

Annual  
Report  
2020  
—2021



SaxInstitute 



## Acknowledgement of Country

The Sax Institute acknowledges the Gadigal People of the Eora nation as the first peoples and traditional owners of the land on which the Sax Institute office is located. We pay our respects to Aboriginal Elders past, present and emerging. We recognise the strong cultural connections of all First Peoples to their land and water across Australia.

We value our partnership with Aboriginal communities and are committed to continuing our work together, enabling community driven research that will make a difference to the health and wellbeing of Aboriginal people and their communities.

## Our mission

To improve health and wellbeing by driving the use of research in policies, programs and services.

## Our role

We are an Evidence Specialist working collaboratively to embed research into the fabric of policy, program and service delivery decisions. We develop, test and deliver best-practice approaches to working at the interface of research and health decision-making.

## Our values

- **Collaboration**  
We treasure our partnerships as an essential part of how we work and acknowledge them as central to our success.
- **Independence**  
Our overriding allegiance is to the evidence and what it tells us.
- **Innovation**  
We constantly seek new and better ways of working that increase the likelihood of beneficial change.
- **Impact**  
We are committed to making a positive contribution that helps bring about measurable improvements.
- **Respect**  
We listen to all points of view and work constructively to ensure communities, clients and stakeholders are actively engaged.

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## At a glance



**205,000**

**health surveys**

sent to participants of the 45 and Up  
Study as part of Wave 3 and COVID  
Insights data collections



**No. 1**

**health policy journal  
in Australia**

our journal *Public Health  
Research & Practice*, independently  
ranked by Scimago



**510**

**researchers**

actively using the SURE platform  
as at 30 June 2021—a 12% increase  
over 12 months



**17**

**Evidence Snapshots**

commissioned, with many  
targeting specific  
pandemic-related issues



**500+**

**prevention researchers**

united in a collaboration  
for enhanced research impact  
through The Australian Prevention  
Partnership Centre



**35%**

**increase in website traffic**

page views rose to 298,400 for  
this financial year

# Sustainable solutions. Powered by evidence.

The global COVID-19 pandemic has demonstrated the vital importance of correctly understanding and applying evidence to solve health policy dilemmas. Australia's response to COVID-19 has ranked among the world's best, but the pandemic will continue to require a nimble and evolving approach and there are many other aspects of healthcare policy and service delivery where evidence-practice gaps exist. The Sax Institute has responded rapidly to provide policy makers and healthcare organisations with the evidence and the tools they need to make the best decisions.

## About the Sax Institute

The Sax Institute is an independent, not-for-profit organisation that improves health and wellbeing by driving better use of evidence in policies, programs and services. The Institute works with governments, health organisations, research organisations and a network of experts nationwide to analyse policy problems and find the best evidence-based solutions.

We have an international reputation as an Evidence Specialist, and have built up a near two-decade track record of innovation in helping decision makers analyse and address health policy problems.

We have an extensive membership comprising many of the country's leading research institutes and universities. We work with organisations across Australia and have an unrivalled ability to marshal the best research expertise that cuts across institutional barriers.

## We are:

- ▶ One of the few organisations established to work at the synapse between the world of research and the world of health decision-making
- ▶ Trusted by both policy agencies and researchers and valued for our independence from professional and vested interests
- ▶ Internationally recognised as an Evidence Specialist
- ▶ Skilled in the worlds of both research and health decision-making
- ▶ Well established, with strong connections to more than 50 research organisations across Australia.

**We're an independent Evidence Specialist focused on improving the health of Australians—we help put evidence at the heart of decision-making by government and others.**

## Message from the Chair



The global COVID-19 pandemic has continued to test health systems, and the policy-making machinery that guides them, across Australia and the wider world throughout 2020–21. The clinical, research and policy challenges have been novel, and the need for new evidence has been and remains urgent and unrelenting.

I'm proud to say that the Sax Institute has risen to these challenges admirably, demonstrating not only its continuing value and relevance to researchers and policy makers around Australia, but also a high degree of adaptability.

The Institute's key role is to drive the use of research in policy, program and service delivery decisions. As COVID-19 spread in mid-2020, the Institute quickly understood the potential of the 45 and Up Study, one of Australia's great research assets, to provide the evidence needed to inform the policy response to the pandemic. The result was the COVID Insights initiative, which draws on the power of the 260,000-strong cohort and adds to it a fast-turnaround survey facility allowing rapid responses to tailored policy-oriented questions. This assisted the NSW Ministry of Health to gain new insights into a range of issues, including how the pandemic was affecting participants' physical and mental health, their exercise and eating habits, their sleep, as well as their experiences with healthcare and attitudes to vaccination.

This is a wonderful example of the Institute's responsiveness to a health need of pressing national importance, particularly as this new approach illustrates the ongoing value of the Institute more generally and it is equally applicable to the myriad other health issues that become more acute in later life. Another example has been the Institute's refinement of its approach to evidence reviews, with the faster-turnaround Evidence Snapshot option now offered alongside the well-established Evidence Check service to give policy agencies extra flexibility in seeking the research answers they need, in the timeframe that best suits them.

Despite the challenges presented by COVID-19 and the interruptions caused by public health measures to control the spread of infection, the Institute has been progressing its work with vigour in many other important areas. For example, in June 2021 the Sax Institute and its partners won a \$1.5 million grant from the Medical Research Future Fund to run the Indigenous Led Evaluation of Aboriginal Programs (ILEAP) project. ILEAP will evaluate three programs designed and led by Aboriginal Community Controlled Health Services, with the aim of

identifying effective approaches in critical health areas such as Aboriginal youth suicide and adult chronic disease—delivering on a core part of the Institute’s mission, namely better translation of evidence into practice.

The Sax Institute has also proudly continued to administer The Australian Prevention Partnership Centre, which supports research and its translation for the prevention of chronic disease.

While bringing evidence to the fore of policy making is central to the Institute’s mission, a key part of our strength lies in the collaborative relationships we have built across Australia and indeed internationally. To this end, I have been delighted to see the continued development and growing reach of the Sax Forum, a new initiative launched in early 2020–21 to maximise the benefits offered by the combined experience and expertise of the Institute’s 58 Members.

Engagement in the Sax Forum has been highly positive, allowing Members to join a range of sessions including a highly anticipated address by the Chief Executive Officer of the Health and Medical Research Office. Another session of the Sax Forum focused on co-production, a topic in which the Sax Institute is an acknowledged global leader.

The Institute’s CEO, Professor Sally Redman, was the lead author of an editorial in a special edition of the UK medical journal, *The BMJ*, on co-producing knowledge. The editorial, published in February 2021, highlights four key considerations for this model of research and is important reading for anyone contemplating co-production. I look forward to the continued development of the Forum and the opportunities this provides for the Sax Institute and its Members to work together.

Another important activity this year has been the review of the Sax Institute’s Constitution, which has been overhauled for the first time

since the Institute was founded in 2002. The updated Constitution will help ensure the Institute’s governance reflects best practice and supports the achievement of its mission.

The new Constitution was unanimously approved by the Sax Institute’s Members in April 2021 and came into effect in May. The new Constitution includes a number of changes to the overall governance of the Institute, including modernising the composition of the Board and focusing over time on recruiting directors based on specific skill sets and backgrounds that collectively will provide the best basis for the Institute’s successful operations.

In line with this, the update of the Constitution has also resulted in a simplified and improved membership structure, with the previous categories of University Members and Ordinary Members dissolved and replaced with a single category of membership. This ensures a clearer and more streamlined approach to membership and allows maximum benefits from the Sax Forum such as greater engagement and more direct collaboration.

Like the year before, the 12 months to July 2021 have brought challenges and surprises for all organisations striving to deliver healthcare services or improve health more broadly. I would like to take this opportunity to thank the Institute’s staff, who have shown resilience in adapting to the changed circumstances and flexibility in seeing new opportunities to inform policy and programs in the interests of better health and care. I would particularly like to thank my fellow Board members for their insights, and Professor Redman for her astute leadership.



**Professor Ian Olver AM**  
Chair

**Sax Institute**

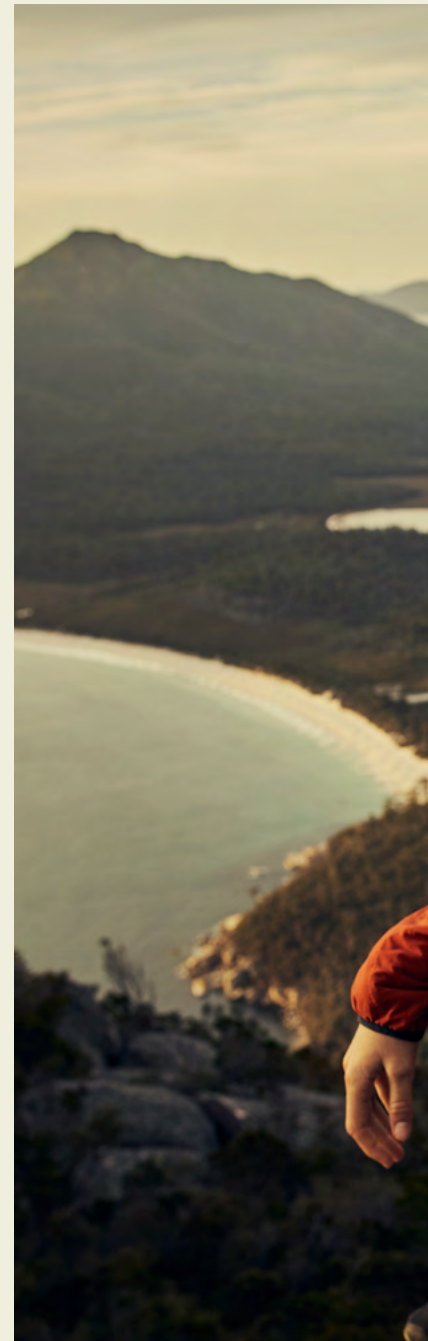
Annual Report 2020—21

Highlights from  
this year embraced  
three key themes  
that are central to the  
Sax Institute's work:

1—Mobilising evidence  
to improve health

2—Impact

3—Engagement









# 1—

## Mobilising evidence to improve health decisions

The right evidence can help ensure the best outcomes and effective use of the more than \$185 billion that Australia spends on health each year. In 2020–21, the Sax Institute developed innovative approaches to mobilising evidence to maximise the value of research investments and knowledge.

### **Optimising the impact of evidence: Strengthening the management of insomnia**

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**This year, the Sax Institute developed a new program called Pathways to Change to analyse where evidence suggests change is needed, and to support the long-term coordinated effort most likely to lead to improvements in health.**

The first Pathways to Change project was conducted in 2020–21 with the National Centre for Sleep Health Services Research (NCSHSR). Insomnia is a common problem with serious health consequences and there is good evidence from randomised controlled trials for the long-term effectiveness of cognitive behavioural therapy for insomnia (CBTi). However, patients are rarely prescribed CBTi, and the most common treatment for insomnia is prescription of benzodiazepines, despite the well-known risks associated with frequent use of this class of drugs.

Sustainable solutions usually require effort from many different stakeholders over a long period of time. Hence, the Sax Institute worked closely with the NCSHSR to understand what would be needed to encourage the wider use of CBTi and to bring key players including general practitioners (GPs), psychologists and governments around the table to support the change.

It became evident that a nexus of issues has created barriers to uptake, including confusion among GPs and other health professionals as to the availability of Medicare rebates in some situations, and a shortage of psychologists or other healthcare professionals trained in CBTi.

Together with the NCHSR, the Sax Institute has worked with key stakeholders to find approaches that help increase awareness among GPs and others about the advantages of CBTi over alternative pharmaceutical treatments, and to make it more widely available to patients.

This new approach, ‘Pathways to Change’, recognises that research findings rarely cross the research-policy divide in a simple, linear way. In many cases, contributions from many stakeholders over a long period of time will be needed.

In 2021–22, we plan to explore whether Pathways to Change works with other health issues, and an initial project looking at asthma in Aboriginal children has commenced.



## **Publishing new policy-relevant research: Tobacco, resilience and COVID-19**

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***Public Health Research & Practice (PHRP)*, the Sax Institute's peer-reviewed quarterly journal, is now independently ranked as Australia's number one health policy journal in Australia—a measure of its scientific influence, based on both the number and prestige of citations.**

This year *PHRP* continued to develop strategic partnerships with key organisations and people to produce special themed issues, which focus attention on public health issues of national and international significance.

The journal published two special themed issues in 2020–21: one which examined how public health systems learn and adapt to extreme events; and the other which focused on tobacco control.

Working with Guest Editors Dr Jean-Frédéric Levesque from the Agency for Clinical Innovation and Professor Mark Harris from UNSW Sydney, the journal published papers in December 2020 that detailed how COVID-19 had impacted healthcare activity in NSW, what the health system response to COVID-19 taught us from a resilient healthcare perspective, and the health impacts of bushfire smoke across a large region due to the 2019–2020 Australian bushfires.

The special issue of the journal focusing on tobacco control was produced in partnership with Cancer Council Australia and published in September 2020. One of the commissioned papers in the issue raised cancer experts' concerns that government investment in mass media anti-smoking campaigns had fallen significantly in recent years, at the same time as evidence on the harms of smoking has strengthened. The paper—one of nine published in the special edition—argued it was time to re-energise tobacco control in Australia.

Other papers in the special edition addressed wide-ranging aspects of tobacco control, from tobacco dependence treatments to Indigenous smoking rates to insights into effective anti-smoking campaigns. All nine presented compelling opportunities to reduce smoking rates further.

The issue helped put the topic of tobacco control on the national agenda, attracting widespread media attention including articles in *The Australian*, a range of regional media outlets, and *The Mandarin*, which targets a policy-maker audience.

*PHRP* attracts a broad readership among those working in health policy and practice in Australia and internationally, with 35% of those who have signed up to receive the journal's email updates working in policy and/or government roles. This means that special issues such as the tobacco control issue can play an important role in shaping public debate and influencing policy.

## Using evidence to improve population diets: Australia's food dashboard

**Exposing the extent to which our food environments push us to eat unhealthy foods has the potential to drive down obesity rates. In 2021–22, The Australian Prevention Partnership Centre helped fund and launch an ambitious new tool for mobilising nutrition evidence: Australia's Food Environment Dashboard.**

Launched in June 2021, the Dashboard tracks the key drivers of high obesity rates in Australia and brings together the most up-to-date data about the healthiness of Australia's food environments. It includes data on the types of food available and their nutritional quality; the price of different foods and diets; and the way food is marketed through advertising and packaging.

The resource will be an important tool for policy, research and advocacy, as it provides a clear picture of all the ways our environment drives us to consume too much of the wrong types of foods. For example, the Dashboard rates all the major supermarkets as unhealthy for the way they promote, discount and display unhealthy foods, such as chocolates, chips and sugary drinks.

The Dashboard was funded by the Medical Research Future Fund through the Prevention Centre, which has been administered by the Sax Institute since the Centre's inception in 2013. The Dashboard was developed under the leadership of Associate Professor Gary Sacks and INFORMAS (International Network for Food and Obesity/Non-communicable Diseases (NCDs) Research, Monitoring and Action Support).

Associate Professor Sacks, whose research has been included as part of *The Lancet Commission on Obesity*, says the Dashboard shows the need for much stronger policy action from all levels of government in Australia to create healthier food environments.

"At Australian supermarkets, it is almost impossible to pay for groceries without being exposed to unhealthy food and drinks," said Associate Professor Sacks. "Unhealthy products are 'on special' almost twice as often as healthy foods, and the discounts on unhealthy foods are much larger than the discounts on healthier foods."



**"Unhealthy diets are leading contributors to poor health in Australia. Our diets are so bad because wherever we go, unhealthy food is pushed at us."**

**Associate Professor Gary Sacks**

Institute for Health Transformation, Deakin University. Lead Investigator, The Australian Prevention Partnership Centre.

Australia's Food Environment Dashboard was developed in partnership with the Global Obesity Centre (GLOBE), a World Health Organization Collaborating Centre for Obesity Prevention in Deakin's Institute for Health Transformation, and the Obesity Policy Coalition.

The Prevention Centre was joined by more than 300 stakeholders for the virtual launch of the Dashboard, and in the first week the site ([www.foodenvironmentdashboard.com.au](http://www.foodenvironmentdashboard.com.au)) attracted more than 3000 unique users. Use of the site continues to grow and will provide an important new way for mobilising food and nutrition evidence in the coming years.

## **Mobilising evidence to inform community wellbeing and mental health supports**

**The Sax Institute's dynamic simulation modelling creates interactive tools to inform complex decisions about health program and service delivery across Australia. In 2020–21, we turned the focus of our innovative modelling techniques to mental health, with the creation of a new planning tool for community wellbeing and mental health supports.**

The proof-of-concept tool, developed in partnership with the NSW Mental Health Commission, is designed to test the effect of different initiatives for investing in community-based wellbeing and mental health supports—essentially providing decision makers with a flexible 'what-if' tool for testing changes before they are implemented in the real world.

In addressing complex challenges, health decision makers must bring together and integrate many kinds of evidence to weigh up the effect of different combinations of actions.

Drawing on a wide range of evidence and data sources, the Institute has delivered a dynamic simulation model that maps NSW's current mental health system and tests the potential impacts of new initiatives, ranging from primary school wellbeing programs to psychosocial rehabilitation and housing support.

The planning tool comes at a critical time for mental health, with an estimated one million Australian adults experiencing depression each year.

Catherine Lourey, Commissioner at the Mental Health Commission of NSW, said the innovative decision tool was developed as part of the Commission's commitment to improving outcomes for people with lived experience through better information for planning and smarter investment.

"The proof-of-concept tool showing that taking a joined-up approach to how we plan mental health and wellbeing and supports across a community can yield improved mental health outcomes and better-informed resource decisions," she said.

In the year ahead, the NSW Mental Health Commission and the Sax Institute are committed to further developing and testing this tool across the mental health and human services sectors.

## Shaping the national conversation around public health

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**Media interest in public health research contributes to the national debate around policy and can play a key role in the process of translating evidence into action. Research supported by the Sax Institute or published in our peer-reviewed journal, *Public Health Research & Practice*, attracted considerable media coverage in 2020–21.**

The 45 and Up Study was a major driver of media interest in work related to the Sax Institute, with research using data from the Study attracting over 150 pieces of media coverage over the period.

An example is a research paper published in the *British Journal of Cancer* in October 2020, on the increased risk of a range of cancers associated with regular alcohol consumption. The research found that just seven drinks a week raises the relative risk of alcohol-linked cancers by an average of 10%.

The work, authored by researchers from Cancer Council NSW as well as Sax Institute Senior Adviser and Professor of Epidemiology and Public Health at Australian National University, Professor Emily Banks, attracted more than 50 items of media coverage, including a feature in the *Australian Financial Review* and a syndicated article across NewsCorp publications—bringing awareness to a health danger of alcohol consumption that has received little public attention until recently.

The 45 and Up Study's COVID Insights Surveys (see page 18) also attracted considerable public interest, including three commentary articles by the Institute's Deputy CEO Dr Martin McNamara in publications targeting public health decision makers: a NSW Health COVID newsletter, sent to over 150,000 NSW public servants; the *Medical Journal of Australia* (MJA) InSight newsletter, sent to over 50,000 doctors across Australia; and Research Australia's flagship *INSPIRE* magazine.

Meanwhile, papers published in our quarterly open-access journal, *Public Health Research & Practice*, continued to attract high-profile media coverage in 2020–21. Research published in the June 2021 issue of the journal showing how health impacts are neglected in major infrastructure planning garnered widespread attention, including a front-page article in the *Sydney Morning Herald* and over 30 other items of media coverage.

Another paper calling for an end to systemic racism in the health system received media attention in Indigenous media, including SBS's *NITV* network and the *National Indigenous Times*, as well as in the influential public health news outlet Croakey Health Media.

**The 45 and Up Study was a major driver of media interest in work related to the Sax Institute, with research using data from the Study attracting over 150 pieces of media coverage over the period.**



**Sax Institute**

Annual Report 2020—21

2—

Impact





The Sax Institute is invested in solving real-world problems and finding high-impact solutions that are backed by evidence. Our work informs health decisions across Australia, contributing to stronger policies, programs and services.

### **Informing the NSW COVID-19 response: using the 45 and Up Study to understand community experiences and motivations**

**Effective responses to the pandemic have required rapid information about the virus and its impact on the community. A long-term investment in the 45 and Up Study meant that the Sax Institute could move quickly to provide critical information to inform responses in NSW.**

A COVID-19 Research Grant from the NSW Ministry of Health supported the 45 and Up Study to develop and roll out new rapid-response surveys that allow data to be collected and made available for key policy decision making in a matter of weeks. These data have informed discussions about vaccination, mental health, healthcare and public messaging.

The new COVID Insights Surveys commenced in June 2020, recruiting more than 30,000 Study participants to complete short online surveys about the impact of the pandemic.

In what has since become Australia's largest community survey into the pandemic to date, the COVID Insights Surveys adopted a unique approach—developing all survey themes and topics collaboratively with key stakeholders in NSW Health. The Institute established

a group of collaborating researchers to review and provide advice on survey themes and questions, while also undertaking ongoing consultations across many parts of government.

This allowed for a greater understanding of the information needs of decision makers, which in turn helped develop reliable and robust surveys to address those needs—particularly crucial in the changing COVID-19 environment.



**“There’s a lot of information of varying quality out there, but what we can uniquely offer is a huge cohort of participants and a long established study design with highly reliable results.”**

**Dr Martin McNamara**  
Sax Institute Deputy CEO

The rapid-response surveys are providing important insights for informing policy. In mid-2020, around 40% of respondents had reported missed or delayed healthcare as a result of the pandemic, most commonly a dentist or GP appointment.

In relation to mental health, the picture was mixed. A high proportion of participants in 2020 reported their overall quality of life as being excellent, very good or good (91%) compared with 88% in 2019. Despite this, 26% reported their mental health was worse as a result of the pandemic.

We also examined the intentions and barriers around vaccination, and how that differed across local communities. For example, 96% of respondents thought the COVID vaccine was important for their own—and others'—health. This, along with other data, was important for informing local efforts to increase vaccination rates.

To date, the results have been presented to emergency response teams, clinical decision makers, and planning and policy decision makers, with results feeding into renewed public messaging about maintaining exercise in lockdown and missed cancer screening.

Importantly, data collected through these surveys will be linked with many other data sets, including the use of health services, which will support ongoing research into the impact of the pandemic on different parts of the population.



**96%**

think the COVID vaccine is important for their own—and others'—health



**26%**

said their mental health had deteriorated during the pandemic



**91%**

said their quality of life was good to excellent

## Using longitudinal data to reveal cancer risks from light smoking

**This year, the Institute's 45 and Up Study has expanded its contributions to facilitate research with the potential to impact health policy and improve health outcomes, including an Australian-first study on the long-term cancer risks of light smoking.**

While the dangers of heavy smoking are well known, there is less evidence globally on the impact of light smoking. Researchers from Cancer Council NSW and the University of Sydney analysed the data from more than 220,000 participants of the 45 and Up Study to understand exactly what is at stake for even casual smokers.

They found that tobacco smoking significantly increased the risk of 12 types of cancer and that one in every seven current smokers will get lung cancer in their lifetime. Results also showed that compared with people who had never smoked, people who smoked 1–5 cigarettes per day were nine times as likely to develop lung cancer, and those who smoked more than 35 cigarettes per day had a 38-fold risk of lung cancer.

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The researchers also showed that the risk of cancer was significantly reduced among participants who had quit smoking—and the younger they quit, the better—demonstrating that quitting is much more effective at reducing disease than simply reducing cigarette consumption.

For over a decade, the Institute's 45 and Up Study has been providing researchers with access to health data that can help them better understand how Australians are ageing.

These latest contributions provide critical new evidence to inform both public health messages and better target strategies to reduce the impact of tobacco use.

Dr Kerrin Bleicher, Director, Research Assets, at the Sax Institute, says the findings demonstrate just how powerful longitudinal data is for producing research with the potential for real world impact.

"The 45 and Up Study is invaluable for understanding how our health changes over time and what we can do to help future generations of Australians live longer, healthier lives," said Dr Bleicher.

New policy-relevant findings are continually emerging from the 45 and Up Study and the Institute actively engages with policy makers to consider new evidence from the Study and its potential to improve health and wellbeing.



**"We're so pleased to see the Study help deliver new insights into the harmful impact of light smoking that can directly inform tobacco control efforts."**

**Dr Kerrin Bleicher**

Sax Institute Director, Research Assets

In 2020–21, the Study helped inform efforts to reduce alcohol-related harms, with researchers from Cancer Council NSW finding that just seven additional drinks a week raises the relative risk of alcohol-linked cancers by an average of 10%. Researchers from the University of Sydney and Swinburne University also used the Study to identify community-level actions that can support wellbeing during the COVID-19 pandemic, revealing how pandemic-safe social connections can help protect older Australians from psychological distress.

## Maximising impact: Co-production with Aboriginal communities and the Cancer Institute NSW

The Sax Institute works in partnership with Aboriginal communities to maximise the potential of research to improve health. This year the Institute embarked on the Cancer and Healthy Ageing in Aboriginal NSW Older Generations Study (CHANGES) in partnership with NSW Aboriginal Community Controlled Health Services (ACCHSs) and the Cancer Institute NSW.

Australia is struggling to close the gap in health between Aboriginal and non-Aboriginal Australians. New approaches like co-production—where communities, researchers and policy agencies work together—may be more effective in developing sustainable solutions.

The Sax Institute has been testing whether co-production can have a greater impact in improving the health of Aboriginal and Torres Strait Islander peoples. And this year, we worked in close partnership with NSW ACCHSs to give voice to the health experiences of older people in their communities.

CHANGES aims to explore older Aboriginal people's perspectives on healthy ageing, their understanding of cancer as part of the ageing process, and how programs and services might be improved. The work is being conducted in close collaboration with Cancer Institute NSW and the findings will be used to better plan services and improve cancer outcomes for Aboriginal and Torres Strait Islander peoples.

- ▼ The CEO of Tharawal Aboriginal Corporation, Darryl Wright, being interviewed by the Sax Institute for Reconciliation Week 2021.



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Phase one of the study began in March 2021, with researchers interviewing Aboriginal Australians over the age of 50, along with their carers and health staff in five ACCHSs across NSW.

Interviews have taken a yarning approach to give people the time and space to tell their health stories in their own way. Yarning is a culturally respectful practice in which Aboriginal people share personal experiences in a safe and appropriate environment.

“On a respect level, it’s important to listen and hear what our older peoples’ stories are,” said Sax Institute researcher Mandy Cutmore, who is an Anaiwan man from Armidale NSW. “When you ask older Aboriginal people about their health story, Elders find that yarning is a more culturally appropriate way of sharing their stories, especially when it’s about their own health path and previous family experiences.”

These yarning interviews have already revealed some of the key health challenges for ageing Aboriginal Australians, including: balancing personal health demands with the needs of their families; improving access to and education around benefits of healthy eating and active lifestyle programs; and culturally-safe and responsive medical care.

Phase two of CHANGES will begin in late 2021, when researchers will begin to consult with older Aboriginal people who have had cancer, or who are currently undergoing treatment, as well as their families, ACCHSs and mainstream health professionals to get a better understanding of how the cancer care system is working for communities, and what can be done to improve cancer prevention and treatment.

CHANGES is made possible thanks to the close relationships and community-led research model pioneered by SEARCH (the Study of Environment on Aboriginal Resilience and Child Health)—a study coordinated by the Sax Institute, and Australia’s largest long term study of the health and wellbeing of urban Aboriginal children.



Staff at NSW Aboriginal Medical Services have worked in partnership with researchers for the Cancer and Healthy Ageing in Aboriginal NSW Older Generations Study (CHANGES). Centre: Carmel Crook, SEARCH Project Manager. L and R: Gemma Bugg and Jamie Maney from Orange Aboriginal Medical Service.



## Supporting national decision-making with fast, high-quality research summaries

**Health decision makers need the right evidence at the right time. The Institute's new fast-turnaround Evidence Snapshot offers decision makers streamlined evidence in less than three weeks.**

Since 2006 our Evidence Check program has provided policy agencies with more than 300 fast and accurate summaries of evidence on a range of topics from mental health to aged care. Evidence Check reports are typically 30–50 pages in length and take up to four months to produce. However, the pandemic has shown just how critical it is to respond quickly to emerging evidence needs, which prompted the Institute to launch the much faster Evidence Snapshot service in 2019–20.

Evidence Snapshots provide decision makers with quick-turnaround evidence in two to three weeks, and the impact of the new service has been immediate—with a range of policy agencies taking up Evidence Snapshots with enthusiasm, particularly in the context of the pandemic.

In 2020–21, a total of 17 Evidence Snapshots were commissioned, with many targeting specific pandemic-related issues, such as understanding whether physical distancing between hospital patients is effective in preventing or reducing transmission of COVID-19; the efficacy of N95, surgical and medical masks in reducing COVID-19 transmission in hospitals and residential aged care facilities; and what is known about aerosol transmission of SARS-CoV-2.

An example of impact on policy are three Evidence Snapshots commissioned by the Australian Commission on Safety and Quality in Healthcare to look at effective strategies in addressing health assessment, oral health and lifestyle issues for people with disability. These Evidence Snapshots were used to inform the development of Provider Practice Alerts—plain English communications to help NDIS participants manage their health. The Snapshots were also used to provide appropriate training for support workers and inform the NDIS strategic planning progress.

Other agencies that commissioned Evidence Snapshots in 2020–21 also included the NSW Ministry of Health and Cancer Institute NSW.





## 3— Engagement

The Sax Institute is committed to building strong and enduring partnerships, as illustrated by our long-term work with many policy and service provider agencies, Aboriginal communities and researchers.

## **National engagement through the Sax Forum**

**The Sax Institute works closely with researchers across Australia, maintaining collaborations with 58 member organisations. In 2020–21, the Institute introduced a new vehicle designed to realise more of the collaborative potential of our membership: the Sax Forum.**

The Forum enables closer and deeper engagement between the Sax Institute and its Members, and provides new ways to work together to improve the use of research evidence in policy and decision making.

The Forum held its inaugural online meeting in August 2020, and enabled some exciting new collaborations during the 2020–21 year. For example, the Forum has created an opportunity for early- and mid-career researchers to learn more about big data sets, including the 45 and Up Study, the Australian Longitudinal Study on Women's Health, the Bureau of Health Information's collection of outcome data, and the NSW Department of Communities and Justice's mammoth linked data sets.

The Forum also hosted Dr Masha Somi from the Medical Research Future Fund to discuss opportunities of interest to public health and health service researchers. Another initiative included working together to develop a special issue of the Institute's journal *Public Health Research & Practice*. The issue will focus on co-production and is scheduled for publication in 2022.

Members of the Sax Institute are leaders in public health and health services research, and include research groups, universities and other organisations with relevant research programs.

The Forum is an important initiative for the Institute, and its development came in parallel with some key adjustments to the Institute's governance arrangements, which were introduced in 2021 following Board approval of the Institute's updated Constitution. The new Constitution simplified the Institute's membership structure (with one category of membership replacing the former University Members and Ordinary Members).

**The Forum enables closer and deeper engagement between the Sax Institute and its Members, and provides new ways to work together to improve the use of research evidence in policy and decision making.**



## Collaborating nationally for chronic disease prevention

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**The uptake of high-quality evidence on effective prevention is important to ensure Australia minimises the impacts of chronic disease. In 2020–21, The Australian Prevention Partnership Centre launched the Collaboration for Enhanced Research Impact (CERI)—a national collaboration of more than 500 researchers to develop a united voice for the prevention of chronic disease.**

CERI is the first initiative of its kind, bringing together the Prevention Centre and seven NHMRC Centres of Research Excellence (CREs) with one clear mission: to enhance the impact, profile and value-add of prevention research in Australia through multi-centre collaboration and networking.

In addition to the broad scope of chronic disease prevention projects led by the Prevention Centre, the CERI network has helped to coordinate national expertise in women's health, obesity prevention during early childhood, food retail environments, implementation science, tobacco elimination and falls prevention.

Stronger collaboration and engagement between researchers working on prevention across Australia has the potential to catalyse knowledge about the prevention of chronic disease.

It is hoped that by joining forces, organisations will be able to argue for sustained investment in the prevention of chronic disease, said CERI member Professor Helen Skouteris, the chief investigator of the Health in Preconception and Pregnancy CRE (CRE HiPP).

“A continued and expanded investment will see the prevention landscape transformed into one where researchers, policy makers and practitioners are genuinely working together to increase the impact of our research and thus reduce the burden of chronic disease in Australia,” Professor Skouteris said.

Already the CERI initiative has resulted in the creation of a user guide for CREs to effectively translate and communicate their prevention research, as well as opinion pieces published in *Croakey Health Media* and *MJA InSight+* that have given voice to critical prevention issues on tackling obesity.



Supported by the Prevention Centre's knowledge mobilisation and science communications expertise, CERl members meet regularly to find alignment in the policy and practice implications of their work and future opportunities for collaboration.

CERl members also focus on building capacity for early- and mid-career researchers by sharing resources, networks and opportunities across the member organisations.

## Partnerships pave the way for new evaluation of Aboriginal-led primary healthcare

**The Sax Institute is committed to driving improvements in Aboriginal health by supporting research that is community-led and aligns with community priorities. In 2020–21 the Institute and partners were awarded a \$1.5 million grant from the Medical Research Future Fund (MRFF) to provide much-needed evidence about the effectiveness of innovative Aboriginal-led health programs.**

Historically, mainstream health programs have failed to close the gap on Aboriginal Australians' disproportionately high rates of mental health issues and chronic disease. A range of Aboriginal-led health programs have proved crucial for supporting community health, but until now they've rarely been evaluated.

Thanks to the new MRFF grant, the Indigenous Led Evaluation of Aboriginal Programs (ILEAP) project is set to change this—evaluating three programs designed and led by Aboriginal Community Controlled Health Services (ACCHSs), with the aim of identifying effective approaches to reduce Aboriginal youth suicide and adult chronic disease.

Led by Sandra Bailey, Senior Adviser at the Sax Institute, the ILEAP project will be conducted in close collaboration with Aboriginal leaders, primary care workers and the community. It is founded on the Institute's strong, long-term collaborations with the Aboriginal health sector, including the Tharawal Aboriginal Corporation in urban NSW, Orange Aboriginal Medical Service in regional NSW, Walgett Aboriginal Medical Service in remote NSW, and the Aboriginal Health & Medical Research Council.

The outcomes of this project will include increased Aboriginal-led evaluation of programs, better translation of evidence into practice in ACCHSs and increasing access to essential primary care services.

"ACCHSs have developed these innovative programs and through this research will lead their evaluation. This work will provide valuable insights into the parts of each program that are working well and the opportunities to further strengthen and build on what's been established," says Sax Institute Deputy CEO Dr Martin McNamara.

◀ Mural artwork co-created by artists Lucy Simpson and Meg Minkley. The mural, which is located at the Sax Institute, explores notions around medicine, knowledge, healing, communication, and understanding of country.

## **SURE: building the future of health data analysis**

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**Emerging trends in health research are changing the requirements for secure, remote-access computing platforms. In 2020–21, the Sax Institute’s Secure Unified Research Environment (SURE) embarked on an ambitious reform program, driven by researchers and data custodians.**

The reform program was developed through broad and deep consultation across the research and data custodian community to design and introduce new high-value capabilities that will help researchers provide solutions to Australia’s most pressing health challenges.

The reform program includes: the provision of more flexible, on-demand computing resources that can be quickly scaled to support advanced analysis techniques; hybrid-cloud services; Linux virtual machines needed for machine learning and artificial intelligence capabilities; a Secure Sandbox to let researchers explore synthetic data to test their techniques before embarking on lengthy approvals processes; and automated upload of data to SURE from trusted data custodians for enduring linked data assets.

There has also been a focus on boosting genomics research, with SURE working closely with NSW Health’s Office of Health and Medical Research, Neuroscience Research Australia (NeuRA) and the Garvan Institute on solutions for researchers using biospecimens for genomics research linked to administrative health data sets.

SURE continued its strong growth in 2020–21, with the number of researchers using the platform this year rising by 12% to 510. Eighty-nine different organisations are using the SURE platform, including universities, health and medical research institutes, hospitals government and industry.

**The reform program was developed through broad and deep consultation across the research and data custodian community to design and introduce new high-value capabilities that will help researchers provide solutions to Australia’s most pressing health challenges.**



**Sax Institute**

Annual Report 2020—21

# COVID-19: how we responded





The Sax Institute proudly contributed to public responses to the COVID-19 pandemic across its programs.



### 45 and Up Study: COVID Insights

- ▶ Two fast-turnaround surveys were completed in 2020–21, and a third commenced, involving 32,000 respondents from the 45 and Up Study to gather information about the impact of the COVID-19 pandemic for the NSW Ministry of Health.
- ▶ Impacts considered in the surveys focused on health, wellbeing, healthcare, lifestyle behaviours, COVID-19 testing and prevention, health literacy, and attitudes towards vaccination among people aged 45 and over across NSW.
- ▶ The findings from the project overall have proved highly useful in policy formation, such as in the planning of mental health services, and have informed updates to public messaging about exercise in lockdown and cancer screening.



### Evidence reviews

- ▶ The Institute's Knowledge Exchange program made a substantial contribution to the COVID-19 response in 2020–21 through its rapid Evidence Snapshot service, created to complement the existing Evidence Check offering as a faster option.
- ▶ Several of the 17 Evidence Snapshots commissioned during the year focused on pandemic-related issues, including whether physical distancing between hospital patients was effective in preventing or reducing transmission of COVID-19; the efficacy of N95, surgical and medical masks in reducing COVID-19 transmission in hospitals and residential aged care facilities; and what is known about aerosol transmission of SARS-CoV-2.



### Aboriginal health

- ▶ The Sax Institute was awarded a NSW Health COVID-19 research grant worth \$498,000 in January 2021 for new research into the mental health needs, including the impact of COVID-19, among staff at Aboriginal Community Controlled Health Services (ACCHSs) in NSW.
- ▶ The two-year project, which commenced in April 2021, involves researchers working in close partnership with ACCHS partners in urban, regional and rural NSW to test community-led strategies to better support the mental health of ACCHS workers, during the pandemic and beyond.





## Aged care

- ▶ The Sax Institute conducted a formative evaluation of NSW Health's secondary triage initiative for aged care residents, which was introduced in March 2020 to reduce unnecessary low-acuity transfers from residential aged care facilities to emergency departments during the pandemic to minimise the risks for vulnerable patients.
- ▶ The evaluation, which was conducted from October 2020 to June 2021, made recommendations for enhancing the implementation, communication, promotion and tailoring referral pathways across Local Health Districts in NSW and has helped inform decisions about how the initiative can potentially be adapted for different health contexts.



## Social and emotional health of young people

- ▶ A research project run through The Australian Prevention Partnership Centre generated new evidence in 2020–21 on the negative impacts of physical distancing policies on the health and wellbeing of NSW adolescents.
- ▶ The project showed participants' physical activity fell by half following the introduction of social distancing restrictions in NSW in early 2020, while screen time nearly doubled (a relative increase of 86%).
- ▶ Overall, the project showed negative short-term health and wellbeing outcomes for young people that, if sustained, may link to longer-term chronic disease outcomes.



## Communicating COVID-19 public health research

- ▶ The Institute's journal *Public Health Research & Practice* continued to make a significant contribution to the dissemination of public health knowledge relevant to the pandemic in 2020–21.
- ▶ In the journal's December 2020 edition, a paper by Dr Kim Sutherland and colleagues from the Agency for Clinical Innovation, NSW Ministry of Health and NSW Ambulance quantified declines in face-to-face primary care consultations, breast screening, emergency department visits, elective surgery and other key health services in the first wave of the COVID-19 pandemic.
- ▶ A further paper in the December 2020 edition, by authors from the University of Sydney and Northwestern University in the US, surveyed 4362 Australian adults and found people with poor health literacy, including people from non-English speaking backgrounds, were significantly less likely to recognise COVID-19 symptoms or the behaviours likely to reduce disease transmission.



## Sax Institute joins national expert forum

- ▶ In May 2021, the Institute's Deputy CEO Dr Martin McNamara was invited to join the COVID-19 vaccine forum, jointly hosted by the Australian Government Department of Health, the Australian Technical Advisory Group on Immunisation (ATAGI), and the National COVID-19 Health and Research Advisory Committee (NCHRAC).





**Sax Institute**

Annual Report 2020—21

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# Concise Financial Statements

## Concise Financial Statements

**For the Year Ended 30 June 2021**

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Note: The following are a set of Concise Financial Statements. The full Financial Statements for the year ended 30 June 2021 with accompanying notes are available on The Sax Institute website: [www.saxinstitute.org.au](http://www.saxinstitute.org.au)

## Directors' report

The Directors present their report, together with the financial statements, on the company for the year ended 30 June 2021.

### Directors

The following persons were Directors of the company during the whole of the financial year and up to the date of this report, unless otherwise stated:

- ▶ Professor Ian Olver (Chairperson)
- ▶ Professor Selina Redman  
(Chief Executive Officer)
- ▶ Ms Kim Anderson
- ▶ Dr Kerry Chant
- ▶ Mr Michael Lambert
- ▶ Ms Robin Low  
(Appointed 19 November 2020)
- ▶ Mr Christopher Paxton
- ▶ Professor David Preen
- ▶ Professor Robert Cumming  
(Retired 10 May 2021)
- ▶ Professor Stephen Jan  
(Retired 10 May 2021)
- ▶ Professor Peter Smith  
(Retired 10 May 2021)
- ▶ Professor Johanna Westbrook  
(Retired 10 May 2021)

### Objectives

#### Our Mission

To improve health and wellbeing by driving the use of research in policies, programs and services.

#### Our Role

We are an Evidence Specialist working collaboratively to embed research into the fabric of policy, program and service delivery decisions. We develop, test and deliver best-practice approaches to working at the interface of research and health decision-making.

## **Short and long-term objectives**

The Sax Institute's strategic plan has two stated objectives. By June 2023, we aim to:

### **1) Increase our impact on health and wellbeing and on services, policies and programs.**

We will deliver more effectively on our Mission, by ensuring we are in tune with the needs of our partners, and by developing new programs, assets, and services to deliver greater impact. We will develop better ways to identify, communicate and encourage actions on the implications of research findings to maximise impact.

Specifically, we aim to have increased impact by:

- a) Developing stronger foundations for the use of evidence (including an increase in syntheses; policy relevant research; skills in generating and using evidence for policy; collaborations and partnerships);
- b) Increasing the use of evidence in policy, programs and services;
- c) Increasing our contribution to improving health and wellbeing; and
- d) Agreement among our stakeholders that the Institute is making an impact.

### **2) Increase our business sustainability**

A strong and stable organisation is also necessary for us to achieve our Mission. We will strengthen our sustainability by increasing our untied funds, to enable us to build our equity, deliver quality outputs and innovate. We will improve our capability to provide high-quality, sustainable programs, assets, and services.

Specifically, we aim to have increased impact by:

- a) Increasing our income;
- b) Increasing the diversity of our clients;
- c) Increasing the diversity of our programs and services through innovation;
- d) Holding corporate costs steady; and
- e) Maintaining equity at the target levels

### **Strategy for achieving the objectives**

We will achieve our impact and financial sustainability targets through five interlinked strategies. The Institute will:

- Develop our portfolio of assets, programs, and services to increase our impact
- Better mobilise evidence to support action
- Strengthen our profile, reach and relationships
- Increase our surplus to maintain equity, enable innovation and support core functions
- Improve our capabilities to deliver sustainable high-quality programs.

## Performance measures

The Institute tracks its progress against the following measures to monitor performance:

- ▶ The number of instances of impact that arise from our work in public policy, programs or service delivery
- ▶ Growth in the number, size and spread of the partners with whom the Institute collaborates
- ▶ Growth in both the size and diversity of the Institute's annual revenue, diversifying away from but continuing to complement its traditional funding base of New South Wales and/or health services
- ▶ Increase in the number of its active collaborations with organisations at both a national and international level
- ▶ Continued demonstrable satisfaction among its stakeholders, as evidenced through for example, surveys and invitations to speak at major national and/or international meetings.

## Key operational matters

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### New Constitution

A revised Constitution for the Institute was approved at a members special meeting held 27 April 2021 and came into effect on 10 May 2021. The new Constitution provides for a more streamlined approach to the Institute's membership, governance, and board structures.

## Information on Directors

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**Name:** Ian Oliver AM

**Title:** Professor

**Qualifications:** MB, MD, PhD

**Experience and expertise:**

Cancer researcher, medical oncologist, and bioethicist. Currently a Professor in the Faculty of Health and Medical Sciences at the University of Adelaide. His past positions include Director of the Royal Adelaide Hospital Cancer Centre and CEO of Cancer Council Australia. He is past president of the Medical oncology Group of Australia and the Multinational Association of Supportive Care in Cancer.

**Special Responsibilities:** Chair of Board of Directors

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**Name:** Selina Redman AO

**Title:** Professor

**Qualifications:** BA (Psych),  
BA (Hons) (Psych), PhD

**Experience and expertise:** Expertise in public health, research and knowledge mobilisation.

**Special responsibilities:** Chief Executive Officer

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**Name:** Kim Anderson

**Title:** Ms

**Qualifications:** BA, Postgraduate Diploma in Library and Information Science

**Experience and expertise:** Non-Executive Director of ASX listed companies Carsales Ltd, Infomedia Ltd, InvoCare Ltd and Marley Spoon AG. Former Fellow of the University of Sydney Senate, Former Chair Building and Estates Committee, and Former Member of the Audit Risk Management and Investments Committee 2004-2011. Former CEO of Southern Star Entertainment and founder and CEO of Reading Room Inc (bookstr.com).

**Special responsibilities:** Chair of Remuneration and Nomination Committee

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**Name:** Kerry Chant

**Title:** Dr

**Qualifications:** MBBS, FAFPHM, MHA, MPH

**Experience and expertise:** Chief Health Officer and Deputy Secretary, Population and Public Health, NSW Ministry of Health.

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**Name:** Michael Lambert

**Title:** Mr

**Qualifications:** BEc (Hons), MEc, MA (Phil), GAICD

**Experience and expertise:** Public finance, corporate finance, government, public policy and health sector. Administrator of the National Health Funding Pool.

**Special responsibilities:** Chair, Audit and Risk Management Committee. Member, Remuneration and Nomination Committee.

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**Name:** Robin Low

**Title:** Ms

**Qualifications:** BCom, FCA

**Experience and expertise:** Expertise in finance, risk and assurance. Ms Low is a former PwC partner and now serves as an independent director of four ASX listed companies Appen Limited, AUB Group Limited, IPH Limited and Marley Spoon AG. Current Director on government and not-for-profit entity boards.

**Special responsibilities:** Member, Audit and Risk Management Committee

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**Name:** Christopher Paxton

**Title:** Mr

**Qualifications:** BA (Hons) in Economics (UK), MBA (UK)

**Experience and expertise:** Partner, EY Port Jackson Partners

**Special responsibilities:** Member, Audit and Risk Management Committee, Remuneration and Nomination Committee

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**Name:** David Preen

**Title:** Professor

**Qualifications:** BSc(Hons), PhD

**Experience and expertise:** Chair in Public Health at the School of Population and Global Health, University of Western Australia.

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### Company Secretary

The following person held the position of Company Secretary at the end of the financial year: Mr Norman Pack (B.Com; MBA; FCPA; GAICD). Mr Pack has been the Company Secretary since July 2016 (resigned effective 31 July 2021) and holds a number of independent trustee directorship roles and has over 36 years of senior finance experience.

## Meetings of Directors

The number of meetings of the company's Board of Directors ('the Board') and of each Board committee held during the year ended 30 June 2021, and the number of meetings attended by each director were:

	Board		Audit and Risk Management Committee		Remuneration and Nomination Committee	
	A	B	A	B	A	B
Ian Oliver	4	4	–	–	–	–
Selina Redman	4	4	–	–	–	–
Kim Anderson	4	3	–	–	1	1
Kerry Chant *	4	–	–	–	–	–
Robert Cumming	3	1	–	–	–	–
Stephen Jan	3	2	–	–	–	–
Michael Lambert	4	4	4	4	1	1
Robin Low	3	3	3	3	–	–
Christopher Paxton	4	4	4	3	1	1
David Preen	4	4	–	–	–	–
Peter Smith	3	2	–	–	–	–
Johanna Westbrook	3	2	–	–	–	–
Jane Stanton (non-Director)	–	–	4	4	–	–

**A**—Number of meeting eligible to attend.

**B**—Number of meetings attended.

\* An ongoing exemption was approved by the Board, in consideration of the full-time leadership role that Dr Chant continues to play in the NSW Government's response to combatting the COVID-19 pandemic.

### Contributions on winding up

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The Sax Institute is a not-for-profit unlisted public company limited by guarantee. In the event of and for the purpose of, winding up of the Company, the amount capable of being called up from each member and / or association who ceased to be a member in the year prior to the winding up is limited to \$10 for members that are corporations and \$10 for all other members, subject to the provisions of the Institute's constitution.

At 30 June 2021, the collective liability of members was \$580 (2020: \$570).

This report is made in accordance with a resolution of Directors on this 15th day of September 2021.

On behalf of the Board of Directors



**Professor Ian Olver AM**  
Chair of Board of Directors



**Professor Selina Redman AO**  
Executive Director

## Statement of profit or loss and other comprehensive income

The Sax Institute

**For the year ended 30 June 2021**

	2021 \$	2020 \$
<b>Revenue</b>	15,404,200	16,320,000
Other income	858,400	837,100
<b>Expenses</b>		
Project specific costs	(4,962,000)	(5,809,700)
Employee benefits expense	(8,605,500)	(8,689,500)
Depreciation and amortisation expense	(1,296,600)	(1,018,400)
Administration expenses	(590,500)	(815,600)
<b>Profit before income tax expense</b>	808,000	823,900
Income tax expense	—	—
<b>Profit after income tax expense for the year attributable to the owners of The Sax Institute</b>	808,000	823,900
Other comprehensive income for the year, net of tax	—	—
<b>Total comprehensive income for the year attributable to the Members of The Sax Institute</b>	<b>808,000</b>	<b>823,900</b>

The above statement of profit or loss and other comprehensive income should be read in conjunction with the accompanying notes in the full Financial Statements available on The Sax Institute website: [www.saxinstitute.org.au](http://www.saxinstitute.org.au)

## Statement of financial position

The Sax Institute  
As at 30 June 2021

	2021 \$	2020 \$
<b>Assets</b>		
<b>Current assets</b>		
Cash and cash equivalents	10,948,500	8,167,600
Trade and other receivables	1,668,300	1,338,200
Financial assets at fair value through other comprehensive income	50,500	50,400
Other	1,866,600	1,463,700
<b>Total current assets</b>	<b>14,533,900</b>	<b>11,019,900</b>
<b>Non-current assets</b>		
Property, plant and equipment	1,879,300	2,320,200
Right-of-use assets	2,506,500	3,064,300
Other	244,200	246,000
<b>Total non-current assets</b>	<b>4,630,000</b>	<b>5,630,500</b>
<b>Total assets</b>	<b>19,163,900</b>	<b>16,650,400</b>
<b>Liabilities</b>		
<b>Current liabilities</b>		
Trade and other payables	1,305,400	1,170,900
Lease liabilities	627,100	578,600
Employee benefits	793,200	632,100
Other	10,527,100	8,693,200
<b>Total current liabilities</b>	<b>13,252,800</b>	<b>11,074,800</b>
<b>Non-current liabilities</b>		
Lease liabilities	2,043,700	2,559,300
Employee benefits	228,800	185,700
<b>Total non-current liabilities</b>	<b>2,272,500</b>	<b>2,745,000</b>
<b>Total liabilities</b>	<b>15,525,300</b>	<b>13,819,800</b>
<b>Net assets</b>	<b>3,638,600</b>	<b>2,830,600</b>
<b>Equity</b>		
Retained surpluses	3,638,600	2,830,600
<b>Total equity</b>	<b>3,638,600</b>	<b>2,830,600</b>

The above statement of financial position should be read in conjunction with the accompanying notes in the full Financial Statements available on The Sax Institute website: [www.saxinstitute.org.au](http://www.saxinstitute.org.au)

## Statement of changes in equity

The Sax Institute

**For the year ended 30 June 2021**

	Retained surplus \$	Total equity \$
Balance at 1 July 2019	2,006,700	2,006,700
Surplus after income tax expense for the year	823,900	823,900
Other comprehensive income for the year, net of tax	–	–
Total comprehensive income for the year	823,900	823,900
<b>Balance at 30 June 2020</b>	<b>2,830,600</b>	<b>2,830,600</b>

	Retained profits \$	Total equity \$
Balance at 1 July 2020	2,830,600	2,830,600
Surplus after income tax expense for the year	808,000	808,000
Other comprehensive income for the year, net of tax	–	–
Total comprehensive income for the year	808,000	808,000
<b>Balance at 30 June 2021</b>	<b>3,638,600</b>	<b>3,638,600</b>

The above statement of changes in equity should be read in conjunction with the accompanying notes in the full Financial Statements available on The Sax Institute website: [www.saxinstitute.org.au](http://www.saxinstitute.org.au)

## Statement of cash flows

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The Sax Institute  
For the year ended 30 June 2021

	2021 \$	2020 \$
<b>Cash flows from operating activities</b>		
Received from grants	19,050,800	16,870,000
Payments to suppliers and employees	(15,442,400)	(18,110,200)
Donations received	16,700	30,000
Interest received	29,500	116,900
Net cash used in operating activities	3,654,600	(1,093,300)
<b>Cash flows from investing activities</b>		
Proceeds from available-for-sale investments	605,800	3,212,800
Net payments of property, plant and equipment	(136,800)	(2,394,100)
Purchase of available-for-sale investments	(606,000)	(2,692,200)
Net cash used in investing activities	(137,000)	(1,873,500)
<b>Cash flows from financing activities</b>		
Repayment of lease liabilities	(736,700)	(397,700)
Net cash used in financing activities	(736,700)	(397,700)
Net decrease in cash and cash equivalents	2,780,900	(3,364,500)
Cash and cash equivalents at the beginning of the financial year	8,167,600	11,532,100
<b>Cash and cash equivalents at the end of the financial year</b>	<b>10,948,500</b>	<b>8,167,600</b>

The above statement of cash flows should be read in conjunction with the accompanying notes in the full Financial Statements available on The Sax Institute website: [www.saxinstitute.org.au](http://www.saxinstitute.org.au)

## Directors' declaration

The Sax Institute

**30 June 2021**

In the Directors' opinion:

- ▶ The attached concise financial statements are extracted from the full set of financials which is available on the Sax Institute's website
- ▶ The attached financial statements give a true and fair view of the company's financial position as at 30 June 2021 and of its performance for the financial year ended on that date
- ▶ There are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

Signed in accordance with a resolution of Directors made pursuant to section 295(5)(a) of the *Corporations Act 2001* on this 15th day of September 2021.

On behalf of the Board of Directors



**Professor Ian Olver AM**

Chair



**Professor Selina Redman AO**

Executive Director



## Report of the Independent Auditor on Summary Financial Statements

### Opinion

The summary financial statements, which comprise the statement of financial position as at 30 June 2021, the statement of comprehensive income and statement of cash flows for the year then ended, are derived from the audited financial report of The Sax Institute for the year ended 30 June 2021.

In our opinion, the summary financial statements derived from the audited financial report of The Sax Institute for the year ended 30 June 2021 are consistent, in all material respects, with that audited report, in accordance with Australian Accounting Standards.

### Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Australian Accounting Standards. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial report of The Sax Institute.

### The Audited Financial Report and Our Report Thereon

We expressed an unmodified audit opinion on that financial report in our report dated 15 September 2021.

### Directors' Responsibility for the Financial Report

The directors of the company are responsible for the preparation of a summary of the audited financial report in accordance with the criteria as set out in the Annual Report.

### Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are consistent, in all material respects, with the audited financial report based on our procedures, which were conducted in accordance with Auditing Standard ASA 810 *Engagements to Report on Summary Financial Statements*.

A handwritten signature in black ink that reads "William Buck".

**William Buck**  
Accountants & Advisors  
ABN 16 021 300 521

A handwritten signature in black ink that reads "L.E. Tutt".

**L.E. Tutt**  
Partner  
Sydney, 15th of September 2021

#### ACCOUNTANTS & ADVISORS

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Sydney NSW 2000

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Parramatta NSW 2150

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[williambuck.com](http://williambuck.com)

## Thanks to our Members

Close collaboration with our 58\* Members connects the Institute with a powerful public health network and world leading research expertise. Thank you to all our Members:

- **Australian Centre for Public and Population Health Research**, University of Technology Sydney
- **Australian Research Centre in Complementary and Integrative Medicine**, University of Technology Sydney
- **Centre for Clinical Epidemiology and Biostatistics**, The University of Newcastle
- **Centre for Health Economics Research and Evaluation**, University of Technology Sydney
- **Centre for Health Informatics**, Macquarie University
- **Centre for Health Systems and Safety Research**, Macquarie University
- **Centre for Healthcare Resilience and Implementation Science**, Macquarie University
- **Centre for Primary Healthcare and Equity**, UNSW Sydney
- **Centre for Social Research in Health**, UNSW Sydney
- **Centre for Women's Health Research**, The University of Newcastle
- **College of Health and Medicine**, Australian National University
- **Dementia Centre for Research Collaboration**, UNSW Sydney
- **Global Obesity Centre (GLOBE)**, Deakin University
- **Health Services and Practice Research Strength**, University of Technology Sydney
- **Hunter Medical Research Institute**
- **Illawarra Health and Medical Research Institute**
- **Ingham Institute for Applied Medical Research**
- **Menzies Centre for Health Policy**, The University of Sydney
- **Menzies Health Institute Queensland**, Griffith University
- **Menzies School of Health Research**
- **National Ageing Research Institute**
- **National Centre for Immunisation Research and Surveillance**, The University of Sydney
- **National Drug and Alcohol Research Centre**, UNSW Sydney
- **National Perinatal Epidemiology and Statistics Unit**, UNSW Sydney

- **Neuroscience Research Australia (NeuRA)**
- **Poche Centre for Indigenous Health,** The University of Sydney
- **Population Wellbeing and Environment Research Lab (PowerLab),** University of Wollongong
- **Prevention Research Collaboration,** The University of Sydney
- **Priority Research Centre for Health Behaviour,** The University of Newcastle
- **Psychiatry Research and Teaching Unit, School of Psychiatry,** UNSW Sydney
- **QIMR Berghofer Medical Research Institute**
- **Research Unit,** Justice Health and Forensic Mental Health Network
- **School of Clinical Sciences at Monash Health,** Monash University
- **School of Medicine and Public Health,** The University of Newcastle
- **School of Medicine Sydney,** The University of Notre Dame Australia
- **School of Population & Global Health,** The University of Western Australia
- **School of Population Health,** UNSW Sydney
- **School of Public Health and Preventive Medicine,** Monash University
- **Simpson Centre for Health Services Research,** UNSW Sydney
- **Social Policy Research Centre,** UNSW Sydney
- **Surgical Outcomes Research Centre,** The University of Sydney
- **Susan Wakil School of Nursing and Midwifery,** The University of Sydney
- **Sydney Dental School,** The University of Sydney
- **Sydney School of Public Health,** The University of Sydney
- **The Cancer Council NSW**
- **The Garvan Institute of Medical Research**
- **The George Institute for Global Health**
- **The Kirby Institute,** UNSW Sydney
- **The University of Newcastle**
- **The University of Notre Dame Australia**
- **The University of Sydney**
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