David Morgan, Acting CEO of the Lowitja Institute, and Marianna Serghi, representing NATSIHON, were welcomed to meeting. It was noted that the Australian Indigenous Doctors’ Association (AIDA) had rationalised its representation on external committees and boards, so Associate Professor Peter O’Mara would no longer be serving on our Board.

In summarising recent AIH research activities, it was noted that a number of overviews and reviews were completed or nearing completion. The Overview of the health of Indigenous people in Western Australia 2011 has been completed and the Overview of Indigenous health status 2011 is nearing completion. Work is continuing on reviews of cardiovascular health, kidney health, nutrition and growth, diabetes, physical activity, ear health, and eye health. In addressing its commitment to providing information to a wide range of users, plain language reviews of health topics are also completed after a full review has been finalised. Work was completed on the plain language reviews of Indigenous women’s health and alcohol use among Indigenous people. Work is nearing completion on plain language reviews of: Indigenous offender health; Indigenous men’s health; and oral health.

The Board was updated on other projects that the HealthInfoNet has been involved in:

- The major project to provide a resource pack, toolkit, website, yarning place and national workshop for the newly appointed Healthy Lifestyle Workers is in the final stages.
- The HealthInfoNet has been working on the development of special section of the web resource aimed at assisting the Indigenous SEWB workforce to identify and address mental health issues and associated substance use issues. The portal will consolidate access to, and promote awareness and usage of, appropriate mental health screening/assessment tools, information, and resources nationally.
- The HealthInfoNet has completed a project to finalise a resource manual for people working with Indigenous young people in the area of sexual health. The HealthInfoNet had been commissioned by the Australasian Society for HIV Medicine (ASHM), the project’s joint partner with NACCHO, to bring together draft materials that had been under development for some time.
- A program of half-day workshops throughout WA on use of the Australian Indigenous HealthInfoNet, and where appropriate, more general training in internet health information search strategies is planned to occur over the next 18 months.

Visits to the HealthInfoNet have increased by 25% over the past year, and page views by 10%. Visits to the HealthInfoNet’s peer-reviewed journal, the Australian Indigenous HealthBulletin have increased by 19% and page-views by 3%.

Promotion of the web resource is continuing through conferences, all of which are either Indigenous-specific or contain a significant amount of Indigenous-specific content. There have been nine
HealthInfoNet cafes run at conferences since July 2011; presentations were made at five of these conferences. Promotional materials were included in the delegate satchels of 17 other conferences. Communications with stakeholder groups have included mail-outs of our hard-copy reviews, and email blasts. Articles written by AIH researchers have appeared in various health-related professional publications and journals. In October, the Australian Indigenous HealthInfoNet was announced as winner of the Diversity category in the Australian and New Zealand Internet Awards (ANZIA). The awards ‘celebrate exceptional contributions by businesses, organisations and individuals to the development and use of the Internet in Australia and New Zealand’.

The HealthInfoNet yarning places (electronic networks), which enable people interested in Indigenous health to share information, knowledge and experiences, continue to grow. There are currently 14 yarning places with a total of 2,268 members.

The HealthInfoNet’s sustainability relating to funding, partnerships and succession was discussed. With regard to funding, the HealthInfoNet’s core funding enables it to provide a reasonable coverage of many health topics. Further funding would be required to enrich the coverage of specific health topics. The Board commented that, as well as focusing on health issues, having information on two aspects of service delivery, namely ‘what works best on addressing the health issues?’ and service capacity issues related to workforce are important. With regard to partnerships, collaborative partnerships were seen as one way of addressing funding issues in some areas, and they are also important in assisting in the enhancement of the quality of the HealthInfoNet’s products. It was highlighted that the HealthInfoNet has 14 agreements in place. With regard to succession, planning for staff change has been identified as an important strategy for the HealthInfoNet’s sustainability. The Board discussed future options and these options will be explored further.

The next meeting, a face-to-face meeting, is scheduled for March/April 2012.