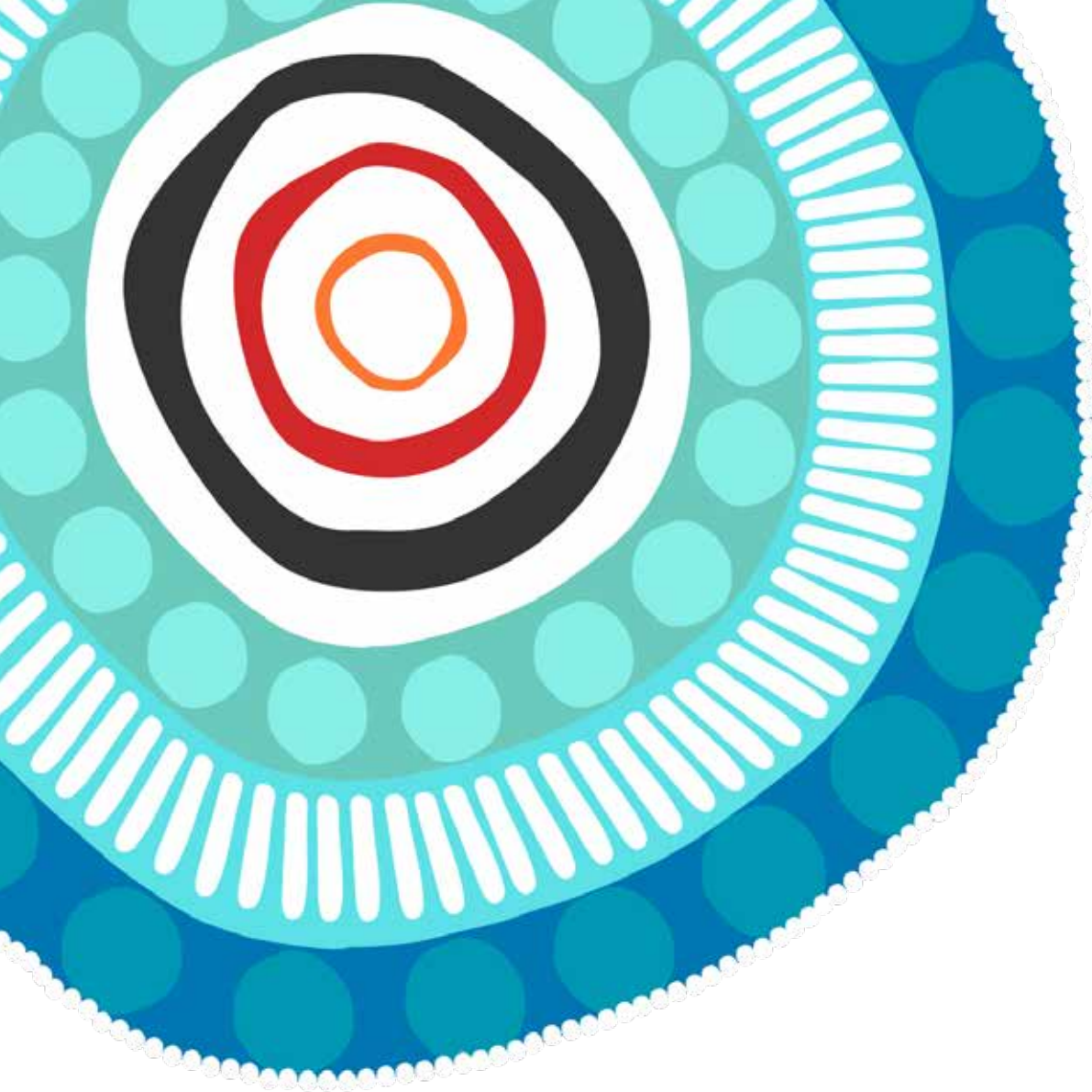


UNIVERSITY CENTRE FOR
RURAL HEALTH
N O R T H E R N R I V E R S

/ə'natəmi/

a study of the structure or
internal workings of something

**UCRH Year in
Review 2025**



Acknowledgement of Country

We acknowledge the local custodians of the land on which UCRH is based, the Widjabul Wyabul people of the Bundjalung nation. We acknowledge and respect their continuing culture and the contribution they make to the life of this region.

Across the Northern Rivers, we also work on the lands of the Gumbayngirr, Arakwal and Yaegl nations and acknowledge their custodianship.

We are committed to ensuring that we walk lightly on this country and that we provide a strong education and cultural grounding for future health practitioners.

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By the numbers



57 medical students
on placement



572 allied health and nursing
students on placement



1159 Multidisciplinary
Education Program
participants



46 Simulation Centre
workshops with
392 participants



320,000 WellMob website
page views



Over \$14m in research funding
over 2024 and 2025



25 higher degree research
students supervised



81 peer-reviewed
publications authored

Highlighting our key successes in 2025

Some of our achievements covered in these pages:

- **Health equity in action:** We walked with communities on projects that centre Aboriginal governance, climate resilience and community-led solutions to improve rural health.
- **Education and workforce development:** We supported over 600 medical, nursing and allied health students through rural placements, simulation and multidisciplinary learning across the region.
- **Research and innovation:** We advanced rural and Aboriginal health research, contributing 81 peer-reviewed publications and new grants that support community-driven projects and better care.
- **Community, partnerships and resilience:** We deepened partnerships across health services, universities and grassroots groups, including the Northern Rivers Community Resilience Alliance, to strengthen local disaster readiness and recovery.

From the Faculty Dean and the Head of Rural Clinical School

This edition of *Anatomy* reflects a year of focused effort, close partnership and quiet determination to improve health and wellbeing for people in the Northern Rivers and across rural and regional Australia. We have four themes to our work: health equity in action, education and workforce development, research and innovation, and community and partnerships.

A strong thread throughout this edition is the rural health workforce pipeline we support from early inspiration through to specialist practice. Programs like Baribunmani Wanyi Ngay and High School Health Careers Day help local Aboriginal and Torres Strait Islander students and other high school students imagine themselves in health careers. Extended rural placements, supported by our Multidisciplinary Education Program and Simulation Centre, continue to build capability and confidence for students across medicine, nursing, midwifery and allied health. The Regional Training Hub helps early career doctors explore regional pathways and take practical steps toward long term rural practice.

Living and working in the Northern Rivers means disaster and climate impacts shape much of what we do. Several stories in this edition highlight how our researchers, staff, students and partners learn with community to understand flood impacts, strengthen community led models like the Northern Rivers Community Resilience Alliance and support better preparedness and recovery. During Cyclone Alfred, our own response drew on this experience, reinforcing the value of early action, partnership and care.

Aboriginal and Torres Strait Islander leadership remains at the centre of our identity. From On Country learning to WellMob's national work in digital wellbeing, through to community governed research, we continue to walk alongside Aboriginal partners and communities whose knowledge grounds our work and strengthens cultural capability across our programs.

You will also see research and innovation that respond directly to local needs. Our teams deliver implementation research that improves clinical practice, strengthens musculoskeletal care and deepens understanding of disaster impacts. This work is rigorous, practical and shaped by close partnerships, ensuring rural and regional communities benefit from evidence that reflects their contexts.

None of this would be possible without our partners across the Northern Rivers and beyond. Local health services, Aboriginal Community Controlled Health Organisations, community groups, universities and government agencies all play a central role in the stories you will read here.

As we look back on a big 2025, we do so with a sense of pride and also excitement. In 2026, we celebrate 25 years of UCRH, a milestone that allows us to honour our past, acknowledge our partners and communities and look ahead with renewed purpose. We look forward to celebrating this with you and thank you for your continued support and partnership.

Professor John Prins
Dean

*Faculty of Medicine
and Health
University of Sydney*

Professor Vicki Flood
**Head of Rural
Clinical School**

*University Centre
for Rural Health
University of Sydney*



From inspiration *to aspiration*

In 2025, UCRH strengthened its work in inspiring future rural health professionals through two cornerstone youth engagement programs: Baribunmani Wanyi Ngay and our annual Health Careers Day.

The first Baribunmani Wanyi Ngay event took place in July, welcoming 45 Aboriginal and Torres Strait Islander high school students to the Lismore campus for a day of hands-on discovery. Students from Kingscliff, Mullumbimby, Shearwater and Casino high schools, Clarence Valley Anglican School and St John's College Woodlawn explored pathways into health careers. They moved through simulation stations in basic life support, physiotherapy and speech pathology, supported by university students on rural placements from the University of Sydney, Griffith University and Southern Cross University. The WellMob team also introduced digital tools designed to support social and emotional wellbeing. The program encouraged students to imagine themselves in future health roles and highlighted the importance of building a strong First Nations health workforce.

A second Baribunmani day in October built on this momentum, engaging 35 students from Trinity Catholic College, St Mary's Casino, Richmond River,

Murwillumbah, Wollumbin, Alstonville, Mount St Patrick and Shearwater high schools. The program again centred on culturally grounded, practical learning experiences that helped students connect their strengths and identities with real-world health career possibilities.

Just days after the July Baribunmani event, UCRH hosted 68 high school students and 12 careers advisors at our annual Health Careers Day, supported by Connect Northern Rivers. Students heard from university health students representing medicine, nursing, dentistry, physiotherapy, pharmacy, occupational therapy, nutrition and dietetics, and more. They took part in exam-pathway preparation sessions, simulation observations, and hands-on workshops in clinical skills including suturing, basic life support, nursing, dentistry, exercise physiology and physiotherapy. The 2025 program also welcomed home-schooled students for the first time and introduced an advanced cardiac arrest simulation involving a retrieval team.

These programs have real impact. They represent the earliest stages of the rural health workforce pipeline that UCRH supports across education and training.

Walking with community *for better health*

Each year we deepen our understanding of what it truly means to act on health equity.

At UCRH, this is not an abstract idea. This commitment underpins multiple strands of our work across education, research and community partnerships, several of which are reflected throughout this report. It lives in the way we listen to communities, how we work alongside them and how we help create tools and knowledge that respond to their priorities.

Through the Validating Outcomes by Including Consumer Experience project (pictured below), we partnered with Aboriginal and Torres Strait Islander primary health care services to rethink how patient feedback is gathered and used. Community members across eight sites shared what matters most to them and their communities, highlighting the need for feedback processes that honour culture, build trust and support accountability in care. Together, we helped shape a patient-reported experience measure that reflects Aboriginal values and worldviews. This work supports services to hear what their

communities are saying about care and to use that insight to improve quality in ways that feel right for the people they serve.

In a different but deeply connected space, we continued our long involvement with the Wilya Janta initiative to advance housing solutions for remote Aboriginal communities. The award of a major national grant is supporting a five year project that evaluates culturally informed, climate appropriate housing designed by community. This research recognises that safe, appropriate housing is central to wellbeing, particularly as climate pressures intensify. By building evidence grounded in Aboriginal worldviews, we are helping create pathways for community designed homes that can be adapted across regions.

Both projects show what health equity in action means to us. We are not only supporting better services and stronger systems. We are walking with community, learning from Aboriginal knowledge holders and helping create tools that lift health and wellbeing in ways that endure.





Growing confidence and capacity

Extended Rural Placements

At UCRH, we are proud of the role we play in helping future health professionals build the confidence, capability and compassion needed for rural practice.

Extended rural placements continue to be one of the most meaningful ways we support this growth. By giving students more time, more connection and more real-world experience, we see them develop a deeper understanding of rural health and a clearer sense of their own potential.

Research findings

Recent UCRH research published in the Australian Journal of Rural Health articulated what we have often observed (see asterisked publication, page 36). In partnership with Whiddon Residential Care, Southern Cross University, TAFE NSW and University of Sydney colleagues, we explored how 5- to 20-week

placements in residential aged care homes shaped students' readiness for practice. Students from multiple universities participated in these placements that we designed and coordinated.

The findings were encouraging. Students experienced meaningful increases in their confidence across assessment, diagnosis, planning and implementation. They also described feeling independent, prepared for work and enthusiastic about interprofessional teamwork. These outcomes matter for rural communities. They show that longer placements do more than support student learning. They help increase access to allied health services for older residents and contribute positively to aged care settings. This work was supported by the Australian Government Department of Health, Disability and Ageing through the Rural Health Multidisciplinary Training Aged Care Expansion Grant.

Further evidence came from a systematic integrative review we published in BMC Health Services Research.

This review brought together findings from eleven studies examining the impact of allied health student placements in primary healthcare settings for older clients. It identified positive effects on client outcomes, satisfaction with care and the way students support service delivery. While it also highlighted the need for more high quality research, it reinforced the value students bring when they are meaningfully integrated into real health services.

Student perspectives

These research findings align closely with what we hear from our own students. Earlier this year, we spent time with a group of Griffith University occupational therapy and physiotherapy students at the end of their ten-week placement with us (pictured left). Their reflections were insightful and warm. They spoke about the importance of patient interaction and the time required to build trust. They valued being able to understand patients' needs deeply and to see the outcomes of their interventions unfold.

These placements followed our service-learning model and were co designed with partners such as the Northern NSW Local Health District and Whiddon. Using our hybrid supervision approach, our clinical educators Lewis Grove and Sarah Crook provided a balance of structured support and independence. Students told us this helped them feel respected, safe and supported as they developed their professional identities. They also expressed genuine appreciation for the care provided by our education support officers, who assisted with wellbeing, logistics, accommodation and social connection. This wraparound support helped students feel welcomed and part of the local community.

We work hard to ensure every placement is flexible and tailored to the learning needs of each student. We want students to develop autonomy within a safe environment. We want them to understand rural practice in a meaningful way. Most importantly, we want them to leave feeling confident, inspired and connected to the communities they serve.

Why Wednesdays matter

One of the most powerful parts of a rural placement with us is the chance for students to learn alongside others through our weekly Multidisciplinary Education Program (MEP).

Every Wednesday, we bring together students as well as local service providers and clinicians. Together, we explore real cases, share discipline perspectives and build the teamwork skills that define high quality, person centred care.

Former UCRH social work student Michelle Dang captured the spirit of these sessions when she shared her own experience in a piece written for our quarterly newsletter. "The collaborative learning I found in MEP was unlike anything I had seen before." In one session, Michelle brought a deidentified case from her placement at Women Up North Housing, and the group offered thoughtful, trauma informed insights she later took back to her supervisor. As Michelle told us, "Learning extends far beyond the lecture hall. It lives in the people and communities we serve."

Rising to a *changing climate*

Across 2025, our reputation in understanding how climate change and the environment shape health in rural and regional communities was deepened.

Through student-led projects, community-driven research and collaborative scholarship, we continued to show how evidence can guide equitable and resilient health systems.

We saw firsthand how extreme weather disrupts not only communities but also the learning journeys of future rural doctors. A study led by Dr Jodie Bailie revealed how third-year medical students experienced the 2022 Northern Rivers floods (see asterisked publication, page 33). Their stories highlighted disrupted placements, loss of essential services and the emotional burden of displacement. What stood out was their deepened understanding of vulnerability and inequity, and how these experiences are shaping the kind of clinicians they want to become.

Building on this, a scoping review led by medical student Nicole Dorfer examined how flood events affect Australia's health system (see asterisked publication, page 34). The review showed that disruptions stretch well beyond immediate emergency

response, impacting infrastructure, transport, workforce capacity and access to care. It laid vital groundwork for strengthening disaster preparedness, especially as climate-driven events increase.

Our researchers also continued to explore how to work safely and respectfully with communities who have lived through trauma (see asterisked publication, page 36). A study published in *BMJ Global Health* offered practical guidance for trauma-informed research in disaster-affected communities, emphasising care, safety and culturally grounded approaches.

We were also proud to support student researcher Jayden Wells, whose work highlighted the power of Indigenous-led environmental and health programs (see asterisked publication, page 38). His review showed that when caring for Country and primary healthcare come together, communities thrive. The message was clear: place-based, culturally led programs create lasting impact.

Together, these projects show how we are contributing to a stronger, fairer future. By listening deeply, partnering respectfully and generating evidence that matters, we are helping shape climate-resilient health systems that leave no community behind.





Rural learning *that changes lives*

We see every rural placement as an opportunity for meaningful impact, not only for communities but for students who learn with us. Julie's story captures that beautifully.

Through our residential aged care placements, Julie has been involved in our allied health student program since 2023 and, together with our occupational therapy, physiotherapy and speech pathology students, has made significant gains in her functional mobility, communication and upper limb use. These improvements have supported her independence in daily living and helped her reconnect with the people who matter most to her.

Last year, during Occupational Therapy Week, Julie shared a clear goal. She wanted to visit the Grafton Jacaranda Festival, return to the place she grew up and spend time with her family. That Occupational Therapy Week and the Festival coincided was a perfect opportunity to apply this year's theme, Occupational Therapy in Action. Julie's outing to Grafton showcased the creativity, problem solving and compassion at the heart of Occupational Therapy practice. Students collaborated to provide tailored interventions that supported Julie's mobility and transfers for safe

car travel and comfort in the community. They also worked on her functional communication so she could chat comfortably with loved ones. A community risk assessment ensured everything was planned and safe.

For our students, the experience was equally transformative. Lucy, a University of Sydney Occupational Therapy student who supported the outing, told us, "I actually didn't realise how hard it was to get health support in general in rural locations. I came in on the first day to orientation and immediately it was barrier after barrier. Going forward, I would definitely think about taking a rural health job if I got the opportunity."

These placements expose students to the realities of rural health, build confidence and capability, and make a future rural career feel both possible and purposeful.

Julie is already thinking about her next trip. And we are pleased to have walked beside her, while helping shape the next generation of rural health professionals.

Pictured above: Julie with her daughter and University of Sydney Occupational Therapy students Tony and Lucy.

Medicine on Country: *connection and capability*

This year, our rural medical education was underpinned by partnerships, refining pathways and supporting students across an ever-widening network of sites and clinical experiences.

Pathways

The Northern Rivers continues to be a place where future doctors learn what rural practice really looks like. Through the North Coast Medical Education Collaboration (NCMEC), we delivered long-stay and elective placements for students from the University of Sydney, the University of Wollongong and Western Sydney University, supporting a total of 57 full-year placements across the three programs.

At our annual NCMEC gathering in Ballina (leadership pictured below), the theme *Learning From and With Country* shaped rich conversations on primary health, community engagement and Aboriginal health education. Speakers from the region's Aboriginal Community Controlled Health Organisations (ACCHO) including Bullinah Aboriginal Health Service and Bulgarr Ngarru Medical Aboriginal Corporation guided reflections, while clinicians and academics shared

innovations in curriculum, AI in health education and evolving workforce pathways.

Each university provided valuable updates. The University of Wollongong highlighted important curriculum reforms, expanded rural pathways, and recruitment and support for Aboriginal and Torres Strait Islander students including cultural camps, pathway clarification and targeted entry supports. The University of Sydney outlined major milestones in the MD curriculum and plans for future program evolution, including more integrated learning and flexibility for students over the coming years. Western Sydney University addressed efforts to build its rural offerings while also marking important program milestones, including their 20th cohort. These conversations reaffirmed the shared commitment across the three universities to advocate for rural internships, enhance end-to-end rural pathways and address workforce challenges together.

Beyond NCMEC, we also placed 49 short-stay and elective students from the University of Wollongong, University of NSW, Bond University and University of Sydney. They completed placements across various disciplines including paediatrics, critical care, surgery, and general medicine.



Clinical learning inspires

All our students train across a diverse region, moving through general practice, critical care (including anaesthetics, intensive care and emergency departments), general and speciality medicine, paediatrics, psychiatry, general and specialty surgery, obstetrics and gynaecology, and Indigenous and community health settings. They also benefit from practical sessions that make the most of our Simulation Centre, and from the support and guidance of skilled clinicians who teach our medical students on placement with us, bringing their real world clinical experience to the fore.

Hands-on workshops taught onsite at our Lismore campus remained a highlight, as do the weekly student led case discussions. Simulation-based sessions such as Ward On Call helped students practise assessing patients in real-time scenarios, sharpen communication with nursing teams and learn to prioritise safely under pressure. These sessions modelled what their first year as junior doctors will feel like and were made possible through the collaboration of our Simulation and Critical Care educators and local clinicians.

And behind the scenes, our Practice Managers Breakfasts offered a moment to thank the general practices across the Northern Rivers whose partnership is essential to high-quality medical placements. These gatherings allowed space for collaboration, shared problem-solving and celebration of the people who ensure students feel supported from day one.

Partnership with purpose

Much of what we achieve in rural medical education happens because of our partnerships. While NCMEC is a pivotal connection, others are also impactful. We would not be in a position to offer such a comprehensive and diverse experience for our students without the support of so many of the region's clinicians and practices. They enable us to focus on preparing graduates who are grounded in rural practice realities, culturally informed, community engaged and ready to contribute to better health outcomes for regional communities.

Excellence recognised

We proudly celebrated the outstanding educators who shaped student learning this year. Our 2025 Excellence in Education award recipients were:

Teaching Excellence

Dr Dominic Givney (Senior Resident Medical Officer, Critical Care)

Recognised for exceptional clinical teaching and meaningful contributions to an outstanding student experience.

Best Supervision by a Department

Emergency Department, Northern NSW Local Health District Richmond Network
Acknowledged for excellence in supervision and consistently high-quality learning environments for students.

Enhancing the Student Experience

Dr Jason Koutsodontis (Psychiatry Registrar)

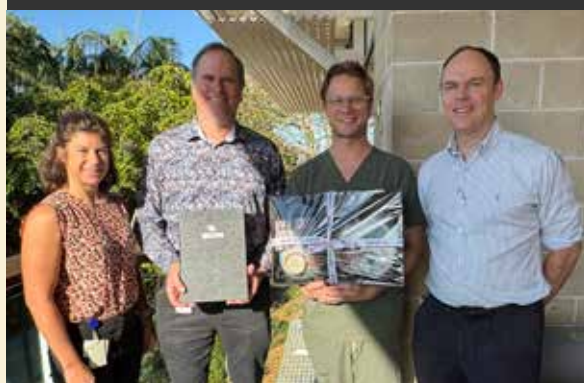
Honoured for enriching learning beyond the formal curriculum and creating supportive, memorable experiences.

Enhancing the Student Experience

Dr Victoria Sasongko (Nephrologist, Lismore Base Hospital)

Recognised for significant impact on student wellbeing, engagement and positive placement culture.

Pictured below: Dr Amy Scott (UCRH Sub-Dean, WSU), Dr Richard Mahoney (Deputy Director, Richmond Network ED), Dr Dominic Givney (Senior Resident Medical Officer, Critical Care), Dr Joe Duncan (UCRH Academic Lead, Sydney Program)





Allied health: *skilled, connected and future ready*

This year we supported a remarkable breadth of placements across the Northern Rivers and Clarence Valley, welcoming 572 Allied Health, dentistry, nursing and midwifery students who collectively completed 4,577 placement weeks.

With placements averaging eight weeks each, we were able to offer meaningful continuity and deeper learning experiences across aged care, hospitals, multipurpose services, community organisations and rural schools.

What makes our region a powerful training ground is its diversity. Students learned in settings from Ballina to Byron Bay, Lismore to Grafton, and Kyogle to Maclean and Yamba, spanning disciplines that included physiotherapy, occupational therapy, speech pathology, psychology, pharmacy, dietetics, social work, exercise physiology, paramedicine, medical imaging, dentistry and more. This breadth reflects our commitment to supporting a strong, multidisciplinary rural workforce and ensuring students experience the realities, challenges and rewards of rural practice.

We achieved this through careful placement

coordination and close collaboration with local services. Sustained student numbers at Whiddon Casino and Kyogle, Kyogle MPS and outreach to Bonalbo and Urbenville helped us meet community need while providing high quality supervision and learning opportunities. Other partnerships, such as those with Uniting Care Goonellabah and Feros Care Bangalow, broaden our reach even further.

Deepening cultural capability

Our students engaged in a suite of learning activities designed to foster their cultural awareness and practice readiness. On-Country experiences introduced students to local perspectives and histories, while cultural awareness sessions offered practical insights into supporting Aboriginal clients.

The weekly Multidisciplinary Education Program remained a cornerstone of interprofessional learning, supported by academics and Clinical Educators who guided tutorials, practice-skills sessions, clinical case discussions and simulation scenarios. The Goori Book Club continued to provide a reflective space for culturally grounded learning and conversation.

Across all of these activities, students consistently told us they felt supported, challenged and welcomed. Many shared that these experiences shaped how they will practise in the future, and in some cases influenced their decision to build long-term careers in the region.

Leading with innovation

Innovation in aged care continued to be a major highlight. Our aged care evaluation showed positive experiences for residents, staff, families and students, with longer placements creating stronger therapeutic relationships and more consistent contributions to daily routines. The Griffith University collaboration, which introduced extended 10-week physiotherapy blocks, demonstrated the value of continuity for both learning and resident wellbeing.

We were also pleased to celebrate excellence within our own team. Clinical Educator in occupational therapy Sarah Crook received an OT Futures Practice Education Commendation for 2024–2025, recognising her skill, cultural responsiveness and impact across schools and aged care sites. Her achievement reflects the dedication of all our educators, who shape student learning every day with compassion and expertise.

Our leadership was also recognised on the national stage. Presenting at the National Allied Health Conference allowed us to share insights from our rural aged care work, reaffirming the sector's recognition that regional clinical education programs like ours are delivering high quality, interprofessional training that is making a difference.

Locally, we continued to create new opportunities for meaningful engagement, including the development of our Reminiscence Kit for aged care placements. This creative initiative invites community members to contribute sensory items that spark connection and conversation, enriching the student experience and strengthening person-centred care.



Purposeful placement

When Shaun Buckett returned to Lismore for placement, it felt less like a requirement and more like coming home.

Growing up in the Northern Rivers, he had always felt connected to this place. After a decade flying Hercules aircraft in the military, he shifted into pharmacy, where everything started to fall into place.

Shaun first connected with us during his pharmacy internship at St Vincent's Hospital. He joined our student-led case discussions and quickly became part of our learning community. Those early experiences helped him understand how different health professions collaborate and how teamwork shapes better outcomes for people living in rural areas.

That connection stayed with him. When he later returned for hospital placements as a medical student it was the sense of belonging, the mentors he had met and the relationships formed in our region that drew him back.

Shaun's journey reminds us that rural placements do more than build skills; they help students find direction, community and purpose.



Bringing realism *to rural training*

As a leading provider of simulation education in the Northern Rivers, we continue to strengthen how students and practitioners learn with us. The same simulation infrastructure supports student learning, workforce development and emergency preparedness across the region.

We ensure future and current health professionals have access to immersive, holistic and technology-enhanced education that prepares them for regional and rural practice. This year, we took several big steps forward.

Expanding capabilities

In 2025 we welcomed two new high-fidelity simulators that significantly expanded the realism and scope of our training.

GeriAnne, our new aged care patient simulator, is already enhancing how students prepare for aged care placements. Designed to mimic complex geriatric presentations, she allows students to practise recognising and responding to common age-related

changes such as cataracts, stroke presentations and mobility limitations, all within a safe and supportive environment. By offering realistic aged skin, articulation, and age-appropriate anatomical features, she helps bridge the gap between theory and practice for disciplines including physiotherapy, speech pathology, occupational therapy, social work, nutrition and dietetics and more. Her arrival also supports our work in the Rural Health Multidisciplinary Training Aged Care Expansion program by improving student readiness and confidence before they step into residential aged care settings.

We also became the first site in Australia, and among the first internationally, to use MamaAnne, a world-class maternal and birthing simulator. MamaAnne enables immersive obstetric emergency training across the continuum of labour, delivery and postnatal care. With features that include an automated birthing system, realistic bleeding, and anatomically accurate silicone and joint articulation, MamaAnne allows learners to safely rehearse scenarios such as eclampsia, postpartum haemorrhage and maternal advanced life support. Her introduction has strengthened our ability to support medical students undertaking perinatal and women's

health terms, as well as practitioners participating in continuing professional development.

Skills and confidence

Our Simulation Centre continues to be a place where collaboration drives impact. This year we delivered 46 workshops across a breadth of clinical areas, welcoming 392 participants from a range of professional backgrounds and partner organisations. Programs ranged from advanced life support, plastering and suturing and ultrasound vascular access, to bespoke offerings for practice nurses, community health teams and emergency department staff. These sessions were supported by collaborators including the Local Health District, retrieval services, Healthy North Coast, Aboriginal health teams and university partners.

Our focus remains on evidence-based, interprofessional and regionally tailored education. We design our programs to strengthen capability across rural practice settings and create tangible improvements in health outcomes for

our communities. Whether through Wednesday Multidisciplinary Education Program sessions, professional development opportunities or placement-based learning, we aim to create training that is practical, meaningful and deeply connected to real-world rural healthcare.

Looking ahead

As we reflect on the year, the momentum building within our Simulation Centre is palpable. The addition of GeriAnne and MamaAnne signals our commitment to investing in cutting-edge tools that support students and clinicians to thrive in rural settings. These technologies, combined with the expertise of our Clinical Educators and the strength of our partnerships, ensure that learners receive the most realistic and impactful training possible.

We remain focused on delivering education that is collaborative, high-quality and responsive to community need. Most importantly, we continue to shape a confident, capable rural health workforce equipped to care for people across every stage of life.





WellMob's year *of strong collaboration*

In 2025, the UCRH-based WellMob project worked alongside national partners to improve digital social, emotional and cultural wellbeing support for First Nations communities.

Partnerships with NSW Ministry of Health and Emerging Minds deepened this year, resulting in additional engagement that enabled WellMob to expand targeted workforce development and digital initiatives.

The team also broadened collaborations across the University of Sydney, working with the Charles Perkins Centre and the Matilda Centre on research and innovation activities that support culturally informed practice. These collaborations reinforce our commitment to evidence-based approaches that meet the needs of health and wellbeing workers and the communities they serve.

This year, WellMob's digital library continued to grow, maintaining more than 500 Aboriginal and Torres Strait Islander mental health and wellbeing resources spanning videos, apps, fact sheets, podcasts and more. We delivered 49 social posts, four e-newsletters

with strong readership, and thousands of practitioner interactions through our training resources.

Top-accessed tools such as the Understanding the Impact of Colonisation, Good Allyship, and Suicide Prevention sheets continued to guide practitioners in culturally safe practice.

Practitioner demand remained strong, with WellMob delivering national and international conference presentations, including at the Indigenous Allied Health Australia Conference pictured above, and at the e-Mental Health Congress in Toronto.

The digital social and emotional wellbeing email-based pilot, developed with our partners, attracted almost 400 practitioners, with 80% requesting further training. This momentum signals a growing national appetite for culturally grounded digital wellbeing capability.

As part of the broader e-Mental Health in Practice project, our contribution ensures WellMob remains a trusted strengths-based platform that promotes cultural knowledge, hope and healing, while supporting the workforce through practical, culturally embedded resources.

Roadmap for rural medical *careers across Northern NSW*

At the postgraduate and early-career stage, our focus shifts to supporting medical trainees as they navigate specialist training pathways in rural settings.

In 2025, the Northern NSW Regional Training Hub flourished as a place where future rural doctors feel supported, connected and confident about their path.

As a partnership between Northern NSW Local Health District and UCRH, we focus on creating clear medical training pathways and helping students see a long-term future in rural medicine.

In 2025 the Regional Training Hub supported 18 interns, 65 medical students and more than 200 doctors in training across 22 disciplines. We delivered orientation and career-planning sessions, internship briefings and exam preparation support, helping trainees settle in and stay engaged.

A highlight was hosting the three-day Junior Medical Officer course, which brought together 75 early-career doctors and students from across the region. We also strengthened local training capacity by

securing new college accreditation in adult internal medicine and supporting reaccreditation in urology and gastroenterology.

We continued to encourage students interested in rural practice through welcome events, career sessions, simulation opportunities and mentoring for early-career doctors. We also contributed to the Destination Medicine podcast and the Regional Medical Training website to promote rural career pathways more widely.

Nationally, we represented the Regional Training Hub network at a Department of Health forum on specialist training and contributed to work on future outcomes-based reporting. Locally, we helped identify workforce needs by collaborating with the Primary Health Network and reviewing regional workforce planning data. We also secured three community grants to deliver education programs in 2026, including critical care, anaesthetics and point-of-care ultrasound.

Together, these achievements reflect our commitment to building a skilled and connected rural medical workforce for Northern NSW.





Driving rural research *with purpose and partnership*

Community-led projects

In 2025 we continued to strengthen our role as a leader in rural and Aboriginal health research, working alongside communities, clinicians and partner organisations to generate practical knowledge. Our work retained a focus on disaster resilience, First Nations governance, climate adaptation and rural health system reform, with major progress across projects including STAUNCH, HeLP-R, VOICE and Healing Country. These initiatives demonstrate the power of long-term partnership, meaningful co-design and community and consumer leadership.

Across relevant projects, UCRH applies a consistent set of culturally-grounded research principles to guide governance, data ownership and accountability. All Aboriginal health research was First Nations led or governed. We embedded Aboriginal researchers, cultural advisory groups and Indigenous data sovereignty principles across our projects, using approaches such as Participatory Action Research, yarning circles, Indigenous storywork and arts-informed methodologies. This ensured that research was accountable to community priorities and that data ownership remained with communities.

Rural workforce support

We continued to build rural research capability by engaging clinicians, community researchers and students across multiple projects. More than 80% of students on service-learning placements completed research or quality improvement projects with support from our clinical educators and academic staff. We supervised medical student projects and 25 HDR candidates, including clinician researchers and rurally based students.

We supported rural clinicians and staff through embedded roles, peer-learning and leadership development. In 2025, the Academic Development Awards recognised 16 staff and helped drive targeted research progression. Our Supervisor Mentorship Program also created new supervisory pathways, supporting three emerging HDR supervisors.

Across the region, we delivered training and supported communities of practice to strengthen research skills, including the Disastrous Writing Workshop, the Rural Health HDR Student Showcase and hybrid open-access sessions. These programs supported collaboration and reinforced our commitment to a sustainable rural research workforce.



Anatomy: Year in review 2025

Strengthening partnerships

Collaboration remained central to our progress. We deepened connections with the University's Advancement Portfolio to support long-term sustainability and convened an in-person workshop with metropolitan colleagues to explore strategic funding diversification. We also held quarterly Research Leadership Collaboration meetings with Northern NSW Local Health District, reinforcing regional alignment and shared decision-making.

Our disaster adaptation and resilience research Cluster played a key role in establishing the Northern Rivers Community Resilience Alliance, a community-centred model that continues to grow local capability in disaster preparedness and recovery. This work demonstrated how research translation can support real-world change (see more about the Cluster on pages 24-25).

Our researchers contributed to advisory panels and committees across Indigenous health, primary care, disaster recovery, climate and ethics, ensuring rural perspectives were represented in broader policy and system reform.

Sharing knowledge

Disseminating research remained a priority. In 2025, we authored 81 peer-reviewed publications (see story on following page), shared findings through conferences and policy forums, and expanded our use of community-facing formats to increase accessibility. Fourteen new grants were awarded, adding to those we received in 2024, reflecting strong recognition of the value and relevance of rural research.

Our research communications strategy supported greater visibility across the region and the broader rural footprint of the Faculty, helping us share achievements, celebrate our researchers and highlight the importance of locally led rural research.

Together, these achievements reflect who we are: a collaborative, community-connected research centre committed to advancing health equity for rural people.

Pictured above: In December, UCRH researchers partnered with Wilya Janta and community leaders of Tennant Creek for Shaking the Bush. This was part of a UCRH project exploring how Indigenous-designed housing can support health, culture and community wellbeing. Image courtesy Andrew Quilty and Wilya Janta.

Driving innovation *in rural pain care*

Our musculoskeletal research team has strengthened our position as a leader in rural health research, demonstrating how evidence can drive improvements in care.

Across our projects, we continued to tackle some of the most persistent challenges in rural communities, particularly chronic pain and the growing burden of musculoskeletal conditions. Our work reflects what we value most: rigorous research, collaboration with health services, and a commitment to solutions that make a meaningful difference in people's lives.

One of our major achievements was the publication of the Healthy Lifestyle Program trial, showing that integrating lifestyle support can reduce disability and improve quality of life for patients with long-term low back pain. These findings reinforce our belief that effective care must look beyond the spine and address the whole person, including the lifestyle factors that shape long-term pain experiences.

We also advanced several projects designed to strengthen rural care pathways. Our research into emergency department wait times demonstrated how physiotherapy-led models could reduce pressure on busy services. Meanwhile, new analyses of back pain across NSW highlighted the heavier burden faced by rural and lower-income communities.

This year also saw the launch of our four-year HeLP-R trial across four regional hospitals. By comparing

in-person and virtual models of integrated care, we are working to uncover what best supports people living with chronic musculoskeletal conditions in rural areas. Early engagement has been overwhelmingly positive, with local clinicians embracing new training and care pathways (pictured above).

Our researchers also shared their findings internationally, presenting work on digital health, artificial intelligence and resistance training at the Back and Neck Pain Research Forum in Switzerland. These conversations are vital as we explore how innovation can enhance rural health outcomes.

Well deserved recognition

We were delighted to celebrate with UCRH PhD student Jane Linton, when she was named as a finalist in the Australian Museum Eureka Prizes. Jane contributed to the Staying Strong with Arthritis project, which co-created the first culturally and clinically informed arthritis education resources for Aboriginal and Torres Strait Islander peoples.





A year of impactful *research and journal publications*

As a rural health centre shaped by and accountable to our communities, we take great pride in the depth and diversity of research emerging from our teams.

In 2025, our researchers contributed to an impressive spread of peer-reviewed publications across leading national and international journals. These papers explored everything from disability inclusion and adolescent wellbeing to climate-related health impacts, musculoskeletal care, public health, culturally safe practice and the changing needs of rural communities. Together, they reflect the breadth of inquiry that is possible when our researchers are deeply embedded in place and connected to local priorities. All publications featured in this story are listed in full in the Appendix to Anatomy.

The scale and diversity of these publications demonstrate our commitment to strengthening rural health through evidence, collaboration and innovation. Although our work contributes to national and global conversations, many of the topics our researchers pursue are shaped directly by the realities of living and working in the Northern Rivers. This includes research addressing the health impacts of extreme weather events, the unique needs of Aboriginal and Torres Strait Islander communities and the ongoing challenges of accessing care in rural settings. These are issues that matter deeply to our region, and our research reflects that responsibility.

The next generation

Supporting the next generation of rural researchers remains a defining part of our mission. Across 2025, 21 medical degree student research projects were undertaken by our University of Sydney and Western Sydney University medical students. These projects were supervised by our academic staff and Local Health District clinicians, ensuring that students were guided by people with deep expertise in rural practice.

Students tackled locally relevant issues including Aboriginal health, disaster impacts on clinical services, and evaluations that directly informed service improvement, such as aged care and care for people experiencing eating disorders. Seven MD projects were published in peer-reviewed journals, demonstrating the calibre of student work made possible through local mentorship and strong community connections.

UCRH researchers also supervised 25 higher degree research candidates, further extending the growth of rurally-supported research.

Women leading resilience *in our region and beyond*

Across the Northern Rivers, our disaster resilience research is helping reveal who drives community recovery and how local leadership shapes long-term wellbeing. These projects show how we are building a strong, evidence-based foundation for more inclusive and effective disaster systems.

Invisible leadership

In recent years, we have deepened our understanding of what drives disaster resilience. Our research has shown that much of the sustained, community-led recovery work following the 2022 floods was led by women whose leadership often went unrecognised. A study we led with partners across Australia revealed how women stepped into crucial roles during and after the disaster, coordinating food relief, managing donation hubs, organising volunteers and providing emotional support while simultaneously navigating their own flood impacts. This work, published in *Women's Health*, confirmed that while public narratives focused on rescue efforts, the backbone of long-term recovery was often invisible labour carried out by women (see asterisked publication, page 36).

This research highlights a systemic gap in disaster governance, where women who already hold deep community knowledge and relationships are frequently excluded from decision making. By documenting these experiences, we are continuing to advocate for disaster systems that recognise, value and resource the people already doing this essential work.

National influence

Our commitment to strengthening disaster governance extends beyond the Northern Rivers. Dr Rebecca McNaught's contribution to the *Disaster Recovery Almanac* amplified regional experiences onto a global stage, drawing attention to the challenges Australians face when insurance systems fail after climate-fuelled disasters. Her work shares lived experience from our communities, illustrating how rising premiums, limited coverage and complex claims processes compound vulnerability after floods or storms. By contributing to national and international dialogues, we are helping shape more equitable and community-centred approaches to disaster preparedness and recovery.



Community-led models

In 2025, we joined the Enabling Regional Readiness project through the Australian Government's Disaster Ready Fund. This initiative strengthens the Northern Rivers Community Resilience Alliance, which grew out of earlier collaborations between local communities, UCRH and the Sydney Environment Institute.

Our earlier research into self-organising in disasters and gendered recovery directly shaped the model now being scaled across the region. With 87% of local coordinators in the Alliance being women, this project recognises and invests in community leadership. We are contributing ongoing evaluation, a dedicated Research Assistant and support for ethics and monitoring, evaluation, accountability and learning. This is helping us refine a scalable, community-led resilience model that reflects the strengths, diversity and lived experience of local people.

Creative collaboration

Research innovation also happens when people are given the time and space to create together. Our annual Northern Rivers Disastrous Writing Retreat has become a valued gathering for researchers, community organisers and disaster practitioners. Hosted at our Lismore campus, the retreat brings together around 20 writers each year for two days of focused writing, peer review and shared inspiration.

Participants from universities, NGOs and community groups describe the retreat as a rare opportunity to develop collaborations and strengthen ties across disciplines. The retreat reflects our commitment to fostering connection in the disaster research space, reinforcing that collaboration is essential to producing meaningful, grounded scholarship.

Future focus

Across all of this work, we continue to bolster our expertise in disaster resilience as a core research strength at UCRH. The studies we lead, the partnerships we cultivate and the community-driven projects we support all contribute to a richer understanding of how rural and regional communities respond to crisis. As climate-related disasters intensify, we are committed to generating knowledge that not only documents what is happening on the ground but also shapes more inclusive, equitable and resilient systems for the future.

Our research in this area is steadily expanding, informed by our proximity to community experience and our deep connections across the Northern Rivers. As we look ahead, we are determined to continue contributing evidence, collaboration and leadership in disaster resilience.



Connected with community *across our region*

As an integral part of the Northern Rivers, we continue to value every opportunity to meet people where they are and contribute to the vibrancy of our region.

Our work is grounded in the needs of our community, and each interaction reminds us why we remain committed to improving health and wellbeing across rural and regional Australia.

Throughout the year, we took part in many local community events, bringing us together with community members, future students and partner organisations. At the Northern Rivers Careers Expo in July, our education teams showcased the pathways available in rural health and connected with hundreds of young people exploring their futures.

Also in July, we participated in Lismore City Council's National NAIDOC Week celebration, standing alongside

community to recognise and honour Aboriginal and Torres Strait Islander cultures. It was a fabulous day, and so heartening to see our students connecting with culture and community in a such a lovely setting.

Later in the year, the West of the Ranges Careers Expo at Bonalbo Central School provided another chance to spark interest in rural health careers. Our team shared insights into what studying and working in our region can look like and encouraged students to imagine themselves as part of the future rural health workforce.

These events reflect the heart of our work: building strong relationships, celebrating local strengths and helping grow a skilled, compassionate health workforce for the Northern Rivers.





Building regional capacity *ahead of the next crisis*

Across the Northern Rivers, we have seen how deeply disasters shape community life and how essential it is for local knowledge, disaster management agency expertise and community-led organising to work hand in hand.

Much of our recent work has centred on understanding how grassroots groups and formal disaster management agencies collaborate during and after crises (see story on previous pages). Through new research presented at our March 2025 Seminar, led by Dr Jo Longman and Emma Pittaway, we shared emerging insights about barriers to collaboration, examples of change since the 2022 floods and what becomes possible when agencies invest in trust, respect and flexibility. Their research builds on earlier studies into community-led organising and recovery across NSW, including here in the Northern Rivers. The message is clear: meaningful collaboration grows when systems recognise and value community expertise.

One practical expression of this partnership-focused approach has been our support for the Northern Rivers

Community Resilience Alliance (pictured above, photo by Maddy Braddon and see earlier stories), a growing network of grassroots groups from Grafton to Tweed. The Alliance's work speaks directly to what we value: connection, co-design, peer support and practical tools that help communities prepare before, during and after disaster. Their initiatives – from the Strengthening Spontaneous Volunteer Program to a shared Monitoring, Evaluation, Accountability, and Learning framework and an ORACLE resource library – are transforming how community groups organise, communicate and sustain their work. UCRH researchers are embedded in the Network to track impact and share learnings.

We are pleased to help amplify their efforts, including featuring their voice in our quarterly newsletter. Their experience reinforces what we see across our research and partnerships: resilience lives in community. By walking alongside those already doing the work, sharing evidence, hosting conversations and strengthening networks, we are helping build a future where our region is not only better prepared for the next disaster but better supported to recover.

Cyclone Alfred *brings testing times*

Many pages in this edition of Anatomy touch on climate, the environment and natural disaster, which reflects both the times we are living through and the region we call home. When Cyclone Alfred swept across the Northern Rivers in March 2025, we once again found ourselves preparing for a major weather emergency.

Preparing with purpose

Alongside our research and community partnership roles, 2025 also tested UCRH's own operational preparedness and response capacity. For many in our community, the forecasts and rising rivers brought back difficult memories. We felt this too, yet we were better placed to respond because of past experiences.

We activated our Incident Response Team early, using Bureau of Meteorology and SES triggers to guide our decisions. This timely mobilisation gave us the lead-in we needed to secure facilities, safeguard student accommodation and support students and staff. Our Team Action Plan owners kept regular contact, and our education teams maintained daily check-ins with students across the region, including online drop-in sessions that proved essential when travel or connectivity became difficult.

Throughout this period, the Faculty of Medicine and Health (FMH) and University stood firmly with us, reassuring our students and staff that the

University's priority was our safety and wellbeing, offering support such as special leave, counselling services and a streamlined communication protocol to minimise pressure on local teams. These gestures, combined with the many messages of care shared by University colleagues, helped bolster morale during an unpredictable week.

Responding as one

As the system intensified, we worked to assess placements, transition teaching online where needed and relocate students from accommodation at risk. These were not easy decisions, especially when multiple partner universities had individual approaches to pausing or continuing placements suited to their needs. This highlighted the complexity of operating across a broad partnership network and reinforced the need for clear protocols.

Despite widespread power outages and communication blackspots, our teams remained calm and connected. Staff stepped up to support one another, ensured student movements were safe and stayed responsive to changing conditions. When the all-clear was eventually issued, staff and students returned in stages, some managing the ongoing challenges of cleanup, outages or school closures at home. Even so, the sense of unity was unmistakable. People checked in on one another, offered practical help and demonstrated the compassion that defines our region.

Our researchers also played an important role

throughout this period. Drawing on years of UCRH research into the health impacts of floods and repeated disasters, our colleagues shared expert insights through national media. Their contributions supported public understanding of the immediate physical risks and the longer-term mental health implications of repeated disasters. This work reminded us that our research is not only academically significant but also deeply connected to the lived experience of our community.

Learning for the future

In the weeks that following, we shifted our focus from response to reflection. We undertook a comprehensive debrief with the support of specialist advisors from FMH. Their facilitation enabled honest and constructive discussion, and staff shared insights about what worked and where we can strengthen our systems.

The feedback highlighted many successes, including early activation, effective use of Teams for rapid communication and the ability to draw on FMH support when connectivity failed. It also identified areas for improvement: clarifying roles and responsibilities, strengthening after-hours expectations, enhancing our infrastructure and refining our communication protocols with partners and universities. These insights have now been translated into a set of prioritised recommendations to guide our next steps.

Cyclone Alfred tested us again, but it also reaffirmed what we know to be true. Our organisation is at its strongest when we act together, and when we stay grounded in our commitment to the wellbeing of our community. We are pleased with how we responded, grateful for the support we received and committed to continually improving our preparedness.

2025 Staff Award winners

Our Annual UCRH Staff Awards are an opportunity to recognise the efforts and achievements made across the organisation. In 2025 the award winners were:

Teamwork and Trust Builder Awards

Individual recipient: Anika Wilkins

Team recipients: Aboriginal Health Education Team (Tara Bayles, Amal Chakraborty, Caitlin Duroux, Tracey Piccoli, Marcelle Townsend-Cross and Emma Walke) and Medicine professional team (Christine Everitt, Rebekah Hermann, Emma King, Nikki Murphy, Mel Rosa and Susie Mikkelsen)

Accountability in Action Awards

Individual recipients: Kerryn Harkin and Rebecca Jordan

Team recipient: Facilities and IT team (Amy Burgess, Stephen Davis, Rod Hart, Scott Jordan, Tony Meston and Greg Pike)

Above and Beyond Awards

Individual recipients: Karen Kelly and Nikki Murphy

Innovation in Practice Award

Individual recipients: Emma King and Tamyeka McPherson

Excellence in Collaboration Award

Team recipient: Administration group (Tara Bayles, Faith Clarke-Alcorn, Caitlin Duroux, Emma King, Tamyeka McPherson and Anika Wilkins)

Growing rural health together

our partnerships in action

At UCRH, collaboration is a constant driver. We thrive as part of a rich ecosystem of partners, parent organisations and community relationships that shape our identity and allow us to deliver on our mission of health equity for rural and regional Australia.

The University of Sydney

We are part of the University of Sydney's Faculty of Medicine and Health, which celebrated its fifth anniversary in 2025, and within the University itself as it marked an extraordinary 175 years. These milestones remind us that we belong to something bigger, and that our work is deeply interconnected with the aspirations and achievements of our wider institutional family.

In November, we joined the University's Community Festival, sharing stories from the Northern Rivers and shining a light on rural health challenges and opportunities. A team of staff from across the organisation showcased our work and our region (pictured below), highlighting what makes UCRH such a unique aspect of the University. This participation

reaffirmed how we see ourselves: as an active contributor to the University's broader mission, and as a bridge between metropolitan institutions and rural realities.

We continue to draw strength from our close partnerships within the Faculty's rural footprint. Our colleagues at the School of Rural Health in Dubbo and Orange, and at the Broken Hill University Department of Rural Health, are integral collaborators in shaping a strong, skilled and connected rural health workforce. Among the highlights this year included a joint presence at the Rural Doctors Network Rural Health Pathways Showcase, and the opportunity for members of our team to participate in the Longitudinal Integrated Placement Seminar hosted by our Broken Hill colleagues. These events gave us the chance to stand alongside our rural partners, share insights and celebrate innovation in rural medical education.

A broader district

Our partnerships also extend across the Northern NSW Local Health District, where we work shoulder to shoulder with healthcare leaders and clinicians who



share our commitment to local communities. In many ways, both small and large, this was an important focus in 2025. Being part of the Kyogle Hospital 100 year anniversary Open Day was a privilege, allowing us to honour a century of rural care while celebrating the people who make it possible. More broadly, our joint work exploring innovative workforce models, such as the physiotherapy clinical educator role established in 2025, reflects our shared focus on sustainability, creativity and long term community benefit.

Regional engagement

We also value our strong connections with organisations that champion rural health across the region and across the country. Healthy North Coast continues to be an important partner in improving outcomes for our region, and we were pleased to welcome CEO Monika Wheeler as a speaker at the annual NCMEC gathering (see story on page 18). Our support for the North Coast Allied Health Association strengthens our ties across local professional groups, helping us link practitioners with education, research and peer networks. We also work closely with peak bodies such as the Australian Rural Health Education Network and the Federation of Rural Australian Medical Educators. These relationships ensure that our local work remains embedded in national collaboration and best practice, and that we contribute to a broader rural health education community that is striving toward the same goal of equitable health outcomes for rural and regional Australia.

Across all these relationships, our approach is guided by and reflective of our identity as a collaborative hub. We know we cannot achieve our goals alone. Our strength lies in working with partners who share our belief in healthier futures for rural communities, and who walk alongside us as we teach, learn, innovate and advocate.



Pictured above (top to bottom): The joint UCRH and Broken Hill presence at the Rural Doctors Network Rural Health Showcase proved popular among students in attendance; Healthy North Coast CEO, Monika Wheeler, addressing the audience gathered for NCMEC; University of Sydney Vice President of Operations, Nicole Gower, was one of many University academic and professional leaders who visited UCRH over 2025.

Connected through *community life*

We appreciate the many ways our students become part of the Northern Rivers community during their time with us.

Through shared projects, cultural experiences and everyday moments, they build relationships that enrich both their learning and the lives of the people they meet. These connections grow naturally from being present, listening and contributing where they are needed, and they reflect the genuine spirit of collaboration that defines our region.

At Bullinah Aboriginal Health Service in Ballina, our Nutrition and Dietetics students worked alongside the Dietitian and Exercise Physiologist to facilitate a cooking and exercise group that brought people together over nutritious, easy to cook meals. Across two student blocks, they planned and delivered activities ranging from a diabetes day cooking demonstration to a healthy eating education group that will be piloted by our next cohort in 2026.

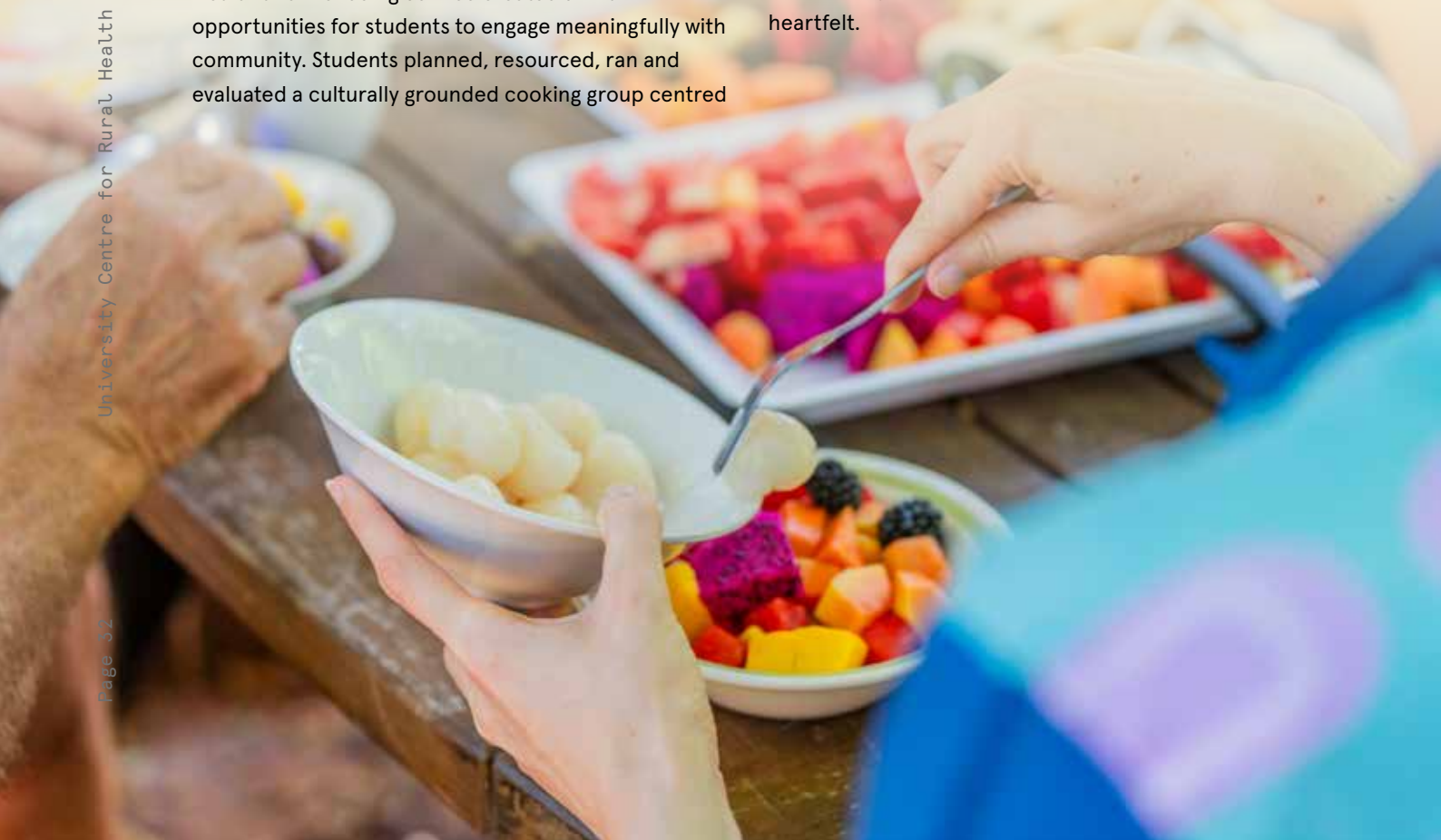
Our partnership with Rekindling the Spirit Aboriginal Health and Wellbeing Service created similar opportunities for students to engage meaningfully with community. Students planned, resourced, ran and evaluated a culturally grounded cooking group centred

on social connection and healthy choices. One student was even contracted to continue supporting the group. The following block of students helped run the weekly sessions and evaluate the program, strengthening continuity for the community.

Our Speech Pathology students also found powerful ways to connect. Blyss, from Southern Cross University, reflected on her time with older residents and with the Beating Hearts of Lismore choir. She spoke about the joy of sitting one to one with people and the sense of belonging that came from watching everyone sing, talk and share moments together.

Not all connections were formal. Many students became regulars at the weekly Lismore ParkRun, with one even achieving first female. Others formed their own early morning walking crew, exploring their neighbourhoods and forging friendships as they walked the hills around Lismore.

These experiences show how our students learn with community and from community, contributing to wellbeing in ways that are structured, social and heartfelt.



Appendix:

UCRH authored publications 2025

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Our cover artwork features the gardens of our Lismore campus. Overhauled in 2021, the beautiful terraces are planted with native species suited to our unique sub-tropical climate. All plants for the project were sourced from the Friends of the Koala Native Plant Nursery, which specialises in locally grown species that support the region's ecosystems. By choosing their stock, we also support the broader conservation work of Friends of the Koala, whose efforts in habitat protection and care for local wildlife continue to strengthen our community and environment. Find more information on Friends of the Koala at <https://friendsofthekoala.org/>.

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across rural and regional Australia.**

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