

## **JCU Faculty of Medicine, Health and Molecular Sciences response to the Joint Select Committee of Northern Australia**

### **6.2 Bringing Australia's strengths to Northern Australia**

*Develop world-class healthcare and biosecurity strengths, including research and training.*

#### **Northern Australia as a Hub for Educating the Regions Health Workforce**

There is substantial potential to capitalise on the groundswell of work being done around health and workforce in Northern Australia.

The Greater Northern Australia Regional Training Network (GNARTN), established to address clinical training across the Northern Territory, Northern Western Australia and North Queensland, has successfully brought together the key stakeholders in health workforce training in the north. In collaboration with James Cook University (JCU), this work has supported clinical placements and healthcare training across northern Australia.

The Faculty of Medicine, Health and Molecular Sciences (FMHMS) at JCU has a longstanding history of training the health workforce in and from the north. The curriculum of JCU has always been embedded in the north and its graduates have substantially increased the health workforce capacity of the region. JCU has well developed (long-standing) relationships with industry and community stakeholders across northern Australia, such as the Kimberley Aboriginal Medical Services Council, the Queensland Aboriginal and Islander Health Council and the Mount Isa Centre for Rural and Remote Health. These key linkages have supported Aboriginal Health Worker training developments, including the development of articulated pathways from industry-based training into university degrees.

An opportunity exists to build on these collaborative strengths to establish Northern Australia as an engine for health education, research and training. In particular, there remains an opportunity to expand current clinical training practice through a Northern Australia Clinical School providing a health service hub for training health professionals in the north. A Tropical Academic Health Centre, similar to the model proposed in the McKeon Review of Health and Medical Research, will create further synergies to drive to development of high quality health and workforce research.

There is significant potential for Northern Australia in the training of a health workforce, both for Australia and our Indo-Pacific neighbours. Globally, there is a current shortage of 4.3 million health professionals<sup>1</sup>. Many of our near neighbours remain without a sufficient workforce to meet the needs of their burgeoning populations. The availability of a qualified and comprehensive health workforce will be a critical determinant of health in our region in the coming decades. The health workforce required to meet the needs of the growing populations has yet to be fully considered for the substantial demographic and economic shifts occurring. On the one hand, growing urbanisation and the emerging middle class provide opportunities for health system development. However, focusing solely on the rising urban middle class would ignore the dire health issues of the rural regions and urban poor. To date, the scale of demand for health services in the Indo-Pacific economies has not been met. Northern Australia has significant expertise that could be harnessed for the provision of education and training services to the region.

There is a renewed global focus on the critical role of health systems and health workforce in underpinning sustainable development, security and economic growth. The United Nations adopted a resolution in December 2012 urging governments to move towards providing all people with access to affordable, quality health-care services – the goal of universal health coverage. Many of our near neighbours have committed to a universal health model. For this goal to be realised, countries will need to establish a strong, efficient health system that meets the regions priority health needs, delivered by a sufficient capacity of well-trained, appropriate health workforce. The scale of the health workforce need was recently recognised at the APEC Third High Level Meeting on Health and the Economy which ratified recommendations to;

*“Encourage the inclusion of universal health coverage in the post 2015 development agenda, including any unfinished Millennium Development Goals (MDGs) agendas” and,*

*“Work to ensure that economies’ health workforces are sufficient in size, well trained, adequately distributed, motivated and appropriately skilled to meet needs of the regions’ economies”<sup>4</sup>, with a specific focus on the allied health workforce<sup>2</sup>.*

One health workforce challenge is the global epidemic of non-communicable diseases (NCDs), including heart disease, stroke, cancer, chronic respiratory diseases and diabetes. Low and middle income nations are estimated to bear 80% of the global burden of NCDs<sup>3</sup>, and most now face a double burden of disease where the prevalence of NCDs is increasing rapidly, while infectious diseases and under-nutrition remain major public health concerns. Health systems are being required to develop sub-acute, chronic and rehabilitative capacity – a major challenge for many of our near neighbours whose health systems are historically shaped around acute rather than chronic care, including in the composition of their health workforce. The current proportions of doctors, nurses, midwives, allied health professionals and community health care workers in several of our neighbouring countries have limited capacity to form the health care teams required for affordable care for chronic conditions.

Significant opportunities also exist to increase the mobility of Australian health professionals and students into the Asia Pacific, increasing our engagement in the health market into the coming decades. Increased engagement and collaboration with institutions based in neighbouring countries would provide further important opportunities for clinical placements and research collaboration.

### **The Role of Northern Australia in Biosecurity of the Region**

Northern Australia is at significant risk of emerging and re-emerging diseases of the tropics. Dengue, malaria, Japanese encephalitis and multi-drug resistance tuberculosis are some of these diseases. Tuberculosis, essentially eradicated in Australia’s mainland many decades ago, remains endemic (and potentially increasing) in Papua New Guinea. Routine cross border movement via the Torres Strait creates a substantial threat of re-establishment of tuberculosis in Australia. Chronic disease, prevalent in Australia’s north and neighbouring countries, compounds the effects of TB. Parallel biosecurity threats exist in agriculture in Northern Australia. For example, threats such as surra and screw-worm could have a devastating impact on cattle in Northern Australia. Biosecurity remains a central issue to the economic development of Northern Australia.

### **The Role of Northern Australia in Health Research for the Tropics**

The Australian and QLD governments have recently established Australian Institute of Tropical Health and Medicine (AITHM). The research undertaken by this Institute will assist in determining and responding to the biosecurity threats to Australia.

Moreover it will establish specialised research infrastructure such as high containment laboratories and highly skilled staff to lead research and manage these facilities. Research in tropical health will also contribute to commercialisation opportunities. The knowledge, infrastructure and evidence produced by the research will go beyond treatments; contributing to expansion of Northern Australia's knowledge economy.

### **Impact of an Investment in a Considered Health Education, Research and Training Network in North Queensland**

Investing in considered approaches to health in Northern Australia, both in health education and research, has significant potential to place Australia as a regional leader in health systems strengthening. The prospective flow on effects of these investments could be multiple and far reaching. Institutional twinning arrangements between health centers and research institutes provide a wealth of opportunity for Australia. Cross border linkages in health would support substantial leadership opportunities for Australia, benefiting soft diplomacy and the sharing of knowledge between countries.

1. WHO. (2013). Universal health coverage. Accessed online 15 June 2013 from:  
<[http://www.who.int/universal\\_health\\_coverage/en/](http://www.who.int/universal_health_coverage/en/)>

2: OECD and WHO International Migration Outlook. <http://www.oecd.org/els/mig/internationalmigrationoutlook2010.htm>

3: 2013 Statement by Third APEC High Level Meeting on Health and the Economy. [http://www.apec.org/Meeting-Papers/Ministerial-Statements/Health/2013\\_health\\_hlm.aspx](http://www.apec.org/Meeting-Papers/Ministerial-Statements/Health/2013_health_hlm.aspx)