care Network
- Digital Health and Informatics Network

- Leeder Centre for Health Policy, Economics and Data
- Sydney Musculoskeletal Research Centre
- The Matilda Centre for Research in Mental Health and Substance Use
- Heath and Health Research Centre
- Centre for Disability Research and Policy
- Westmead Applied Research Centre

THE UNIVERSITY OF **SYDNEY**

Celebrating **175** *years*

We recognise and pay respect to the Elders and communities – past, present, and emerging – of the lands that the University of Sydney's campuses stand on. For thousands of years they have shared and exchanged knowledges across innumerable generations for the benefit of all.
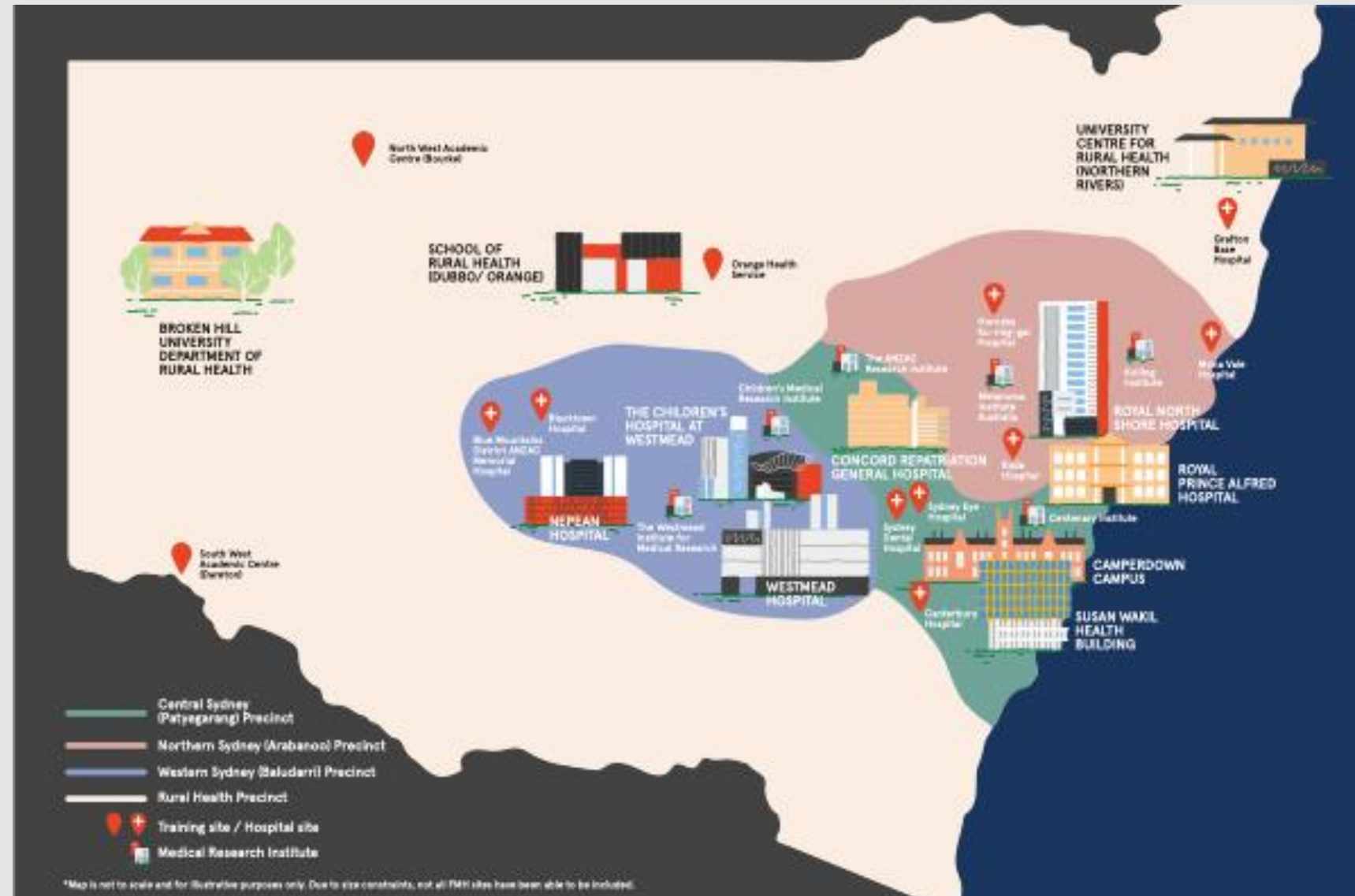
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SYDNEY

Faculty of Medicine and Health precincts

We are delivering excellence in teaching and research across New South Wales.

- Rural Health Precinct
- Central Sydney (Patyegarang) Precinct
- Western Sydney (Baludarri) Precinct
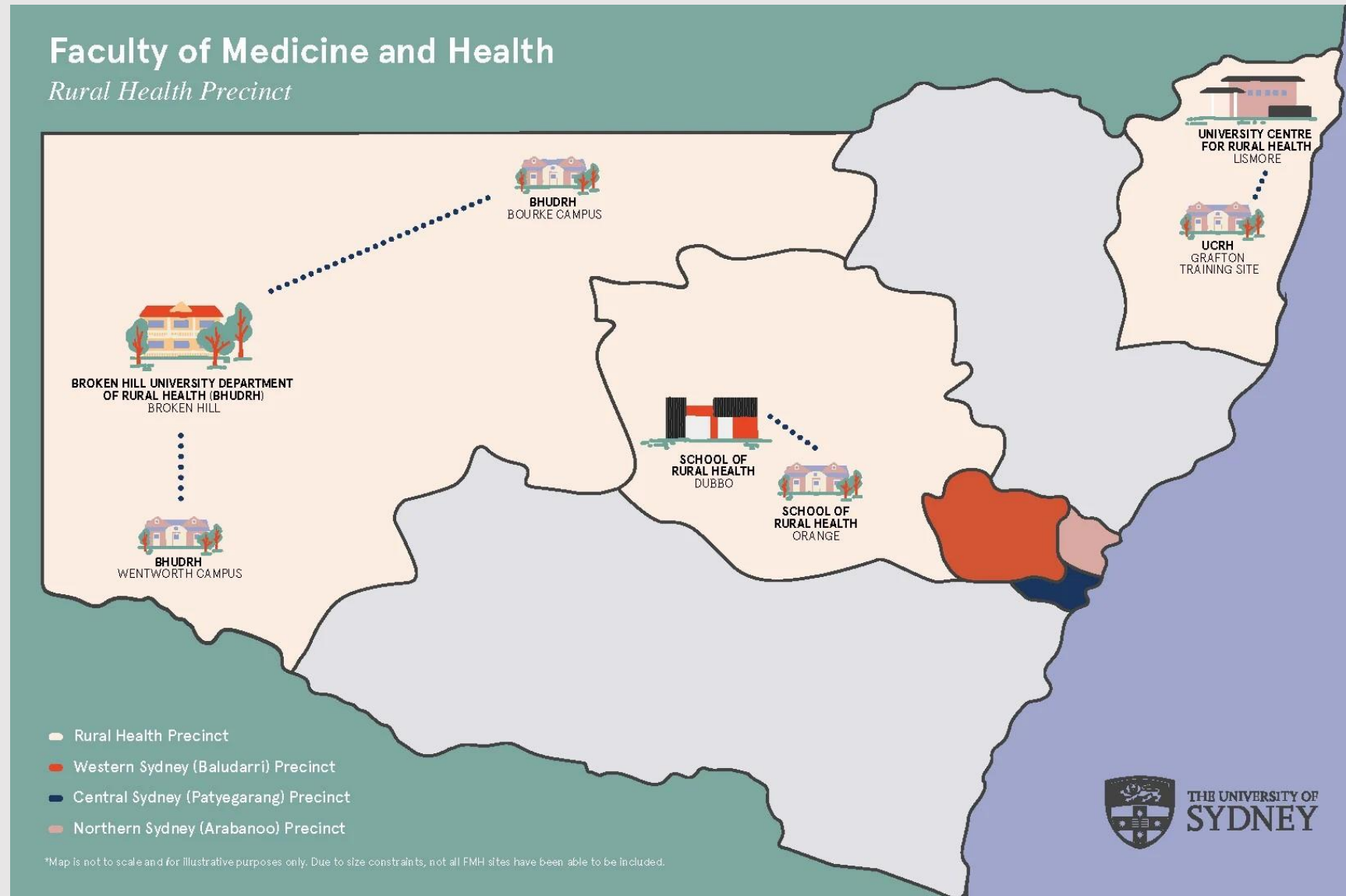- Northern Sydney (Arabanoo) Precinct

The Rural precinct

Our Rural Health Precinct incorporates our three Rural Clinical Schools:
- University Centre for Rural Health Lismore
- School of Rural Health Dubbo/Orange
- Broken Hill University Department of Rural Health.

Through our rural clinical schools, we are building the rural health workforce knowledge and capacity by delivering expert academic teaching, leading research, and fostering collaborative partnerships with universities, local health services, and community organisations.

Faculty of Medicine and Health
Rural Health Precinct

BHUDRH
BOURKE CAMPUS

BROKEN HILL UNIVERSITY DEPARTMENT
OF RURAL HEALTH (BHUDRH)
BROKEN HILL

BHUDRH
WENTWORTH CAMPUS

SCHOOL OF
RURAL HEALTH
DUBBO

SCHOOL OF
RURAL HEALTH
ORANGE

UNIVERSITY CENTRE
FOR RURAL HEALTH
LISMORE

UCRH
GRAFTON
TRAINING SITE

- Rural Health Precinct
- Western Sydney (Baludarri) Precinct
- Central Sydney (Patyegarang) Precinct
- Northern Sydney (Arabanoo) Precinct

*Map is not to scale and for illustrative purposes only. Due to size constraints, not all FMH sites have been able to be included.
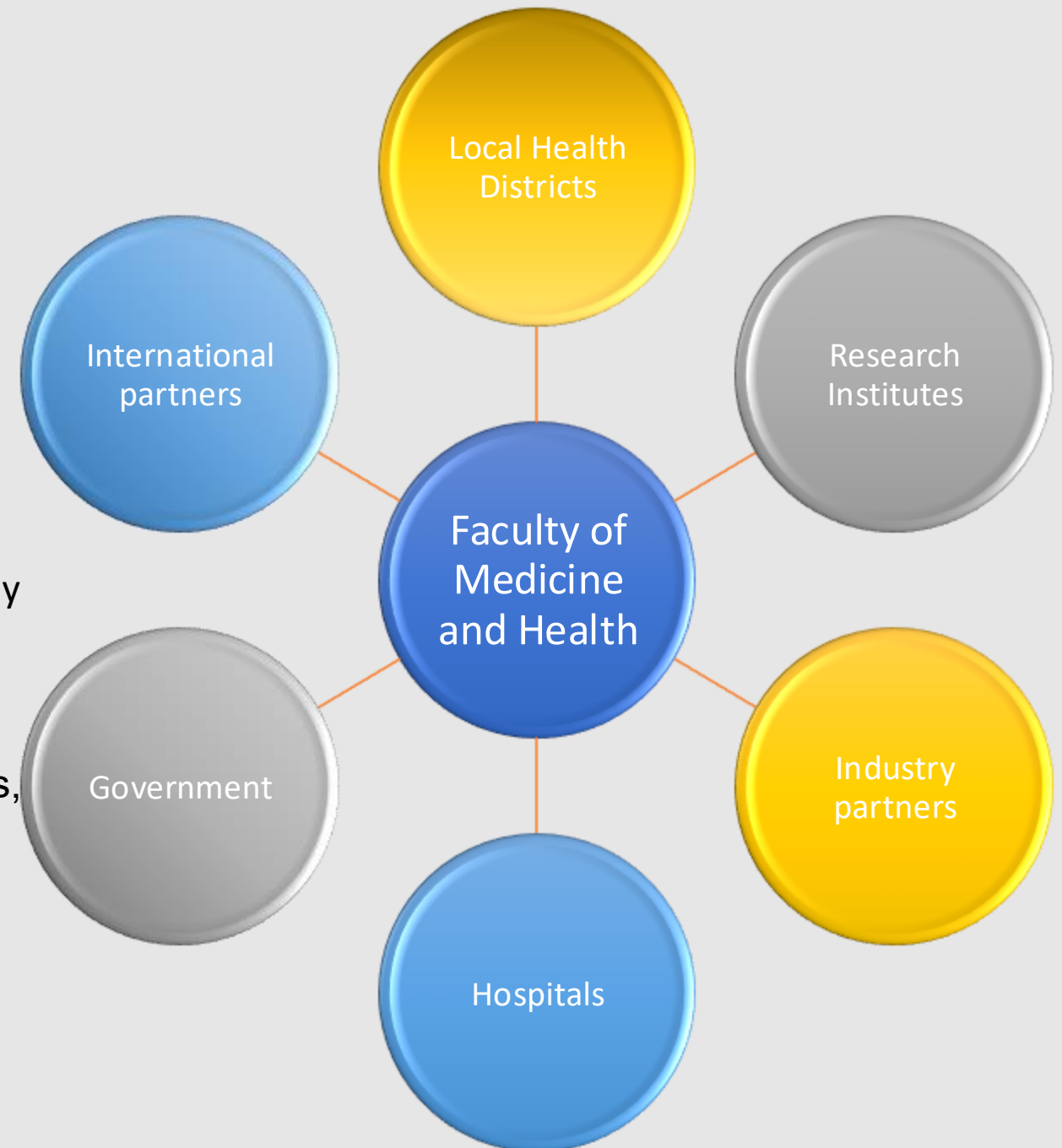
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Our partnerships

Together we are transforming healthcare.

Our partnerships are helping to develop student learning and expand research capacity.

We are a proud sponsor of WHRN and recognise the important education and research work undertaken by our colleagues in rural and remote NSW.
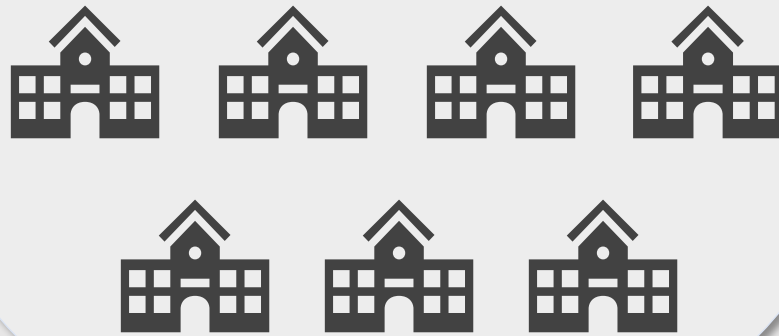
We are also proud to partner with a network of local health districts, primary health care networks, industry, research institutes, hospitals, government organisations and international partners, and welcome new opportunities to collaborate.
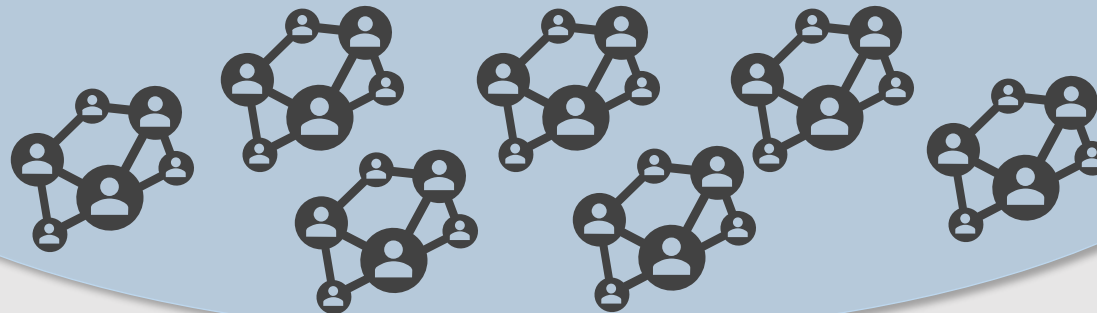
Our research centres

Flagship Centres

Flagships are long-term major groupings of researchers conducting world-leading research that addresses a significant research problem.

Impact Centres

Our Impact Centres focus on specific areas of health and medical research of national significance. They deliver concentrated expertise on one or two subjects within their defined research area.

Incubators

Incubators identify a societal need and look to test their research capabilities to meet the challenge of addressing it. They bring together researchers who may not otherwise collaborate.

- **Sydney Musculoskeletal Health**
- **The Matilda Centre**
- Sydney Infectious Diseases Institute
- NHMRC Clinical Trials Centre
- Poche Centre for
- Indigenous Health
- Save Sight Institute
- The Daffodil Centre

- **Centre for Disability Research and Policy**
- **Leeder Centre for Health Policy, Economics and Data**
- **Westmead Applied Research Centre (WARC)**
- **Heat and Health Research Centre**
- Reproduction and Perinatal Centre

- Biomanufacturing Incubator

Child and Adolescent Health Centre currently under development

Our Research Networks

FMH networks support collaboration on major themes to build capacity in areas of strategic importance to health and medical research and/or teaching by regularly bringing together people from a range of disciplines.

Academic Implementation Science Network

Demonstrate that evidence-based interventions can be successfully implemented and scaled-up in large and diverse health systems. *(with SHP)*

Cardiovascular Initiative

Addressing cardiovascular health through multidisciplinary research. Aims to improve cardiovascular health for current and future generations across Australia through clinical and translational research. *(with CPC)*

Cancer Research Network

Links researchers from across the University, its teaching hospitals and affiliate research bodies to facilitate collaborative cancer research with the goal of achieving international excellence.

Community and Primary Health Care Network

Promotes and embed a Primary Health Care approach centred on meeting people's health needs through their whole life

Digital Health and Informatics Network

Improving future efficiency, quality and efforts in digital health and informatics with a vision to prevent illness, promote wellness and improve care through purposeful collaboration and innovation.

Sport and Physical Activity Research and Teaching Network

Dedicated to advancing knowledge, education and innovation in sport and physical activity research.

Sydney Clinical Imaging Network

Promotes research and education, and shares knowledge and expertise in the rapidly evolving, multidisciplinary field of clinical imaging.

Sydney Pain Consortium

Brings together researchers, clinicians and educators with the vision to create and disseminate new knowledge on pain to optimise patient outcomes.

Sydney Health Ethics

Focuses on ethical issues across health, medicine and the life sciences by applying approaches and methods drawn from the humanities and social sciences

The University of Sydney

Faculty of Medicine &
Health Research
Networks

Please join one or more of
our networks

Digital Health and Informatics Network (DHIN)

Purpose

- We want to provide a central connection point for those with an interest in digital health and informatics

- The DHIN's mission is to build the capability of Network members with a focus on EMCRs in digital health and entrench the University as a leader in digital health, academically, and with impact across the health sector and community

- Our purpose is to connect interests, promote collaboration in research, share current projects and resources in these areas, and stimulate purposeful networking via Digital Health & Informatics Network (DHIN) hosted events and online engagement

History

- Established in 2018

Scale

- Multi-disciplinary: members across the University, Local Health Districts and health precincts associated with the University of Sydney, and private industry enterprises.

Membership & Interest holders

- Over 1,200 members
- Strong ties throughout academia and industry nationally

KEY GROUPS

Network Executive Team (NET)	Network Advisory Group (NAG)	Early Careers Research (ECR) Community	Digital Health Week
• EMCRs leading the key initiatives of the DHIN	• Senior academic and industry partners who guide and support the DHIN members and initiatives	• Works to bring together emerging researchers with an interest in digital health • 4-5 events/year	• National scientific event run annually • Partnering with other universities

Digital Futures: Rethinking Health and Care

The conference theme for 2026 is 'Digital Futures: Rethinking Health and Care'. As digital innovation accelerates, the future of health and care is being redefined.

This conference invites researchers, practitioners, policymakers, and technologists to explore how emerging digital technologies—AI, data analytics, remote monitoring, virtual care, social media, and more—are reshaping healthcare systems, professional practices, and patient experiences. Join us for critical conversations, cutting-edge insights, and collaborative opportunities that will shape the next era of health and care. Submissions of in-progress or early stage research are encouraged.

By fostering discussions around Digital Futures: Rethinking Health and Care, the conference seeks to drive positive change in the digital health landscape, ultimately leading to improved health outcomes for everyone, regardless of their background or circumstances.

Dates

3–5 February 2026

Locations

Digital Health Week 2026 is a face to face event run across multiple sites. See the schedule for details of access to events on different days.

Enquiries

Please contact
digital.health-week@sydney.edu.au
if you have any questions.

Digital Health and Informatics Network (DHIN)

Join the DHIN
(Digital Health and Informatics Network)

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The Cardiovascular Initiative

Purpose

- To provide a platform to bring together pre-clinical and clinical research hubs and facilitate collaboration of outstanding researchers and clinicians across faculties, FMH Precincts (including the Rural Precinct), world-class medical research institutes and to bring together the clinical cohorts and power of the three local health districts (LHDs) of Sydney Health Partners (SHP).

History

- Established in 2017 with seed funding and University leadership support. In 2021, CVI became an official network within the Faculty of Medicine and Health.

Scale

- Anchored by the Faculty of Medicine and Health, the Charles Perkins Centre and SHP, CVI encompasses diverse cardiovascular and metabolic research.

- CVI spans Sydney's major campuses and regional health precincts, ensuring broad geographic coverage.

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Membership & Stakeholders

- CVI membership has grown over 25% since mid-2021, now exceeding 1,000 members.
- Strong ties with Sydney Health Partners.

Pipeline (Interest Groups) Coverage

- Activities include basic science, clinical research, and translation into medical practice.

Multidisciplinary Collaboration

- Collaborations extend beyond medicine to data science and engineering, enhancing research depth.

Rural focus

In 2024, the CVI and ACvA ran a National workshop in Dubbo at the School of Rural Health: *"Remoteness and CVD and Stroke in Australia Workshop"*

External Partners

Health Services and Research Institutes
- Sydney Health Partners (SHP) – a collaboration between: Local Health Districts (LHDs) and Medical Research Institutes (MRIs)
- Heart Research Institute (HRI)
- Charles Perkins Centre (CPC) – although internal, CPC also facilitates external collaborations
- Royal Prince Alfred Hospital (RPA) – through CPC RPA Clinic

National and Professional Organisations
- Australian Cardiovascular Alliance (ACvA)
- Australian Stroke and Heart Research Accelerator (ASHRA)
- Cardiac Society of Australia and New Zealand (CSANZ)
- Victor Chang Cardiac Research Institute
- Baker Heart and Diabetes Institute
- Obesity Australia – via CPC collaborations

Cancer Research Network

Purpose

- The Cancer Research Network links cancer researchers in the University of Sydney and its teaching hospitals and affiliated research institutes and institutions, thereby helping build high quality cancer research capacity, achieve international cancer research excellence and contribute to reducing the impact of cancer on society.

History

- Established in 2006 (celebrating 20th anniversary in 2026).

Scale

- Multi-disciplinary: members across all five Faculties; Schools, Institutes, Local Health Districts and health precincts associated with the University of Sydney.

- Rural projects

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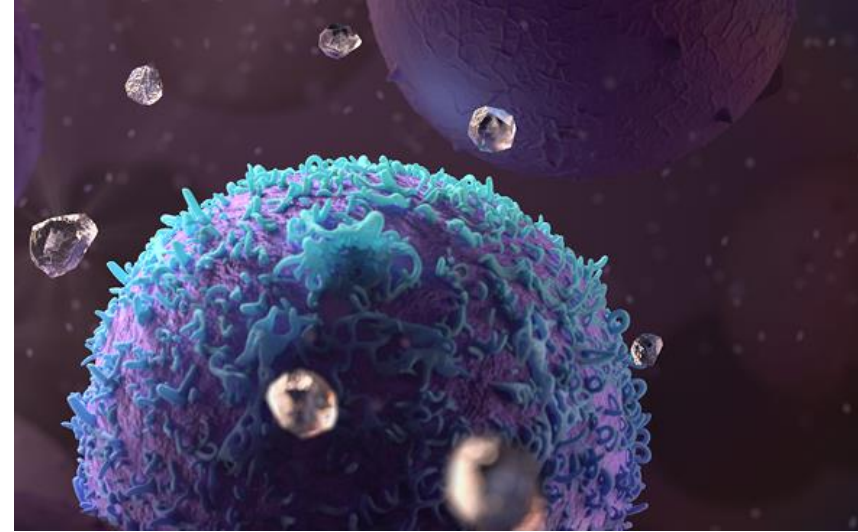
Membership & Stakeholders

- Over 1,000 members.
- Strong ties with Sydney Cancer Partners and Sydney Health Partners.
- Sponsor of state-wide cancer conferences such as the Cancer Institute NSW Cancer Summit

Key Groups

- Special Interest Groups (SIGs)
  - Cancer specific: including breast, brain, prostate, bowel, melanoma.
  - Cross-cutting themes: including AI, survivorship, patient reported outcomes, data linkage, comparative oncology, tumour and microenvironment

- Postgraduate Student Working Group
  i. Meets 9–10 times per year
  ii. Annual PG & ECR Symposium in November* (Nov 12 in 2025). Averages more than 80 attendees.
  iii. Mentoring Program & Career Development Workshop
  iv. Social events
  v. LinkedIn group led by PGSWG member

Academic Implementation Science Network (AISN)

Purpose

- To build capacity in implementation science. The Network is responsible for harnessing academic expertise from across the University to progress an agenda for education, training, and research in implementation science. The AISN is a partnership network with the Faculty of Medicine and Health (FMH) and Sydney Health Partners (SHP).

History

- The FMH Academic Implementation Science Network was established in 2021 to enhance translational research and specifically implementation science expertise across the University of Sydney and SHP member organisations. SHP has hosted an Implementation Science "Community of Practice" (CoP) Network since 2018.

Scale

- The Network has leveraged the strong foundation and membership base of the SHP Implementation Science CoP to engage with members across the partnership.

Membership

- AISN membership has grown over 25% since mid-2021, now exceeding 985 members.
- Strong ties with Sydney Health Partners.

SHP Implementation Science CoP

- AISN members also gain access to the benefits of SHP Implementation Science Academy Community of Practice including the full resource library and networking hub and events.

Academic Implementation Science Network

Join the AISN
(Academic Implementation Science Network)

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The Community and Primary Health Care Network

- Established in 2021 as the Faculty of Medicine and Health's Community and Primary Health Care engagement arm.

- Builds partnerships between the University, primary health care organisations, consumers and the community.

- Embeds Primary Health Care principles in our ways of working across research, education, advocacy and engagement.

- Focuses on person-centred care, safety, and equity in healthcare systems.

- Aims to promote happiness and healthy lives for all people at all ages.

- Delivering a Consumer Engagement Framework for Research and resource hub.

Our Partners

In collaboration with our partner organisations and Primary Health Networks, we deliver programs that are effective, relevant and responsive to the needs of our members. Our key partners include:

- Sydney Health Partners
- Health Consumers NSW
- WentWest PHN
- Central and Eastern Sydney PHN

- Sydney North PHN
- Western NSW PHN
- Healthy Communities Foundation Australia

Our Members

We have over **570** members currently.
Our members are located across New South Wales including Broken Hill, Sydney, Dubbo and Lismore.

Our members come from a diverse range of primary care backgrounds including but not limited to:

- Public Health
- General Practice
- Health Services Management
- Nursing and Midwifery
- Pharmacy

- Behavioural and Social Sciences
- Physiotherapy
- Psychology
- Dietetics and Nutrition
- Dentistry and Oral Health

The Community and Primary Health Care Network

Scan to learn more and become a member

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Celebrating **175** *years*

Sydney.edu.au/medicine-health/cphcn

The University of Sydney

Faculty of Medicine & Health Research Networks

Please join one or more of our networks

The Matilda Centre for Research in Mental Health and Substance Use

Dr Louise Thornton

Louise.Thornton@Sydney.edu.au

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Celebrating 175 *years*

Opportunities for collaboration

- **Game4Health**
    - Adapting *Our Futures* into a serious game for rural/regional schools.
- **DigiHub RCT**
    - Evaluating a digital mental health hub for adults in rural communities.
    - Includes human vs. AI health coach arms.

Get in touch

he-matilda-centre

Louise.Thornton@Sydney.edu.au

@TheMatildaUSyd

TheMatildaCentreUSyd

sydney.edu.au/matilda-centre
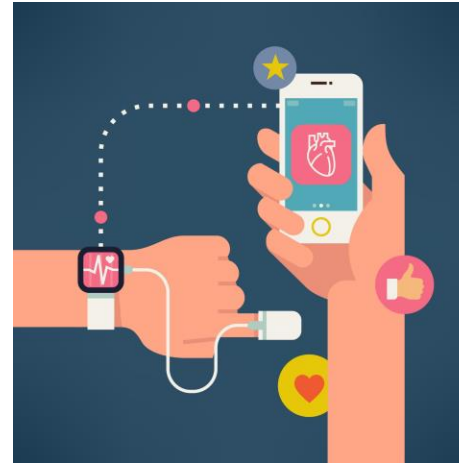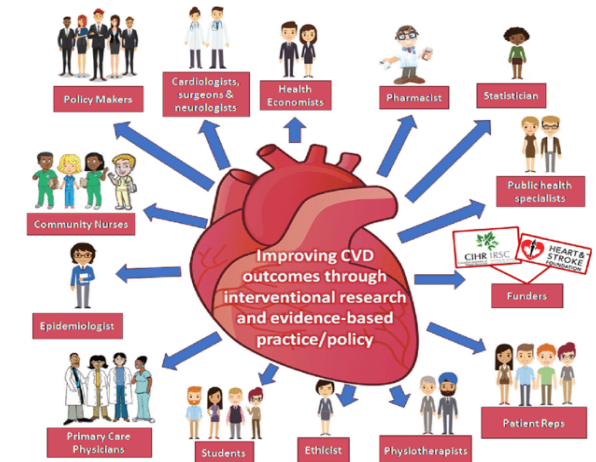
WARC's research themes

Innovation in clinical approaches & treatments

Innovation in Digital Health

Innovation to achieve health equity

We embrace our location at Westmead precinct in Western Sydney, where the socioeconomic and multicultural diversity inspires our ideas and co-designs our interventions

What is DigiCuris?

DigiCuris is a digital platform developed by researchers and clinicians.

It enables large-scale customised and personalised support that empowers people with chronic health conditions to self-manage their health.

Personalised approach

Content is tailored on user data, preference, and program design.

Simple and direct delivery

Being able to deliver content simply by text, email, or within app.

Support and monitoring

Provide support and monitoring between patients and healthcare providers.

Covering a range of health conditions

With message content developed through research in partnership with clinicians and patients.

The Leeder Centre for Health Policy, Economics and Data

https://www.sydney.edu.au/medicine-health/our-research/research-centres/leeder-centre-for-health-policy-economics-and-data.html

Associate Professor Martin Howell

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CRICOS 00026A

Current Rural Partnerships

Evaluation of the Central West NSW Mental Health and Wellbeing Program (In collaboration with the Poche Centre at the University of Sydney)
Partners – NSW Ministry of Health, 4 x ACCHOs in Central West NSW, Western NSW LHD

Formative evaluation of the NSW Health Building on Aboriginal Communities Resilience (BACR) Initiative (In collaboration with the Poche Centre at the University of Sydney) (Economic Evaluation)
Partners – NSW Ministry of Health

Development and evaluation of regional health care alliances to improve health system performance in New South Wales Patient Centred Co-commissioning Groups
Partners – NSW Ministry of Health, University of Melbourne, WentWest, Western NSW PHN, Consumers Health Forum

Improving patient outcomes and reducing the hidden burden of chronic wounds: a digitally enabled Wound Model of Care (The ENABLE Study).
NHMRC Partnership project led by SLHD. Leeder are undertaking the economic evaluation.
Partners include Western NSW LHD, Murrumbidgee LHD and Health North Coast PHN.

Recently Completed Project with Western NSW LHD

Evaluation of the Virtual Rural Generalist Service VRGS as an effective, "COVID-19 resilient" model of care - (NSW Health COVID-19 Research Grants Round 2 – 2020)
Partners – University of Sydney and Western NSW LHD
MJA Supplement: Virtual care: supporting acute care service delivery in rural and remote communities -
https://www.mja.com.au/journal/2024/221/11/supplement
A mixed methods evaluation of the VRGS. The evaluation drew upon the experiences of patients, carers, clinicians, and health managers and administrators, in conjunction with linked service usage (administrative data) and health outcomes data.

Opportunities for Collaboration

- Partnership research grants across the disciplines of the Centre with a particular focus on co-design with consumer or patient groups.

- Rural cohort of students in our graduate studies programs. HPOL5012 - Leadership for Health can be run as a standalone development program.

- Higher degree research projects MPhil or PhD for rural students and clinicians

- Research events, workshops and roundtables – partnering – co-hosting – career development.

Investigator Grant Request

Making equitable decisions: Embedding appropriate and robust methods for exploring equity impacts in health decision-making processes. Seeking potential interviewees to understand how equity is considered in decision-making settings for health in Australia. Inclusion criteria for potential participants are **individuals who are currently employed or previously employed** (2020 to present) **by an Australian government department and/or government committees across federal, state, and local levels**. To be eligible for participation, these individuals must regularly use (or have used) devidence from economic evaluations when making decisions about resource allocation in health. Contact: anagha.killedar@sydney.edu.au

The Leeder Centre
for Health Policy, Economics and Data

The Leeder Centre is an Impact Centre in the Faculty of Medicine and Health.

In 2024 we changed our name from the Menzies Centre for Health Policy & Economics as part of an expansion in our research program with the formal inclusion of Big Data, Linkage and Analysis for Health.

Our common intellectual motivation is to study the complex nature of health and policy systems, and use advanced methodologies in economics, large data analytics, systems thinking and public policy analysis to understand and improve these systems.

Research activity within the Centre is categorised into the following broad themes, however there are interlinkages and co-dependencies with researchers working across themes on joint programs of work.

- Policy, Governance, and Leadership for health
- Health economics, funding and financing
- Health technologies, services and systems
- Big data, linkage and analysis for health
- Master of Health Policy & Planning

Named to honour the remarkable career and contributions of **Emeritus Professor Stephen Leeder AO** to health policy and health systems worldwide.

A founding Director of the Centre, he established its strong research program in chronic disease policy and a master's program in health policy – now known as the School of Public Health's Master of Health Policy and Planning.

**Directors –
Professor Andrew Wilson AO
Professor Kirsten Howard**

Heat and Health Research Centre

Our purpose

To reduce the health impacts of extreme heat and hot weather across the human lifespan

Our mission

"To serve as a platform for multi-disciplinary research that generates comprehensive and sustainable solutions for the complex impacts of extreme heat and hot weather on human health and wellbeing across the lifespan"

Priority Research Themes

Maternal & Child Health	Physical Activity, Sport & Occupational Health	Ageing & Chronic Diseases	Landscapes & the Built Environment	Humanitarian Settings

- Negative heat-related pregnancy outcomes
- Infant thermal management methods
- Heat in schools
- Playground safety

- Sport extreme heat policy development
- Equitable cooling in RMG industry
- Occupational heat stress risk management
- Active commuting

- Heat action plans
- Personal heat resilience
- Medications
- Cardiovascular health
- Mental health
- Aged-care homes

- White/green roofing
- Urban greening
- Shading initiatives
- "Fan-first" cooling
- Modifications to built environment
- Low-income housing

- Future survivability limits
- Refugee camps
- Slums
- Prisons
- Heat & mosquito-borne diseases
- Heat & water-borne diseases

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Heat and Health Research Centre

Thermal Ergonomics Laboratory

Our state-of-the-art climate chamber can simulate environmental conditions of the past, present, and future. The climate chamber allows precise control of ambient temperature, humidity, airflow, and solar radiation - key environmental factors that influence human heat strain

Examples of our research:
Translating research into real-world tools
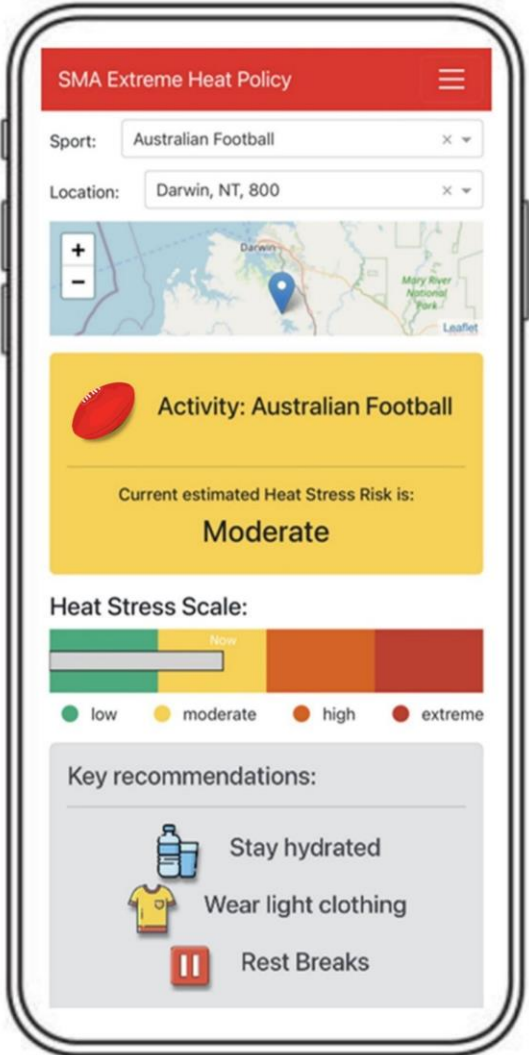
HeatWatch
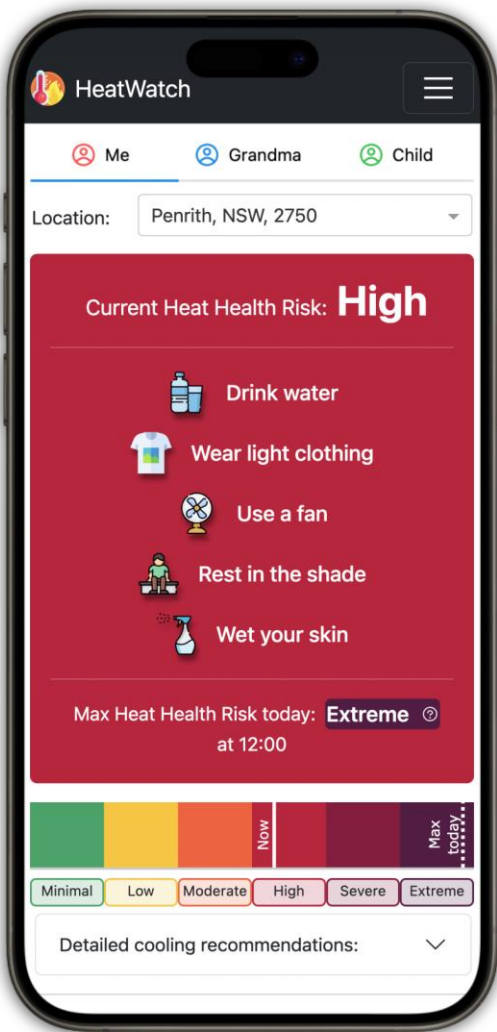
Personalised heat-health risk assessment for individuals with tailored evidence-based cooling recommendations

USYD Sports Heat Tool

A web-based resource for assessing heat stress risk for physical activity and sports in Australia and world-wide.

Thank you and connect with us...

Visit our website!

Centre Director: Professor Ollie Jay

E: *ollie.jay@sydney.edu.au*

Centre Manager: Dr Felicity Bright

E: *Felicity.bright@sydney.edu.au*

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PLANNING FOR A BETTER LIFE WITH DISABILITY IN REGIONAL AND REMOTE AUSTRALIA

ABOUT THE PROJECT

**Professor John Gilroy,
Indigenous Disability Studies Stream leader
Centre for Disability Research and Policy**

A research project led by

The University of Sydney

https://heart-led.org.au/

Person-Centred Emergency Preparedness (P-CEP)

Disability Inclusive Emergency Planning (DIEP)

Partnerships for P-CEP Implementation in Queensland Communities

Get Ready Together Western Australia

Professor Michelle Villeneuve,

Inclusive Community Development Stream Leader,

Deputy-director

Centre for Disability Research and Policy

https://collaborating4inclusion.org/

Fixing the NDIS for people with psychosocial disability

Ensuring equity of access to support for people with serious mental illness

Partner with us   Contact us
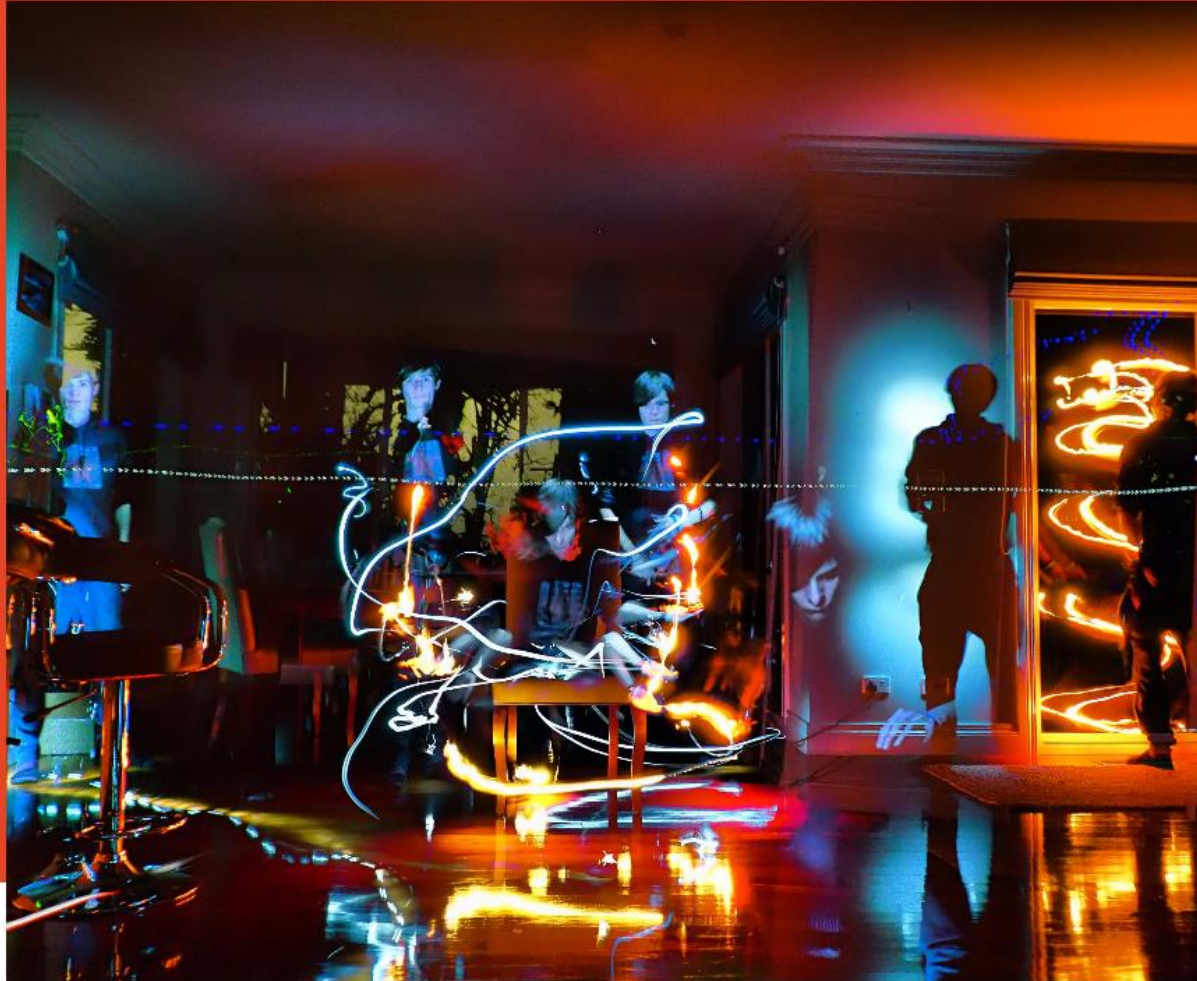
Professor Jennifer Smith Merry,

Disability Inclusive Policy Stream leader,

ARC Laureate Fellow

Centre for Disability Research and Policy

https://www.sydney.edu.au/medicine-health/our-research/research-centres/centre-for-disability-research-and-policy/research/fixing-the-ndis-for-people-with-psychosocial-disability.html

What is SydneyMSK?

SydneyMSK
Sydney Musculoskeletal Research Centre

World leading researchers
Life changing impact

- A consortium of 400 researchers of diverse backgrounds and research areas within musculoskeletal health and rheumatic diseases
- Formal partnership with SLHD and NSLHD
- Our members are in all Schools of FMH and many have various LHD affiliations
  - Remit of embedding some of our research in LHDs and striving to address LHD research priority areas
- Work in close partnership with Sydney Health Partners MSK Clinical Academic Group (CAG) which focuses on implementation research and also CTC (numerous clinical trials)
- Work in close partnership with Institute for Musculoskeletal Health (IMH) and the Kolling Institute
- Close ties with Faculty of Engineering
- Role is to bring together MSK researchers, enable and value-add to their work; strengthen areas with potential for growth

. Biostatistical support hub

- Full time biostatistician

- **Health Economic Support Hub**

- **Consumer Involvement Lab**

- **Policy & Advocacy Portfolio**

- **Diversity and Inclusion Portfolio**

- **Multiple seminars / symposia / events**

  - **Focus on EMCRs and building broader cross-institutional collaborations**

Policy, Practices and Education to improve the lives of people with disability

Disability-Inclusive Policy

Disability Across the Lifespan

Disability-Inclusive Workforce and Services

Sustainable and Inclusive Community Development

Accessibility and Technology

Mental Health and Wellbeing

Indigeneity

Culturally And Linguistically Diverse

Lived-experience Leadership

Rural and remote

International outreach

LIVED-EXPERIENCE LED, CO-LED AND CO-PRODUCED RESEARCH

THE UNIVERSITY OF SYDNEY | Centre for Disability Research and Policy

Western NSW Networks

ARIG the WHRN
Aboriginal Research Interest Group
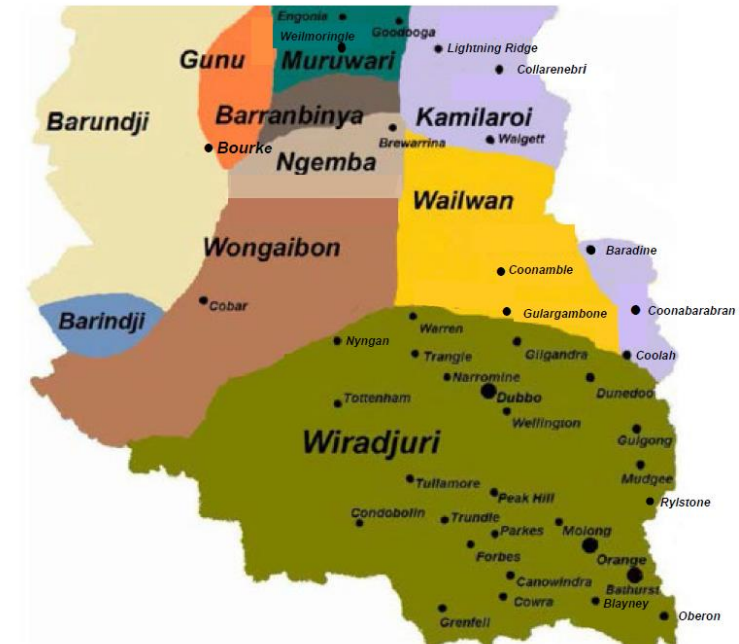
Lynette Bullen   Patricia Canty   Georgie Luscombe

Within WNSWLHD footprint:

- many strong and proud Aboriginal nations

- a dedicated Aboriginal workforce

The seed that grew the ARIG was planted during a conversation between

Pat Canty (Manager Aboriginal Partnerships, Aboriginal Health and Wellbeing Directorate) and

Alice Munro (Director of Research).

The ARIG origin story

Auntie Pat shared that Aboriginal LHD staff have an appetite
- to understand 'what is research'
- to know how it is done
- a desire to become 'emerging researchers' and
- for opportunities to be created to support Aboriginal LHD staff to do research.

The WNSWLHD *Improving Aboriginal Health Strategy (2018-2023)* recognises that improving Aboriginal Health in our district involves
- **identifying research gaps** and
- creating **health service delivery innovation**.

The **Aboriginal Research Interest Group** was formed to support these aspirations.

ARIG – 6 years on and going strong!

- First meeting August 2019

- Held virtually, 4th Friday of the month

- Open to all
  - ✓ Aboriginal voices are privileged
  - ✓ participants join in a spirit of respect and learning

- Yarning and support

- Sharing current or planned Aboriginal health projects
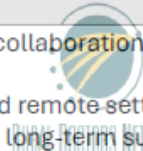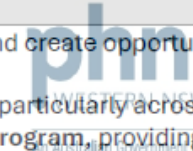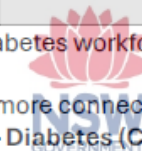
- Guest speakers

- Journal article review

Thank you to Jess Ingram for early administrative support and for our artwork ☺

Want to join?

Email Georgie Luscombe on

Georgina.Luscombe@sydney.edu.au

Care Partnership Diabetes Workforce supports – Rural Doctors Network		
	Far West NSW	**Western NSW**
Workforce grants	Health Workforce Scholarship Program (HWSP) grants for non-LHD health practitioners and limited CP-D grants for LHD employees w/ possible focus for pharmacy workforce	Health Workforce Scholarship Program (HWSP) grants for non-LHD health practitioners and limited CP-D grants for LHD employees
GP/ACCHS Innovation models **10x GP practices & ACCHS in the region since April 2025**	Care Partnership Diabetes	**Shared Medical Appointments** • Group diabetes clinics for up to 8 patients every 8 weeks • Peer learning environment for patients • Upskills GP practice and ACCHS staff to deliver group care • Support provided to implement the group appointment model **Immersive Mentoring** • On-site mentoring by a diabetes educator for Nurses, AHPs, and AHWs • 1 planning session, 4 diabetes clinics, and ongoing support • Builds staff confidence and capability in delivering diabetes education	**Patient Re-engagement** • Identifies and reconnects patients with type 2 diabetes not actively engaged in care • Supports data use for patient identification and care planning • Connects patients to diabetes services (e.g. Diabetes Hub) **Other Service Enhancement** • Flexible funding to trial innovative diabetes care models • Focus on sustainable and locally adaptable service improvements • Encourages proposals that improve patient access and outcomes
Rural Health Pro	**Rural Health Pro** is a national online platform designed to connect, support, and upskill health professionals working in rural and remote communities. It offers access to professional development opportunities, peer networking, job listings, resources, and events tailored to the rural health workforce.	
Education events	**Diabetes Education Workshops** Since 2024, six workshops have been delivered across Western and Far West NSW, building both clinical and non-clinical capability within the diabetes workforce. **Three non-clinical workshops** were held in **Orange, Dubbo, and Broken Hill**, strengthening connections across the diabetes workforce through networking, peer learning, and shared problem-solving. **Three clinical workshops**, delivered in collaboration with the **University of Technology Sydney (UTS)** and the **Aboriginal Health and Medical Research Council (AHMRC)**, provided practical, hands-on training to upskill health professionals in diabetes care. **Two additional clinical workshops are planned for early 2026**, continuing this collaboration to further strengthen workforce capacity, particularly across pharmacy services and broader multidisciplinary teams. Together, these workshops have created lasting partnerships, enhanced clinical confidence, and supported sustainable, community-led improvements in diabetes care across Western and Far West NSW.	
Individual workforce support	**Supporting Success from Start to Finish** The program provides end-to-end support to help participants succeed throughout their study journey — from enrolment to completion and into practice. • Scholarships, study leave, funded placements, and mentoring. • Peer connection and knowledge sharing through Rural Health Pro • Case management and coordination support, recognised as essential to participant success	
Diabetes network	A network of Credentialled Diabetes Educators (CDEs) and Diabetes Educators (DEs) established to strengthen the diabetes workforce and create opportunities for collaboration, shared learning, and professional development. The network enables educators to stay up to date with best practices, work through complex cases together, and feel more connected — particularly across rural and remote settings. It offers a mix of virtual discussion groups and face-to-face networking events **funded through the Care Partnership – Diabetes (CP-D) program**, providing ongoing, long-term support to educators across Western and Far West NSW.	

- established to tackle the prevalence of drug and alcohol abuse in Western NSW, which is higher than most other parts of NSW

- collaborative research group with the Western NSW Local Health District and community members to reduce the incidence of drug and alcohol-related deaths in rural communities

- aims to address the barriers faced by individuals in these regions such as accessing treatment, navigating stigma, transportation difficulties, and a lack of local resources

- unique socio-economic and cultural contexts of these areas contribute to complex challenges that necessitate a coordinated response
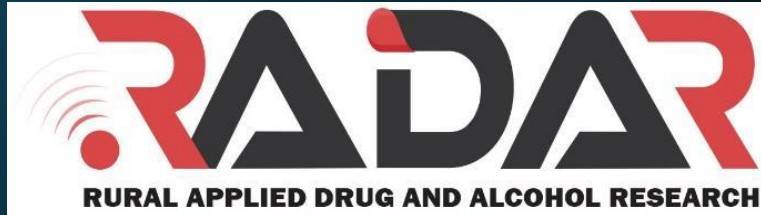
Progress

- 2023 - two $50k grants (RHRI):
  1. Evaluation of the Buvidal program in Bourke
  2. Enhancing Access to Drug and Alcohol Services in Western NSW [EADAS]

- **EADAS**: audit of D&A services across Western NSW, co-design process - staff interviews and focus groups to identify key research priorities (med students)

- MRFF Grant application

Team RADAR

CSU	Prof Julaine Allan, Dr Catherine Keniry, Dr Brendan Cantwell, Dr Nicole Snowdon
WNSWLHD	Lynette Bullen (IDAT), Meredith Eagle, Kathleen Hain, Alice Munro, Dr Stan Theodorou
Consumer Rep:	Marianne Olk

Contact

juallan@csu.edu.au, ckeniry@csu.edu.au

The Ageing Well Research Group

Charles Sturt University

Vision

In executing our research our vision is to shape the ageing agenda through collaboration with health providers and health service professionals, local bodies and government agencies.

Who we are:

43 researchers working across the areas of:

Social, health and community engagement

Building Workforce Capability

Health Technologies
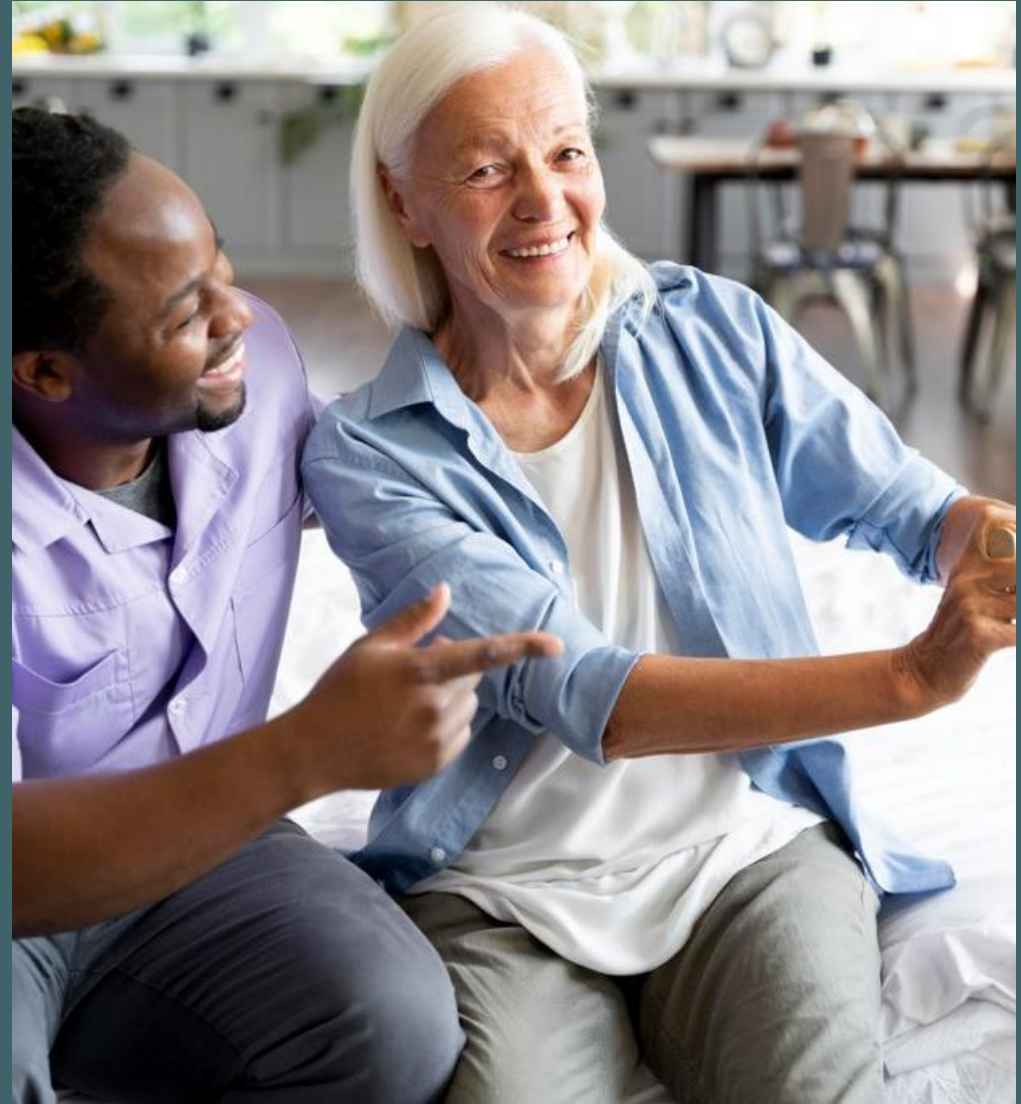
Research in focus

Wellness 2 Age is a pre-packed evidence-based program that holistically supports rural older people to proactively age well.

The program equips older people with strategies that enhance confidence and independence, mental wellbeing, and social participation

https://wellness2age.csu.edu.au

Collaborations & connections

If you want to:

 - Share information with the group

 - Seek collaborators for grants and projects

 - Express interest in future opportunities relevant

   to your interests

 - Find an expert

Email: ageingwellresearch@csu.edu.au

Group Leads

Belinda Cash & Melissa Nott

The Manna Institute is a virtual collaboration of leading researchers, industry, and community partners focused on improving mental health in rural, regional, and remote Australia.

It builds research capacity through coordinated efforts, HDR support, professional development, and strategic partnerships, aiming for lasting community impact and sustainable external funding.

Lived experience embedded.

Manna's mission is to build **place-based research capacity**, foster **collaboration**, and support **translational research** that makes a real difference in our communities

Five research streams include:
- Children, youth and family
- Physical health / mental health
- Health and Wellbeing in Later Life
- Distress and suicide prevention
- Healthy Planet Healthy People

These groups are open to researchers, people with a lived experience, clinicians, and community partners who want to contribute to meaningful change.

Join us – affiliate, partner or collaborator.

Connect with us

mannainstitute@une.edu.au
www.mannainstitute.au

manna INSTITUTE

PATHWAYS TO PARTNERSHIPS

PROFESSOR AUNTY KERRIE DOYLE & FRIENDS

YERIN DILLY BAG MODEL

VALUES THAT INFORM THE PROCESS

Nagana: Ask

Gaining cultural assistance; cultural humility as a core value of the researcher.

Mawa maur: Hold

When an Aboriginal person shares their story, the researcher holds this a privilege.

Ngara ngara: Listen

To hear what is and is not said; knowing when to speak up.

Wingara: Think

Recognising the power in research. Reflect, consider, seek clarification, respect

Burbangana: Help lift up

Leave the community in a better/stronger/fitter position.

Bulbanga: To hold up

Maintain a therapeutic relationships with community beyond the extent of the research.

Miromaa: Courage

Taking action in the presence of unknown consequences; protect self and community in the presence of threats.

Waranara: Seek

Avoiding too many worry questions. Recognise and respect the community's role in approving the entire project.

THE PARTNERING CYCLE

Partnerships cycle © Partnership Brokers Association.

'Gulbarra' – Understand
Reflecting on the transformation from a rich, thriving cultural history to a present shaped by challenges to cultural practice — whilst also speaking to the enduring strength, resilience, and survival of Aboriginal and Torres Strait Islander people.

Key Actions
• Include cultural competence training for all staff involved in the project.
• Ensure project teams are briefed on the local history and context of the communities being engaged.
• Use the Acknowledgement of Country meaningfully in all meetings and documents.
• Engage with Aboriginal-led literature and historical records relevant to the specific community or region.

1. Understand and Acknowledge Historical Context

Engaging with Aboriginal and Torres Strait Islander communities must begin with a deep understanding of Australia's colonial history and the ongoing impacts of dispossession, systemic racism, and intergenerational trauma. Recognising these lived realities forms the foundation of respectful, ethical, and culturally safe Engagement[1, 2, 3].

Researchers must reflect on their own positionality and acknowledge that Aboriginal and Torres Strait Islander communities have historically been over-researched and under-served. Engagement must aim to reverse this dynamic by prioritising Indigenous leadership, knowledge systems, and self-determination.

'Winhangarra' – Hear, Think, Listen
The coming together at different points in time to build understanding and strong communication, highlighting diverse communication styles and cultural contexts that may vary across time, place, and individuals — both for Aboriginal and Torres Strait Islander people and those delivering programs.

Key Actions
• Ask for guidance on who should be approached first and how
• Begin conversations with listening, not presenting a pre-formed agenda
• Make time for informal relationship-building (e.g. over shared meals, or Country)[7]

2. Initiate Early and Respectful Contact

Engagement should start at the earliest stage and be guided by the spirit of *Dadirri*[4, 5] — stillness, patience, and genuine listening without imposing agendas. This must happen before projects are finalised or submitted for funding, ensuring communities shape objectives, methodologies, and outcomes.

Initial contact should follow cultural protocols[6], reaching out through Aboriginal Community Controlled Health Organisations (ACCHOs), Aboriginal Medical Services (AMS), not-for-profits, Land Councils, or Elders. Wherever possible, engagement should prioritise face-to-face meetings.

'Gibaynbirra' – Reciprocate
The imagery of hands reaching out symbolises the act of forming partnerships, while the flowing lines between groups represent the ongoing exchange and mutual respect that sustain a continuum of reciprocity.

Key Actions
• Establish a Memorandum of Understanding or Letter of Agreement outlining roles, expectations, and benefit-sharing[1, 8]
• Offer meaningful paid roles for Aboriginal researchers, Elders, and cultural consultants
• Engage in regular joint planning meetings to ensure the project remains aligned with community priorities[9]

3. Establish Genuine and Reciprocal Partnerships

Partnerships should be based on mutual respect, benefit, and trust. Aboriginal and Torres Strait Islander organisations should be invited to co-lead research activities and share in governance, decision-making, and authorship. Partnerships must be transparent, equitable, and formalised.

'Ngiyambildhaany' – Oversight
The importance of cultural leadership and governance in shaping programs — placing Aboriginal and Torres Strait Islander voices at the centre creates culturally safe spaces and meaningful outcomes.

Key Actions
• Establish a Cultural Governance Group or Aboriginal Advisory Committee
• Ensure community members sit on project steering groups and are actively engaged throughout the life cycle of the research
• Seek approval from both institutional Human Research Ethics Committees (HRECs) and Aboriginal-specific HRECs (e.g. Aboriginal Health and Medical Research Council (AH&MRC), Human Research Ethics Committee)[10]
• Where the project is part of an educational program, ethics approval may be sought through the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS) Human Research Ethics Committee[6]

4. Embed Indigenous Governance and Oversight

Cultural governance structures should guide every stage of the project. Aboriginal and Torres Strait Islander communities must have the authority to shape research questions, methodologies, and outputs. This means establishing advisory or governance groups that have real decision-making power[8].

'Gurwarra' – Deliver from Danger
Shields of protection and meeting places, symbolise the commitment to fostering safe spaces for all, where people feel empowered to speak, share, and connect without judgment.

Key Actions
• Provide cultural competency training for all staff[12, 13]
• Involve Aboriginal Health Workers, Liaison Officers, or Navigators in community interactions
• Create space for feedback from community partners about how the research process feels

5. Ensure Cultural Safety at Every Stage

Cultural safety goes beyond awareness, it means creating an environment where Aboriginal and Torres Strait Islander people feel respected, listened to, and free from racism or cultural disregard. It is defined by the person or community receiving the engagement, not the person delivering it[11,12].

'Yandyibul' – All Around
Strong foundations — like mountains and rocks — symbolise the need for grounded, solid relationships. The tangible outcomes are shown as being built together, growing from that shared base, to endless horizons.

Key Actions
• Co-develop a Benefit-Sharing Plan with community partners
• Offer training, mentoring, or co-authorship to emerging Aboriginal researchers
• Share all results in plain language formats and community forums[7]

6. Clarify and Deliver Tangible Benefits

Engagement must be grounded in clear, mutual benefit. This includes health and social outcomes, capacity-building, and shared ownership of knowledge. Researchers should avoid extractive practices and ensure that the community gains lasting value from participation[8, 14, 15, 16].

Key Actions
• Schedule regular yarning sessions or community updates[15]
• Avoid jargon or overly technical language
• Provide flexibility in timelines and engagement to respect cultural business, Sorry Business, and significant community events
• Use visual communication tools (e.g., diagrams, videos) to enhance understanding

'Bawamarra' – Communicate
Two large boomerangs, represent the importance of respectful back-and-forth dialogue, equity and equality, grounded in cultural safety and mutual understanding.

7. Practice Transparent, Ongoing Communication

Successful engagement depends on two-way, transparent, and culturally respectful Communication[8]. Regular check-ins, updates, and open discussion of challenges should be built into the project timeline.

'Gawimarra' – Gather
Culturally significant collection points and the cultural safety required, with subtle undertones of songlines that reflect how ancestral knowledge continues to shape our data sovereignty practices today.

Key Actions
• Follow the CARE Principles for Indigenous Data Governance[17]
• Clarify ownership and access arrangements in Memorandum of Understanding (MoU)
• Return data to communities in accessible formats
• Discuss and document expectations for data use in future projects, publications, or policies
• Ensure communities are involved in decisions around the long-term storage and future secondary use of data[18]

8. Uphold Indigenous Data Sovereignty and Shared Ownership

Data collected in partnership with Aboriginal and Torres Strait Islander communities must be governed by principles of Indigenous Data Sovereignty. Communities should retain control over how their data is used, stored, and shared[14, 16, 17].

'Wilima' – Midst
Outer elements all face a shared focal point at the centre, symbolise unity in purpose. Their varied shapes and sizes represent the diversity within Aboriginal and Torres Strait Islander communities, highlighting the need to embrace and respect these differences in all stages of the process.

Key Actions
• Engage community representatives from the outset in identifying research priorities[6]
• Facilitate co-design workshops that are accessible and culturally safe[19]
• Ensure decision-making power is shared throughout the project, not just during consultation phases[19]
• Use strengths-based approaches that build on community assets and aspirations

9. Embed Co-Design Throughout the Project Lifecycle

True co-design is a collaborative process that involves Aboriginal and Torres Strait Islander communities in shaping all aspects of a project throughout the duration of the project, from problem definition to interpretation of findings[19]. It ensures that community voices are not just heard but centred.

'Wibiyanha' - Stay
Commitment and cultural integrity are shown by the overseers, the contributions of all participants, and the foundational work that supports open-ended opportunities and lasting connections beyond all outcomes.

Key Actions
• Return to the community to share findings in ways that are culturally appropriate, such as wisdom gathering circles ("yarn ups"), visual summaries, or community gatherings[7,8]
• Provide community partners with access to reports, publications, and other outputs in clear and accessible formats
• Ask how the findings might be useful and invite input on any future directions, follow-up research, or actions[14]
• Keep the relationship going through regular check-ins, involvement in future projects, or participation in community events
• Work together to reflect on and evaluate what the project achieved and what it meant for the community

10. Continued Engagement with the Target Community Post-Research Work

Ethical engagement with Aboriginal and Torres Strait Islander communities does not stop when the research ends. Once data collection is complete, it is important to stay connected, share the outcomes, and continue building the relationship[6].

Too often, research projects conclude without closing the loop with the community. This can leave people feeling that their contributions were not valued or that the research served no clear purpose. Staying engaged after the project finishes shows respect, builds trust, and supports long-term partnerships. It also helps ensure that the research delivers meaningful outcomes for the community.

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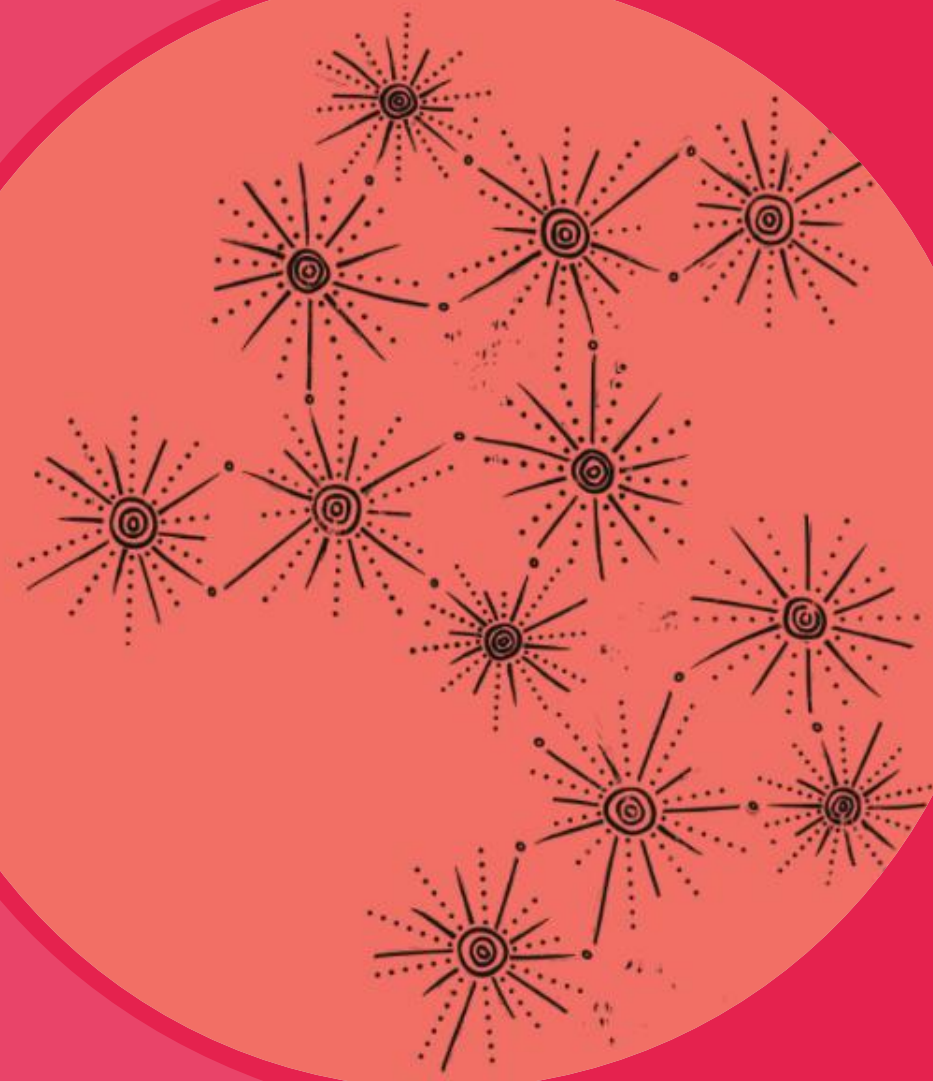
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MOST IMPORTANTLY

HTTPS://WWW.YOUTUBE.COM/WATCH?V=V9RSJIED60M&AB_CHANNEL=MARIDULUBUDYA RIGUMAL-SPHERE

In the spirit of reconciliation, NSW Regional Health Partners acknowledges Aboriginal and Torres Strait Islander people as the Traditional Custodians of country throughout Australia, and their connections to land, sea and community.

NHMRC accredited Research Translation Centre (Regional, Rural and Remote)
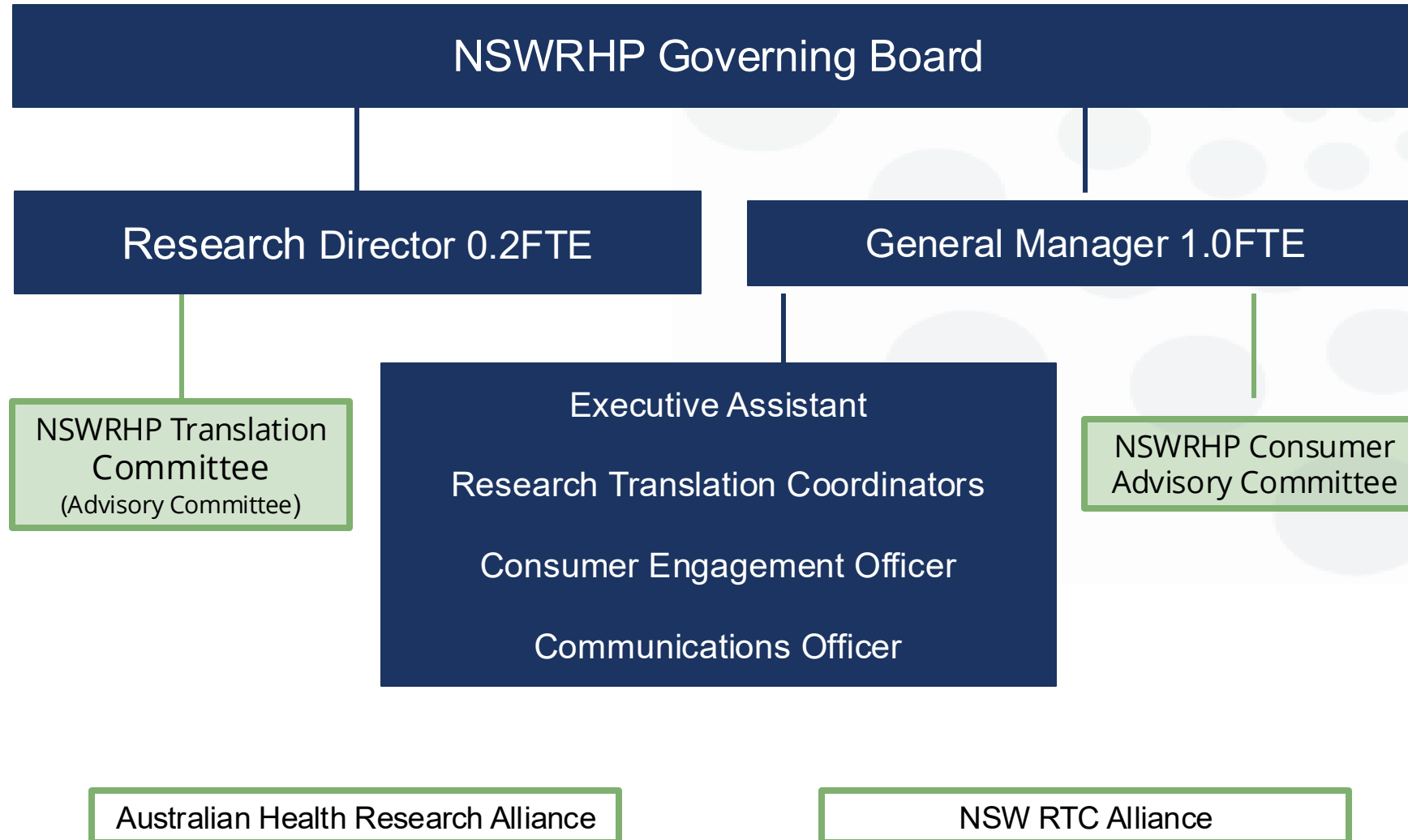
- Core Partners
  - Charles Sturt University
  - Rural Doctors Network
  - Western NSW LHD
  - Hunter New England LHD
  - Mid North Coast LHD
  - University of New England

- Associate Partners
  - Hunter Medical Research Institute
  - Central Coast LHD
  - Hunter New England Central Coast PHN
  - University of Newcastle
  - Calvary Mater Hospital

Organisation Chart

NSWRHP Governing Board

Research Director 0.2FTE

General Manager 1.0FTE

NSWRHP Translation Committee
(Advisory Committee)

Executive Assistant

Research Translation Coordinators

Consumer Engagement Officer

Communications Officer

NSWRHP Consumer Advisory Committee

Australian Health Research Alliance

NSW RTC Alliance

Best Contacts

Website:

- www.nswregionalhealthpartners.org.au

Email:

- hnelhd-nswregionalhealthpartners@health.nsw.gov.au
- lisa.mcfayden@health.nsw.gov.au

Thank you to all our delegates who have joined us today.

We look forward to continuing the networking at the Researcher of The Year Awards
at Duntryleague at 5.45 pm