

# Franklin Women

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## May 2017 Newsletter

I am writing this at about 30,000 ft in the air on my way back to Sydney from Fiji. It was our first family holiday since Zoe arrived 11 months ago and I had been looking forward to quality time together and much needed time out. But of course the last thing I packed when running out the door last week was my laptop as I still needed to make a few finishing touches to our upcoming [event](#). I was annoyed with myself that I packed 'work' on our first family holiday but as I hit 'publish' on our event website while overlooking the Fijian waters with cocktail in hand, the words of Dr Linda Friedland from our [last event](#) hit home. Maybe she is on to something by replacing the concept of work-life balance with work-life integration. Because at that moment, I wasn't stressed or annoyed, I was content. I was at such an amazing place with my favourite people and had put aside a small amount of time to do something that makes me happy. So I have made a pact that next time I won't be so hard on myself when my personal and professional lives collide every now and then.

I really hope you are as excited about our upcoming event as we are. Enjoy reading about it in this newsletter with the other contributions we have from women in our field.

Bulla! Melina and the FW team

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## What happened this month

- Applications for the [2017 Georgina Sweet Awards for Women in Quantitative Biomedical Science](#) are now open.
- Submissions for [Thinkable's 2017 Peer Prize for Women in Science](#) close TODAY (31 May)!
- Nominations have also opened for the [2017 Research Australia Health and Medical Research Awards](#).
- The 2017/18 Budget was announced; here are some health-related summaries from [Research Australia](#) and the [Public Health Association of Australia](#).
- The [NHMRC](#) announced some big changes to their grants and fellowships.
- An allocation of [\\$33 million for clinical trial research](#) was announced, to be delivered through the Medical Research Future Fund.
- May 20 also marked [International Clinical Trials Day](#); read more in our latest [FW Career blog](#), and later in this newsletter.



## Career Profile

Meet **Heather Baldwin**, a **trainee biostatistician** with the NSW Ministry of Health, currently undertaking a 6-month placement at the **Prevention Research Collaboration**, Sydney University. She has a PhD in bat and virus ecology and population genetics.



**What is your training in the health or medical science field?** I took an unusual route into public health – my background is in wildlife ecology. I did undergraduate biology and then took on an honours project on the conservation genetics of Australian flying foxes, before completing a PhD on bat and virus ecology. Part of my PhD focused on the epidemiology of bat viruses related to the SARS and MERS viruses in humans, and I did extensive field work in Ghana, where I was based at a research institute for tropical medicine. My time there fostered an interest in public and global health, and after finishing my thesis I joined the NSW Biostatistics Training Program with the NSW Ministry of Health. I'm currently halfway through the 3-year program and loving the different perspectives I am gaining in the different placements.

**Tell us about some of your trainee biostatistician placements?** As a trainee biostatistician, I rotate through work placements as part of my training in population health research, while completing a Master of Biostatistics. My current placement is with the Prevention Research Collaboration at Sydney University, where I am involved in several research projects around physical activity and nutrition for preventive health. I've had previous placements at Clinical and Population Perinatal Health Research at the Kolling Institute, the Bureau of Health Information, and the Centre for Epidemiology and Evidence at the Ministry of Health. Through these placements I've been involved in a range of different projects, from looking at the effectiveness of whooping cough vaccination in pregnancy, to investigating causes and outcomes of a rare pregnancy condition, to evaluating health system performance. I like that it's not just number crunching – I get to be involved in different aspects of the research, from design and analysis to writing papers and communicating findings, and learn about a range of different topics that relate to public health. It's hugely interesting and rewarding.

**What is one of your favourite projects you are currently working on?** One of the projects I'm working on at the moment uses data from a longitudinal study to investigate the association between various types of sitting behaviours and mortality risk. We look at how much time people spend sitting in front of the TV, at work, and in the car, and see whether that is associated with increased mortality risk, after accounting for general health, physical activity level and other factors. The analysis is quite complicated and something that I've never done before, and I like the challenge.

***What are some of the major ‘outputs’ from your work?*** I really enjoy giving presentations as a way to communicate research findings and engage with others about my work. Last year I presented results from a case-control study of the effectiveness of pertussis (whooping cough) vaccination in pregnancy for preventing infant pertussis disease at the Public Health Association of Australia conference in Alice Springs. I also presented the findings of a project on procedures that increase risk for placenta accreta, a rare condition in pregnancy, at the Kolling Institute Academic Day conference. I have published several publications from my PhD (still working on getting the last couple out!), and I currently have two papers from my traineeship work under review, on outcomes of placenta accreta, and variation in mortality by time of day and day of week of hospital admission.

***How do you think your work contributes to the field and/or the overall health of the community?*** The work I do aims to provide evidence-based recommendations for public health policy and clinical practice, through both publishing work that adds new knowledge to the field, and working with policy makers to translate research into policy recommendations. The study of pertussis vaccination in pregnancy that I mentioned earlier was a particularly exciting piece of work, because it was both evaluating the evidence for the NSW Health policy and contributing knowledge that may be used to inform control strategies to reduce the burden of pertussis disease worldwide.

***Who do you collaborate with and how did those work relationships come about?*** I am lucky to have the opportunity to work with seasoned researchers in a broad variety of fields through each placement. I am learning so much from the specialists I collaborate with, and hope that I can also bring new perspectives and skills into the teams.

***Do you have any side interests or passions that you are looking to develop?*** As I spend most of my time these days behind a desk, I do miss fieldwork and working with animals, so I recently started volunteering with my partner at a wildlife rescue and care organisation. I’m also involved with refugee advocacy through the Refugee Action Coalition. I help to plan and organise events on refugee issues, like public forums, film nights, strategy meetings, and hold regular stalls to provide information and start conversations about refugee rights and inclusion. I think the refugee rights movement intersects very much with public health, not only through direct issues of access to healthcare for refugees, but because they share core values of equality and human rights.

***What food have you eaten too much of in your life?*** Yam... During 2 years of fieldwork as a vegan in West Africa I basically lived on it – fried yam, pounded yam, boiled yam, roasted yam, mashed yam, yam porridge, yam chips, yam leaves, cocoyam. It’s best deep fried with fresh chilli sauce.

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# Upcoming FW Event

***Our next event [Debunking the innovation stereotype – beyond techies and co-working hubs](#), aims to get us all thinking about innovation. While we were brainstorming for this event, the FW team came across all sorts of opportunities out there. FW founder Melina shares some of them here – who knew they all existed...***

When I started FW I had two aims. I wanted to create a platform for women working across the health and medical research sector to connect, as this sets the foundation for some amazing professional opportunities. But I also wanted to give us an opportunity to hear from experts on topics important for professional development that we don't otherwise have access to. I found that the research sector is very good at investing in our scientific skills but there is so much more to building a successful career, and no-one was teaching us any of it. This is so true for our upcoming event. Everyone is talking about the importance of innovation but no-one seems to really know what it means, and so with the exception of throwing the word in a grant proposal here and there, the concept is left alone. To me, this is not enough. Whether we like it or not, innovation is the future of health research and researchers in the field (especially women!) should be driving this evolution, rather than leaving it to those in other sectors like technology and business.

Our event is bringing together speakers from business, health systems, public health and government to explore what innovation means for health researchers and where the opportunities are. In the meantime, I thought I would share some of the great programs and people the FW team found when putting the event together that might just inspire you to get innovative in your career.

1. **[ON: Accelerating innovation](#)**: ON is Australia's national science and technology accelerator, powered by CSIRO.
2. **[Australian Technologies Competition](#)**: A competition and accelerator program that mentors, profiles and promotes innovative and emerging technologies, that have the greatest global potential; they have a specific Medtech and Pharma category.
3. **[MTPConnect](#)**: A not-for-profit which aims to accelerate the rate of growth of the medical technologies, biotechnologies and pharmaceuticals sector; they resource a number of initiatives through their Project Fund Program including [Accelerating Australia](#), [The Bridge Program](#) and [Industry Mentoring Network in STEM](#).
4. **[Cicada Innovations](#)**: Australia's leading incubator that grows tech start-ups, and home to the NSW Medical Device Program: the CEO is our event guest speaker!
5. **[Macquarie Park Innovation District](#)**: An industry-led initiative which brings together a number of academic and business partners to create Australia's leading innovation district; they hold regular [events](#) including the Healthcare Hackathon.
6. **[SheStarts](#)**: A groundbreaking innovation program for ambitious female entrepreneurs with big ideas; check out their previous [founders](#) – could be you!

7. **iAccelerate**: A University of Wollongong business incubator program that is built around educational programs, formalised business acceleration monitoring and one-to-one mentoring.

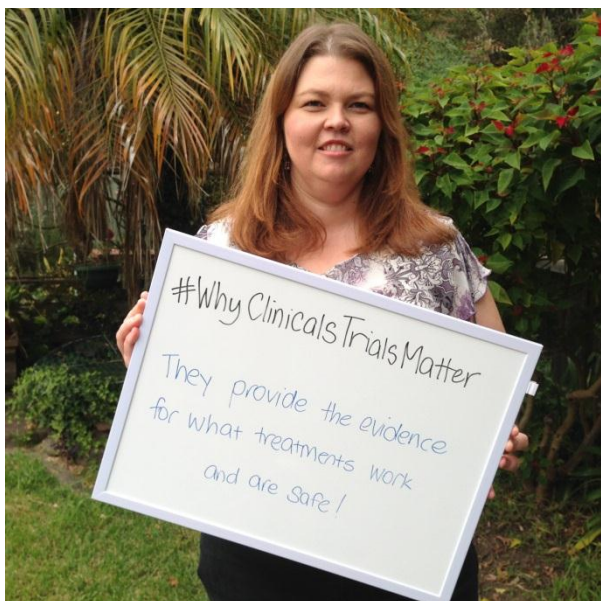
This list is just a start. Have some fun exploring these initiatives and other opportunities outside your immediate organisations – who knows where they might take you!

**Melina** is a medical research scientist who moved into public health policy and dabbles in social entrepreneurship. Her favourite things mainly involve food, mini-schnauzers and kick-arse women.

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## Community engagement in health research

*Clinical trials have been quite the buzzword this month. But in this article [Dr Janelle Bowden](#), founder of [Research4Me](#) (read more about it in the [FW Career blog](#)) considers them from another perspective. Besides the high quality evidence they provide, what else are clinical trials all about?*



So why did you end up in a career in health and medical research? Odds are it may have been because you wanted to do something that would end up improving people's lives. At least that's why I did it. But you know, for many years it never really occurred to me to talk to the people I was hoping to help about what they needed, or what I was doing.

Eleven years ago that changed. I was on a global project team establishing a breast cancer trial. We'd created some materials to help attract and support patients in the trial, and decided to hold a focus group to evaluate them. As I sat watching the group tear apart

the concepts, colours, images, text, etc. that we'd used, I saw that even in our best intentioned efforts to 'walk in their shoes', not having experienced breast cancer, we just couldn't properly imagine what they would need or respond positively to. In retrospect, we could have saved time and resources had we included these women as part of the project team meetings when we were creating the materials (and even the protocol) from the start. It was my light bulb moment.

From that day on, I started to look for ways to include the people I was hoping to help in my projects.

The NHMRC has produced a [Statement](#), [Model Framework](#) and [Resource Pack](#) to support involving consumers in research. Many funders are starting to ask researchers how consumers have been informed about their project. However, it is not always simple for researchers to find consumers or know how to work effectively with them. Equally,

consumers are not necessarily appropriately skilled, supported or clear on the expectations of them in order to be effective team members.

Involving consumers can take time, effort and training, and for resource-poor researchers, it can be easy to put this activity into the too hard/not possible basket. But organisations like [Involving People in Research](#) and my own [Research4Me](#) are looking to make that easier with training and support.

I have found in my own career, listening to health consumers helps drive and inspire me to do better. I think medical research needs to deliver what the community actually needs, and therefore it makes sense to involve consumers in the research process. If you don't already, I'd encourage you to consider how your research project might benefit from involving consumers, then reach out to those who can mentor and support you to make it happen.

**[Dr Janelle Bowden](#) has a PhD in Immunology and 18 years experience working in and around clinical trials. When she's not pursuing her clinical trial-related business ventures, she can be found playing in sandpits, moulding playdoh, dancing to Trolls music and reading stories with her 3-year old!**

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## We are loving right now...

***Fierce women in science and literature!*** Spending the weekend at the Sydney Writers Festival has got us thinking about the power of stories and the written word. Here are some of our current fierce favourites...

- Way back in 1953 Rachel Carson wrote this poem against the [silencing of science](#)
  - [Difficult Women](#) by Roxane Gay is a collection of stories of the true lives of women
  - [The Mushroom Hunters](#) by Neil Gaiman is a feminist poem on the dawn of science (and that amazing story about [Beatrix Potter](#) was certainly news to me!)
  - [The end: The human experience of death](#) by Bianca Nogrady explores how death is defined by so much more than the physiological
  - [Women of Letters](#) is a wonderful Australian movement that celebrates the lost art of letter-writing, if there's an [upcoming event](#) near you we highly recommend it!
  - James Bradley, author of climate change novel [Clade](#), said it best – watching animals is the antidote to despair, so [here's](#) your monthly fix
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We want to include your contributions in our newsletter. If you are doing something, or know about something, that you think other women in our field would be interested in, drop us a [line](#). We are all about sharing, promoting and collaborating between women in our field. Don't be shy, it might bring about a great opportunity! Want to receive our newsletters directly to your in-box? [Subscribe here](#).