



## **ANNUAL REPORT**

# **AUSTRALIAN CENTRE FOR INTERNATIONAL AND TROPICAL HEALTH**

**2011**

**Submitted to the Executive Dean, Faculty of Health Sciences**

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# Acronyms

|         |  |
|---------|--|
| AAMI    | Australian Army Malaria Institute                              |
| ACITH   | Australian Centre for International and Tropical Health        |
| ADRA    | Australian Development Research Awards                         |
| AIDS    | Acquired Immunodeficiency Syndrome                             |
| APMEN   | Asia Pacific Malaria Elimination Network                       |
| ARV     | Antiretroviral Treatment                                       |
| AusAID  | Australian Agency for International Development                |
| BoM     | Board of Management  |
| DoHA    | Department of Health and Ageing                                |
| FNU     | Fiji National University                                       |
| GIS     | Geographic information Systems                                 |
| GPS     | Geographic Positioning Systems                                 |
| GSO     | Government Statistical Office                                  |
| HIS     | Health Information Systems                                     |
| HIV     | Human Immunodeficiency Syndrome                                |
| IC      | Investment Case  |
| ICD     | International Classification of Diseases                       |
| IHME    | Institute for Health Metrics and Evaluation                    |
| IMRSSP  | Indonesian Mortality Registration System Strengthening Project |
| JTA     | Jane Thomason and Associates                                   |
| LMALA   | Lihir Mining Area Landowners Association Inc.                  |
| MDG     | Millennium Development Goals                                   |
| MIPH    | Masters of International Health                                |
| MIS     | Malaria Information Systems                                    |
| NCEPH   | National Centre for Epidemiology and Population Health         |
| NGO     | Nongovernment Organisation                                     |
| NIH     | National Institutes of Health                                  |
| NHMRC   | National Health and Medical Research Council                   |
| NMPS    | National Malaria Plans   |
| PacMI   | Pacific Malaria Initiative                                     |
| PacMISC | Pacific Malaria Initiative Support Centre                      |
| PHERP   | Public Health Education and Research Programme                 |
| PMNCH   | Partnership for Maternal, Newborn and Child Health             |
| QIMR    | Queensland Institute of Medical Research                       |
| SPC     | Secretariat for the Pacific Community                          |
| SPH     | School of Population Health                                    |
| STPHI   | Swiss Tropical and Public Health Institute                     |
| TB      | Tuberculosis   |
| UC-SF   | University of California – San Francisco                       |
| UNICEF  | United Nations Children’s Fund                                 |
| UQ      | University of Queensland                                       |
| VA      | Verbal Autopsy   |
| VINE    | Vietnam Evidence Base for Health Policy Project                |
| WHO     | World Health Organisation                                      |
| WPRO    | Western Pacific Regional Office (WHO)                          |

## Executive Summary

During 2011 the recommendations of the reviews undertaken in 2010 (ACITH and Masters of International Public Health) have been implemented resulting in:

- Rationalisation of several courses and updating to both reflect global health policies, programmes and initiatives; and the strengths of the ACITH in health services management, policy and implementation and disease control programmes;
- Recruitment of key staff especially to strengthen the global disease control programme focus;
- Submission of the tropEd application;
- UQs successful application to be part of the Queensland Tropical Health Alliance with ACITH the UQ lead;
- Strengthening of the alliances with SEAMEO-TropEd;
- Launch of two new initiatives, namely One Health and Trans-boundary Health.

Within the **Learning Domain** the MIPH continues to consolidate its postgraduate and research higher degree student load. Increased success in research publications and grants, have been a strong feature of the **Discovery Domain**. In the **Engagement Domain** the Centre remains a major player in the national, regional and global public health and development arena. Implementation of the major recommendations of the ACITH and MIPH reviews in 2010, were commenced in the second half of 2010, resulting in a revised curriculum offering for 2011, and planning for restructuring of the centre and refining the Centre's strategic directions and funding base.

### Vale

The staff of ACITH remember :

Professor Frank Schofield, one of the founding figures of ACITH and mentor

And

Ms Heidi Reid, PhD student and short term advisor and friend

Who sadly passed away in 2011

# Foreword

## INTRODUCTION

Global changes have major influences upon global health programmes and status. Important in recent years has been the impact of the global financial crisis upon domestic, international and global health financing. Changes in funding levels available for development assistance and research into global health have highlighted the need for a stronger focus on sustainability, effectiveness and efficiency as well as strong financial governance capacity. Searching for broader health system strengthening from investments in global disease control priorities, understanding the effectiveness of investments into Millennium Development Goals 4,5 and 6; improved targeting and micro stratification of responses; are some of the responses staff at the ACITH are engaged in as part of the global health research and development community. Through ACITH's unique blend of learning, research and engagement, faculty and students continue to work and explore real life situations in global public health, whilst searching for new ways to use emerging technologies, theories and approaches to make sense of and address these complex global public health challenges.

The ACITH strategic direction is:

- To work in interdisciplinary partnership to respond to local, national and international public health priorities, seeking solutions through needs for innovation (discovery through promotion and testing of hypotheses), validation (evidence providing what works) and application (strengthening individual and public health actions, systems and policies).
- ACITH should generate new evidence, validate it in different health system settings and directly translate evidence into policy and public health action by combining excellence in science and training of an academic institution with the standards of corporate organizations in consulting, backstopping and contract research organization. Particular emphasis should be placed on:
  - Developing further the existing large network of national and international collaboration;
  - Long-term associations;
  - Strategic alliances and long-term partnerships established with partners in the focal areas of activities, i.e. Australia, the Pacific, SE-Asia and Africa.

The staff in ACITH within the School of Population Health continues to build upon its professional diversity reflecting both the growing needs for a strong diverse public health workforce, as well as a broad variety of technical and professional capacities and country experiences required.

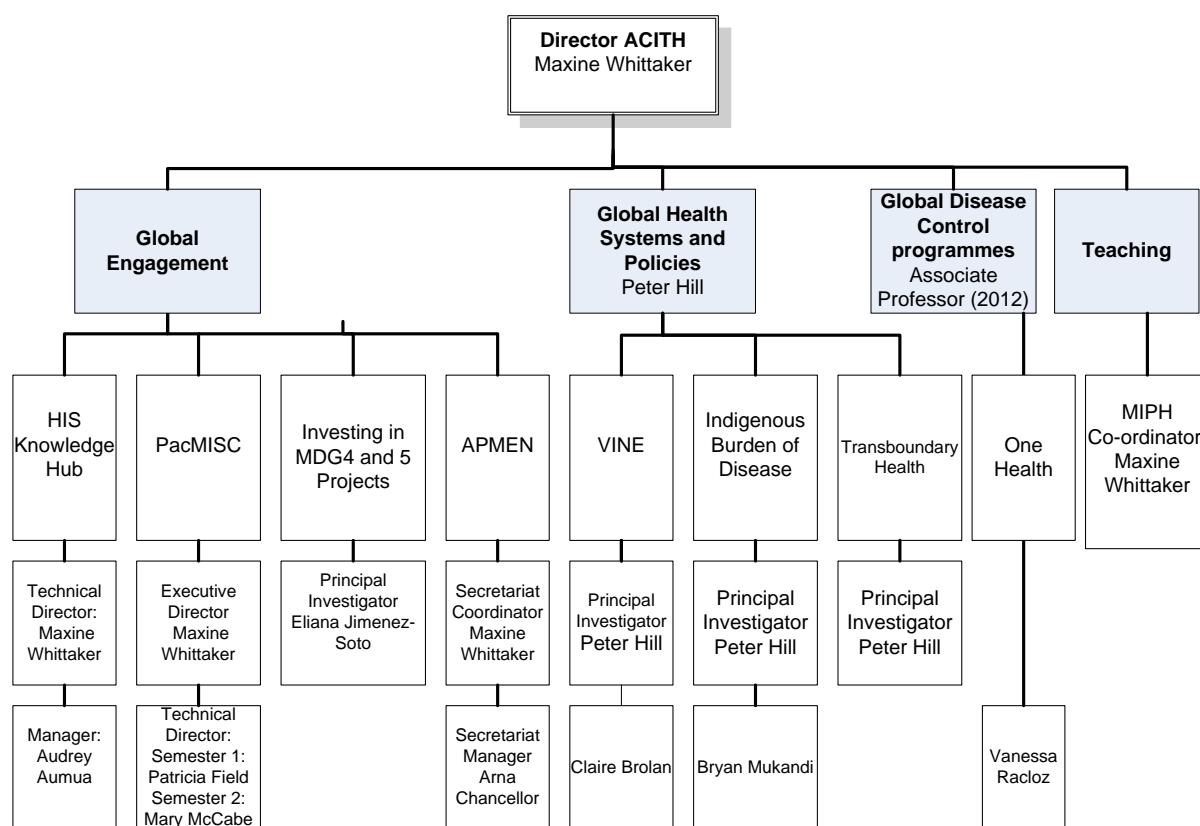
## BACKGROUND

The Australian Centre for International and Tropical Health (ACITH) is a University of Queensland Faculty of Health Sciences Centre, established in 1995. Developed as a teaching and research collaboration between The University of Queensland and the Queensland Institute of Medical Research (QIMR) the Centre has grown in size, scope and content from the original programme supported through foundation funding (commenced in 1995, concluded in 2010) of the Commonwealth Government under the Public Health Education and Research Programme (PHERP). ACITH combines the resources and expertise of Global, Tropical and International Health within the School of Population Health, Faculty of Health Sciences, University of Queensland.

ACITH aims to improve the health of populations in Australia and internationally through excellence in education, research and service including high level representation on major international and tropical health committees, editorial panels and review bodies. ACITH is now an internationally recognised centre in global, international and tropical health with several major research and

development grants and speciality units. The Centre also supports postgraduate coursework and research training in international global and tropical health. Developed as Australia's designated centre for international and tropical health and nutrition under the PHERP funding, ACITH continues to provide a focus for higher education, new research endeavours and consultancies nationwide and includes a critical mass of scientists from a wide range of disciplines and professions. Growth has continued in applications for, and enrolments in these training programmes, especially since the launch of the Graduate Certificate, Graduate Diploma and Masters in International Public Health in semester 2, 2006. In recent years ACITH has grown its resourcing base, through competitive research grants and consultancy activities, which include major centres in malaria, health information systems, health metrics and health policy and planning. This growth and continued competitive advantage in global health contracts and research grants in its related fields, has assist ACITH to sustain its regional prominence.

The Centre has consolidated in 2011 to include 4 programme units (Global Engagement, Global Health Systems and Policies, Global Disease Control Programmes and Teaching) and the coordination of the Masters of International Public Health (Annex 1: Staff List).

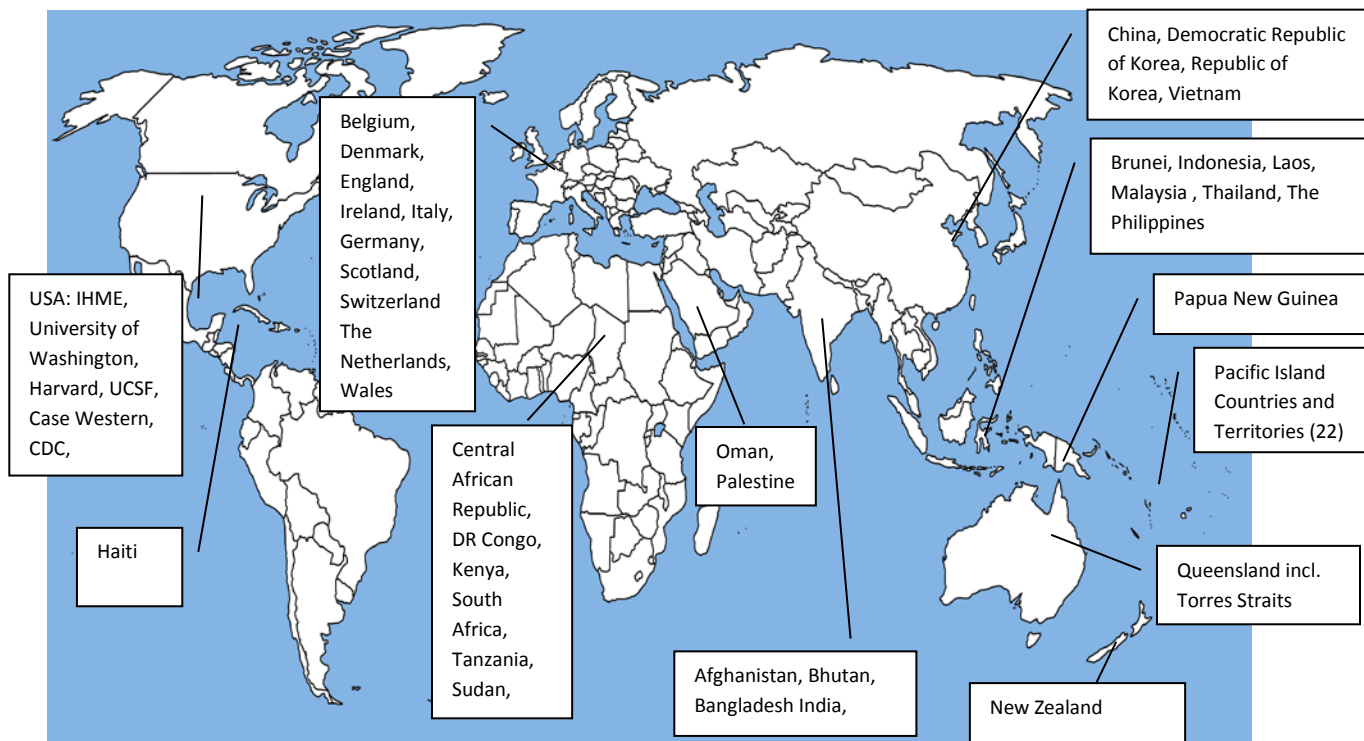


## OVERVIEW

The mission of ACITH is to *improve the health of populations in Australia and internationally through excellence in education, research and service*. ACITH seeks to:

- provide first-class coursework and research degree courses in tropical public health for Australian students, students from tropical developing countries and other students with a strong interest in these areas
- develop superior facilities for research and research training, to support international and Australian public health programs and the transfer of knowledge and technology to tropical developing countries, and to make special provision for the training of Aboriginal and Torres Strait Islander students
- maintain and further develop strong collaborative links with an extensive number of national and international institutions.

The Director with the Head of School and other SPH academic and administrative staff are working continually to enhance the role and reputation of the Centre in global health development activities through close collaboration with global and regional health development bodies, such as AusAID, SPC, WHO and the Development Banks and Global Health initiatives; global research and educational bodies such as SEAMEO-TropMed, tropEd . (Figure 1; Annex 2)



**Figure One: Countries of ACITH involvement in research, engagement , collaborations and training**

# Activities and Achievements

The Centre continues to perform in all three domains of **Discovery, Learning and Engagement**. These achievements are described in detail in the following sections. In addition, staff of the Centre were engaged in reviewing for a range of institutions the following: international peer reviewed journals, research grant panels, theses from several national and international universities; and invited on expert panels and scientific committees of national government and international organisations. Several international visitors have been hosted by the ACITH, and staff of ACITH have been invited to events at various international and national universities and research groups.

## LEARNING

Following the MIPH External Review in 2010 the staff of ACITH and SPH worked through the recommended changes and consolidations to the curriculum to develop a curriculum better reflecting global health priorities, linked to the growing needs for development of principles and capstone activities for students, and better reflecting the research and project activities of the Centre and the School. The MIPH changes also reflected the recommendations of the MPH review, continuing the alignment between the 2 Masters, and ensuring both Master (and their linked Graduate Diplomas and Certificates) remain international best practice in public health training. All course changes were passed through Faculty Board and University Senate in 2010, allowing the changes to be implemented in 2011.

The Centre coordinates the Graduate Certificate, Graduate Diploma and Master of International Public Health, as well as providing inputs in the School of Population Health and Faculty of Health Sciences' undergraduate and postgraduate programmes, including the medical degree, in health services management, health economics, global health and infectious diseases. There has been a maintenance of the number of student enrolled. Continued growth is noted in new student enrolments, with the main focus on growth being: in the new Masters (24 Unit) enrolments, with 47.5% increase (but a 42% decline 25% increase in the #16 unit) offering resulting in an overall increase in new enrolments of 13.5%; largely contributed to by the 35% increase in full time internal and international enrolments.

A popular, growing and potential for further growth area is the continuing professional development courses. Provided as an intensive mode for enrolled students, these continue to attract a large number of external participants, funded through a range of modes including self funding, employer supported and development agency. The short course on Health Aspects of Disasters was provided to 64 Australian and international participants this year with a broader participants by military staff from Pakistan, Vietnam, Papua New Guinea, the Philippines and Indonesia. The short course entitled "Introduction to Health information Systems was provide to more than 20 international participants. Other short courses offered by the HIS Hub through the ACITH were: 2 short courses for medical officers on Cause of Death Certification (Fiji National University and Bangladesh, China); and Training on Better Use of Existing Health Information to Samoa Ministry of Health staff. One new courses were developed in 2011 for Summer Semester offering – Introduction to One Health and negotiations were completed to offer the Swiss Tropical Public Health Institute's course – Health Resource Allocation Model – as a directed studies unit in the Summer Semester.

Research higher degree training is also actively supported through the Centre – with students increasingly attracted to the specialised fields of infectious diseases, global health, health systems and policies and applied medical anthropology.



## **Courses (2011)**

### **Global health and Infectious Disease (PUBH2010)(Internal)(Undergraduate)**

Course Coordinator: **Maxine Whittaker**

This course, a new offering in the Bachelor of Health Sciences in 2011, responds to a student demand for more global health and infectious disease content in the undergraduate offerings. The course gives a broad introduction to major global health problems with an emphasis on infectious disease in resource poor countries. Issues addressed include the causes and control of: malaria, TB, HIV, malnutrition, acute respiratory infection, diarrhoeal disease, vaccine preventable disease, water and sanitation and other environmental related health problems, cardiovascular disease, diabetes and other child and maternal health issues. The course will also explore major international health policy and program developments, particularly the Millennium Development Goals, and the translation of those policies into practice.

### **Health Financing (PUBH 7014)(Internal)(Postgraduate)**

Course Coordinator: **Kim Nguyen/Eliana Jimenez Soto**

This course provides a critical analysis of different models of financing health systems from a policymaking perspective. They include State-funded, social insurance, voluntary health insurance and community-based insurance models. Revenue collection and purchasing methods are also examined in detail with a view of discussing their implications for policymaking and health systems management. Particular attention is devoted to efficiency and equity issues. The course emphasizes those aspects of health financing that are highly relevant for policymakers in developed and developing countries.

### **Managing Global Disease Priorities (PUBH7099) (Internal and External) (Postgraduate)**

Course coordinators: Semester 1- **Peter Hill**, Semester 2 - **Rushika Wijesinghe / Jo Durham**

The course, new in 2011, is a broad introduction to global health systems and the way in which global disease priorities are managed in development settings. It focusses on the key global health priorities identified through the Global Burden of Disease and the Millennium Development Goals (MDGs), in particular AIDS, TB and Malaria. It examines the global health initiatives and programs developed to deal with these and focuses on the health system capacity needed to support and scale up interventions to address the MDGs 4,5,6 in particular.

### **Communicable Disease Management & Control (PUBH 7101)(Internal) (Postgraduate)**

Course Coordinator: **Dr Rushika Wijesinghe**

This course, new in 2011, covers the management and control of communicable diseases affecting human populations. Management would include disease management as well as surveillance and outbreak / epidemic control in the domestic and international settings. The diseases will be discussed primarily grouped together according to their common modes of transmission. Only a few selected diseases would be discussed in detail. The global distribution, disease burden, epidemiology, life cycle, clinical manifestations, treatment, prevention, control and surveillance of selected communicable diseases will be described. For diseases that have vectors or intermediary hosts, factors affecting disease transmission, vector ecology and environmental control options will also be discussed.

### **Sexual, Reproductive & Child Health: A Global Health Perspective (PUBH 7106) (Internal and External) (Postgraduate)**

Course Coordinator: **Dr Helen Ashwell**

Sexual, reproductive and child health (SRCH) encompasses a range of issues relating to sexual health of men and women and the health of children within a low and middle income country contexts. This course, new in 2011, highlights a number of the essential elements relating to SRCH, identifying links between the different aspects and how they affect and influence the health of men, women and children. Sexual and Reproductive health implies people are able to have a responsible, satisfying and safe sex life and have the capability to reproduce and the freedom to decide if, when and how often to do so. Maternal health refers to the health of women during pregnancy, childbirth and the postpartum period. While motherhood is often a positive and fulfilling experience, far too many women associate it with suffering, ill-health and even death. Children represent the future, therefore their healthy growth and development ought to be a prime concern of all societies. Newborns are particularly vulnerable and infants under five years are vulnerable to malnutrition and infectious diseases, many of which can be effectively prevented or treated.

### **Project Planning for International Health (PUBH 7108) (Internal) (Postgraduate)**

Course Coordinator: **A/Prof Peter Hill**

This course acquaints participants with the planning processes of major international and donor agencies, and provides sufficient knowledge and skills to collaborate in the identification of and design of aid projects. Project design and write-up, including the use of logframe planning matrices will be modelled, with an emphasis on interdisciplinary team work.

### **Health & Development (PUBH 7113) (Internal and External) (Postgraduate)**

Course Coordinator: **Ms Jo Durham**

This course reviews the economic underpinnings of development practice and its implications for the application of health programs. While the main focus is on economic development and health, the course also aims to provide students with an understanding of the variety of conceptions of health and development, including how they are measured; fundamentals of the demographic, epidemiological, and nutritional transitions and the bi-directional interactions between health and economic development. It also looks at the social, economic and cultural components of development and their specific interactions with disease and fertility in various ecological settings; conceptions of socio-economic status and poverty; determinants of health and disease and health improvement in the international context.

### **Health Aspects of Disasters (PUBH 7117) (Internal/Short course) (Postgraduate)**

Course coordinator: **Ms Jo Durham/Prof Maxine Whittaker**

This course covers the common types of disasters and effects on health, nutrition and mortality; public health and medical responses; infectious disease and nutritional emergencies; refugee camps; co-ordination of donor and aid agencies; disaster preparedness and minimization of health hazards.

### **Global Health Policy (PUBH 7645) (Internal) (Postgraduate)**

Course Coordinator: **A/Prof Peter Hill**

Global Health Policy identifies key stakeholders in international health and their roles, including WHO, World Bank, key NGO's and bilateral agencies and Global Public Private Partnerships. It explores major global health policy and program developments, and the translation of those policies into practice. It also examines the changing aid environment, and responses in global health governance to these changes. In 2011, this was offered through an intensive mode and then activities spread throughout the semester.

## Other contributions to undergraduate/postgraduate and MBBS and other UQ/other institutional teaching

Staff of the Centre provided teaching input into a number of undergraduate and postgraduate courses of the School of Population Health. In 2011, Professor Maxine Whittaker coordinated the MBBS Public health course, and provided some content into topics of that programme.



Participants in the 2011 Health Aspects of Disasters Intensive course

## Enrolments and Graduations 2011

### Research Students 2011

| <i>Continuing Enrolments</i> |           | <i>Graduations</i> |          |
|------------------------------|-----------|--------------------|----------|
| MPhil                        | 0         | MPhil              | 0        |
| PhD                          | 13        | PhD                | 2        |
| <b>Total</b>                 | <b>13</b> | <b>Total</b>       | <b>2</b> |

| <i>Graduate</i>  | <i>Thesis Topic</i>  | <i>ACITH Principal Supervisor (Associate supervisor/s)</i> |
|------------------|--|--|
| Nguyen-Bang Pham | Sex Ratios At Birth In Viet Nam: Current Situation, Trends, Differentials And Policy Implications                        | Peter Hill<br>(Chalapati Rao)                              |
| Hideki Higashi   | Economic Evaluation to Inform Health Policy: Cost-Effectiveness of Tobacco Control Interventions in Vietnam and Thailand | (Peter Hill)   |
| <i>Candidate</i> | <i>Thesis Topic</i>  | <i>ACITH Principal Supervisor (Associate supervisor/s)</i> |
| Airin Roshita    | Maternal employment and child's weight for age: A study of an Indonesian urban middle class community                    | (Maxine Whittaker)   |
| Anar Ulikpan     | To SWAp (Sector-wide Approach) or not to SWAp  | Peter Hill<br>(Eliana Jimenez Soto)                        |

|                   |   |                                     |
|-------------------|---|-------------------------------------|
| Anna Tynan        | Capacity analysis of the Papua New Guinea Health System for potential scale up of a circumcision program: implications for policy development | Peter Hill<br>(Maxine Whittaker)    |
| Asmat Malik       | Decentralization In Pakistan: Performance Of Health Sector  | Peter Hill<br>(Eliana Jimenez Soto) |
| Bridget Appleyard | Malaria in pregnancy in Solomon Islands   | (Maxine Whittaker)                  |
| Dawn Dulhunty     | The perception humanitarian aid practitioners place on higher education as it relates to their professional development and practice          | Peter Hill                          |
| Gerard Kelly      | A spatial decision support system for malaria elimination   | (Rushika Wijesinghe)                |
| Ha Vu Song        | Understanding sexual and reproductive health of teenagers and young adults with autism in Hanoi, Vietnam                                      | (Maxine Whittaker)                  |
| Litiana Kuridrani | Indigenous Fijian women's cultural perceptions and response to HIV and AIDS: Implications for strategies of prevention and control            | Maxine Whittaker                    |
| Madeline Lemeki   | Evaluation of HIV intervention projects in Oro Province, Papua New Guinea: Barriers and facilitators to achieving results of behaviour change | Maxine Whittaker                    |
| Susan Vlack       | Promoting identification and immunisation of Aboriginal and Torres Strait Islander people in the urban General Practice setting               | (Maxine Whittaker)                  |

#### Coursework Students – New Enrolments 2011

| <i>Program</i>                           | <i>Plan</i> | <i>Number of Students</i> |
|--|-------------|---------------------------|
| Grad Cert International Public Health    |             | 5                         |
| Grad Dip International Public Health     |             | 5                         |
| Master International Public Health (#24) |             | 59                        |
| Master International Public Health (#16) |             | 15                        |
| <b>Total</b>                             |             | 84                        |

#### Coursework Students – Continuing Enrolments 2011

| <i>Program</i>                           | <i>Plan</i> | <i>Number of Students</i> |
|--|-------------|---------------------------|
| Grad Cert International Public Health    |             | 7                         |
| Grad Dip International Public Health     |             | 4                         |
| Master International Public Health (#24) |             | 85                        |
| Master International Public Health (#16) |             | 24                        |
| <b>Total</b>                             |             | 120                       |

#### Coursework Students - Graduations 2011

| <i>Award Program</i>                     | <i>Number of Students</i> |    |
|--|---------------------------|----|
| Grad Cert International Public Health    | 1                         |    |
| Grad Dip International Public Health     | 4                         |    |
| Master International Public Health (#24) | 27                        |    |
| Master International Public Health (#16) | 11                        |    |
| <b>Total</b>                             |                           | 43 |

## Coursework Students – Total Enrolments 2011 – International Students, External Students – Full Time and Part Time Students

| <i>Program</i>                           | <i>Plan</i>  | <i>Number of International Students</i> | <i>Number of Full Time external Students</i> | <i>Number of Part Time Students</i> |
|--|--------------|---|--|-------------------------------------|
| Grad Cert International Public Health    |              | --                                      | --   | 4                                   |
| Grad Dip International Public Health     |              | 3                                       | --   | 4                                   |
| Master International Public Health (#24) |              | 37                                      | 3  | 29                                  |
| Master International Public Health (#16) |              | 6                                       | 3  | 17                                  |
|  | <b>Total</b> | 46                                      | 6  | 54                                  |

## DISCOVERY

The strategy for the Centre's research focus is to maximise our influence on the global health development agenda for example through:

- Knowledge creation:
- Translation of evidence into policy and public health action
- Capacity development
- A focus on emerging issues
- Evaluation research

Examples of the work include: the knowledge created under the HIS Knowledge Hub; research on assisting countries develop their advocacy and negotiation skills as well as a strong evidence base to ensure that their needs are reflected in development programmes and agendas; translating research into policy and practice – beyond the bench to bedside – into the community and health programmes; and critically appraising what prevents the translation of programmes and research and resource allocation activities into results such as in the work on the MDG 4 and 5 global assessments and the critical analysis of aid effectiveness and global health initiatives.

The collaborative arrangements between the PNG Institute of Medical Research and University of Queensland, as well as with the Fiji National University defined through formal Memoranda of Understanding continued to operate.

At the PNG Institute of Medical Research, 4 ACITH postdoctoral fellows are located – three undertaking applied research work in monitoring and evaluation of the national malaria control programme – including effectiveness of control strategies, community participation, impact of the programmes and operational research, and one working in exploring improvements in the verbal autopsy techniques. In Fiji capacity development activities and research is underway in various aspects of health information systems. ACITH also had a full time staff member based in Vietnam under the VINE project who in addition to his work on VINE was been engaged in an active research programme related to HIV and sexual health.

A continued focus on quality research was maintained and encouraged throughout 2011. A continuing challenge for international health research is sources of funding especially for the social science and health policy and management research fields. Strategic leveraging from existing contracts such as PacMISC and VINE for this research and further research grant applications was a stronger focus of the strategy for research funding in 2011.

Staff in the Centre applied for/were members of interdisciplinary research teams applying for NHMRC, ARC and ADRA funding in the 2011 period – which resulted in a number of research grants

(Annex 5). Increasingly the health services research, applied anthropological and policy research and translation of research into policy and practice capacities within the ACITH are being included into SPH research teams. Additionally the social, political, health sector and cultural context knowledge, experience and networks of the Centre staff in the Asia, Pacific and African region is called upon to support and develop research proposals by the SPH.

Annex 4 highlights the 2011 new and continuing grants run through the ACITH or in which ACITH staff are engaged. Annex 5 highlights the publications and other research activities achieved by the staff of the Centre.

### **Uptake of Evidence to Policy: the Indigenous Burden of Disease Case Study**

*The Uptake of evidence to policy: the Indigenous Burden of Disease case study* is a 3 year, NHMRC funded project that aims to explore the ways in which research evidence that has been specifically developed for policy, influences policy processes and outcomes. The chief investigators are Associate Professor Peter Hill, Professor Cindy Shannon and Professor Philip Davies of the University of Queensland, and Professor Anthony Zwi from the University of New South Wales.

The 2007 Indigenous Burden of Disease (BOD) study, conducted within the University of Queensland's School of Population Health by Prof Theo Vos and his colleagues, is the starting point. The project examines its influence on Aboriginal and Torres Strait Islander health policy. The objectives of this research are to: explore how meaning is constructed from academic research evidence by different policy stakeholders; identify ways to enhance the use of research evidence in policy; and to extend the current theoretical base of health policy analysis.

### **Health Systems in Severely Disrupted Environments**

The Health Systems in Severely Disrupted Environments research program was funded by the Danish Ministry of Foreign Affairs in late 2010, and seeks to provide greater understanding of the provision of health services in counties subjected to severe, protracted stress, examining both the evidence of such disruption, as well as of resilience within these systems. Six countries, each displaying different manifestations of state absence or failure, are being studied: Afghanistan, Central African Republic, DR Congo, Haiti, Palestine, and Somalia. The research team blends independent global health specialists and academics from ACITH and other collaborators. Early results point to the impact of each country's political and economic history on health care provision, and its limitations. The poor health status, relative to regional comparators, is an obvious product. But the territory left by the failure of the state is clearly not empty vacuum: with vigorous activity by a range of providers, of varying quality and coverage. Public Health services, such as immunization and disease control tend to be neglected, but diverse and innovative sources of curative care were identified. Examples include specialist health services provided by former residents in rural Haiti; web-based psychiatric consultation in Palestine; and the growth of private medical schools in Somalia. Inefficient and redundant services, however, result as a consequence of the loss of governance of health services, and the research is seeking to explore whether governance may be built from the "ground-up" in such diverse and unstructured environments.

### **"Patients without Borders": trans-border health care**

One of the emergent issues to arise from the Health Systems in Severely Disrupted Environments research has been the recognition that in many situations where the provision of health services by the state is not adequate, cross border health seeking is a common phenomenon. This is sought by various layers in society: those who can afford it may seek international health care—'health tourism'—often for elective or cosmetic procedures, as researched between Singapore and Malaysia

by Associate Professor Andrea Whittaker. But at lower levels, cross border health seeking is undertaken, at times coordinated with other commercial travel, at times as an emergency. Web based importation of medications is increasingly common, with poor quality control possible. Work undertaken by both PACMISC and APMEN draws attention to the problems of cross border control of malaria, a problem encountered in other diseases as well. But the growth of structures to purposively provide health care across borders has also been observed. MIPH student Katie Harris is currently in Thailand, researching the Mae Sot clinic set up as a private clinic to service Karen from neighbouring Myanmar. The clinic, supported by a number of donors, also trains long term patients to become health care providers on their return. Jo Durham is preparing research examining the health seeking links between Laos and Thailand and in other parts of the country, with Vietnam. Research examining the links between migrant diaspora—particularly from Sudan and Somalia—are being explored in collaborations with the University of Copenhagen. This is a program of work that has significant potential to grow, in an increasingly globalised world.

### **VINE project**

The Evidence Base for Health Policy Project, a collaborative project between the University of Queensland and the Ministry of Health in Viet Nam, and funded by The Atlantic Philanthropies completed its program of research in 2011 with a National Research Dissemination Workshop in Hanoi held in June 2011. Over 5 years, the project built local capacity for research that informs policy—including mortality analysis, burden of disease and cost-effectiveness analyses. The findings of the project provided essential health intelligence to guide priority-setting in the health sector based, drawing attention to key areas of the Burden of Disease not adequately addressed in health planning processes. The areas identified as priorities included stroke, mental health, cancer and injury. The contributions of tobacco, salt intake and alcohol consumption were highlighted and cost effective interventions developed to guide program interventions. The cause of death data that underpins these analyses has been substantially improved through the establishment of population surveillance sites. Encouragingly, many project findings and products are completed at the time when the Ministry of Health is developing its five year and 20 year strategic plans, giving us unique opportunities to bring evidence generated from our project to the Ministry of Health's planning processes. We are currently negotiating possibilities to extend our collaboration with the Health Strategy and Policy Institute (HSPI) within the Ministry of Health, Hanoi School of Public Health, and Hanoi and Hue Medical Universities, with hopes to continue work in mortality studies, as well as engage in further policy analysis.

### **International Centers of Excellence for Malaria Research : Research to Control and Eliminate Malaria in SW Pacific**

In 2010 the National Institutes of Health AI-09-017 International Centers of Excellence for Malaria Research : Research to Control and Eliminate Malaria in SW Pacific awarded a 7 year (US\$ 7,000,000) grant to a consortium in which ACITH/UQ is a member with Case Western University (lead), Papua New Guinea Institute of Medical Research, Swiss Tropical and Public Health Institute, Vector Borne Disease Control Programme in Solomon Islands, Walter and Eliza Hall Institute, Centers for Disease Control (USA), and University of Melbourne. Ground work to establish protocols, working arrangements between all research groups, and working with the communities to establish working relationships and arrangements were undertaken., The entomological and epidemiological field work will commence in 2012, as will the capacity development of the national health and research training institute in Honiara.

### **One Health**

This is a new unit of work for the ACITH, and is bringing together various groups within the SPH including Infectious Disease Epidemiology, Epidemiology and Biostatistics, BODCE, Environmental Health), as well as the traditional partners of QIMR and AAMI, and the Swiss Tropical and Public

Health Institute and new partners with the University of Queensland Veterinary School and ENTOX. Building upon a plan of action for this programme of work developed in late 2009, the unit has:

- Launched the initiative in 2010 with support from the Swiss Association of Research networks (SARN), University of Queensland Internationalization Office and the Swiss Embassy to Australia;
- Successfully submitted a grant application to the UQ Vice Chancellor and ProVice Chancellor for start up funds for the UQ wide One Health initiative;
- Hosted an SPH strategic meeting with Swiss Tropical Public Health (Professors Marcel Tanner, Jakob Zinsstag) on joint research and teaching collaborations;
- Commenced work with the Australian Blood Bank on zoonotic infections, and with Swiss Tropical Public Health on Food borne trematodes in Laos and Brucellosis in Mongolia (economic analyses);
- Submitted several grant applications to NHMRC (Hendra virus), Smart State (with QTHA), Optimus Foundation, Australia-Vietnam Foundation, Australian Research Council;
- Finalised health economics and policy analysis work under a contract with Murdoch University, through its School of Veterinary and Biomedical Sciences, as part of their grant from the Australian Centre for International Agricultural Research project AH2006/161 ("ACIAR Project") entitled Management of Pig Associated Zoonoses in the Lao PDR;
- Recruited a postdoctoral fellow in One Health (commencing February 2011) with funding from SPH;
- Developed a new subject entitled Introduction to One Health for Summer semester 2011 offering (January 2012), with guest lectures from Professor Jakob Zinsstag and Dr Esther Schelling.

## ENGAGEMENT

The ACITH supports a range of capacity building activities as service to communities, governments, organisations and development agencies. Highlights of these in 2011 were:

### **Pacific Malaria Initiative Support Centre (PacMISC)**

The goal of PacMISC is to *facilitate the successful implementation of national malaria programmes in the Solomon Islands and Vanuatu in collaboration with ministries of health and development partners*. It achieves this by providing a flexible funding mechanism to implement highly-focussed, demand-driven, locally appropriate and cost effective activities outlined in the respective countries' malaria action plans, whilst also contributing to broader health systems strengthening and human resource development.

PacMISC was established in 2008 as part of the Australian Government's commitment to the control and progressive elimination of malaria in the Pacific region as defined under the Pacific Island Malaria Initiative. Massive collaborative funding and technical assistance, especially from the Global Fund, World Health Organisation, the Secretariat of the Pacific Community and both countries' governments, has resulted in significant reduction in the transmission rates of malaria with some provinces well on track to reach elimination status.

Generally the focus of PacMISC is to support partner governments and implementing agencies with the following:

- Provision of effective and efficient program management support to enable successful implementation of activities such as the mass distribution of bed nets and treatment drugs throughout each country.
- Coordination of the design and implementation of high quality surveillance, monitoring and evaluation systems to ensure effective monitoring of the interventions and provide real-time alert system for changes in transmission patterns.



- Delivery of effective teaching and training to meet identified needs in order to build human resource capacity at national and provincial levels to manage and implement the malaria programs. The skills and capacity of PacMISC consortium members and institutions within Australia and internationally are drawn upon to provide this expertise.
- Provision of highly focussed technical assistance and operational research.

During 2011, further work on reviewing the achievements and operational and governance activities so the Pacific Malaria Initiative was undertaken, as part of the preparation of the next phase of Australian government support to the two countries' government health programmes. To cover this "design and review" phase, AusAID extended the PacMISC contract for 12 months ( July 2011- June 2012), to support the requests for a seamless transition, and continued support during the changes in financial and other support arrangements. PacMISC supported achievements in both countries' programs in 2011 included:

- Malaria Indicator Surveys were conducted in both countries to measure their progress towards achieving the goals and targets of their respective programs by collecting information on coverage of core malaria interventions and malaria parasite prevalence. Full results will be released to partners in early 2012.
- Improved entomological monitoring capacity with several baseline and follow-up surveys being successfully completed by both the Solomon Islands and Vanuatu national program. The findings of these surveys will determine the targeted vector control activities required to maintain low no-indigenous malaria transmission.
- Continued support to strengthen microscopy capacity through the implementation of the microscopy maintenance program in both countries. Based on feedback from the microscope program supervisors and maintainers, training was designed and delivered by Meddent and Olympus, with graduates now undertaking servicing and fixing of microscopes.
- The importance of health promotion activities and community mobilisation in support of the malaria programs has been acknowledged in both countries and activities were expanded to include the piloting of a malaria school package to 42 schools across seven provinces in Vanuatu, whilst in the Solomon Islands provincial health workers visited primary schools to promote behaviour change in relation to malaria. These activities are supported within the context of broader capacity building of the health promotion units to develop strategies, plans and manage and monitor the implementation of activities.
- Human resource development plans were written in consultation with both programs with emphasis on broader health systems strengthening. As part of the plans health services management training was delivered to health managers at both national and provincial levels.
- In Vanuatu the Ministry of Health's capital works program has been strengthened with increased human resources and systems capacities developed via ongoing technical assistance.
- Strengthened financial management capacity within both programs with extensive work undertaken to develop capacity building plans for financial staff; and policies and procedures to strengthen planning, budgeting, acquittal of funds, monitoring and reporting.
- Ongoing work to improve the malaria information systems in both countries through changes to the databases and improved data collection, entry, analysis and reporting techniques.

The PacMISC is supported by a Malaria Reference Group who met in Brisbane in May 2011. This logistics of this activity was provided by PacMISC staff, to support AusAID. The MRG continued to provide guidance to the Pacific Malaria Initiative, the Governments of Vanuatu and Solomon Islands and AusAID throughout 2011.

## Investing in MDGs 4 and 5

This set of activities now consists of two major projects.

The *Investment Case for Scaling up Equitable Progress towards MDGs 4 & 5* is a \$4 million project funded by the Bill and Melinda Gates Foundation and AusAID. It's aimed at improving maternal and child health in five priority countries in Asia and the Pacific. The project ran from January 2009 to December 2011. In June 2011, the project secured additional funding of \$2.4 million from AusAID to continue the Investment Case work to June 2013, working in close collaboration with UNICEF.

The purpose of the project is to identify the main health constraints and 'bottlenecks' hampering the take up of 'best buy range of interventions' required to achieve equitable progress towards MDGs 4 and 5 and to estimate the extra funding needed to address these current constraints in an equitable way.

Two goals of the United Nations Millennium Declaration of 2000 call for substantial reductions in child and maternal mortality by 2015. Throughout the world, almost 11 million children under the age of five die every year (more than 1,200 an hour), mostly from easily preventable or treatable causes. More than half a million women die in pregnancy and childbirth every year - that's one death every minute. Of these deaths, 99 per cent are in developing countries. Effective, low-cost reproductive, maternal and newborn child health interventions are available but, while there has been good progress in some countries, coverage continues to be low in many others, particularly in the developing world.

This Investment Case (IC) project is a collaboration between the AusAID Knowledge Hubs, led by UQ's School of Population Health within ACITH, and national research partners in five Asia Pacific countries - India, Indonesia, Nepal, Papua New Guinea and The Philippines - where rates of preventable maternal, neonatal and child deaths are particularly high. The project team is working closely with policy makers and the global and country offices of development partners in the region, including UNICEF and WHO, to ensure the study results are translated into real action in each country. The project team are also consulting with other consortia, such as the *Maternal, Newborn and Child Health Network for Asia and the Pacific* and the *Partnership for Maternal, Newborn and Child Health (PMNCH)* to ensure that this project complements other activities in the region.

Reports from the first Investment Case work to December 2011 is available at:

[www.uq.edu.au/investmentcase](http://www.uq.edu.au/investmentcase). The work incorporates an Equity analysis and a Scale-up Analysis. The Equity analysis aims to identify disadvantaged groups according to health outcomes and intervention coverage. The Equity country reports include a detailed analysis of under-five mortality using the latest methods. The Scale-up involves an analysis of available datasets and consultation workshops with partners in-country to identify bottlenecks and strategies to scale-up critical interventions to prevent maternal, newborn and child deaths. Final results, including how governments have used the IC analysis for their local government planning and budgeting are included in these reports.

The project team are currently working on the new phase of work in Indonesia, Nepal and the Philippines with preliminary results due later in 2012.

### *Roadmaps for optimizing RMNCH in SE Asia*

The objective of this exercise is to develop evidence-based recommendations on how to develop and use implementation options/scenarios to scale up effective MNCH interventions in the Asia-Pacific region. A wide range of approaches have been used to help countries develop investment and implementation scenarios. Examples of this include formal evaluations of strengths and weaknesses of national plans undertaken under the Joint Assessment of National Health Strategies

and Plans (JANS), as well as the use of simulation exercises like the Lives Saved Tool, which help policymakers identify the key priority interventions addressing major causes of death. Much of the available information however only describes the process and the tools with less evidence on their effectiveness in aiding the planning/budgeting process, particularly in the Asia-Pacific region. For this exercise we will summarize the key elements across various approaches that have been used to help countries develop investment and implementation scenarios, and we will provide recommendations for roadmaps and scenarios by country type. This exercise will not produce recommendations on the type of strategies (i.e. performance incentives, or conditional cash transfers) which can be used by countries to effectively scale- up MNCH interventions.

### **Health Information Systems (HIS) Knowledge Hub**

The HIS Knowledge Hub responds to a growing recognition of the need for strengthening health information systems in developing countries to deliver comprehensive information needed to guide health programs, support policy development, and measure progress. Many low and middle income countries only have partial information systems, which are of unknown reliability, poorly coordinated and unable to provide the necessary information for monitoring health outcomes and the proper management of health systems. To facilitate this vital research, HIS Hub receives support from AusAID which will provide up to AUD\$8 million over four years (2008 to 2011) and during 2011, and 18 months costed extension of activities was contracted- based upon the recommendations of the independent review of the Knowledge Hub initiative..

HIS Knowledge Hub aims to challenge the assumptions on best practice in the development of health information systems and add to the body of knowledge through targeted operational research within the region. It is designed to facilitate the development and integration of HIS and local capacity to ensure that cost-effective, timely, reliable and relevant information is available, and used to better inform health development policies. The objectives of the Hub are:

- Increase the critical, conceptual and strategic analysis of key HIS issues relevant to the Asia Pacific region that can be used to inform policy thinking and practical application at the national, regional and international levels
- Expand convening powers and engagement (e.g. communication, networks and partnerships) between the Hubs, Australian institutions and Asia Pacific national, regional and international researchers, development partners and educational institutes
- Effectively disseminate relevant and useful HIS knowledge resources which aim to influence policy thinking at national, regional and international levels
- Expand the HIS capacity of Australian institutions and professionals and through them to Asia Pacific institutions and professionals to participate effectively in evidence informed policy making

The HIS Knowledge Hub uses its ‘convening power’ to develop key collaborations with other national and international organisations with expertise in HIS operations.

The major “products” for 2011 were:

1. Essential HIS Investments for health service management
2. Strengthening and expanding the HIS workforce
3. Strengthening vital Statistics and cause of death-data
4. Health Information Systems strengthening and maternal and child health

Outputs from these products include a series of working papers and documentation notes (Annex 5), tools for practice and peer reviewed publications,. In addition the following major international events were convened by the Hub:

- HIS Knowledge Hub Meeting to discuss the Resource Kit, Geneva July 2011
- Pacific Health Information Network (PHIN) Strategic Meeting, Brisbane, May 2011
- Pacific Health Information Network Conference Nadi, Fiji August 2011
- Collaborative Initiative on Vital Statistics Development in the Pacific, Brisbane April 2011
- HIS Systems short course Brisbane September 2011
- WHO /HIS Hub Pacific Surveillance Meeting Brisbane September 2011



Participants in the HIS Short Course, 2011

### **Asia Pacific Malaria Elimination Network (APMEN)**

APMEN was launched in February, 2009, in Brisbane, Australia, at a meeting co-hosted by University of Queensland and University of California (San Francisco). The overall aim of the APMEN is to develop and sustain a network of Country Partners and Partner Institutions to work collaboratively to address the challenges of malaria elimination in the Asia Pacific region, with particular focus on the unique challenges for the region such as *Plasmodium vivax* (*P. vivax*). This overall aim will be accomplished through the following key strategic objectives:

1. Share information and develop expert consensus on issues relating to malaria elimination, in order to support policy and decision making at the country level.
2. Support country decision making through building of the evidence base for malaria elimination, with a particular focus on *P. vivax*.
3. Increase expertise and capacity to carry out elimination activities through guidance, training, and sharing of experiences.
4. Provide leadership and advocacy for malaria elimination in the region by expanding international and domestic awareness, funding, and support.
5. Facilitate support for emerging priorities for malaria elimination especially in the Asia Pacific Region.
6. Develop a governance structure suitable for the network and provide Secretariat support of governance infrastructure and smooth coordination and to enable efficient work of Network.

APMEN is composed of Asia Pacific Country Partners that have set a national goal of elimination of malaria, as well leaders and experts from key multilateral and academic agencies with an interest and skills in malaria research and elimination in the Asia Pacific region. As of March 2011 these

countries are: Bhutan, China, Democratic People's Republic of Korea, Indonesia, Malaysia, Philippines, Republic of Korea, the Solomon Islands, Sri Lanka, Thailand and Vanuatu. The Bill and Melinda Gates Foundation and The Australian Agency for International Development have committed substantial funding to support APMEN and other elimination activities. The University of Queensland through ACITH was awarded a contract from AusAID to manage the APMEN work plan (2009) and many of the Secretariat functions. Other aspects of Secretariat functions are managed by the Global Health Group at University of California (San Francisco) funded through the BMGF. Other development partners such as UNICEF, USAID, WHO, Malaria Consortium have provided support to the network activities.

During 2011, an independent mid-term review was undertaken of the AusAID funded secretariat activities of APMEN. The report was released in early 2012.



APMEN Community Participation in Elimination Workshop, Chiang Mai,

In 2011, key APMEN activities focused on:

#### Objective 1: Information sharing and consensus building

- Updating of the APMEN website.
- Finalisation of the APMEN Malaria Elimination *Atlas*, a first-of-its kind *Atlas* of APMEN's malaria-eliminating partner countries which displays the geographic distribution of malaria, and clearly outlines how much malaria remains and where it is concentrated.
- Dissemination of the 10 matrices which are tools designed to add to the current body of knowledge on malaria control strategies and interventions in the Asia Pacific region

#### Objective 2: Building the evidence base for decision support

- Annual technical meetings of the Vivax and Vector Control working groups
- Continuation of the APMEN Research grant program for research into *Vivax*
- Support to Vivax Working Group who in 2011 have supported 11 research projects in 7 different APMEN countries
- Completion of the Vector survey.
- Completion and submission of a case study on Sri Lanka's malaria control and elimination program describing the key success factors in its reduction in malaria incidence.
- A survey tool on reactive case investigation methods was developed and disseminated to the APMEN Country Partners.

#### Objective 3: Technical guidance and capacity building

- Continued success of APMEN Fellowship programme with 5 fellowship awarded in the following topic areas: spatial analysis and GIS along border regions, Malaria management training, G6PD deficiency, and genotyping.

- Inaugural GIS APMEN training program conducted in Shanghai co hosted by the National Institute of Parasitic Diseases China with 35 attendees from APMEN Country partners.
- Technical Support visits to APMEN Research Grants recipients
- A successful genotyping workshop was conducted during APMEN III, as part of Vivax Working Group meeting in Kota Kinabalu with 25 attendees

Objective 4: Leadership, knowledge management, advocacy.

- Representation at key global and regional malaria and disease control meetings
- New members of APMEN members Thailand and the London School of Hygiene and Tropical Medicine
- Applications from Cambodia and two regional Partner Institution , Sarawak Malaria Research Centre, Malaysia and the Mahidol Vivax Research Centre, Thailand
- Advocacy articles in peer reviewed and population media publications

Objective 5: Facilitating of Emerging priorities.

- Community Engagement Workshop conducted focusing on malaria elimination, with the support of co hosts Thailand Vector Borne Disease program in Chang Mai with 45 attendees.
- Progression of a Vivax Multi Centre research trial where APMEN countries have agreed on Standard operating procedures for genotyping which may eventually lead to an ability to identify if a case is local or imported.
- A Bhutan cross-border report which was co-financed through SEARO, GHG, Bhutanese Government and APMEN was completed and submitted for publication highlighting the challenge of border malaria.

Objective 6: Secretariat Function

- Publication of the APMEN newsletter five editions disseminated via the website.
- Convening the third annual network meeting in Kota Kinabalu, Advisory Board meetings and other meetings such as the Vector Control and Vivax Working Groups.
- APMEN was invited to participate in and give a presentation present on the regional network model of APMEN during the WPRO Malaria managers meeting held in Manila.
- Malaria Elimination Group (Tanzania, October)
- Roll Back Malaria Partnership Board Meeting (Wuxi, November 2011)
- Australian Medical Students Association (Sydney, July)
- Gates Foundation Malaria Forum (Seattle, October 2011)
- WPRO Malaria Managers Meeting (Manila, August)
- The American Society of Tropical Medicine 60th Annual meeting (Atlanta, November)

APMEN Community Engagement Workshop The Network has already witnessed increasing interest from the regional and global malaria scientific community and initial additional resourcing being provided to APMEN activities. The Network will not only facilitate elimination of malaria in Asia-Pacific but also catalyse and give support and hope to similar initiatives in other regions of the world.



APMEN Vector Control Working Group meeting, September in Bangkok

## OTHER ACTIVITIES

### World Health Day

In 2011, the SPH, facilitated by ACITH, launched a new initiative of celebrating World Health Day (WHD). Using the WHD theme of Increasing Antimicrobial Resistance, a panel of SPH experts addressed the topic from a range of their disciplinary and research interests including One Health, medical tourism, health systems management, and health seeking behaviour. A key note address was provided by Professor Tim Walsh of the Faculty of Health Sciences who highlighted his work in India and the link between the growing threat of antimicrobial resistance and water and sanitation and environmental conditions. Other speakers from the School were: Professor Alan Lopez; Professor Theo Vos; Associate Professor Andrea Whittaker; Mr Ricardo Magalhaes; Dr Rushika Wijesinghe (ACITH); Ms JoAn Atkinson (ACITH) and Professor Maxine Whittaker (ACITH).

### Protecting Health Care in Armed Conflict

On 3 November 2011, the School of Population Health co-hosted a national conference on *Protecting Health Care in Armed Conflict* in collaboration with the Australian Red Cross and the International Committee of the Red Cross (ICRC). Opened by Professor Alan Lopez, the conference addressed the direct and indirect threats to health systems and staff as a result of conflict. Mr Paul-Henri Arni, head of the ICRC *Health in Danger* Project presented the preliminary findings of their international research, and Associate Professor Peter Hill presented on the distorting impact of conflict on health systems. Associate Professor Hill has now been invited to speak on the challenges of conflict for health systems at the ICRC sponsored *Healthcare in Danger* Symposium, in London, on 23 April 2012.

## VISITORS

In 2011, a broad range of colleagues, researchers, industry, development agencies and country partners visited ACITH in 2011. These included:

- **Australian High Commission Brunei Darussalam:** Mark Sawers- High Commissioner
- **Australian Red Cross :** Greg Vickery, President; Dr Helen Durham, Head of International Law & Principles,
- **Burnet Institute:** Professor John Reeder, Professor Mike Toole,
- **Centers for Disease Control (US):** Dr Tom Burkott

- **Global Health Group**, University of California (San Francisco): Professor Richard Feachem, Dr Roly Gosling and Ms Cara Smith
- **International Committee of the Red Cross**: Jeremy England, Head of Office, Australia; Dr Paul-Henri Arni, Geneva
- **Liverpool School of Tropical health**: Professor Janet Hemingway
- **Medicine for Malaria Venture**: Mr Dan Evans
- **Medecins Sans Frontieres, Australia**: Mr Paul McPhun, Executive Director,
- **Menzies School of Health Research** : Dr Ric Price and Dr Lorenz Von Seidlein -
- **Ministry of Health, Mexico** : Minister of Health
- **Nossal Institute**: Professor Graeme Brown
- **NYU School of Medicine** - Professor Karen Day -
- **Queensland Health**: Dr Hai Phuong
- **Swiss Embassy, Australia: Ambassador and Attache**
- **Swiss Tropical Public Health Institute**: Professor Marcel Tanner (Director), Professor Jakob Zinnstag.
- **The Center for Global Health & Diseases Case Western Reserve University** - Professor Peter A. Zimmerman
- **University Tübingen, Germany**: Prof. Dr. med Stephan Zipfel, Dean of Medical Education; Prof. Dr. med Dominik Hartl, Chair for Pediatric Infectiology and Immunology; Prof. Dr. med Ulrich Lauer, Senior Physician, Professor in the Department of Medicine, Dr med Friederike Holderried, Head of Division of Study and Teaching, Ms Diane Blaurock, International Relations, Faculty of Medicine
- **UNSW School of Public health**: Professor Richard Taylor, Dr Rohan Jayasuriya, Dr Husna Razeq

## Conclusion

The ACITH continues to consolidate its place on the global health development map through its innovate teaching, research and engagement activities, as well as its capacity development and collaboration principles interweaved into all of its activities. Strategic challenges to this growth including the maintenance and recruitment of appropriate professionals, building and strengthening core alliances and collaborations with national, regional and international teaching and research institutions and development agencies, continued engagement in core research, maintenance of student numbers and broadening of the teaching programmes. Ensuring sustained core funding for the centre remains a challenge, especially post-PHERP, and means innovative financing for supporting the teaching and research programme and its staff will need to be developed. Broadening the funding base through research programmes, consultancy and project work with a broader range of development partners and agencies, and philanthropy need to be explored.



# Annexes

# Annex 1

## Staffing for ACITH (UQ) 2010

### Teaching and Research/Research Staff

|  |                         |
|--|-------------------------|
| JoAn Atkinson                            | Gerard Kelly            |
| Eindra Aung                              | Kim Nguyen              |
| Claire Brolan                            | Justin Pulford (Goroka) |
| Karen Carter                             | Rasika Rampatige        |
| Adnan Choudhury                          | Chalapati Rao           |
| Juliana Cuervo-Rojas (Goroka)            | Tanya Russell           |
| Ngo Duc Anh (Ha Noi<br>be Gouda (Goroka) | Eliana Jimenez Soto     |
| Manual Hetzel (Goroka)                   | Maxine Whittaker        |
| Peter Hill                               | Rushika Wijesinghe      |

### Project Staff

|                                      |   |
|--------------------------------------|---|
| Audrey Aumua (HIS Hub)               | Fallon Horstmann (HIS Hub)                |
| Lisa Bain (PacMISC AAMI)             | Marie Louise Johnson (PacMISC AAMI)       |
| Matthew Baxter (MDG Investment Case) | Megan Johnston (PacMISC Vanuatu)          |
| Arna Chancellor (APMEN)              | Amanda Lee (APMEN)                        |
| Zoe Dettrick (MDG Investment Case)   | Luke Marston (PacMISC Solomon Islands)    |
| Simone Dowd (PacMISC AAMI)           | Rebekah Mc Bride (PacMISC)                |
| Patricia Dowling (PacMISC Vanuatu)   | Stacey Pitman (ICEMR)                     |
| Patricia Field (PacMISC)             | Ibari Hellmer Reyes (MDG Investment Case) |
| Sonya Firth (MDG Investment Case)    | John Smale (PacMISC Solomon Islands)      |
| Karen Ann Gray (PacMISC AAMI)        | Sophia Tsai (PacMISC AAMI)                |
| Andrew Hodge (MDG Investment Case)   | Susan Upham (HISHub)                      |
| Nicola Hodge (PT HIS Hub)            | Suzanne Welsh (PacMISC)                   |
| Melanie Holesgrove (PacMISC)         |   |

### Administrative/Management staff

Alison Manley

### Adjunct Appointments

|   |  |
|---|--|
| Nicolas Anstey, Honorary Professor            | William Parks, Adjunct Associate Professor   |
| Stuart Blacksell, Adjunct Associate Professor | Ian Riley, Professor Emeritus  |
| Joan Bryan, Adjunct Associate Professor       | Andreas Suhrbier, Conjoint Associate<br>Professor  |
| Jonathan Carapetis, Adjunct Professor         | Marcel Tanner, Honorary Professor  |
| Qin Cheng, Adjunct Associate Professor        | Richard Taylor, Honorary Professor   |
| Robert Cooper, Adjunct Associate Professor    | Jane Thomason Adjunct Associate Professor  |
| Richard Feachem, Honorary Professor           | Peter Upcroft, Conjoint Associate Professor -<br>Jacqueline Upcroft Conjoint Senior Lecturer – |
| Michael Good, Conjoint Professor              | Patricia Valery, Conjoint Lecturer   |
| Adele Green, Conjoint Professor               | David Whiteman, Adjunct Associate Professor  |
| Dean Jamison, Honorary Professor              |  |
| Donald McManus, Conjoint Professor            |  |
| Denis Moss, Conjoint Professor                |  |
| Christopher Murray, Honorary Professor        |  |

### Casual Appointments

|                  |                    |
|------------------|--------------------|
| Suzanne Campbell | Matthew O'Sullivan |
| Carla Abou Zahr  | Shalomie Shadrach  |
| Asmat Malik      | Linda Skiller      |
| Lene Mikkelsen   | Leanne Williams    |

## Annex 2

### Collaborations

| Unit  | Countries   | SPH/UQ collaborations  | National and International collaborations  |
|-------|---|--|--|
| APMEN | Bhutan<br>Brunei<br>China<br>Democratic People's Republic of Korea (DPRK)<br>India<br>Indonesia<br>Malaysia<br>Nepal<br>Philippines<br>Republic of Korea (ROK)<br>Solomon Islands<br>Sri Lanka<br>Thailand<br>Vanuatu.<br>Vietnam | Infectious Disease Epidemiology Unit, UQ<br>PacMISC<br>HIS Hub | <ul style="list-style-type: none"> <li>• AAMI</li> <li>• ACTMalaria</li> <li>• Armed Forces Research Institute for Medical Science (AFRIMS)</li> <li>• AusAID</li> <li>• Australian Army Malaria Institute (AAMI)</li> <li>• Bill and Melinda Gates Foundation</li> <li>• Burnet Institute, Melbourne, Australia</li> <li>• Centers for Disease Control, Atlanta</li> <li>• Eijkman-Oxford Clinical Research Unit, Indonesia</li> <li>• Institute of Medical Research, Papua New Guinea</li> <li>• Karolinska Institutet</li> <li>• Kenan Institute</li> <li>• London School of Hygiene &amp; Tropical Medicine</li> <li>• Mahidol Vivax Research Centre</li> <li>• Malaria Atlas Project</li> <li>• Malaria Consortium</li> <li>• MEG, Malaria Elimination Group</li> <li>• Medicines for Malaria Venture (MMV)</li> <li>• Menzies School of Health Research</li> <li>• Pasteur Institute</li> <li>• QIMR</li> <li>• Research Institute for Tropical Medicine (RITM), Philippines</li> <li>• Sarawak Malaria Centre</li> <li>• University of Melbourne (Nossal Institute for Global Health)</li> <li>• University of Queensland (School of Population Health)</li> <li>• UNICEF</li> <li>• World Health Organization (SEARO, WPRO, GMP)</li> <li>• USAID, Regional Development Mission/ Asia</li> <li>• WorldWide Antimalarial Resistance Network (WWARN)</li> <li>• WHO partners <ul style="list-style-type: none"> <li>* SEARO Malaria</li> <li>* WPRO Malaria</li> </ul> </li> </ul> |

| Unit                                     | Countries  | SPH/UQ collaborations  | National and International collaborations   |
|--|--|--|---|
|  |  |  | <ul style="list-style-type: none"> <li>• Roll Back Malaria (RBM)</li> </ul>   |
| Health Metrics and Mortality Unit (HMMU) | Fiji<br>Indonesia<br>Kiribati<br>Nauru<br>Oman<br>South Africa<br>Thailand<br>Tonga<br>Vietnam   | BODCE<br>Head of School Office<br>HIS Hub  | <ul style="list-style-type: none"> <li>• AusAID</li> <li>• Health Metrics Network</li> <li>• SPC</li> <li>• UNAIDS</li> <li>• UNSW</li> <li>• WHO</li> <li>• WPRO</li> </ul>  |
| HIS Hub                                  | American Samoa<br>Bangladesh<br>Cook Islands<br>Federated States of Micronesia<br>Fiji<br>Guam<br>Kiribati<br>Marshall Islands<br>Nauru<br>New Caledonia<br>Niue<br>Northern Marianas<br>Noumea<br>Palau<br>Papua New Guinea<br>Samoa<br>Solomon Islands<br>Sri Lanka<br>The Philippines<br>Tokelau<br>Tonga<br>Tuvalu<br>Vanuatu<br>Wallis and Futuna | ADG Health Policy<br>ADG Epidemiology and Statistics<br>MDG Investment case<br>One Health<br>PacMISC<br>VINE | <ul style="list-style-type: none"> <li>• AusAID</li> <li>• Burnett Institute</li> <li>• Fiji National University</li> <li>• Health Metrics Network</li> <li>• IFHIMMA</li> <li>• Institute of Child Health, Melbourne</li> <li>• Institute for Health Metrics and Evaluation</li> <li>• Menzies School of Health Research</li> <li>• Nossal Institute</li> <li>• Pacific Health Information Network (PHIN)</li> <li>• PHIN</li> <li>• PIHOA</li> <li>• PSHON</li> <li>• SEARO</li> <li>• Secretariat of Pacific Communities</li> <li>• UNSW School of Public Health</li> <li>• WHO</li> <li>• WPRO</li> </ul> |
| MDG Investment Case                      | India<br>Indonesia<br>Nepal<br>Papua New Guinea<br>The Philippines   | BODCE<br>Head of School Office<br>HIS Hub<br>VINE  | <ul style="list-style-type: none"> <li>• ADB</li> <li>• AusAID</li> <li>• Bill and Melinda Gates Foundation</li> <li>• Burnett Institute</li> <li>• IHME</li> <li>• Maternal, Newborn and Child Health Network for Asia and the Pacific</li> <li>• Nossal Institute</li> <li>• Partnership for Maternal, Newborn and Child Health (PMNCH)</li> <li>• UNFPA</li> <li>• UNICEF</li> </ul>   |

| Unit                                     | Countries                  | SPH/UQ collaborations   | National and International collaborations   |
|--|----------------------------|---|---|
|  |                            |   | <ul style="list-style-type: none"> <li>World Bank</li> </ul>  |
| Roadmaps for optimising RMNCH in SE Asia | SE Asia                    | Head of School Office<br>MDG Investment Case Team   | <ul style="list-style-type: none"> <li>ADB</li> <li>Nossal Institute</li> <li>WHO (PMNCH)</li> </ul>  |
| One Health                               | Laos                       | Infectious Disease Epidemiology Unit, SPH<br>BODCE<br>School of Economics UQ<br>Veterinary School, UQ | <ul style="list-style-type: none"> <li>AAMI</li> <li>Murdoch University</li> <li>QIMR</li> <li>Swiss Tropical Public health</li> </ul>  |
| PacMISC                                  | Vanuatu<br>Solomon Islands | APMEN<br>HIS Hub<br>Infectious Disease Epidemiology Unit<br>ADG Epidemiology and Biostatistics        | <ul style="list-style-type: none"> <li>AAMI</li> <li>AusAID</li> <li>Burnett Institute</li> <li>Global Health Group UC-SF</li> <li>Liverpool School of Tropical Medicine</li> <li>Ministry of Health Solomon Islands</li> <li>Ministry of Health Vanuatu</li> <li>Nossal Institute</li> <li>QIMR</li> <li>Swiss Tropical and Public Health Institute</li> <li>WPRO</li> </ul> |
| VINE                                     | Vietnam                    | BODCE<br>HMMU   | <ul style="list-style-type: none"> <li>AusAID</li> <li>Atlantic Philanthropies</li> <li>Hanoi School of Public Health</li> <li>Health Strategy and Policy Institute (HSPI) (Ministry of Health, Vietnam)</li> </ul>   |
| Other                                    |                            |   | <ul style="list-style-type: none"> <li>ICDDR-B, Dhaka, Bangladesh</li> <li>Mahidol University, Bangkok, Thailand</li> <li>Research Institute for Tropical Medicine, Manila, Philippines</li> <li>School of Public Health and University of Indonesia</li> <li>INDEPTH network, Accra, Ghana</li> </ul>  |

# Annex 3

## Publications 2011

### Published

#### Journal Articles

Andersen F, Douglas NM, Bustos D, Galappaththy G, Qi G, Hsiang MS, Kusriastuti R, Mendis K, Taleo G, **Whittaker M**, Price RN, von Seidlein L. Trends in malaria research in 11 Asian Pacific countries: an analysis of peer-reviewed publications over two decades. *Malaria Journal*. [Article]. 2011 May;10:7.

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Brown RPC, **Jimenez EV**. Subjectively-assessed Welfare and International Remittances: Evidence from Tonga. *Journal of Development Studies*. [Article]. 2011 Jun;47(6):829-45.

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- Douglas P, **Hill P**. Managing infants who cry excessively in the first few months of life. *BMJ*. 2011 2011-12-15 00:00:00;343.
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- Douglas PS, **Hill PS**, Brodribb W. The unsettled baby: how complexity science helps. *Archives of Disease in Childhood*. 2011; epub ahead of print.
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- Durham J**, Tan BK, White R. Utilizing mixed research methods to develop a quantitative assessment tool: An example from explosive remnants of a war clearance program. *Journal of Mixed Methods Research*. 2011;5(3):212-26.
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Pham B, Hall W, **Hill P**. Indirect evidence of the contribution of prenatal sex selection practices to the high sex ratio at birth in Vietnam. *Journal of Population Research*. 2011; epub ahead of print:1-7.

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**Rao C**, Kosen S, Bisara D, Usman Y, Adair T, Djaja S, Suhardi S, Soemantri S, **Lopez AD**. Tuberculosis mortality differentials in Indonesia during 2007-2008: evidence for health policy and monitoring. *The International Journal of Tuberculosis and Lung Disease*. 2011;15(12):1608-14.

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**Wijesinghe R**. and Ananda. R. Wickremasinghe. Physical, Psychological, and Social Aspects of



## Books and Monographs

**Aung, E., Whittaker, M** 2011 Preparing Routine Health Information Systems for Immediate Health Responses To Natural Disasters HISHub Working paper

Birdsall K and **Hill P.** (2011) Making childbirth a village affair: How 'Desa Siaga' improves the health of mothers and babies in Indonesia. German Health Practice Collection: Bonn.

Davies, P., **Aumua, A., Hodge, N., Whittaker, M.** 2011 Senior decision makers in health: Identifying and understanding their information needs HISHub Working Paper series

**Hill PS.** (2011) The Alignment Dialogue: GAVI and its Engagement with National Governments in Health Systems Strengthening. In: Rushton S and Williams O (eds.). Partnerships and Foundations in Global Health Governance. Palgrave Macmillan: Basingstoke. Pp. 76-101.

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Jayasuriya, R., Razee, H., Bretnall, L., **Whittaker, M.,** Yap, L., and Chakumai, K. (2011) Voices from the field: factors influencing Rural Health Worker performance in Papua New Guinea. The University of New South Wales, Sydney, Australia. ISBN 978-0-7334-3039-8

Lewis, D., **Hodge, N., Whittaker M** 2011 Understanding the Role of Technology in Health Information Systems His Hub Working Paper Series

**Rampatige R, Riley I,** Gamage S, Poi an W, **Upham S,** (2011) Handbook for doctors on cause of death certification, Health Information Systems Knowledge Hub, University of Queensland, Brisbane 2011 (waiting for ISBN TAB) Brisbane 2011

Health Information Systems Knowledge hub (2011,) Strengthening practice and systems in civil registration and vital statistics, University of Queensland, Brisbane 2011.

## Conference and Seminar Presentations

**Hill PS.** (2011) That Medical Circumcision be made available to all men in PNG. (Debate captain) *Joint National Policy Forum on Male Circumcision for HIV Prevention in Papua New Guinea,* Gateway Hotel, Port Moresby, PNG 20-21 November, 2011.

Pavignani E and **Hill PS.** (2011) Health Systems in Failed States *ISA Asia-Pacific Regional Section Inaugural Conference 2011* 'Regions, States and Peoples in a World of Many Worlds'. Brisbane, Australia 29-30 September, 2011.

**Hill PS,** Vermeiren P, Miti K, Ooms G and van Damme W. (2011) Global Health Initiatives and Health Systems Strengthening: Tracking the Discourses. *International Studies Association Annual Meeting,* Montreal, Canada, 15-19 March 2011.

**Rampatige R,** Quality issues related to reporting cause of death and ICD mortality coding

practices, presentation at UNESCAP meeting on improving Civil registration and Vital statistics systems in Asia Pacific region, Bangkok April 2011.

**Rampatige R**, Improving causes of death reporting and mortality coding; guidance for countries Civil registration and vital registration systems, presentation at a joint meeting hosted by World Health organization and the health metrics network to review the resource kit on Civil Registration and vital statistics systems , Geneva 2011.

**Rampatige R**, Improving causes of death reporting and mortality coding; guidance for countries Civil registration and vital registration systems, Presentation at the Category 1 Pacific Vital statistics workshop, jointly hosted by secretariat of Pacific Communities and University of Queensland. Suva September 2011

**Rampatige R** (2011), Promoting routine validation of causes of death in countries. Presentation at the School of Population Health, University of Queensland seminar series, Brisbane, November 2011

**Rampatige R**, Wainiqolo I (2011), International standard guideline on medical certification of cause of death; Presentation at the joint meeting organized by the Tonga Ministry of Health, Tongan Medical association, University of Queensland and Fiji National University, Tonga tapu, November 2011.

**Rampatige R**. Verbal Autopsy method to derive cause of death rural china (2011): Presentation at the joint initiative of University of Queensland and the George Institute China, Beijing December 2011

**Whittaker, M** 2011 With us Not for us: Youth and Development The Oaktree Foundation Official 2011 Launch :Brisbane, March 23, 2011

**Whittaker, M** 2011 Refugee and Asylum Seeker Health: Controversies and Possibilities Public Health Association of Australia Conference Sept 2011

**Whittaker, M and Atkinson, J** 2011 Power in the hands of the people: the human face of malaria programmes ACTM/QTHA Annual Conference Cairns, 16 -17 July 2011

**Whittaker, M** 2011 Opportunities for collaboration and partnership on Global health Issues SEAMEO-TropMed 50<sup>th</sup> Governing Board Meeting, Bangkok, September 8-9<sup>th</sup>,

**Whittaker, M** 2011 MDGs and development – what difference can they make? Queensland Youth Summit St Lucia 25 March

**Whittaker, M** 2011 Stories from the Field : MDG 3 Gender UNMDG Series MBBS July 22,

**Whittaker, M** 2011 Stepping Up and Out: Universities meeting the social responsibility for sustainable development Global Health Symposium University of Auckland 17 Nov

**Whittaker, M** 2011 Family Planning – From policy to implementation Lessons from international experience paper to Chinese Family Planning Association Delegation April

**Whittaker, M** 2011 Will One Health make a difference to the achievement of global health goals? Paper to ENTOX seminar September

**Whittaker M 2011** Malaria Australian Medical Student Association's Global Health Conference Sydney July

**Wijesinghe R.** Quality of Life in filarial lymphoedema patients in Colombo, Sri Lanka. 7<sup>th</sup> European Congress on Tropical Medicine and International Health, Barcelona, Spain 3<sup>rd</sup>- 6<sup>th</sup> October 2011

### **Publications under review**

**Alderman K,** Turner L, Tong S, Floods and human health: A systematic review. *Environment International* (Under Review)

**Alderman K,** Connell D, Tong S, Turner L. Motivators and barriers to the assessment of climate-change related health risk using an environmental health impact assessment framework. *MBC Public Health* (Under review)

**Atkinson J, Johnson M-L, Wijesinghe R,** Bobogare A, Losi L, O'Sullivan M, Yamaguchi Y, Kenilorea G, Valley A, Cheng Q, Ebringer A, **Bain L, Gray K,** Harris I, **Whittaker M,** Reid H, Clements A, **Shanks GD** Surveillance as an intervention differentially applied across the spectrum of malaria endemicity: Implications for malaria elimination in Isabel Province, Solomon Islands. (Under review *Malaria Journal*)

Brown R, Connell J, **Jimenez-Soto E,** Migration and Social Protection in the South Pacific: Remittances, Poverty and Development in Fiji and Tonga, *Population, Space* (Under review)

### **ACCEPTED FOR PUBLICATION**

**Aung, E., Whittaker, M** Preparing routine health information systems for immediate health responses to disasters *Health policy and planning*

**Choudhury, A., Whittaker, M Racloz, V** "Conducting Socioeconomic Evaluations in Information Constrained Settings: The Impacts of Pig-associated Zoonoses in Lao PDR" to *EcoHealth*. Manuscript ID ECH-11-0108

Razee, H.; **Whittaker, M.,** Jayasuriya, R., Yap, L., Brentnall, B 2011 Listening to the rural health workers in Papua New Guinea - the social factors that influence their to work *Social Science and Medicine*

**Walker S, Rampatige R, Wainiqolo, Aumua A,** An accessible method for teaching doctors about death certification: Accepted for publication by *Health Information management journal*, Australia

### **Selected Reports & Other Publications**

Brolan CE and **Hill PS.** (2011) Final Report, Evidence for Health Policy in Vietnam. Brisbane: School of Population Health.

PACMISC 2011 Six monthly progress reports to AusAID

**APMEN** Annual Report 2011 to APMEN December

**APMEN** Annual Workplan 2012 to APMEN December

***Atlas of the Asia Pacific Malaria Elimination Network***

**APMEN** Newsletter

- **Issue Five, December 2011**
- **Issue Four, August/September 2011**
- **Issue Three (special vivax edition), July 2011**
- **Issue Two, July 2011**
- **Issue One, April 2011**

**Bhutan Cross Border Report - May, 2011**

**Radio broadcasts/TV interviews**

Interview with Prof. Graham Brown, APMEN Board member **Malaria still a major health issue in some Pacific countries**

<http://www.radioaustralia.net.au/pacbeat/stories/201102/s3151118.htm>

Newsline TV Article on the Health Care in Danger Conference 7<sup>th</sup> November 2011 "**Protection Boost**". <http://australianetwork.com/newsline/archives.htm>

# Annex 4

## Grants 2011

### New

**Atkinson, J-A., Russell, T.**, Papua New Guinea / Global Fund (PNG/GFATM) Rd 8 Malaria Control Program: Operational Research Fund 2011

**Eliana Jimenez-Soto, Kasia Alderman, Andrew Hodge**, Alison Morgan, Prathna Dayal, David Hipgrave, Ian Anderson, Development of Framework for integrated implementation of the Global Strategy for Women's and Children's Health and regional initiatives in Asia WHO (PMNCH) (Short Name: Roadmaps for optimizing RMNCH in SE Asia) US\$95,000 Dec 2011-Jun 2012.

### Continuing

Fitzgerald, L., Vallely, A., Lambert, S., Canuto, C. **Whittaker, M** 2009 – 2-11 Life History Project on sexual health risk amongst sister girls, and youth in Torres Straits and TSI communities \$A40,000 Qld health

**Hill, P.**, Alan Lopez, Theo Vos, Chris Doran, Chalapati Rao Developing the Evidence Base for Health Policy, Vietnam. Atlantic Philanthropies A\$ 3,000,000 2006-2011

Jayasuriya, R., **Whittaker, M.**, Glastonbury, I., Razee, H., Yap, L., Sairere, J., Martineu, T Jayasuriya and Whittaker Health worker performance improvement: evidence from an intervention in Papua New Guinea AusAID (ADRA) \$A 623,190 (5 years)

Kazura, J., Ivo Mueller, Tom Burkot, Robert Cooper, Dennis Shanks, Pete Zimmerman, C King, J Aponte, **Maxine Whittaker** Research to control and eliminate malaria in SE Asia and SW Pacific National Institutes of Health US\$9.8 million 2011-2016

Lopez, A., **Eliana Jimenez**, Kim Mulholland, Wendy Holmes, Sophie La Vincente, Peter Deutschman, Ahmer Akhtar, The investment case for closing the gap: Financing equitable progress towards the Millennium Development Goals 4 and 5 AusAID/Bill and Melinda Gates Foundation (\$2 898 481) and AusAID (\$1 490 000). 2008-2011

Lopez, A., **Ian Riley**, Chalapati Rao, Measuring population health status in developing countries, Bill and Melinda Gates Foundation, 2005-2010, \$4 000 000.

Lopez, A., **Whittaker, M** Pacific Malaria Initiative Resource Centre (PacMISC) AusAID 2008-2011 (extension to June 2012) A\$ 11,150,710

Lopez, A., Hort, K., **Whittaker, M.**, Annear, P Asia Pacific Observatory Research Hub WPRO US\$ 250,000 2012-2013

Vallely, A., Angela Kelly, Lisa Fitzgerald, Peter Siba, **Maxine Whittaker**, John Kaldor Qualitative longitudinal study to investigate masculinity, sexuality and agency among male youth in Papua New Guinea AusAID/National AIDS Council \$A1,287,000 Awarded 2009. Duration 2010-2013

**Whittaker, M , Choudhury**, A ACIAR Project AH2006/161 Pig Zoonoses Project in Laos PDR Murdoch University / ACIAR 2010/11

**Whittaker, M** AusAID Asia Pacific Malaria Elimination network AusAID \$6.1 million Awarded 2009, Duration 2009- 2013

**Whittaker, M AusAID** Asia Pacific Malaria Elimination network AusAID \$6.1 million Awarded 2009, Duration 2009- 2013

### **Applications Under review**

Le Vu Anh , Tran Thi Tuyet Hanh , Nguyen Ngoc Bich , Nguyen Thanh Ha; **Vanessa Racloz** , Michael Dunne, Fiona Harden, **Adnan Choudhury**, **Maxine Whittaker** Applying A One ch To Reduce The Risks Of Dioxin Exposure For Local Residents Living In Dioxin Hot Spots In Vietnam Direct Aid Program (DAP), part of the Department for Foreign Affairs and Trade Health Approach To Reduce The Risks Of Dioxin Exposure For Local Residents Living In Dioxin Hot Spots In Vietnam \$150,000

Schofield, L. McBride, J., **Whittaker**, M., Clements, A., **Aaskov, J.**, Gasser, R., Mills, P New, Emerging and Re-emerging Infectious Disease Surveillance (Nereids) in the Torres Strait 2012-2105 Smart Futures Fund, Queensland Department of Employment, Economic Development and Innovation A\$ 1,600,000

**Whittaker, M., Racloz,V., Salton, M** Maternal health and zoonotic illnesses: addressing the double burden of neglect UBS Optimus Foundation \$US126,000 2012-2013