



Fact sheet: Benefit for Aboriginal and/or Torres Strait Islander health question

To help drive equitable health outcomes for Aboriginal and Torres Strait Islander communities, all researchers should consider the potential benefits of their research for Indigenous health.

As a recommended action under NHMRC's [Road Map 3: A strategic framework for improving Aboriginal and Torres Strait Islander health through research](#) and associated [Action Plan 2021-2024 Triennium](#), a review of the [Indigenous Research Excellence Criteria \(IREC\)](#) was undertaken in 2023. This included national consultation with the feedback considered by the Principal Committee Indigenous Caucus (PCIC) and a [consultation report](#) was released in December 2023.

A key finding from the Review, which was endorsed by PCIC, was strong support for all NHMRC applicants answering a question about how their proposed research will benefit Aboriginal and/or Torres Strait Islander health. This is aligned with the [National Agreement on Closing the Gap](#), which aims to enable Aboriginal and Torres Strait Islander people and governments to work together to overcome the inequality experienced by Aboriginal and Torres Strait Islander people, and achieve equal life outcomes for everyone in Australia.

What is happening?

In selected NHMRC grant opportunities, applicants will need to address the following question:

How does your application benefit Aboriginal and/or Torres Strait Islander health, including contributing to Closing the Gap outcomes?

Applicants will need to clearly describe how their proposed research could benefit Aboriginal and/or Torres Strait Islander health, including contributing to progress against the outcomes and/or targets under the National Agreement on Closing the Gap (not exceeding 2,000 characters).

The expectation is that all applicants will carefully consider the potential benefits of their research for Aboriginal and/or Torres Strait Islander health, not that all proposed research will have a specific benefit.

The response will be considered by peer reviewers in the overall assessment of the application, using the existing scheme-specific assessment criteria (it does not alter the weighting of the assessment criteria), in the context of the relevant field of research. Peer reviewers will focus on whether applicants have demonstrated careful consideration of the potential benefits of their research for Aboriginal and/or Torres Strait Islander health, rather than the number or magnitude of any specific benefits.

Why is this happening?

One of NHMRC's health priorities is promoting wellness and health equity for Aboriginal and Torres Strait Islander people. The objective of introducing this new benefit question is to encourage all applicants – not just those working directly in Indigenous health – to carefully consider how their research could benefit Aboriginal and/or Torres Strait Islander health. This is an important step towards all research promoting wellness and health equity for Aboriginal and Torres Strait Islander people.

In 2019, the Health Research Council of New Zealand announced a similar initiative where all applications must describe how their proposed research contributes to Māori health advancement. The information provided about the research proposal's potential to advance Māori health is scored against the [Māori Health Advancement](#) criterion. In contrast, the response to NHMRC's new question will be considered in the overall assessment of the application against the existing scheme-specific criteria.

Is this replacing the Indigenous Research Excellence Criteria (IREC) assessment?

No, the IREC process is separate to the new question and will remain unchanged. The IREC will continue to apply for applications where a focus of the research effort and/or capacity building is Aboriginal and Torres Strait Islander health.

What if my research does not specifically benefit Aboriginal and/or Torres Strait Islander health?

As stated above, it is not expected that all proposed research will have a specific benefit for Aboriginal and/or Torres Strait Islander health. If you feel that your proposed research does not have a specific benefit for Aboriginal and/or Torres Strait Islander health, you should explain this in the response to the question (see Example 1 below). The appropriateness of responses will be considered by expert peer reviewers in the overall assessment of the application within the specific context of the research and where it is positioned along the research pathway.

Will any guidance be provided to applicants and peer reviewers?

Yes, guidance has been developed in consultation with the Indigenous Advisory Group and is provided to:

- applicants on how to respond to this new question. This is included in the relevant grant opportunity guidelines available on [GrantConnect](#) and in this fact sheet.

- peer reviewers on how to consider the responses in the overall assessment of applications. This is included in the relevant peer review guidelines available on [GrantConnect](#) and in this fact sheet.

What should I include in my response to the question?

Applicants should consider the potential direct and/or indirect benefits of their proposed research for the health and wellbeing of Aboriginal and/or Torres Strait Islander individuals and communities. These could be short-, medium- and/or long-term benefits, which may require further research and development beyond the life of your project to be realised. Applicants are encouraged to refer to the [National Aboriginal and Torres Strait Islander Health Plan 2021-2031](#) and the outcomes under the [National Agreement on Closing the Gap](#).

You should consider the prevalence and any differential outcomes for the disease/condition under study in the Aboriginal and/or Torres Strait Islander population. In addition, you should identify whether the proposed research addresses a priority health issue for Aboriginal and/or Torres Strait Islander peoples or a critical barrier to progress in Closing the Gap. You should also highlight where there are knowledge gaps and whether your proposed research will address them. Depending on the nature of the proposal, you should explain why the research does not have a specific benefit for Aboriginal and/or Torres Strait Islander health, where relevant.

Applicants may want to consider the following questions when preparing your response, noting that not all of these will be relevant to all research:

- Have you carefully considered the potential direct and/or indirect benefits of your proposed research for the health and wellbeing of Aboriginal and/or Torres Strait Islander individuals and communities in the context of the Closing the Gap outcomes? Have you described these benefits or explained why there are no/limited specific benefits?
- Have you considered the prevalence and any differential outcomes for the disease/condition under study in the Aboriginal and/or Torres Strait Islander population, highlighting any knowledge gaps?
- Have you considered whether the proposed research addresses a priority health issue for Aboriginal and/or Torres Strait Islander peoples or a critical barrier to progress in Closing the Gap, highlighting any knowledge gaps?

Example responses are provided below, but these do not cover all circumstances and should not be used as templates.

Example 1: Research with no specific benefit for Aboriginal and/or Torres Strait Islander health or contribution to Closing the Gap outcomes

'The proposed research is basic science examining the X signalling pathway, which is thought to play a role in Y disease. There is limited data on the prevalence and severity of disease Y in the Aboriginal and/or Torres Strait Islander population. Disease Y is not identified as a priority health issue for Aboriginal and/or Torres Strait Islander peoples in the National Aboriginal and Torres Strait Islander Health Plan 2021-2031 or elsewhere. Hence, the research is likely to benefit the health of the general population in the long term, including Aboriginal and Torres Strait Islander

peoples, and supports the Closing the Gap outcome to ensure Aboriginal and Torres Strait Islander peoples enjoy long and healthy lives.'

Example 2: Research with some specific benefit for Aboriginal and/or Torres Strait Islander health and contribution to Closing the Gap outcomes

'The prevalence of disease X significantly impacts Australian Aboriginal and Torres Strait Islander populations, who also have inferior outcomes compared to the broader Australian population. Understanding the risk genes for this disease in Australian populations is limited, including for Aboriginal and Torres Strait Islander populations in Australia. Through the inclusion of samples from Aboriginal and Torres Strait Islander peoples in Australia (which will be collected according to ethical guidance), an immediate benefit of this project will be gaining new knowledge of validated genetic risk factors for this disease that are relevant to these populations. This knowledge will hopefully lead to the development of genetic testing that is applicable for Aboriginal and Torres Strait Islander peoples in Australia and can inform tailored clinical screening and management. This could lead to improved quality of life, especially for those living in rural, regional and remote locations. The long-term goal will be to reduce the inequities for this disease, contributing to the target of Closing the Gap in life expectancy within a generation.'

Example 3: Research that specifically benefits Aboriginal and/or Torres Strait Islander health and contributes to Closing the Gap outcomes

'X behaviour is a leading cause of preventable diseases and avoidable death in Australia. The prevalence of X has not reduced for Aboriginal and/or Torres Strait Islander peoples at the same rate as the broader Australian population, especially in remote communities. This is a major contributor to health inequities for Aboriginal and/or Torres Strait Islander peoples. This research will contribute to reducing X, and contribute to the Closing the Gap outcome of Aboriginal and Torres Strait Islander people enjoying long and health lives. A reduction in X will also deliver health benefits by reducing associated preventable diseases that can impact on the quality of life and reduce the number of X-related deaths of Aboriginal and Torres Strait Islander people. The research will also have economic benefits in terms of limiting the financial hardship associated with X and its resultant diseases. The potential benefits of this research are a priority for Aboriginal and Torres Strait Islander communities as outlined in Y, which called for more research on effective approaches to reduce X.'