

NARN *newsletter*

Wet season, 2023

- ⊙ Children developing well
- ⊙ Young people and adults growing well & staying strong
- ⊙ Older people ageing well in place

Photo credit Culbert, 2007

From the Leadership Team

Welcome to the 5th Northern Australia Research Network (NARN) newsletter, 2023 wet season edition. This newsletter was collated by our Northern Territory members and highlights some of the fantastic research and practice innovation undertaken by northern Australian researchers.

NARN is a collaborative network of researchers, clinicians, consumers, health managers, health educators, workforce development and policy personnel from northern Australia. Allied health professionals form the majority of the NARN membership with a range of other members who contribute to delivery of disability, rehabilitation and lifestyle services.

NARN works in partnership with [Indigenous Allied Health Australia \(IAHA\)](#), recognising and acknowledging the cultural and diverse needs, beliefs, practices and authority of Aboriginal and Torres Strait Islander people in northern Australia.

Our aim is to conduct research to inform delivery of culturally-responsive and safe, disability, rehabilitation and lifestyle services in regional, rural and remote northern Australia. We apply a strength-based approach to research to support children developing well, young people growing up well, adults staying strong and older people ageing well in place within family and community.

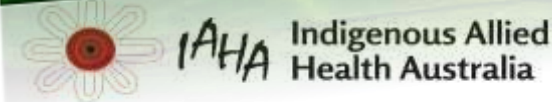
2023 has seen the development of NARN's [Strategic Plan](#). The NARN research strategies are strength-based and solution-focused. They are based on authentic community engagement and the IAHA cultural responsiveness framework, and aim to strengthen allied health services and providers. The key strategies are Connect, Co-create, Strengthen, Translate and Sustain.

[Membership](#) to NARN is free and a great way to connect with other professionals across who are interested in improving access and quality of allied health services across northern Australia.

Please feel free to share this newsletter amongst your networks and [contact us](#) with stories on your research in northern Australia.

NARN NT Breakfast Meeting

Flinders NT hosted the regional NT Breakfast meeting on 22nd August. The breakfast event was held over five locations – Darwin, Katherine, Nhulunbuy, Tennant Creek and Alice Springs – and connected virtually via Teams.



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Northern Australia Research Network



We acknowledge Australian Aboriginal People and Torres Strait Islander People as the first inhabitants of the nation, and acknowledge Traditional Owners of the lands and water where we live, learn and work.





Central Australia— Children



Central Australia— Children



The event was attended by 31 people who enjoyed a light breakfast while hearing presenters discuss their research from various NT locations. Speakers/researchers and topics for the morning included:

Melissa Ridd and Leigh Moore: The essential ingredients of a high-quality health student placement in rural Australia: protocol for a mixed-methods study (Darwin)

Lara Cardinal, Lisa Jonas, and Dr Kathryn Dawes: Paediatric Feeding Clinic: A collaboration to enhance flow and communication, for a family centred approach (Darwin)

Dr Sonia Hines: Effectiveness of strategies to reduce risky alcohol consumption among youth living in rural or remote areas: a systematic review (Alice Springs)



The event also included a networking bingo where attendees got to discover different skills, experiences or interests or other attendees. Feedback was positive and we look forward to the next breakfast meeting in 2024.

Lauren Toll and the leadership team

Establishing a Paediatric Feeding Clinic in Central Australia

The Paediatric Feeding Clinic is based in Central Arrernte land in Mparntwe (Alice Springs), and began as a 12-month pilot trial in 2022. We observed an unmet need for children with medically complex issues to receive coordinated multi-disciplinary feeding-related care. These families required multiple outpatient appointments from different services, including nutrition, medical surveillance, and swallowing management. These single discipline appointments all had the same goal of reducing feeding-related admissions, and we found an increasingly collaborative approach was necessitated.

The clinic follows a multi-disciplinary outpatient model, and consists of a Speech Pathologist, Dietitian, and Paediatric Registrar, as well as an Allied Health Assistant role supporting communication lines with very remote families. The clinic is designed to have an intentionally broad service area across Central Australia, including border communities in Western Australia and South Australia, due to the service availability gaps. We see children from 0 to 18 years, who require consultative reviews from multiple disciplines to support family goals in feeding and growth, including establishing oral feeding, weaning nasogastric tube feeding and overcoming oral aversions.

The clinic additionally promotes an earlier discharge pathway for feeding-related in-patient admissions, by providing higher level supports in the community.

Challenges faced by the clinic during its pilot period included insufficient staffing for speech pathology and dietetics. Following the results of our audit, the clinic facilitated a budget submission to Clinical Governance and the SEC for further speech pathologist and dietician positions.

From the pilot trial, the clinic received positive feedback from families and has grown to be an established component of the Paediatric department. This model provided a goal and family-centred approach with clear inter-disciplinary communication that considered language and cultural responsiveness. Through collected data and surveys, we demonstrated achievement of family-set goals, improved carer satisfaction and invaluable transdisciplinary learning opportunities.

Ongoing monitoring, including ongoing partnering with families attending the clinic, will be essential for service improvement and adaptation. The pilot clinic project has recently grown to include student research projects supported by Charles Darwin University, with the aim of exploring feeding clinic service models being implemented in rural areas.

We would like to acknowledge the support provided by the Alice Springs Hospital Allied Health & Paediatric teams in establishing and supporting the clinic. We would also like to thank Dr Anthea Brand (Flinders University & Charles Darwin University) for her support to establish research projects associated with the clinic.

By: Lara Cardinal, Lisa Jonas, Dr Kathryn Dawes, NT Health (Speech Pathologist, Dietitian, Paediatric Registrar)



Meet us where we are: non-Indigenous young peoples' ideas on how to reduce alcohol-related harm in Mparntwe

Alcohol-related harms are a common risk for young people living in rural and remote areas. While most Australian jurisdictions reported a decrease in young people's binge drinking between 2016 and 2019, this was not the case for the NT. In the NT, the proportion of young people who reported binge drinking in the past month rose from 51% in 2016 to 69% in 2019. Young people in rural and remote areas, such as in the majority of the NT, are at higher risk of harms from their drinking compared to youth in urban locations (e.g., drink driving). Many strategies have been tried in the past to try to reduce these risks, without a lot of success. With this research, we aimed to understand the strategies young people in a remote central Australian town believed would reduce alcohol-related harms amongst their peers.

We talked to a total of 38 non-Indigenous young people living in Mparntwe (Alice Springs), aged between 14 and 18 years, in focus groups at their school. The young people discussed strategies they thought would reduce alcohol-related harms among people their age.

Like most behaviours, young peoples' drinking behaviour developed with their friends and other kids at school. Through social learning, drinking alcohol was perceived as fun and normal. Participants wanted to learn about strategies to stay safe around alcohol. Their ideas for doing so reflected their existing social methods of learning about alcohol: having comfortable conversations and storytelling with a small group of peers and a relatable role model. They were very clear that messages advising them to abstain entirely from drinking alcohol weren't realistic and were easily ignored. They felt that alcohol-related harm reduction strategies would be most effective if focused on safety, rather than abstinence, and applied social learning strategies.

Young people value their growing self-determination. In the future interventions should be designed alongside young people and aim to help them to make safer decisions, rather than making decisions on their behalf.

By: Sonia Hines, Senior Research Fellow, Flinders Rural and Remote Health, NT

Study reveals over 10,000 apps designed for suicide prevention do not include the people who need it the most

Suicide affects more than 700,000 globally each year and the ripple effect extends to the person's family, friends and community. As a response to prevent suicide, over 10,000 digital health technologies (video conferencing, smartphone apps, texting and social media) emerged as the first port-of-call for people experiencing mental health distress especially during and immediately after the COVID-19 pandemic. Given the rise of digital solutions for suicide prevention, there appears however, to be a disconnect between bringing the technology to market and involving experts-by-experience or service users as co designers. With a rapidly evolving technological environment, understanding the place and space of experts-by-experience in suicide prevention requires urgent attention.

In this study, suicide prevention expert from Charles Darwin University, Associate Professor Dianne Wepa found that despite the numerous apps focused on suicide prevention, none of them were codesigned with the people affected by suicide. Codesign is defined as a co-creation approach involving collaboration between researchers and end users from the onset. This international study reviewed over 3000 research articles and found that people that experienced self-harm or caregivers were not involved in the development of the apps. As a result, the acceptability of the apps by service users or experts-by-experience was not very high. Their role was mostly as members of focus groups, advisory groups, pilot studies or at the final stage of usability testing of the app. Associate Professor Dianne Wepa has conducted this study over two years and is in the final stage of the study where she is now looking for people to help her design a proof-of-concept app in the Northern Territory. She says that this is a lack of funding to pay people for their time and would like organisations interested in funding this initiative to contact her at Charles Darwin University.

By: Dr Dianne Wepa, Associate Professor, Head of Discipline Social Work, Charles Darwin University

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Darwin—Workforce



Darwin—Workforce



Pathway into health careers for First Nations people

At CDU we will run the second year of the First Nations Introduction to University - Health Pathway between 15th January to 9th Feb 2024. This is a free, 4-week study and mentoring program that offers a supported pathway for First Nations students to prepare for future study in health.

Students gain academic skills as well as knowledge of health and wellbeing, health policy and management and health research. The program goes beyond the classroom to include mentoring and activities where students develop a sense of belonging – with each other, the University, the staff, support services and in the professional community.

The program is co-designed with First Nation and non-First Nation educators and professionals and includes guest speakers from local organisations. Students who complete the program will be given assistance in choosing university pathway options at the end, such as qualifications at certificate, diploma or degree level in health.

This is a great opportunity to grow our own workforce in the Northern Territory. The Health Pathway complements the CDU's suite of First Nations enabling courses, including the Pre-Law program, the Pre-Business program and the Pre-Accounting program.

Andersen et al (2015) report that “participation rate of Indigenous people in higher education is comparatively disparately low across all sectors”. This pathway approach is also supported by Frawley et al (2017) who describe pathways as “a mechanism to redress disadvantage”. This program is a positive practical step to overcoming commonly identified barriers to Indigenous higher education success.

By Professor Heather Malcolm, Physiotherapy, Charles Darwin University

The essential ingredients of a high-quality health student placement in rural and remote Australia

We all know that rural communities experience poorer health outcomes and have less access to healthcare than metropolitan populations (Australian Institute of Health and Welfare, 2022). To build the rural health workforce, lots of rural communities around Australia

are using student placements as a strategy (Battye et al., 2019). Those of us living in rural and remote areas know that our student placements might look and feel a bit different to placements happening in metropolitan areas, and we can offer some amazing educational and cultural experiences to students. If only we all knew what essential ingredients are required to design and deliver a high-quality rural student placement...

We hate not knowing the answers to things, so we joined a team of academics and health professionals from multiple University Departments of Rural Health (UDRHs) across the country. We are now on a mission to find out what essential ingredients make up a quality student placement in regional, rural, and remote Australia (Quilliam et al., 2023). The first step was a scoping review (Green et al., 2022) to explore the evidence relating to features of quality in rural health student placements. Out of the 101 included papers which were whittled down from 2866 papers, most were dominated by medicine and nursing placement research. No explicit or standardized definition of quality in rural health student placements was found. In addition to this, a key stakeholder voice was missing: the perspectives of university staff who have a role in designing, administering, delivering, and/or evaluating rural health student placements.

We're currently involved in the data collection of a mixed methods study using the ECOUTER method (Murtagh et al., 2017). Although it rhymes with 'barracuda', ECOUTER is not to be confused with one! ECOUTER is taken from the French verb 'to listen' and stands for Employing COncceptUal schema for policy and Translation Engagement in Research. When trying to listen to the important perspectives of busy, geographically dispersed rural and remote university staff, the ECOUTER methodology has been a great help. It uses interactive mind-mapping to enable university staff to use and explore their own knowledge to consider other people's knowledge and to interact on the topic of rural student placement quality.

This is the first national study exploring features of high-quality rural health profession student placements and we're hoping it will influence policy surrounding rural health student placements. Stay tuned for the results...

By: Melissa (Melba) Ridd and Leigh Moore, Lecturer in Remote Health (Allied Health) and Lecturer | Nursing and Allied Health respectively



Kimberley—Workforce



Kimberley—Workforce



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Photo credit Culbert, 2007

Majarlin annual awards night honours Kimberley healthcare supervisors

The Majarlin Kimberley Centre for Remote Health recently hosted its annual Kimberley Supervisor & Preceptor Recognition Awards, recognising individuals and organisations who have made outstanding contributions to student placement experiences in 2023.

Award winners from across the Kimberley contribute their time to support and mentor students, positively shaping the future health workforce.

Award nominations were received from both students and staff across five award categories for both Nursing & Midwifery and Allied Health.

Jing Marais and Caroline Goodey were the recipients of the Innovative Supervisor/Preceptor Award, which recognises innovation within the provision of the clinical learning experiences and acknowledges the individual who uses imagination, creativity, and originality to enhance the learning experience for students.

Receiving the Commitment to Clinical Teaching Award were Stuart Aamodt and Kath Aitken, while Melita Waters and Sascha Gregory were acknowledged for their commitment, hard work and passion towards positive change in the accessibility to health services in remote regions in the Interprofessional Collaborator award category.

The Outstanding Supervisor Award was awarded to Steph Davidson and Andrea Cornish.

Broome General Ward and St Mary's College were awarded the Thumbprint Award which commends the commitment of an organisation or individual that provides students with unique opportunities to experience and give back to the Kimberley. This award recognizes and salutes the work of both

Over 100 guests attended the awards ceremony at the Broome Surf Life Saving Club.

Tiahna Murfit, Occupational Therapist at Kimberley Therapy Services attended the evening with her team and commended Majarlin's programs for their contribution to the healthcare sector.

"It was great to see so many amazing people being recognised for their energy and commitment to educating the future generation of health and education professionals," she said.

"Thank you Majarlin for hosting a fun evening that gave us the opportunity to appreciate those who play a crucial role in shaping the future of our workforce."



2023 Majarlin Award recipients:

- Innovative Supervisor/Preceptor: Allied Health; Jing Marais, Nursing & Midwifery; Caroline Goodey
- Commitment to Clinical Teaching: Allied Health; Stuart Aamodt, Nursing & Midwifery; Kath Aitken
- Interprofessional Collaborator Award: Allied Health: Melita Waters, Nursing & Midwifery; Sascha Gregory
- Outstanding Supervisor Award: Allied Health; Steph Davidson, Nursing & Midwifery; Andrea Cornish
- Thumbprint Award: Allied Health; St Mary's College, Nursing & Midwifery; Broome General Ward

By Marjalin Kimberley Centre for Remote Health





Kimberley—Workforce



Photo credit Culbert, 2007

Grand Opening event celebrates new facilities at Majarlin Kununurra

In a significant step towards supporting Aboriginal and remote health in the Kimberley region, the opening of new accommodation and office facilities will be celebrated today at Majarlin Kununurra.

The project includes four fully renovated units which can accommodate ten students at a time for periods of between two – 12 weeks while they complete their required course placement work. It means that students will be able to access high quality accommodation in Kununurra while undertaking their practical training.

The formal opening celebrations will include accommodation and office “open house” visits and traditional Manthe ceremonies undertaken by Members of Miriwoong traditional custodians. Kimberley MP and Yawuru, Nimanburr and Bardi woman Divina D’Anna will perform ribbon cutting ceremonies on both sites of the new facilities to officially mark them as open. The celebrations will culminate with a Gala Dinner in the evening.

There also many employment benefits for the local community including employment through the new facilities.

The University of Notre Dame Australia’s Acting Director, Majarlin Kimberley Centre for Remote Health, Dr James Debenham, said the new facilities were much needed and would allow students on placement to focus fully on their studies during their time in Kununurra.

“This is of great significance to the Majarlin family and to the broader East Kimberley community,” Dr Debenham said. “Firstly, it formally marks the establishment of Majarlin’s presence here in the East Kimberley. Secondly, and I believe more importantly, it expresses our genuine intention to serve organisations of the East Kimberley community seeking to achieve holistic health and well-being through culturally sensitive, accessible, and sustainable healthcare for many years to come. As such, our objective here is to celebrate the former, and firmly state our intentions to the latter.”

The University’s Cultural Security Officer, Maria Morgan, said the new facilities had been designed to create culturally sensitive and safe spaces for both students and staff, allowing them to complete their

work and studies while feeling welcomed and supported.

“The Manthe allows a connection to the Miriwoong people of this country and provides a culturally safe space for both staff and students,” Ms Morgan said.

Majarlin is one of 22 University Departments of Rural Health (UDRH) in Australia funded by the Department of Health. It is located in the unique Kimberley region of Western Australia.

Majarlin facilitates quality allied health and nursing clinical placements for students from all Australian universities, providing support for students through placement facilitation, supervision, education, social networking, travel, and accommodation. It helps support local clinicians by providing professional development opportunities and conducting quality remote health research.

Majarlin is a collaboration between the five Universities listed below and is led by The University of Notre Dame Australia:

The University of Notre Dame Australia

- Curtin University
- Charles Darwin University
- Edith Cowan University
- Murdoch University



By Majarlin Kimberley Centre for Remote Health

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The Leadership Team



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About NARN

NARN Vision for northern Australia

A good life for all Northern Australians while
recognising the unique culture and life-style and addressing health inequities
for Aboriginal & Torres Strait Islander peoples

NARN Research Strategies

Connect Strengthen Drive Translate Sustain

We acknowledge Australian Aboriginal People and Torres Strait Islander People as the first inhabitants of the nation, and acknowledge Traditional Owners of the lands and water where we live, learn and work.

