

Department of Health Western Australia Human Research Ethics Committee

Project Summaries for Approved Proposals

April to June 2023 Quarter

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Project summaries for proposals approved by the Department of Health Human Research Ethics Committee – April to June 2023 quarter.

The material contained in this document is made available to assist researchers, institutions and the general public in searching for projects that have ethics approval from the Department of Health Human Research Ethics Committee (DoH HREC). It contains lay descriptions/summaries of projects approved in the April to June 2023 quarter.

Under the WA Health mandatory Research Governance Policy, the DoH HREC, must review all research projects that require the use and disclosure of personal health information from the DoH Data Collections, including data linkage. DoH HREC approval cannot occur until approval to access a DoH data collection is approved by the data collections' Data Steward or their delegate.

The lay descriptions/summaries outlined below have been provided by the respective Principal Investigator and are shared with their consent.

Project Title	Evaluation of the Research Translation Projects Program
Coordinating Principal Investigator	Delia Hendrie
Institution	Curtin University
Ethics Approval Date	12/04/2023

Research translation is an essential process for ensuring health systems have ongoing capacity to service the health needs of a population and address challenges through the integration of cost-effective interventions based on new research and technology. This project explores the translation pathway using a realist evaluation approach that is applied to a program funded by the WA Department of Health, the Research Translation Project (RTP) program.

Prior research for the project has developed an initial 'program theory', which has identified three key areas of outcomes related to the RTP program. These outcomes, deduced from stakeholder interviews and document review, are translation of RTP evidence into organisational action, research capacity building amongst the clinical workforce and the development of resource stewards at the frontline of healthcare.

This project will investigate these emerging themes. It will use qualitative methods to study how the process of research translation can trigger change mechanisms in specific contexts to produce outcomes that can contribute to health system sustainability. Data will be drawn from interviews with recipients of RTP grants and analysed using a thematic approach.

By providing guidance on the translation process, findings of the project have the potential to improve research translation capacity and facilitate the process of incorporating research evidence into health policy and services, thus contributing to community health and service delivery. While the research translation process is context dependent, the intention is for the project to deliver generalisable learnings that can be applied more broadly to other research programs.

Project Title	Linking for Life: Pathways of young people born between 1990 and 2015 in contact with multiple government agencies in Western Australia.
Coordinating Principal Investigator	David Preen
Institution	University of Western Australia
Ethics Approval Date	30/05/2023

This is a retrospective cohort study of people born from 1990 onwards which includes data at the individual and family level to investigate factors contributing to a range of social and health outcomes.

This project aims to update a previous study "Pathways of young people in contact with multiple government agencies in Western Australia (WA) 1994-2014". This will provide insight to the WA government on the characteristics, costs and pathways of high service users, in order to inform policy, earlier intervention, and cross-agency solutions to improve the outcomes of young people within, or at risk of being within, this cohort.

Multiple and complex service users continue to be identified as a priority cohort of interest across many of our partner agencies. This Social Investment Data Resource (SIDR) study will allow a more in-depth study to be completed on these high service users, including data from parents, siblings and additional agencies (Health and WA Police data were not available for the 2017 study).

This project is part of a large Australian Research Council (ARC) Linkage grant that was submitted by University of Western Australia and included support from our partner agencies (Department of Health, Department of Education, Mental Health Commission, Department of Justice, WA Police, Treasury and the Department of Communities). These agencies were consulted on the research priorities for this ARC grant, and multiple and complex service users continued to be identified as a cohort of interest across many of the partner agencies. This study is a direct response to this consultation and will see the 2017 study broadened and strengthened to provide insights into this small, but highly complex group of young people.

We are requesting the use of linked data held in the SIDR for a cohort of people in WA born from 1990 onwards to examine, at the population level, people (and families) who have had contact with multiple government agencies, compared to those who have not. We will utilise genealogical data to investigate the influence of family factors on the outcomes of the cohort as well as service use levels and patterns for families with high service use.

A complete birth cohort will allow for the identification of high, medium and low service users and will enable comparisons of both positive and negative outcomes with the aim to identify which factors foster positive outcomes at the population, family and individual level.

To identify people who have had contact with multiple government agencies, we require data from the WA Departments of Communities (Child Protection and Family Support, Housing, Disability Services), Education, Health (including Mental Health Commission), Justice and WA Police. Access to this data will enable us to look at service contacts and timing across agencies, as well as the outcomes of interest.

Project Title	Linking for Life: Mental health, suicide and self-harm in children and young people in Western Australia
Coordinating Principal Investigator	David Preen
Institution	University of Western Australia
Ethics Approval Date	30/05/2023

This is a retrospective cohort study of people born from 1990 onwards which includes data at the individual and family level to investigate factors contributing to a range of social and health outcomes.

As part of the Linking for Life Project, this project will use Western Australian (WA) population-based data to examine the pathways and outcomes of children and young people with mental illness. This study will highlight risk factors, predictors and interactions of Mental Health with other government services (e.g. Police, Justice, Education and Child Protection), with the aim of improving policies, cross-agency support and earlier intervention.

This project is part of a large Australian Research Council (ARC) Linkage grant that was submitted by University of Western Australia (UWA) and included support from our partner agencies (Department of Health, Department of Education, Mental Health Commission, Department of Justice, WA Police, and the Department of Communities, Treasury).

Mental health and suicide prevention have both been identified as key focus areas in the "WA State Priorities Mental Health, Alcohol and Other Drugs Services Plan 2015-2025" which is part of the Mental Health Commission's strategic direction. Aligning with the Department of Health and Department of Communities research priorities, this project will contribute to the understanding of mental health in children and young people, their wellbeing and how it is impacted by various risk factors. Also, in line with the Department of Justice research priority topic "Interrelationships: mental health, substance abuse, homelessness, and crime" this project will investigate the impact of factors, such as justice system involvement, on mental health outcomes in children and young people.

This project will extend previous work by exploring a greater range of services, and will help inform agencies regarding risk factors, predictors, and points of earlier intervention, to improve support to children within this cohort.

Project Title	Linking for Life: Improving the evidence base for child protection and juvenile justice policy, service design and expenditure, to ensure the best possible outcomes for children and families in contact with the child protection or justice system
Coordinating Principal Investigator	David Preen
Institution	University of Western Australia
Ethics Approval Date	30/05/2023

This program of research aims to fill gaps in the current evidence base to inform child protection and juvenile justice policy and expenditure. Aboriginal children and their families are over-represented in both the child protection and justice system, and reducing representation is a Closing the Gap priority. Key areas of research for this program of study have been determined through discussions with the Department of Communities and Justice. The outcomes from these studies will be used to inform policy, service design, and to support expenditure on earlier intervention. Having a strong evidence base will ensure Government has the best programs to support children and their families in touch with the child protection or juvenile justice system, improving outcomes and ensuring progress is made towards the Closing the Gap indicator.

The over-representation of Aboriginal children and families in the child protection and justice system are key closing the gap targets. The outcomes and targets are listed below:

Closing the Gap Target and Outcome 12:

- Outcome: Aboriginal and Torres Strait Islander children are not overrepresented in the child protection system.
- Target: By 2031, reduce the rate of over-representation of Aboriginal and Torres Strait Islander children in out-of-home care by 45 per cent.

Closing the Gap Target and Outcome 11:

- Outcome: Aboriginal and Torres Strait Islander young people are not overrepresented in the criminal justice system.
- Target: By 2031, reduce the rate of Aboriginal and Torres Strait Islander young people (10-17 years) in detention by 30 per cent.

The project is also strongly aligned with 3 of the priorities of the new National Child Protection framework, 2021:

- Children and families with multiple and complex needs
- Aboriginal and Torres Strait Islander children and young people experiencing disadvantage or who are vulnerable
- Children and young people who have experienced abuse and/or neglect, including children in outof-home care and young people leaving out-of-home care and transitioning to adulthood.

Project Title	Understanding Lung Cancer in Western Australia - Improving our knowledge of remote and Aboriginal populations
Coordinating Principal Investigator	Andrew Redfern
Institution	Fiona Stanley Hospital
Ethics Approval Date	14/06/2023

Lung cancer is the most commonly diagnosed cancer and the leading cause of cancer death in Aboriginal Australians. Furthermore, geographical remoteness and access to care has been shown in all populations to lead to worse treatment and survival outcomes in lung cancer. Identifying factors that result in delayed diagnosis, barriers to treatment, service availability, and adherence to prescribed treatment regimens may help improve these poorer outcomes. Differences in tumour and host biology demographics including; tumour cellular sub-type, the spectrum of driver mutations present and immune infiltrates could contribute further. Notably, there are currently no data available for lung cancer outcomes in Western Australia (WA) for any period pertaining to either Aboriginal status, or remoteness.

The over-arching aim of this project is to explore the patient, disease, and treatment-related factors that contribute to reduced service access and poorer outcomes from lung cancer in patients who live in rural and remote WA. This also includes identifying any systematic differences between Aboriginal and Torres Strait Islander patients, and the interplay between remoteness and Aboriginal status.

The study population will include patients retrospectively identified form the WA Cancer Registry (WACR) who were diagnosed with lung cancer in WA from 2011 to 2020. We will use electronic medical records to confirm diagnosis, assess medical co-morbidities and access additional data on blood, pathology and radiological testing. This will allow us to assess the burden and distribution of lung cancer in WA as well as the overall treatment patterns including surgery, radiotherapy, chemotherapy, targeted drug therapies and immunotherapy. In collaboration with Pathwest, we also aim to identify the landscape of underlying actionable mutations and delineate the tumour immune environment including how these vary with remoteness and Aboriginal status.

This study will provide the first incidence and survival data for Aboriginal lung cancer in WA as well as the first data on lung cancer incidence and outcomes by remoteness of residence. These results will represent the first assessment of Aboriginal and remote survival outcomes from lung cancer in the era of immunotherapy and targeted agents. We aim to correct the disparity in cancer outcomes between Aboriginal and non-Aboriginal patients by understanding the contributing factors driving poorer survival, with the long-term goal of improving cancer outcomes for these patients.

Project Title	Living Proud LGBTIQA+ Health Priorities Needs Assessment
Coordinating Principal Investigator	Jonathan Hallett
Institution	Curtin University
Ethics Approval Date	14/06/2023

LGBTIQ+ people experience elevated health risks and overall poorer health than cisgender heterosexual people, which has been linked to experiences of discrimination, stigma, and exclusion. This project is aimed at gaining an understanding of gaps in Western Australia for primary health care service provision for LGBTIQ+ people. Curtin University is partnering with the non-profit organisation Living Proud to undertake a consultation with service providers to identify what LGBTIQ+ initiatives exist within mainstream services (government and non-government). This will involve a short online survey to profile what initiatives exist and where service providers see gaps in health care access for LGBTIQ+ Western Australians. In addition, a single consultation meeting will be conducted with invited representatives of mainstream services to discuss identified gaps and make recommendations for policy and practice.

This document can be made available in alternative formats on request for a person with a disability.

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