

New Pro Vice-Chancellor

As of November 2011 Professor Brendan Crotty has taken up the role of Pro Vice-Chancellor of Deakin's Faculty of Health.

Prior to this appointment, Professor Crotty held the position of Foundation Head of the Deakin School of Medicine from 2006. In this role he was responsible for the development, accreditation and delivery of the Deakin medical course, which is designed to equip graduates with the skills needed to practise in rural and regional Australia. He oversaw the establishment of partnerships with regional health services and the development of an active research program within the School of Medicine and its partner institutions.

Professor Crotty graduated from the University of Melbourne in 1979 and then trained in gastroenterology at St Vincent's and Alfred Hospitals in Melbourne. After completing a research doctorate he worked for two years in Oxford in the United Kingdom, where he developed a research and clinical interest in inflammatory bowel disease. He returned to work in the University of Melbourne Department of Medicine at the Heidelberg Repatriation Hospital in 1991. In 1998 he was appointed Clinical Dean of Austin Health/Northern Health Clinical School.

Professor Crotty has extensive experience in postgraduate medical education. He is Chair of the Board of the Postgraduate Medical Council of Victoria, the body responsible for training programs for all first and second year medical graduates



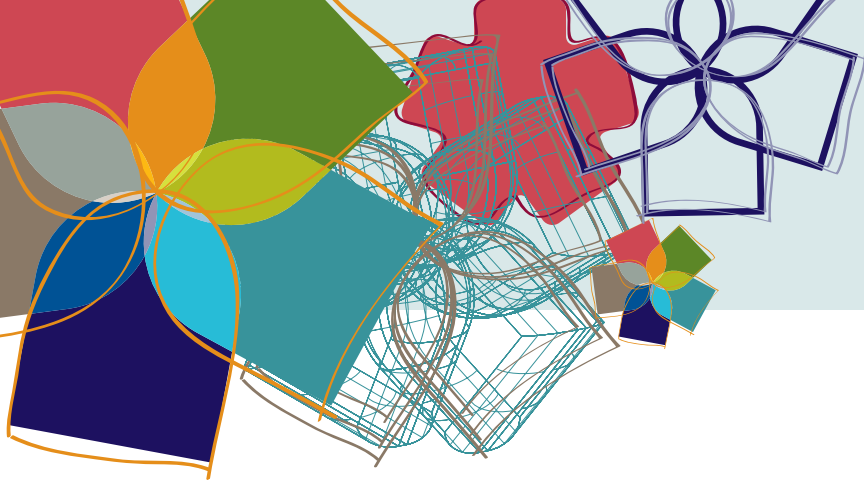
working in Victoria. He has recently completed a two-year term as Chair of the Confederation of Postgraduate Medical Education Councils, the peak body for early postgraduate medical training in Australia and New Zealand. He served as Secretary of the Royal Australasian College of Physicians Committee for Examinations from 2003 to 2007.

As leader of one of Australia's premier multidisciplinary health faculties, he is committed to delivery of integrated health courses and collaborative research programs that address the challenges facing the Australian healthcare system.

The Faculty is delighted to have Professor Crotty lead us forward as we strive to achieve even greater things in 2012. We would like to extend our sincere thanks to Professor Maxine Duke, Head of the School of Nursing and Midwifery, who lead the Faculty as Acting Pro Vice-Chancellor from July until October.

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2011 Leadership in Nursing and Midwifery Awards

The 2011 Leadership in Nursing and Midwifery Awards were held on Wednesday 26 October in the Olympic Room at the Melbourne Cricket Ground. Presented by Deakin University's School of Nursing and Midwifery and Health Super, the annual Awards recognise inspiring nurses and midwives who have contributed to the profession and benefited the public by improving health service delivery, capacity and/or policy.

The awards dinner, which was hosted by ABC Radio announcer Tonya Roberts, showcased the achievements of the short-listed applicants, culminating in the announcement of the 2011 winners. The audience heard from Health Super Chief Operations Officer Ms Carol McKelson-Timmins, Deakin Vice-Chancellor Professor Jane den Hollander, and Head of the School of Nursing and Midwifery Professor Maxine Duke about the significance of the awards and the work of nurses and Midwives in Australia.

A particular highlight of the night was special guest speaker Professor Ian Hickie, Executive Director, Brain & Mind Research Institute, University of Sydney. Professor Hickie delighted the audience with his fast-paced, witty and endearing speech, a highlight of which was the story of his 82 year old father who has just graduated from his latest degree – proof that an active and engaged mind fares better.

Vanessa Watkins, Clinical Midwife Consultant with Eastern Health, won the \$20 000 major prize. The award recognises Ms Watkins' outstanding leadership and dedication to midwifery through a project that enhanced maternity care at Eastern Health.



Ms Carol McKelson-Timmins, Ms Vanessa Watkins and Professor Maxine Duke

Two award finalists each also received \$6000:

- Martin Keogh, Alfred Hospital, for excellence in nursing and midwifery leadership in a metropolitan health care environment
- Jo Bourke, Barwon Health, for excellence in nursing and midwifery leadership in a regional/rural health care environment.

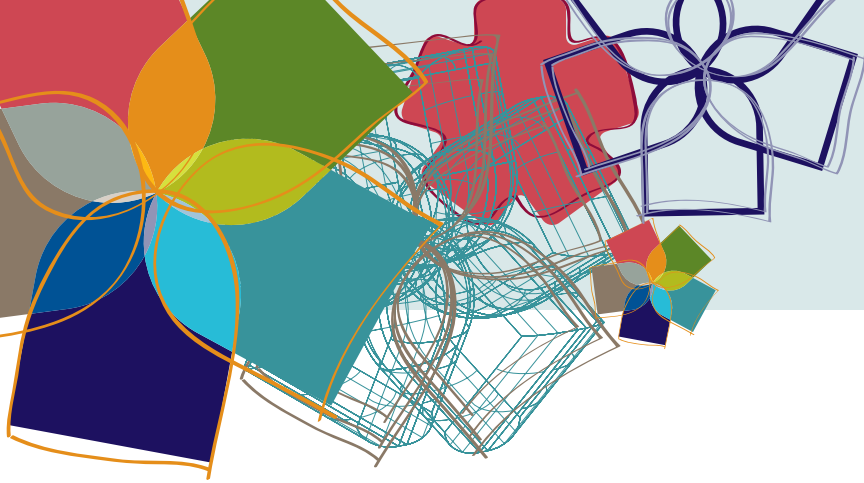
Professor Maxine Duke, Head of Deakin's School of Nursing and Midwifery said, 'Ms Watkins exemplifies the spirit of the awards and is a role model for midwifery leadership not only within Eastern Health but for all in the profession.'

'The Eastern Health Expected Pathways of Care for Pregnant Women project Ms

Watkins implemented has broken through the hierarchical barriers often experienced between midwives and clinicians to create a model of collaboration that has resulted in improved care of women during and after pregnancy.'

'The model is based on mutual respect and understanding of the professional roles of each clinician group involved in caring for pregnant women and is being held up as blueprint of practice by other health services in Australia.'

'Ms Watkins is to be commended for her tenacity in bringing about the changes achieved at Eastern Health that has seen the role of the midwife embedded into clinical care within the hospital!'



Deakin University wins the 2011 National Health Fusion Team Challenge

On Friday 26 August an interprofessional team of Deakin students won the National Health Fusion Team Challenge, hosted by the University of Queensland in Brisbane. 2011 is the first time Deakin has entered a team in this national event, and the Faculty of Health and the broader University are thrilled with the success our students have had.

The Health Fusion Team Challenge (HFTC) is a national extracurricular competition between mixed interprofessional teams of health students nearing the end of their studies. The event provides students with the opportunity to demonstrate expertise in teamwork and collaboration as they develop a management plan for a client with complex health needs. The highlight of each HFTC is the public competition where student teams come together to present their management plans to a live audience and panel of expert judges.

The 2011 event saw Deakin compete with teams from Flinders University, Griffith University, Monash University, Queensland University of Technology, the University of Melbourne, the University of Queensland and the University of Sydney.

Deakin's winning team was made up of students from across the Faculty of Health: Marguerite Conley (Master of Dietetics), Emily Dalton (Bachelor of Nursing), Paul Dodemaide (Bachelor of Social Work), Radhika Sheorey (Bachelor of Medicine Bachelor of Surgery), Penelope Watts (Master of Psychology (Clinical)), Vivian Winkler (Bachelor of Occupational Therapy).

The students were tasked with compiling and presenting a management plan for a 23 year old man with an acquired brain injury sustained in a motor vehicle accident. Ten months after the



Paul Dodemaide, Margie Conley, Vivian Winkler, Penny Watts, Radhika Sheorey and Emily Dalton

accident the man was left with memory loss, epilepsy and reduced motor control, which was leading to falls. He also had increased emotional outbursts, frustration, and lived in a very complex family situation.

The students had a four-week preparation period, during which they met on eLive and in person, and did their own research to come up with a management package for the patient. Health practitioners in the community and several Deakin staff acted as mentors during this period.

On the day of the National Health Fusion Team Challenge, after participating in a series of heats throughout the day, each team presented their management plan in front of a live audience and panel of expert judges. At the completion of all presentations teams were asked to respond to a series of timed extension questions or exercises designed to test their teamwork skills under pressure. During this process they were questioned by the judging panel about the case and the teamwork processes they used.

The students' presentation was extremely professional, well researched and thorough. They were fantastic ambassadors for Deakin University not only in the final event, but also through the course of the entire day. They put in a great deal of preparation before the event and approached it with a high level of enthusiasm, and this was evident in their teamwork skills and the quality of their presentation.

The win highlights the efforts Deakin's Interprofessional Education Steering Committee and the Interprofessional Education Coordinator, Mrs Sherryn Evans, have put into establishing an Interprofessional Education program at Deakin over the past three years. Congratulations also to Mrs Catherine Ward, Lecturer in Interprofessional Collaboration in Healthcare, who helped lead the students to success by coordinating Deakin's efforts in the Health Fusion Team Challenge.

Deakin celebrates NHMRC success

Deakin University and the Faculty of Health have recently had great success in winning a number of highly sought-after and prestigious grants and awards from the National Health and Medical Research Council (NHMRC).

Deakin's success in the 2012 round of grants is a terrific improvement on our success in 2011. Our project grants have increased from an 8% success rate in 2011 to a 29% success rate in 2012, with a 433% increase in funding. We are also celebrating a 100% success rate in Research Fellowships, and a 40% success rate in both Early Career Fellowships and Career Development Fellowships.

The Faculty of Health's School of Medicine, and associated research groups, won 11 of the 12 NHMRC Project Grants awarded to Deakin:

- Professor Michael Berk – School of

Medicine, Faculty of Health, four projects.

- Associate Professor Sue Brumby – School of Medicine, Faculty of Health / National Centre for Farmer Health.
- Dr Tania de Koning-Ward – School of Medicine, Faculty of Health / Centre for Molecular and Medical Research.
- Dr Felice Jacka – School of Medicine, Faculty of Health.
- Professor Johnson Mak – School of Medicine, Faculty of Health / Centre for Molecular and Medical Research, two projects.
- Dr Sean McGee – School of Medicine, Faculty of Health / Centre for Molecular and Medical Research, two projects.

A number of staff in the Faculty have also been successful in securing highly competitive NHMRC fellowships for 2012.

Congratulations to the following recipients:

Early Career Fellowships

- Ms Cathy Mihalopoulos – Population Health Strategic Research Centre
- Dr Lisa Gold – Population Health Strategic Research Centre

Career Development Fellowships

- Dr Sean McGee – School of Medicine, Faculty of Health / Centre for Molecular and Medical Research
- Professor Jo Salmon, School of Exercise and Nutrition Sciences, Faculty of Health / Centre for Physical Activity and Nutrition Research

Research Fellowship

- Professor Jo Salmon – School of Exercise and Nutrition Sciences, Faculty of Health / Centre for Physical Activity and Nutrition Research

Clinical exercise physiology services at Deakin

The School of Exercise and Nutrition Sciences has recently opened its new facility for clinical exercise physiology services: Clinical Exercise Learning Centre (CELC). The Centre is staffed by academics who are Accredited Exercise Physiologists (AEPs), and specialises in providing exercise services for people living with, or at risk of, chronic medical illnesses, injuries or disabilities.

This new centre was developed to complement the new Master of Clinical Exercise Physiology, and provides opportunities to students enrolled in the course to work with AEPs and the patients they service. The students gain a valuable opportunity for learning and application

of clinical knowledge, but also provide an added benefit for the patients they work with.

The Clinical Exercise Learning Centre provides services to clients in a one-to-one or group environment. Two such groups are the Cardio Club, specifically designed for individuals suffering from cardio respiratory related disease; and Sugar Beat, for patients with Type 2 diabetes or pre-diabetes. These group programs offer individualised exercise in a friendly and fun environment.

The CELC accepts referrals of patients with health concerns in the key pathology areas: cardiorespiratory, metabolic,

musculoskeletal, neurological, mental health and cancers. Referrals are welcome through Medicare, WorkSafe, TAC, Department of Veteran Affairs, and private clients.

The clinical academic staff at Deakin University Clinical Exercise Learning Centre would like to invite people who are currently living with, or at risk of, chronic medical illnesses, injuries or disabilities to contact us if they are interested in this service.

For more information

Clinical Exercise Learning Centre
9244 5442
celc@deakin.edu.au

Research snapshots

Preventing adolescent mental health problems

Deakin University health researchers led by Dr Felice Jacka, of the School of Medicine, have found that poor diet may be a risk factor for mental health problems during adolescence.

In a study of 3000 Australian adolescents, published in the journal *PLoS One*, the Deakin researchers revealed that diet quality predicted mental health in adolescents over time, suggesting that it might be possible to use diet to prevent mental health problems developing in the first place.

'We found that diet quality and mental health were linked, with healthier diets associated with better mental health in 2005 and also predicting better mental health in 2007. This relationship even persisted when mental health at the starting point was taken into account,' said Dr Jacka who is from Deakin's Barwon Psychiatric Research Unit, based at Barwon Health.

'Three quarters of psychiatric illnesses begin before the age of 25 and the average age that depressive illnesses

start is only 13 years old. Once an individual experiences depression, they are more likely to experience it again. We believe that diet may be an important environmental factor influencing the development of mental health problems during adolescence, when rapid growth makes good nutrition particularly important.'

'This new evidence suggests that it might be possible to prevent some cases of depression developing in the first place by ensuring that the diets of adolescents are sufficiently nutritious.'

For the study, the researchers analysed data collected from over 3000 Australian adolescents in 2005 and again in 2007.

Participants filled in detailed questionnaires about their normal diets and their psychological symptoms. Other factors that may be associated with both diet quality and mental health, such as the socioeconomic status of the family, age, gender, physical activity levels, dieting behaviours and weight, were also taken into account.

'Importantly, we found that changes in diet quality over time were linked to changes in mental health,' Dr Jacka said.

'On average, adolescents whose diets improved over the two year period also experienced an improvement in mental health over that time, while those adolescents whose dietary quality deteriorated over a two year period experienced an associated deterioration in mental health. This wasn't explained by changes in physical activity levels or weight.'

The researchers also noted that the relationship didn't seem to work the other way.

'We also examined whether the relationships that we saw could be explained by 'reverse causality'; that is, was diet quality in adolescents a response to mental health symptoms rather than the other way around? We tested this idea, but did not find any evidence that this was the case,' Dr Jacka said.

Reversing obesity needs global action

Obesity has been on the rise for some 40 years and will continue to rise for 40 more if governments around the world do not take decisive, policy-driven action, according to Deakin University obesity experts.

Researchers with Deakin's WHO Collaborating Centre for Obesity Prevention Alfred Deakin Professor Boyd

Swinburn and Dr Gary Sacks, and their colleagues, have mapped the rising obesity epidemic over the past 40 years for the first of four papers to be published in *The Lancet Obesity Series*, ahead of the first-ever UN high-level meeting on non-communicable diseases in September.

They point to policy-led solutions as the most effective way to reverse obesity.

'Governments have largely abdicated the responsibility for addressing obesity to individuals, the private sector, and non-governmental organisations,' the researchers argue. 'Yet the obesity epidemic will not be reversed without government leadership, regulation, and investment in programs, monitoring, and research.'

Continued over page

Research snapshots

Reversing obesity needs global action...continued

The researchers pinpoint the obesity epidemic as beginning in most high-income countries in the 1970s and 1980s.

'In the first half of the 20th century the population was exercising less due to increased mechanisation and motorisation. But they were also eating correspondingly less, and that kept the obesity prevalence low,' Dr Sacks said.

'In many high income countries, a flipping point seems to have occurred in the 1970s with the still very sedentary population now eating more due to the 'push effect' of more readily available, cheaper, high-calorie foods.

'Obesity is increasing in all countries, but rates vary widely between countries. In Australia, around 1 in 4 adult woman are obese, compared to only 1 in 20 in Japan and China, 1 in 10 in The Netherlands, 1 in 3 in the USA, and a staggering 7 in 10 in Tonga. In some regions, such as Western Australia, obesity has overtaken tobacco as the largest preventable cause of disease.

'Obesity is now also sweeping through low-income and middle-income countries, threatening their development and leaving many countries with a double burden of obesity-related chronic disease

in some people and malnourishment of others.'

Increased supply of cheap, tasty, energy-dense food, improved food distribution and more pervasive and persuasive food marketing are noted in The Lancet paper as the key drivers of the obesity epidemic.

'Obesity is the predictable result of people responding normally to these obesogenic environments,' Dr Sacks explained.

'Underlying all the main causes of obesity are the strong economic forces driving consumption and growth.

'While the policies that promote economic growth and free trade have many benefits, they are also contributing to the global crises of overconsumption, including both obesity and climate change.'

And while it might seem that reversing obesity is as simple as individuals taking charge of their own lives, the researchers point out that people have to negotiate a complex array of choices, with many decisions made subconsciously.

'The food industry is becoming ever more effective at promoting their products so that people are consuming excess energy without even realising it, so called 'passive

over-consumption'.

The researchers believe that support for individuals to counteract obesogenic environments will continue to be important, but the priority should be for policies to reverse the obesogenic nature of these environments.

As UN Member States gather in New York for the first ever UN High-Level Meeting on non-communicable diseases in September, the researchers believe the inexorable global rise of obesity will be the toughest challenge that they face.

'The UN is calling for heads of state to make this meeting a priority, and there is an opportunity for Australia to take the lead in this area through strong government support for this issue,' Dr Sacks said.

The Lancet Series aims to state the case for action on obesity: what is the size and nature of the problem, what is driving its global increase, what will the future obesity burden be under a business-as-usual scenario, and what action is needed to reverse the epidemic?