

## ANZCA Research Strategy

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### Introduction

Research is a key pillar underpinning ANZCA's mission. The College is actively involved in supporting research through the Research Committee grants process, the ANZCA Clinical Trials Network (CTN), the Scholar role within the training curriculum, and the ANZCA Research Foundation. It is promoted through our many scientific meetings, especially the annual scientific meeting, and supported by ANZCA Research Foundation fund-raising and the Fellows. This affects both ANZCA and the Faculty of Pain Medicine. The CTN Executive has developed a vision and strategic priorities, and the Foundation has developed vision and mission statements.

This overarching ANZCA research strategy is the basis of, and a guide for, ANZCA research activities, planning, and decisions.

## ANZCA Research Strategy

### Key Research Principles

The research strategy is based on several key principles. These **principles** are to:

- **Encourage research in anaesthesia, pain and perioperative medicine which benefits the community by leading to improved effectiveness, quality and safety in clinical care;**
- **Develop research skills in the specialty of anaesthesia, pain and perioperative medicine;**
- **Contribute to research capacity and capability in the anaesthesia, pain and perioperative medicine community**

Underpinning these principles are a number of elements:

- To encourage research in anaesthesia, pain and perioperative medicine which benefits the community ...
  - ensure research is of high quality
  - provide guidance as to appropriate areas for research
  - effectively communicate research activity and outcomes
- To develop research skills in the specialty of anaesthesia, pain and perioperative medicine.
  - consider research throughout the College and Faculty
  - support and develop specialist researchers
  - encourage post-graduate qualifications in research
- To contribute to research capacity and capability in the anaesthesia, pain and perioperative medicine community
  - Ensure sustainable resources to support research activity

- Provide a competitive funding process and other resources for research
- Encourage and support collaborative research activity

## **Strategic Aims**

From the above, the following strategic aims have been identified to support the Key Research Principles.

### ***1. To promote high quality research***

- through the Research Committee, Clinical Trials Network and Scholar Role subcommittee, provide guidance to review and advise on research projects at all levels
- maximise the efficient use of the resources available for supporting research
- support both basic science and clinical research

### ***2. To identify and target key research areas***

- identify key domains of research to guide research investigations
  - to guide ANZCA Research Foundation fundraising
  - to aid Research Committee prioritisation
- demonstrate relevant benefits to the community
  - by supporting translational research
  - to improve access to care

### ***3. To communicate and disseminate research activity and outcomes widely***

- Communicate and disseminate research activity and outcomes within Australia, New Zealand and the wider international community, including especially the community-at-large, utilising a broad range of professional and other media

### ***4. To ensure that research is considered throughout the College and Faculty at all steps in policy and strategic planning***

- Consider research and research-related values in decision making and policy development College and Faculty-wide, at all career stages

### ***5. To Support and develop specialist researchers at all career stages***

- Encourage and develop
  - trainee and novice involvement in research
  - academic progression in research
- Development of an Emerging Investigators Subcommittee to interconnect the research opportunities and pathways throughout the College

### ***6. To encourage post-graduate qualifications in research***

- Provide advice and resources to support specialist anaesthetists and pain medicine specialists to achieve higher degree qualifications in research-related areas

### ***7. To develop sustainable resources to support research activity***

- Develop the supporting role of the ANZCA Research Foundation
- Develop sustainable resources to support research activity through funding; grant support; and advocacy; including Government

#### ***8. To provide a competitive funding process and other resources for research***

- support ongoing growth in Research Committee and CTN grant and Pilot Grant competitive funding processes in addition to other sources of support
- develop on-line research resources and access to consultations for advice to applicants

#### ***9. To encourage and facilitate collaborative research***

- Encourage collaborative research activity within ANZCA, Australia and New Zealand, and internationally, and via the ANZCA Clinical Trials Network, researchers and external organisations. Collaborative research includes between hospitals, internationally and across specialties.

#### ***10. To audit and review research strategy processes and outcomes***

- Ensure that the aims are being met
- Identify areas of strength and weakness in individual areas and act on these findings

## **Background**

The research strategy has been developed in consultation with stakeholder groups within and outside ANZCA who play important roles in ANZCA medical research.

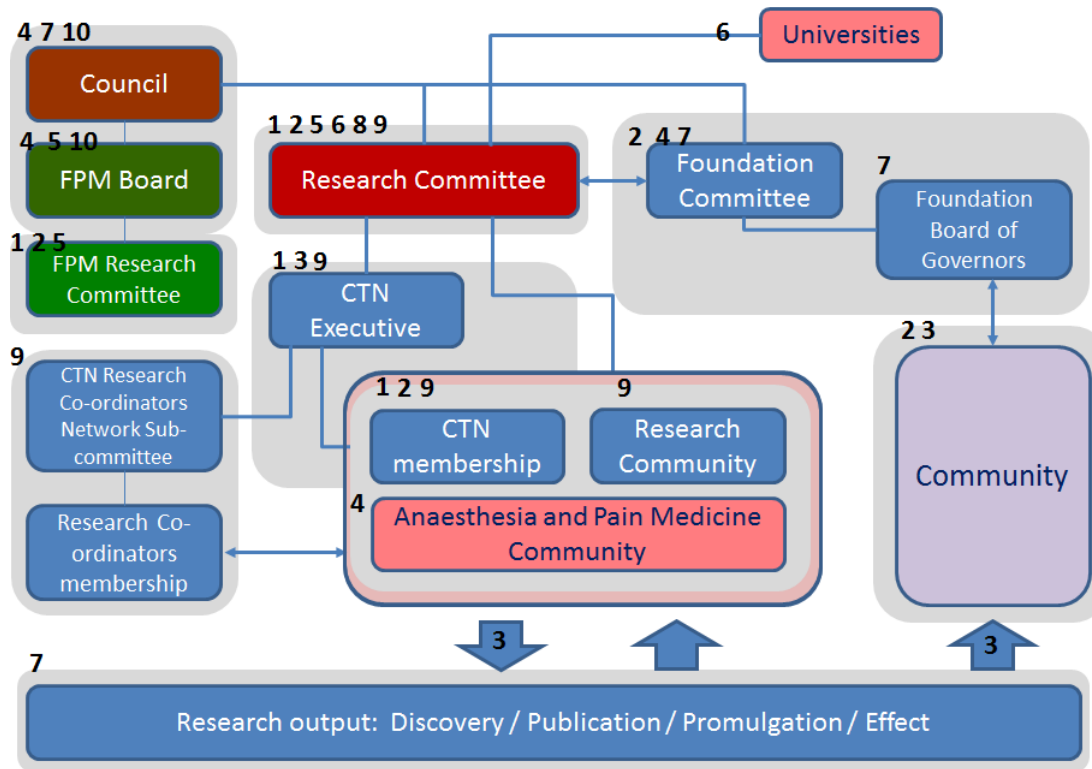
The principles and aims of this strategy were presented and discussed at the ANZCA Clinical Trials Network Conference in August 2016 in open session, and have been considered further by the Research Committee, Foundation Committee, Clinical Trials Network Executive, and the Faculty of Pain Medicine.

Several other medical colleges and societies have published research strategies, the most coherent being that of the Royal Australasian College of Physicians. The RACS, AAGBI and RCoA also all make reference to research strategy. These have been considered in the formation of this strategy.

## **Overview**

The relationships between the groups within and outside ANZCA are outlined in the figure below (with the numbers identifying the main points where the strategic research aims interact):

## Research and ANZCA – Strategy mapping



### ANZCA research Strategy

These strategic priorities and aims, and how they map onto the ANZCA research structure and relationships, are summarised as follows:

**To encourage research in anaesthesia, pain and perioperative medicine; which benefits the community by leading to improved effectiveness, quality and safety in clinical care:**

1. To promote high quality research
2. To identify and target key research areas
3. To communicate and disseminate research activity and outcomes widely

**To develop research skills in the specialty of anaesthesia and pain medicine:**

4. To consider research throughout the College and Faculty at all steps in policy and strategic planning
5. To support and develop specialist researchers at all career stages
6. To encourage postgraduate qualification in research

**Contribute to research capacity and capability in the anaesthesia and pain medicine community:**

7. To develop sustainable resources to support research activity
8. To maintain and improve a competitive process for funding and resources
9. To encourage collaborative research

### Ongoing audit and review

10. To audit and review research strategy processes and outcomes

## **Aboriginal and Torres Strait Islander-determined priorities and principles for health and medical research**

The ANZCA Reconciliation Action Plan 2023-2025 (the RAP) identified the need to increase opportunities for Aboriginal and Torres Strait Islander fellows, trainees and staff in designing and conducting research.

This included identifying guiding Aboriginal and Torres Strait Islander health research priorities and principles developed in consultation with leading Aboriginal and Torres Strait Islander health research organisations and community stakeholders, and embedding them into ANZCA's research strategy and granting processes.

After a search conducted by the ANZCA Foundation, the ANZCA Research Committee approved and added Appendix II in July 2024. It includes several principles and priorities based on stakeholder consultations conducted by a leading Australian Aboriginal and Torres Strait Islander health research organisation that has been a primary source of guidelines promulgated by the Australian National Health and Medical Research Council, and other relevant resources.

The purpose of Appendix II is to guide and encourage ANZCA-supported investigators conducting Indigenous health research in Australia, as part of 'Action Item 13' in the current ANZCA Reconciliation Action Plan. Investigators are encouraged to peruse and use Appendix II as an aid to aligning their Australian Indigenous health research with these established principles and priorities.

It is intended that the next iteration of this strategy will include similar and equally-important content to guide Maori health research.

## **APPENDIX I: CONTEXT FOR THE ANZCA RESEARCH STRATEGY**

### **Clinical Trials Network**

The primary goal of the ANZCA Clinical Trials Network is to improve the evidence base of anaesthesia by endorsing high quality, multicentre randomised controlled trials and related research. The ANZCA Clinical Trials Network also provides research infrastructure support for Fellows and trainees of the College for survey research purposes and administers the Pilot Grant Scheme.

The vision for the Clinical Trials Network is:

'The ANZCA Clinical Trials Network will be a world leader in delivering high quality trial evidence that translates into safe and effective practice in anaesthesia, perioperative and pain medicine.'

The strategic priorities for the Clinical Trials Network for 2014-2017 are:

- To deliver high quality evidence to guide safe and effective practice
- A capable network of leaders, sites and collaborations
- Engagement of our stakeholders in Clinical Trial Network activities
- A sustainable Clinical Trials Network infrastructure

### **Research Committee**

The Research Committee has many roles. These include: assessment of research applications for projects related to anaesthesia, resuscitation, perioperative medicine, intensive care or pain medicine carried out in Australia or New Zealand; recommendations to the Council on the award of project grants, scholarships/fellowships and the Harry Daly Research Fellowship; the development of policy on research issues for consideration by Council; advice to other College committees on research matters; and liaison with the CTN and Foundation.

### **ANZCA Foundation**

The mission of the ANZCA Research Foundation is:

- To support medical research and education that saves lives, helps people to optimise their health and work to make life as pain-free as possible.

This is achieved by raising funds to:

- Increase the safety and comfort of patients undergoing anaesthesia and sedation
- Improve outcomes for critically ill patients following surgery or trauma
- Improve the treatment of acute pain, cancer pain and persistent non-cancer pain.

The Foundation's vision is:

To be a leader in funding research and education in anaesthesia, perioperative and pain medicine.

This vision is pursued by supporting the delivery of sustainable health benefits, and helping to attract and develop leading researchers.

### **ANZCA Training Curriculum**

The curriculum has a number of research-related activities that are predominantly encompassed under the Scholar Role activities and currently managed by the Scholar Role subcommittee.

## **APPENDIX II: ABORIGINAL AND TORRES STRAIT ISLANDER-DETERMINED PRIORITIES AND PRINCIPLES FOR HEALTH AND MEDICAL RESEARCH**

### **Introduction and purpose**

The purpose of this appendix is to guide and assist ANZCA-supported investigators conducting research in Indigenous health in Australia. It includes principles and priorities based on stakeholder consultations conducted by leading Australian Aboriginal and Torres Strait Islander health research organisation, the Lowitja Institute (a primary source of related Australian National Health and Medical Research Council guidelines), and links to other relevant resources.

### **Background**

#### **ANZCA Reconciliation Action Plan – Action Items for Research**

The ANZCA Reconciliation Action Plan 2023-2025 (the RAP) identifies the following ‘vision for reconciliation’ in Australia:

***‘Our vision for reconciliation is to lead safe and high-quality patient care in anaesthesia, perioperative medicine, and pain medicine that’s culturally safe and equitable, and to empower Aboriginal and Torres Strait Islander peoples to train and have flourishing professional careers in these fields. This will be achieved when Aboriginal and Torres Strait Islander peoples enjoy equitable career opportunities and long healthy lives, with equitable access to culturally safe and responsive services that are free from racism.’***

The RAP identifies a series of actions aimed at delivering this vision. Action number 13 in the plan is to increase opportunities in research.

Responsibility for two of the three deliverables identified for this action item was assigned to the ANZCA Research Committee, FPM Research Committee, and the General Manager of the ANZCA Foundation.

#### **Action item 13:**

***‘Increase opportunities for the involvement of Aboriginal and Torres Strait Islander fellows, trainees and staff in designing and conducting research projects.’***

The following are the associated deliverables:

- *‘Investigate guiding Aboriginal and Torres Strait Islander health research priorities and principles through consultation with Aboriginal and Torres Strait Islander fellows and trainees, Aboriginal and Torres Strait Islander community stakeholders, and lead Aboriginal and Torres Strait Islander research organisations.’*
- *‘Embed Aboriginal and Torres Strait Islander research priorities and principles into ANZCA’s research strategy and ANZCA grant assessment processes.’*

### **Investigating Aboriginal and Torres Strait Islander health research priorities and principles**

This paper is designed to progress the first deliverable; investigating Aboriginal and Torres Strait Islander health research priorities and principles developed through consultation. The ANZCA Foundation conducted an online search for:

1. relevant Aboriginal and Torres Strait Islander-led organisations or groups involved in health research,
2. research priorities and principles identified in the public domain by such organisations or groups,
3. priorities and principles in this area identified by other recognised health research organisations including funders, and whether their formation involved Aboriginal and Torres Strait Islander leadership, consultation, or input.

## National Health and Medical Research Council

### Public consultation on priorities for Targeted Calls for Research

In 2020, the NHMRC invited stakeholders and members of the public to submit research priorities in Aboriginal and Torres Strait Islander health to inform the basis of future Targeted Calls for Research (TCR) grant opportunities.

The public consultation opened in November 2020 and closed in February 2021.

The NHMRC formed an Expert Advisory Panel comprised of Principal Committee Indigenous Caucus (PCIC) members and experts in the field to develop research questions and plans for the opening of the first Targeted Call for Research (TCR), which was scheduled for late 2023.<sup>1</sup>

### Ethical guidelines for research with Aboriginal and Torres Strait Islander peoples

NHMRC released two revised guidelines in 2018, replacing and revoking its older guidelines:

1) *Ethical conduct in research with Aboriginal and Torres Strait Islander peoples and communities: Guidelines for researchers and stakeholders 2018*, and

2) *Keeping research on track II 2018*.

The guidelines work with the *National Statement on Ethical Conduct in Human Research*, and the *Australian Code for the Responsible Conduct of Research*, to provide more specific information on ethical conduct in research with Aboriginal and Torres Strait Islander Peoples and communities, and should be read alongside the *AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research 2020*, developed by the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS).

### Development of the guidelines

In 2013 the NHMRC commissioned the Lowitja Institute and AIATSIS to conduct an evaluation of the previous guidelines, with extensive consumer engagement in all states and territories. The resulting report and literature review included recommendations for revision of the two original guidelines.

For more detailed information and supporting documents please visit the relevant NHMRC web page below.<sup>2</sup>

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<sup>1</sup> <https://www.nhmrc.gov.au/health-advice/aboriginal-and-torres-strait-islander-health/research-priorities-aboriginal-torres-strait-islander-health>

<sup>2</sup> Ibid.



# Lowitja Institute

## Overview

The Lowitja Institute is Australia's only national Aboriginal and Torres Strait Islander community-controlled health research institute.

It works for the health and wellbeing of Australia's Aboriginal and Torres Strait Islander peoples through high impact, high quality research, knowledge exchange, and by supporting a new generation of Aboriginal and Torres Strait Islander health researchers.<sup>3</sup>

Please note that the Lowitja Institute's priorities are not static. This paper reproduces principles and priorities discovered in the Institute's website. It is intended to inform the ANZCA Research Committee's discussion around developing an informed summary of existing research priorities and principles derived from consultative processes led by an appropriate Aboriginal and Torres Strait Island research organisation or organisations, for inclusion in an updated ANZCA Research Strategy, potentially for annual review, in accordance with the ANZCA RAP objectives.

## Consultation

The priorities and principles identified by the Institute are based on engagement and consultation of appropriate stakeholders. It states that:

*'As an organisation, we regularly engage with Aboriginal and Torres Strait Islander peak bodies and professional associations and the Australian Government, as well as mainstream health peak bodies and professional associates, non-government organisations and philanthropic organisations.'*<sup>4</sup>

## Key Research Principles

'Lowitja Institute has identified five key principles that underpin our approach to research:

1. **Beneficence** – to act for the benefit of Aboriginal and Torres Strait Islander people in the conduct of our research
2. **Leadership** by Aboriginal and Torres Strait Islander people
3. **Engagement** of research end users (Aboriginal and Torres Strait Islander organisations and communities, policymakers, other potential research users)
4. **Development** of the Aboriginal and Torres Strait Islander research workforce
5. **Measurement** of impact in improving Aboriginal and Torres Strait Islander people's health.'<sup>5</sup>

## Practice Principles

The Lowitja Institute identifies five 'practice principles that underpin its policy work:

- **Voice:** Centring Indigenous narratives and ways of doing within policy documents and discourse.
- **Expertise:** Ensuring we are informed by Aboriginal and Torres Strait Islander expertise.
- **Cyclical and Reciprocal:** Policy developed through a process that empowers Aboriginal and Torres Strait Islander peoples.
- **Significance and value:** Recognising First Nations knowledge is scientific knowledge and complementary to Western scientific knowledge.

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<sup>3</sup> <https://www.lowitja.org.au/about-us/>

<sup>4</sup> Ibid.

<sup>5</sup> Ibid.

- **Strengths-based:** Building strengths-based policy that centralises the health and wellbeing aspirations of Aboriginal and Torres Strait Islander communities, as articulated in our research and consultations.<sup>6</sup>

The Institute also notes on its website that desirable attributes of research include being innovative, impactful, and community-led, and benefiting health and well-being outcomes for Aboriginal and Torres Strait Islander peoples.

## Policy Priorities

The Institute states that:

*‘Our policy priorities are developed both internally, from outcomes of commissioned research or Lowitja Institute-led roundtable discussions, and externally, as they link to current or emerging government policy contexts and topics within the Aboriginal and Torres Strait Islander health sector.’<sup>7</sup>*

The Institute identifies its ‘core policy priorities’ as well as its ‘emerging priorities’. These priorities and summary statements for each are reproduced below from the Institute’s document *Policy Priorities 2022–2025*. (Please note that these are extracts only, and that the full document should be consulted for a detailed understanding of the Institute’s policy priorities.)

### Core priorities

#### Cultural safety in health policy and programs

‘Cultural safety is a core element of the National Agreement on Closing the Gap (National Agreement), particularly with regard to Priority Reform Two (building the Aboriginal and Torres Strait Islander community-controlled sector) and Priority Reform Three (transforming government organisations). Consistent with those Priority Reforms, the National Aboriginal and Torres Strait Islander Health Plan 2021–2031 (NATSIHP) embeds the accountability of mainstream health systems to provide accessible, culturally safe and responsive care.’

#### Climate change and health

‘Urgent action is needed to end energy poverty in our communities and invest in Aboriginal and Torres Strait Islander peoples’ mitigation, prevention, and adaptation planning to ensure resilience to climate change. This presents an opportunity for redress and empowerment of Aboriginal and Torres Strait Islander communities to lead climate action planning based on their intimate traditional and historical knowledges of Country.’

#### Cultural and social determinants of health

‘Western models of public health have only much more recently (within the last 25 years) come to emphasise the social determinants of health – the social and economic factors leading to health inequity. However, the cultural determinants of health, and their interactions with the social determinants, have remained largely unexplored in the public health policy discourse. Further, governments in Australia have generally not demonstrated substantive commitments to

<sup>6</sup> Lowitja Institute Policy Priorities 2022–2025, p3.

<sup>7</sup> <https://www.lowitja.org.au/policy-advocacy/our-policy-priorities/>

strengthening the social and cultural determinants of health in Aboriginal and Torres Strait Islander communities.’

### **Racism in health systems**

‘Priority 8 of the 2021–2031 NATSIHP aims to identify and eliminate racism across the health, disability and aged care systems, including both individual and systemic racism. However, commitments to build a health system free of racism cannot be achieved without an unflinching examination of the sources, extent and impacts of the systemic racism that currently exists.’

### **Ethics for Aboriginal and Torres Strait Islander health research**

‘When research ethics are not considered from Aboriginal and Torres Strait Islander perspectives, the analysis of a research project’s risks and benefits is unlikely to adequately centre Aboriginal and Torres Strait Islander peoples’ priorities, knowledges, cultural safety, or cultural and intellectual property. As a result, the benefits of such research do not accrue equally to the Aboriginal and Torres Strait Islander research participants as they do to the researchers and academic institutions involved.’

## **Emerging priorities**

### **Nation building for health and wellbeing**

‘Nation building is about empowering Aboriginal and Torres Strait Islander communities to maintain and strengthen their cultural customs, values and practices – including governance mechanisms – at the local/regional level. A crucial aspect of nation building is to acknowledge and respect differences in cultural practices between individual Aboriginal and Torres Strait Islander nations, rather than treating all First Peoples as a homogenous ‘pan-Indigenous’ group.’

### **Effects of a changing environment on housing access, adequacy and sustainability**

‘Poor housing conditions and unsuitable housing design pose significant health risks for Aboriginal and Torres Strait Islander peoples, with these risks further exacerbated by climate change and natural disasters as discussed above. There is a clear link from healthy, responsive and culturally appropriate housing to health and wellbeing outcomes. As a key social determinant of health, we call for further investment in improving the quality, access, and sustainability of housing available to Aboriginal and Torres Strait Islander families.’

### **Building capacity for good partnerships and codesign in health policy and programs**

‘In order to ensure that the specific needs of Aboriginal and Torres Strait Islander peoples are being accurately identified and addressed in health policy and service delivery, is critical that policies and programs are developed and delivered in partnership with Aboriginal and Torres Strait Islander people, organisations and communities.’

### **Understanding the effects of racism and adversity on biological systems**

‘Internationally, there is a growing evidence base indicating that discrimination-induced stress is associated with increased morbidity across a range of chronic physical conditions, and that these health risks can be transmitted intergenerationally through both epigenetic pathways (gene expressions) and the harmful effects of antenatal stress on developing babies, particularly for people of colour.’

## **Data governance, infrastructure and sovereignty**

‘Indigenous Data Sovereignty (ID-SOV) is a rapidly growing field of scholarship with important implications for research, policy development and public service delivery pertaining to First Peoples across the world. In Australia, the Mayam nayri Wingara Indigenous Data Sovereignty Collective defines ID-SOV as the right of Aboriginal and Torres Strait Islander peoples to exercise ownership over Indigenous data.’

## **Building a culturally safe disability and aged care sector**

‘Elderly Aboriginal and Torres Strait Islander people, and those with disability or developmental concerns, face significant challenges in accessing appropriate, timely and culturally safe care. These challenges have been highlighted on the national level in recent years, including through the Royal Commission into Aged Care Quality and Safety and the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability.’

## **Research Agenda Themes**

‘The Lowitja Institute has also developed a set of ‘Research Agenda Themes’, through a collective process of bringing together a range of Aboriginal and Torres Strait Islander stakeholders from the research, Aboriginal and Torres Strait Islander community control, and health sectors, as they are grounded in current and priority needs.’

The institute’s 2019–2023 Research Agenda focused on four key themes:

- Empowerment
- Sovereignty
- Connectedness
- Cultural Safety.

Its 2024–2026 Research Agenda is focused on:

- Self-determination
- Sovereignty
- Cultural determinants
- Racism.<sup>8</sup>

## **Australian Indigenous Doctors’ Association (AIDA)**

The AIDA website was reviewed however specific priorities for medical research were not found.

## **OCHRe (Our Collaborations in Health Research).**

An emerging collaborative, OCHRe is a national network for Aboriginal and Torres Strait Islander researchers. Funded by the NHMRC, its goal is to ‘support and develop the next generation of Aboriginal and Torres Strait Islander research leaders and improve the health and wellbeing of Australia’s First Nations peoples.’<sup>9</sup>

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<sup>8</sup> <https://www.lowitja.org.au/research/lowitja-institute-research-agenda-2024-2026/>

<sup>9</sup> [OCHRe \(Our Collaborations in Health Research\) - School of Public Health - University of Queensland \(uq.edu.au\)](#)

OCHRe is led by some of Australia’s most eminent Aboriginal and Torres Strait Islander researchers including Dr Janine Mohamed, Professor Sandra Eades, Professor Alex Brown, Professor Gail Garvey. The concept for the network was developed with Aboriginal and Torres Strait Islander health researchers through extensive consultation.

OCHRe is an appropriate additional resource for researchers seeking to better understand research priorities in Indigenous health.

Website: <https://public-health.uq.edu.au/project/ochre-our-collaborations-health-research>

#### **Version control**

Version	By	Date	Change	Approval
1.	D. Scott	April 2017	Original	Research Committee Council
2.	R. Packer	February 2025	RAP appendix added.	Research Committee Council