

**AUSTRALIAN PRIMARY HEALTH CARE
RESEARCH INSTITUTE**

MENZIES SCHOOL OF HEALTH RESEARCH

**APHCRI LINKAGE & EXCHANGE TRAVELLING FELLOWSHIP
REPORT**

**Stream Four Report: Interventions to prevent growth faltering in remote
Indigenous communities**

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**COMPARING STREAM FOUR RESULTS WITH THE
INTERNATIONAL CONTEXT**

The approach taken in our Stream Four review and review findings are generally consistent with other research completed or underway in the area of trying to improve child health in contexts of poverty. My visit to the World Health Organization (WHO) reinforced this perception. Finding ways to address the social determinants of poor child health and taking a long term approach is providing a difficult challenge for all health researchers. Much of the existing research on poor child health in contexts of poverty takes place in economically poor developing countries and findings need to be adapted for the Australian context. There is little research published that focuses on addressing poor child health in resource rich countries such as Australia where often political and social factors contribute as much to poor Indigenous child health as poor economic circumstances.

The Stream Seven APHCRI Linkage and Exchange Travelling Fellowship program provided me with the opportunity to investigate and increase my knowledge on a number of water, sanitation, hygiene and nutrition factors relevant to child health and remote Indigenous communities. In particular, it provided an opportunity to interact face-to-face with the developers of existing cause-effect environmental health models and frameworks and gain a better understanding of the theory that underlies the existing cause-effect child environmental health model and framework. At the same time I was able to explore with key persons issues concerning getting research evidence into policy and practice.

OVERSEAS LINKAGE & EXCHANGE ACTIVITIES

INTARESE ANNUAL PROJECT MEETING, PRAGUE

The INTARESE Consortium (<http://www.intarese.org/>) is a European Union funded project that comprises a total of 33 partners, from many of the leading research and user organisations in Europe – including 10 universities, 17 national research institutions/centres, four national Government agencies, one inter-Government organisation and one representative from industry. INTARESE brings together a team of internationally lead scientists in the areas of epidemiology, environmental science and biosciences to collaborate on developing and applying

new, integrated approaches to the assessment of environmental health risks and consequences, in support of European policy on environmental health. A major aim of INTARESE is to develop a conceptual framework within which to bring together the latest scientific evidence across all the relevant environmental sectors and disciplines as a basis for integrated assessment of both environmental and health impacts and risks. The project is co-ordinated at Imperial College London – led by Professor David Briggs.

The key theme at the November 2007 meeting was the issues and challenges of achieving integrated assessment. The content of presentations and following discussions were research oriented, however, it was also interesting to observe the workings of a very large project based on the principles of linkage and exchange between individuals, teams and research institutions across borders. The need for teams to build in linkage and exchange mechanisms and taking an integrated approach to research was a condition of grant funding. The formal and informal discussions concerning how willing individuals and institutions are prepared to work co-operatively and share information, as well as issues such as institutional constraints to working collaboratively, were very interesting. The approach appears to have achieved mixed success so far. Further interesting discussion centred on the tensions brought about by the funders/policy makers stipulating the parameters of the research to be conducted.

ENVIRONMENTAL HEALTH GROUP, LONDON SCHOOL OF HYGIENE & TROPICAL MEDICINE (LSHTM)

Professor Sandy Cairncross, Professor of Environmental Health, supervised my placement at the LSHTM. The objective of my placement was to broaden my knowledge on water, sanitation and hygiene improvement models and approaches and establish an on-going linkage and exchange, and generally collaboratively working relationship, with individuals and teams in the LSHTM Environmental Health Group. My placement proved to be very successful. I was introduced to a number of experts in their field, all of whom were very welcoming and generous with their time. The exchange was not one-way and I was able to share information on work being completed in Indigenous health in the Northern Territory, for example, on promoting hand washing. By the end of my stay I had established good working relationships with many members of the LSHTM Environmental Health Team with the intention of working in collaboration on shared research areas of interest in the future. During my placement I presented at a team meeting, giving an overview of Australian Indigenous child health issues and a summary of our research findings.

CHILDREN'S ENVIRONMENTAL HEALTH INDICATORS' (CEHIS) SECRETARIAT, WORLD HEALTH ORGANIZATION (WHO), GENEVA.

Fiona Gore, CEHIs Secretariat, facilitated a one day visit for me at WHO to learn more about WHO's CEHIs initiative and application of the Multiple Exposure Multiple Effects (MEME) Model. During my visit I met a number of WHO personnel who work in the area of children's environmental health and indigenous health, including Dr Jenny Pronczuk, the head of the WHO Children's Environmental Health Division. The visit provided a good opportunity to cement an already established link with the CEHI Secretariat. While the objective of my visit to WHO was to gather as much information as possible to help develop CEHIs for use in remote Indigenous communities, personnel at WHO were equally interested in the approach we are planning and wish to be kept informed of our initiatives and progress to disseminate information about our work more widely.

MEETING WITH PROFESSOR DAVID BRIGGS, PROFESSOR ENVIRONMENTAL HEALTH, IMPERIAL COLLEGE LONDON

This was a follow-up meeting with Professor Briggs as we had already met at the workshop in Prague. At this meeting we discussed in depth the use of the MEME model which Professor Briggs developed and issues about developing children's environment health indicators for use in remote Indigenous communities. The discussion was invaluable in helping to plan developing indicators based on the MEME model. Professor Briggs also provided me with introductions and

contact details for other key persons who were likely to be able to support this work. He agreed to review and comment on work in progress.

CONCLUSION

Drawing from the knowledge I gained and my observations while overseas, several issues stand out. I found the issues surrounding trying to get evidence into policy, and policy into practice, are common across the globe. It appears that the political imperative dominates the content of policy and frequently what research is funded. This is also the case with major international agencies, such as WHO, whose work is dependent on funding from powerful donor countries. I was struck by the fact that wherever I went the researchers I met were welcoming and eager to share information and learn of research happening in the Northern Territory. Broadening my network enabled me to assess the suitability of the existing models and frameworks for use in remote Indigenous communities. I was able to establish good on-going relationships with leaders in the field and these persons have indicated their ready availability to provide on-going advice at all stages of indicator development, trialling, implementation and evaluation.