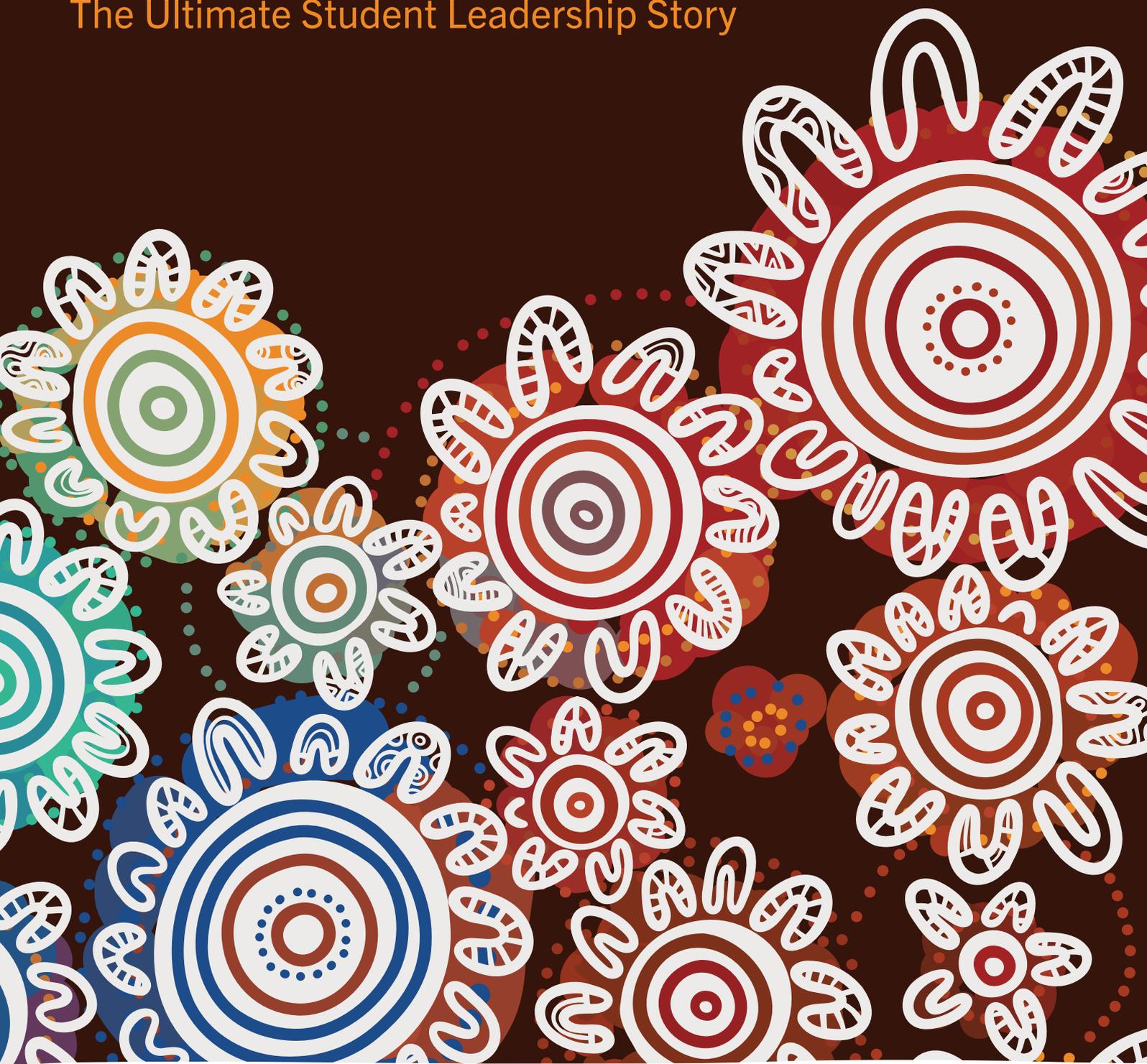


STRENGTHENING OUR FUTURE LEADERS

The Ultimate Student Leadership Story



IAHA

Indigenous Allied
Health Australia



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ACKNOWLEDGEMENT OF COUNTRY

IAHA would like to acknowledge the Traditional Custodians across the lands, waters and seas that we work and live on and pay our respects to Elders past, present and future and thank them for their continuing custodianship.

ACKNOWLEDGEMENTS OF CONTRIBUTORS

IAHA acknowledge and thank all past and present USLC students, mentors, and judges who have generously shared their knowledges, experiences, and insights throughout this work. Your contributions have deeply shaped and strengthened our collective learning.

We extend our sincere gratitude to all who have contributed to this report, and in particular, we honour the Aboriginal and Torres Strait Islander Peoples whose sovereign knowledges have been carried across generations with care, responsibility, and respect. These knowledges continue to guide us and will be carried forward in the spirit of relational accountability and truth-telling.

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LEADERSHIP STATEMENT

At Indigenous Allied Health Australia (IAHA), we hold a profound commitment to nurturing culturally strong and professionally skilled leaders who feel strong and connected in both their identity and their profession. The Ultimate Student Leadership Challenge (USLC) is a transformative initiative that reflects this commitment, grounded deeply in culture, community, and the enduring strength of our ancestors.

The USLC is far more than a leadership program it is a cultural journey and a strategic investment in the future Aboriginal and Torres Strait Islander health workforce. By creating a culturally safe, interprofessional, and community-led environment, the program empowers students to develop leadership capabilities that are not only clinically excellent but also culturally responsive and accountable.

Through their participation, students gain a heightened sense of responsibility and connection to Aboriginal and Torres Strait Islander peoples, preparing them to lead systemic change, self-determine health priorities, and contribute to nation-building. This leadership strengthens communities, shapes policy, and helps create a more just and equitable health system in Australia.

The USLC is a critical part of IAHA's broader vision to build a strong, self-determined, and culturally responsive workforce that walks confidently in both professional practice and cultural identity. We are proud to witness the growth of future leaders who carry forward this vision, driving change from the ground up alongside our members, partners, and communities.



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EXECUTIVE SUMMARY



Through its evolution, the IAHA Ultimate Student Leadership Challenge (USLC) has become a key initiative for growing a generation of strong, culturally connected Aboriginal and Torres Strait Islander allied health leaders. Informed by Aboriginal and Torres Strait Islander ways of knowing, being and doing, the USLC has brought together allied health students, along with medical, dental, nursing and midwifery students in a culturally safe, interprofessional space where they build confidence, deepen their cultural identity, and grow as agents of change across health systems and communities.

Launched in 2013, through a partnership with Queensland University of Technology (QUT) the program was adapted from the Health Fusion Team Challenge (HFTC) to create a culturally safe, Aboriginal and Torres Strait Islander-led experience. Today, the USLC is a nationally and internationally recognised Aboriginal and Torres Strait Islander-led, governed, and delivered initiative. As a living expression of IAHA's Cultural Responsiveness in Action Framework, the USLC enhances student learning through culturally informed simulation, mentorship, and interdisciplinary teamwork, filling critical gaps in university curricula and preparing students for culturally safe practice. It strengthens clinical and cultural capabilities in tandem, supporting students to navigate and influence both mainstream and community-led contexts. In doing so, the USLC directly supports the priorities of the *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation*

Plan 2021–2031 by strengthening workforce pathways, fostering culturally safe leadership, and building the future capabilities of the Aboriginal and Torres Strait Islander health workforce.

Each year, the USLC brings together Aboriginal and Torres Strait Islander allied health students from across Australia for three days, to work in interdisciplinary teams on real-world Aboriginal and Torres Strait Islander health scenarios, supported by cultural and professional mentors. The program culminates in a final showdown at the IAHA National Conference, where teams present their culturally informed interdisciplinary health care plans to an experienced panel of judges and an audience of peers, mentors, community and conference delegates ensuring students are visible, valued, and contributing meaningfully to national conversations about culturally safe, responsive health systems.

The USLC provides a critical value-add to university programs by supporting curriculum development, clinical placement readiness, and leadership capabilities not typically embedded in mainstream health education. Students practice key clinical, cultural, and teamwork skills through structured role-play and case-based simulations that reflect complex, real-life Aboriginal and Torres Strait Islander health and wellbeing priorities. These activities enhance understanding of interdisciplinary roles and responsibilities, cultural safety, and collaborative practice all of which are core competencies for effective and respectful care in today's health and social service systems. The USLC supports universities to strengthen their graduates' cultural capability, leadership potential, and readiness to engage in respectful, community-led care.



Students are mentored throughout the experience by experienced Aboriginal and Torres Strait Islander health professionals, many of whom are USLC alumni forming long-term relationships that provide cultural and professional guidance across the life course of their careers. This relational and reciprocal model of mentorship, leadership, and learning supports a sustained connection with IAHA and one another, building a strong network of future leaders who are accountable to their communities and to each other.

The impact of the USLC since its inception has been transformative. It has supported students to step into leadership roles, speak publicly, take on board director roles, and lead from a place of cultural strength. It has also empowered students to influence change within their universities by advocating for the embedding of cultural responsiveness in alignment with the Aboriginal and Torres Strait Islander Health Curriculum Framework. Through their leadership, students have helped ensure that learning outcomes related to cultural safety, accountability, and interdisciplinary practice are meaningfully integrated into health education programs. Lifelong relationships have formed through mentoring and peer support that continue throughout students' professional and personal journeys.

Since 2013, close to 200 Aboriginal and Torres Strait Islander students, representing more than 28 health professions and 32 universities, have participated in the USLC. Based on available data, over 95% have reported gains in intercultural knowledge, communication, cultural responsiveness, and interdisciplinary care, reinforcing the program's role in growing leadership readiness and culturally safe practice.

Looking ahead, IAHA is focused on deepening the USLC's impact by strengthening its alumni network to foster ongoing connection, mentorship, and leadership development. It will expand its reach both nationally and internationally, embed mechanisms to measure long-term impact on students' careers and communities and transition into a formal research agenda grounded in Indigenous methodologies. Sustained partnerships and investment from government, universities, and alumni will ensure the USLC continues to flourish into its second decade.

As the USLC enters its second decade, it will continue to nurture the next generation of strong, connected Aboriginal and Torres Strait Islander health leaders. The continued success and expansion of the USLC depends on sustained investment from government, universities, and alumni. With sustained support, the USLC can deepen its impact, fostering leadership that drives meaningful change in Aboriginal and Torres Strait Islander health outcomes across Australia. This investment is more than financial, it reflects a shared commitment to a future health workforce that is culturally safe, accountable, and led by Aboriginal and Torres Strait Islander peoples.

**IT CHANGED HOW I SEE MYSELF,
MY PROFESSION, AND MY FUTURE.**

**I'M NOT JUST A STUDENT—
I'M A LEADER FOR MY PEOPLE.**

USLC Participant

INTRODUCTION

The Ultimate Student Leadership Challenge (USLC) is a flagship initiative of Indigenous Allied Health Australia (IAHA), created to grow strong, culturally grounded Aboriginal and Torres Strait Islander leadership across the health and wellbeing workforce. From its beginnings on Kurna Country, the program has continued to grow in depth, reach, and cultural strength guided by the leadership, vision, and priorities of Aboriginal and Torres Strait Islander people.

In 2024, the USLC returned to Kurna Country, an intentional and respectful act that honours place, continuity, and cultural responsibility. We acknowledge the Kurna people as Traditional Custodians, and pay respect to their Elders past and present. Holding the program on Kurna Country again has reaffirmed the importance of connection to Country and the grounding of leadership in place-based cultural knowledges.

The USLC is governed, led, designed, and delivered by Aboriginal and Torres Strait Islander people, and is embedded within IAHA's broader work to transform systems through cultural responsiveness and community-led pathways. Informed by IAHA's Cultural Responsiveness in Action Framework, Theory of Change, Social Emotional Wellbeing framework, and workforce development strategies, the program supports students to build leadership capabilities that are both culturally responsive and clinically strong. Central to this approach is a deep commitment to social and emotional wellbeing, recognising that cultural identity, connection, and belonging are vital foundations for strong, sustainable leadership.

At its core, the USLC is a culturally immersive, interprofessional learning experience. It brings together Aboriginal and Torres Strait Islander health students from across the country to connect with culture, step into leadership, and strengthen their readiness to enter the health workforce. The program creates a culturally safe space where students are supported by mentors to walk alongside peers, and learn through real-world scenarios that reflect the priorities of our communities.

Mentorship has been central to the USLC since its inception, reflecting a long-standing cultural tradition of learning through relationship, responsibility, and reciprocity. Guided by experienced Aboriginal and Torres Strait Islander health professionals, many of whom are USLC alumni students are supported to grow strong in who they are and the work they do. This intergenerational model ensures that leadership is not only about capability, but about cultural continuity and collective care.

This report shares the story, cultural creation, intent and ongoing impact of the USLC. It recognises the deep cultural governance that underpins the program, the relationships that sustain it, and the collective vision it contributes to: a strong, self-determined Aboriginal and Torres Strait Islander health workforce led by the strength and knowledge of our people.





PURPOSE AND SCOPE OF THE REPORT

This report reflects on IAHA's story and history of the USLC, highlighting the program's journey, challenges, and successes.

It brings together stories, reflections, and experiences from students, mentors, and alumni, illustrating the impact and growth of the USLC as a culturally informed leadership program grounded in Aboriginal and Torres Strait Islander ways of knowing, being, and doing. The report is for all those who have contributed to the USLC, those who have helped create it, supported its growth, worked behind the scenes, or provided sponsorship. Most importantly, it is for the Aboriginal and Torres Strait Islander allied health students for whom the program was designed, as well as those committed to strengthening the health workforce.

This report evaluates how the program has been delivered, what students have experienced and the USLC's impact on the students, mentors, and the conference audience. It also examines the strengths and challenges and offers recommendations for its continued development and future evaluation.

The USLC began on Kurna Country in 2013, and in 2024, the national event returned to Kurna Country symbolically grounding a decade of leadership and learning within the lands where it all began. This return reflects IAHA's commitment to cultural governance, relational accountability, and deep respect for Country, continuity, and cultural integrity.

For consistency, this report refers to the program as the USLC, including earlier activities delivered under its former name, the Health Fusion Team Challenge (HFTC).



METHODS

This evaluation process was grounded in Indigenous methodologies that privilege relationality, reciprocity, and lived experience, and was led by Aboriginal and Torres Strait Islander researchers. Qualitative analysis followed a pragmatic, descriptive approach, drawing on student and mentor reflections to identify key themes, supported by participant quotes and selected video snippets that demonstrate the long-term impact of the USLC. Quantitative data were analysed using descriptive statistics (counts, percentages, and averages), and a standard test (paired t-test) to assess changes between pre and post program responses. All available evaluation data from the first ten years of the USLC were collated. This data included attendance records, feedback on the program as well as information found in IAHA's publications such as annual reports.

In addition, the report incorporates new conversations with previous students (i.e. alumni), who shared how the USLC has influenced their leadership journeys and contributed to their communities. These yarns were conducted via Microsoft Teams by Aboriginal and Torres Strait Islander research team members in a spirit of respectful listening and reciprocity. By combining quantitative data with lived experiences and storytelling, this report honours both measurable outcomes and the deeper, relational impacts of the USLC.

THE IAHA STUDENT LEADERSHIP JOURNEY



2013

Adelaide | 19 Students Attended

- Partnered with QUT to license the Health Fusion Team Challenge (HFTC).
- IAHA hosted the first HFTC event in Tarntanya (Adelaide).

2014

Canberra | 24 Students Attended

- IAHA made changes to the HFTC to include culturally informed activities.
- Ice breakers were included to establish connection within the teams.



2015

Cairns | 38 Students Attended

- IAHA commissioned the 2014 winners GMACK of the HFTC to attend the Australian HFTC in which they placed 2nd.
- IAHA developed the Cultural Responsiveness In Action Framework which helped to inform the delivery of the HFTC program.

2016

Canberra | 36 Students Attended

- Cultural mentors were included, alongside professional mentors.



2017

Perth | 39 Students Attended

- Social Emotional Wellbeing officially embedded within the HFTC.
- The first-time HFTC judging panel is all Aboriginal and/or Torres Strait Islander health professionals and industry experts.

2018

Sydney | 32 Students Attended

- IAHA hosted the International Conference with Indigenous students from Aotearoa (New Zealand) and Canada to participate in the IAHA HFTC event, strengthening international relationships.
- Team facilitators were included to support the teams to engage in simulated learning and presentation through a cultural lens.
- Judging matrix was modified for an international First Nations context.

2019

Darwin | 31 Students Attended

- IAHA's CR Framework and cultural capability increasingly added to the delivery of the HFTC.
- Increased SEWB supports for students.
- Increased cultural mentoring role.
- Students were challenged with more complex case scenarios, requiring them to demonstrate IAHA's values and the 6 key capabilities of IAHA's CR Framework while working "off Country".
- Judging matrix changed completely to assess cultural responsiveness.

2020
2021

USLC Cancelled due to COVID

- No students attended during 2020 and 2021.
- During this time IAHA continued to work on embedding the cultural informed activities and developed their own Aboriginal and Torres Strait Islander culturally and trauma-informed and aware student leadership challenge termed USLC.
- Workforce development strategy launched – USLC became part of this pipeline.

2022

Canberra | 24 Students Attended

- Launch of IAHA's culturally informed USLC.
- Aboriginal and Torres Strait Islander governed, designed, led and implemented.
- Judging panel remains culturally informed and facilitated by Aboriginal and Torres Strait Islander experts and leaders in the sector.
- Introduction of access to professional mentors online.

2023

Sunshine Coast | 20 Students Attended

- Increase in the number of past student participants returning as either mentors, judges and/or team facilitators.

2024

Adelaide | 25 Students Attended

- Celebration of the 10th student event in Tarntanya (Adelaide), back on the lands where the first was held.
- A further increase in the number of past participants involved in the delivery of the Challenge demonstrating reciprocity in action.



THE CULTURALLY INFORMED USLC TODAY

The Ultimate Student Leadership Challenge (USLC) is an Aboriginal and Torres Strait Islander-led, governed, and delivered leadership initiative driven by IAHA's commitment to growing the next generation of strong, connected Aboriginal and Torres Strait Islander health leaders. Now in its second decade, the USLC is deeply grounded in accountability to student development, the communities it represents, and the vision of a culturally safe, responsive, and self-determined health workforce.

Each year, Aboriginal and/or Torres Strait Islander health students from across the country come together to participate in a three-day cultural and professional learning experience grounded in Aboriginal and Torres Strait Islander ways of knowing, being, and doing. The USLC creates a culturally safe space where students are supported to step into their leadership, connect with culture, and build strong, interprofessional relationships.

Governed and underpinned by IAHA's Cultural Responsiveness in Action Framework and Theory of Change, and guided by cultural and social determinants of health, the USLC also reflects IAHA's broader governance, SEWB, and workforce development strategies. The USLC brings cultural responsiveness to life through immersive, team-based learning. It centres cultural identity and safety, providing a space where students can strengthen their leadership, grow in confidence, and learn from each other through relational, strengths-based, and person and community-centred approaches. Students engage with real-world, interdisciplinary case scenarios shaped by Aboriginal and Torres Strait Islander health and wellbeing priorities. Working collaboratively, they draw on both cultural and professional knowledge to develop management plans that are holistic, culturally safe, and multidisciplinary. The challenge empowers the students to lead in providing holistic, culturally safe, and multidisciplinary care.



Scan to watch the USLC in action





Mentored by experienced Aboriginal and Torres Strait Islander health professionals, many of whom are past USLC participants, students practise critical skills such as reflection, cultural humility, communication, and teamwork. The mentoring relationships are built on trust, shared experience, and cultural accountability, creating a strong sense of belonging and continuity across cohorts. The USLC is a learning experience designed to support Aboriginal and/or Torres Strait Islander health students in building both their clinical and cultural capabilities as the next generation of health care professionals.

Central to the USLC is the understanding that leadership is both supported and shared. Aboriginal and Torres Strait Islander clinicians generously share their time and insights, not only to mentor students, but also to continue their own professional and cultural learning. This reciprocal exchange strengthens a collective support circle across generations and professional roles. Alongside other programs and supports, the USLC ensures students are supported from their initial entry into study through to early career and beyond, contributing to a culturally strong and responsive health workforce.

Key partnerships with universities, Aboriginal and Torres Strait Islander Community Controlled Organisations and allies remain critical to the USLC's success. The strength of the program is deeply grounded in these networks and in the collective commitment to a culturally responsive and self-determined health workforce.

University partnerships and collaborations

University sponsors play a pivotal role in the success of the USLC. By partnering with IAHA, these institutions demonstrate a commitment not only to Aboriginal and Torres Strait Islander students, but to building a culturally safe and responsive health workforce. Their investment through financial sponsorship and in-kind support enables students to access unique, culturally informed leadership and learning experiences that many universities are not yet able to provide within their own systems. As universities continue to be named across national workforce strategic frameworks, their involvement in the USLC reflects a proactive commitment to embedding cultural safety, leadership development, and Indigenous-led learning into their institutional responsibilities. These partnerships help create spaces where students feel seen, supported, and able to grow both personally and professionally.



Here is a snapshot of a more complex wholistic case scenario based on Aboriginal and Torres Strait Islander health and wellbeing, community and family relationships/kinship, remoteness, availability of service and support, place based complexities of health systems (eg. National and State jurisdictions) informed by Aboriginal and Torres Strait Islander affairs, policy and reform that was provided to students in 2022 that was also informed by community representatives, health professionals who worked in the region.



Tamara is a 30-year-old Barkindji woman living in Wilcannia, a remote community on the Baaka (Darling River). Tamara grew up learning language, painting, and dance from her mother Jakarra and other Elders. She is known in her family and community for her quiet strength, cultural pride, and commitment to others.

Tamara shares a modest three-bedroom home with her husband Byron, her mother, brother, sister-in-law, niece, and nephew. The house is crowded, but full of life, love, and intergenerational responsibility. Tamara and Byron care for her young nephew Ian, whose mother has faced personal challenges. Her mother Jakarra, a respected Elder, is central to the family's cultural and community life. Together, they hold the family strong.

Tamara has lived with the long-term impacts of Rheumatic Heart Disease, diagnosed when she was a child. Although she managed her health carefully, a recent episode left her breathless and frightened. She was flown to Adelaide for surgery, and the decision to replace her mitral valve with a bioprosthetic one was made so she could safely have children – a future she and Byron look forward to.

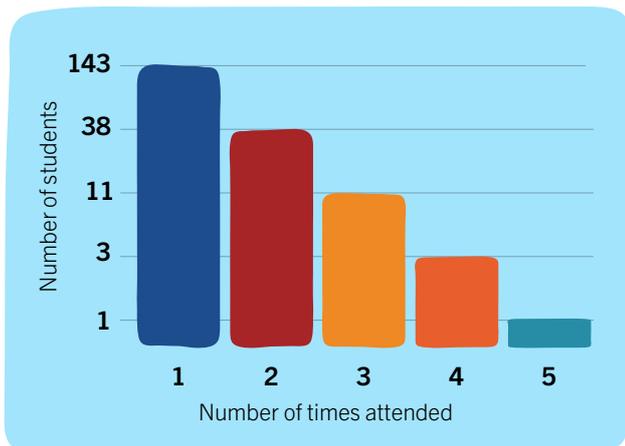
Now six weeks post-surgery, Tamara is preparing to return home. She's excited but nervous – she wants her recovery to reflect her strengths, her culture, and the realities of life in Wilcannia. Her goals are to return to work at the local council, stay healthy, support her family, and one day become a mum. She wants her care to involve her family and be shaped by those who know her community and culture best.

Tamara's story reflects the power of family, culture, and community as cornerstones of health and healing – and reminds us that recovery is not just medical, but deeply relational and place-based.



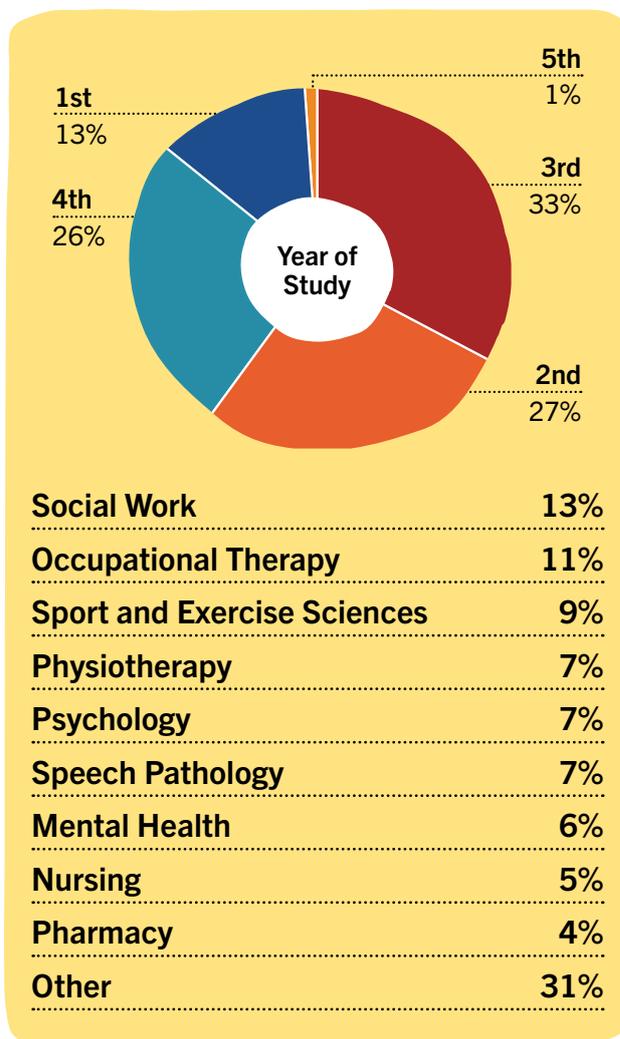
OUR REACH

Since 2013, a total of 196 students have attended the USLC with several returning in subsequent years – resulting in 269 places filled overall.

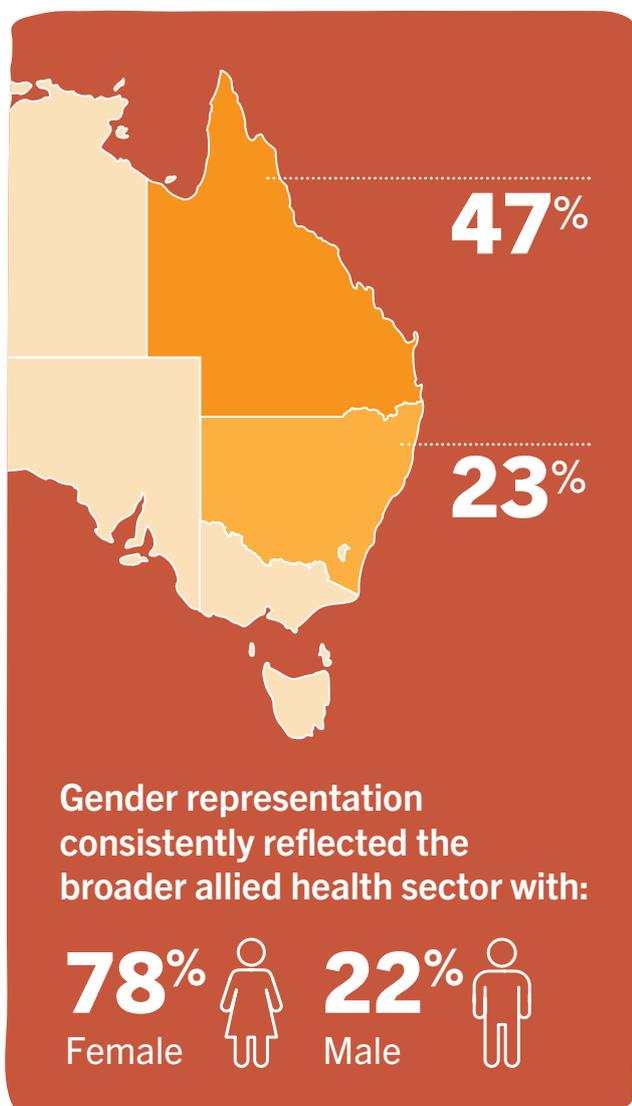


Annual participation ranged from 19 to 39 students, with an average of 27 students attending each year.

Students represented over 26 allied health disciplines, medicine, nursing/midwifery and all year levels, with most attending in 2nd and 3rd year of study.



Participants came from 32 universities from across all states and territories except Tasmania with the majority from **Queensland (47%)** and **New South Wales (23%)** reflecting the history of the program and the distribution of IAHA's student membership.



OUR IMPACT

Over the history of the USLC, participation led to significant growth across a range of personal and professional development areas.

These results highlight the USLC's effectiveness in fostering culturally safe leadership, collaboration, and confidence among emerging Aboriginal and Torres Strait Islander health professionals.

56%↑ Aboriginal and Torres Strait Islander university health students networks

34%↑ Confidence in public speaking

31%↑ Confidence in their skills for shared decision-making

28%↑ Intercultural knowledge

26%↑ Understanding of other health disciplines

24%↑ Comfort using cultural knowledge alongside professional learning

SHOWING UP WITH PURPOSE

Students indicated that they joined the USLC to strengthen their leadership, cultural identity, and ability to work across disciplines in culturally safe, community-centred ways. They sought connection with culture, peers, and the broader allied health workforce, to grow their knowledge, skills, confidence, and networks. Many returned to deepen their cultural and professional development, and to stay connected to the IAHA family and the sense of purpose the USLC fosters.



“ ”

So word got around at the university in regards to the USLC and I was also like, I want to be a part of IAHA, this deadly mob that everyone keeps talking about. So it was very much word of mouth and then also just reading about it and seeing that I would meet other mob from around Australia. So that was my real reason for becoming a part of the USLC.

“ ”

I didn't really know what the Challenge was when I first applied. I just saw an opportunity and I'm so grateful I did. I ended up participating three times, and each one was filled with sharing, learning, teamwork, and connection.

“ ”

I learnt so much from my first experience, but I know I still have so much to learn, so I returned for the cultural and professional development and support.



WHAT SHAPED STUDENT'S LEARNING AND LEADERSHIP

Students consistently highlighted the deep connection to culture, community, mentors, and each other, and the culturally safe, empowering environment where they could grow with pride and purpose. They valued learning in ways that honoured their individual identities and cultural background. They appreciated the support by mentors who freely shared their knowledge and care. They most enjoyed the friendships they formed, and the strong sense of belonging. Activities that they felt had the biggest impact included the daily check-ins where they reflected and connected meaningfully, and the challenge itself, which pushed them to work together under pressure, applying cultural knowledge in real time.

““”

The USLC is a life changing opportunity. It opened my eyes to importance of having mob working with mob in health and other sector related industries. The USLC changed my career path to want to work in Aboriginal and Torres Strait Islander health.

The connections I made during the USLC are now some of my closest connections, where we celebrate our successes, learn from each other, and our now leaders in our own right in the health sector.

““”

The USLC allowed me to step out of the white-western way of thinking and allowed me to acknowledge and understand what the right way for our people is. Throughout my studies, when I am approaching an assessment, I am always thinking about what is the most culturally safe way to approach this situation, who the right professionals are that need to be involved, and what is best for the person that I am supporting.

““”

I felt comfortable being myself and learning at my own pace. Supported, connected and needed.

““”

The impact on my career has been immeasurable. The USLC deepened my knowledge of allied health and strengthened the value of my cultural understandings and lived experience. I've gone on to work in both hospital and community-controlled settings. But the biggest impact has been the lifelong relationships and connections I've built. I'm forever grateful for my IAHA family.

““”

I now realise that some team members only need a leader to instill confidence in them to unleash their full potential.

STRENGTHENING THE JOURNEY

Students shared thoughtful reflections and constructive suggestions, much of which has shaped ongoing improvements to the program. Many spoke about the intensity of the experience, the fast pace, long days, and limited downtime and suggested building in more time for rest and recovery to help everyone stay grounded and engaged.

While the program was demanding, students deeply valued the guidance and encouragement of the mentors, with only a few noting that occasional check-ins briefly interrupted team focus, a small trade-off for the strong, supportive presence mentors provided throughout the journey.

While the USLC challenged many students, it also acted as a catalyst for growth. As they engaged with unfamiliar situations and worked beyond their comfort zones, students came to better understand their strengths, their capacity to respond to challenges, and their potential. For many, the experience was transformative, helping students learn not only how to lead, but also who they are becoming as future health professionals. Students learn not only how to lead, but also who they are becoming as future health professionals.

“ ”

Keep doing what you're doing! This camp was amazing and just what I needed—connecting to our people and culture.

“ ”

This was great for my development so keep doing what you're doing.

“ ”

I loved this experience. I feel truly blessed and grateful to have been apart of it. Staff and all people involved have been so lovely and accommodating.



SHAPING FUTURE PRACTICE

Students described a powerful shift in their approach to their study and future practice. Many described now seeing their role through a cultural lens, placing culture at the centre of care, rather than at the periphery. They spoke of being more culturally aware, confident, and person-centred, with greater understanding of the importance of family and community in holistic care. The experience helped them feel stronger in leading with their identity and equipped them to bring Aboriginal and Torres Strait Islander frameworks into clinical settings. Students also noted improved communication skills, a deeper appreciation for interprofessional teamwork, and a commitment to building relationships and advocating for cultural inclusion in health and education systems.

“ ”

Very much the connections. The amount of professionals I've met who are now working in their fields has been tremendous. And also the value of culture when it came to the USLC when we were doing the challenges, it was all based around our culture. So, understanding that we can still lead in our industries with our culture, regardless of whether we're working in mainstream or with mob, we can still do that, no matter where we go.

“ ”

I will always lead with my cultural lenses and treat my patients how I would treat my family members.

“ ”

Think with black brain first and foremost.

“ ”

The way we view the world is holistic and therefore, we see the client in a holistic way, embedding the social and cultural determinants of health. It also flipped my practice by understanding that the patient is the expert in their own health and not the health professional which allows the patient to assert their own self-determination for the health and wellbeing.

“ ”

The USLC has had a significant impact on my studies within the past year. It has made me more aware of the systemic issues and how when in practice, it is always important to keep at the forefront that I am black before I am a practitioner.

“ ”

Blak before clinician.

CONNECTING FOR CHANGE

Students overwhelmingly recommended the USLC for other Aboriginal and Torres Strait Islander allied health students because of the connection, cultural pride, and professional growth it fosters. They described it as a life-changing experience that helped them step out of their comfort zones, build networks, develop deep connections, grow in confidence, and feel proud of who they are. Some spoke of how mentors who had once been USLC students inspired them to follow the same path, having returned to support others and continue the cycle of learning and leadership.

“ ”

Beyond the professional development, the USLC creates a sense of community, builds lifelong networks, and inspires students to step into leadership roles with confidence and purpose. We talk about the IAHA family and the USLC cohorts will be closely linked personally and professionally for life.

“ ”

I would recommend other students participate in the challenge to learn more about yourself, to share your understanding about your chosen field, but also learn about other mob and their allied health professions, to connect and learn from mentors who have been in the field who are prepared to share their knowledge, their skills and their practice with wisdom with you.



“ ”

I would highly recommend it. It's such a learning curve—especially coming from mainstream learning, it really breaks away from that and gives you the chance to feel more connected to culture and be around other mob. If you haven't had that connection before, it's a great space to feel welcomed. I hope others get as much out of it as I did, because the learning is continuous and it stays with you for years to come.

“ ”

I would tell them that it was an amazing opportunity that has literally changed my life.

“ ”

I had such a great opportunity as a student in the USLC and most of my mentors had taken part as a student before me, which I thought was great and a journey/story that I could be a part of too... and now am, which is cool to think of.

“ ”

The USLC is truly life changing, as it changed my life. Not only do you get to meet deadly Aboriginal and Torres Strait Islander students and mentors, but you then are also a part of the IAHA family. It challenges the way that you think to change your practice that you learn at university, that is biomedical and colonial. The outcomes you get from the USLC go far beyond the skills you learn from a clinical perspective, you make life long connections, build upon your leadership, challenge the way you think it a positive way, and become a part of the IAHA family.

“ ”

The USLC is incredibly important for Indigenous students, as we are still learning, it is important to learn in a way that is safe for us and Mob.



MENTORS REFLECTIONS

Mentors described the USLC as deeply rewarding for themselves and the students they supported. Many who had once been students in the USLC had returned to give back, driven by the impact the program had on their cultural identity, confidence, and professional growth. They spoke of learning to see themselves, developing strong interprofessional skills, and realising the value of working holistically and collaboratively for mob. The USLC helped mentors understand their place in the health workforce, not just as professionals, but as culture-strong leaders.

Mentors valued watching students grow over the course of the program, gaining confidence, stepping into leadership, and deepening their connection with culture and each other. They described the USLC as a unique space that universities often can't replicate. They shared how the experience reinvigorated their own motivation and purpose or "filled their cup". Several mentors and coordinators shared that one of the most powerful experiences was witnessing students shift their thinking, moving away from narrow clinical views and embracing culturally responsive, team-based care.

““”

Being a part of a movement of like-minded students striving to help out communities in what ways we could and seeing the same faces come through each year, seeing how we change, develop and pass down knowledge.

Coming back as a mentor last year was a really different experience for me—but just as meaningful. Being part of that process from a new perspective was powerful, and I hope others get the opportunity to do the same and give back to the USLC community.

COMMUNITY REFLECTIONS

Audience members described the final showdown as inspiring and a powerful display of student leadership, collaboration, and cultural strength.



““”

The program... encourages students to be brave, bold and work together, while reinforcing a sense of pride and belief in who they are and to vision who they might become as a future Indigenous health leader.



CARRYING THE LEGACY FORWARD

Throughout the USLC's first decade, the program has supported hundreds of Aboriginal and Torres Strait Islander allied health students to develop confidence, leadership capabilities, and meaningful connections with others who share their commitment to health and community.

At the heart of the experience is cultural identity and safety, being able to show up, be themselves, feel proud, and lead from a place of cultural strength. Just as important is the sense of belonging that comes from building relationships with peers, mentors, and IAHA as a collective. Many students return as mentors, continuing the cycle of support, learning, reciprocity and leadership.

Students reflected on gaining confidence to lead in their own way and at their own pace. They valued interprofessional learning and learned how each profession contributes, recognising the contributions of each profession to care. Networks formed during the USLC continue well beyond the program, providing all of those involved with connections across Australia and internationally.

Students also shared insights into how the program could better support their own individual growth. Many described the pace and intensity as energising but challenging, and highlighted opportunities to strengthen the experience. They expressed a desire for more uninterrupted team time, and deeper cultural learning through yarning and hands-on practice. These reflections show students' commitment to their own development and to the collective success of the program.

IAHA has listened and continues to adapt. The report centres the voices and experiences of Aboriginal and Torres Strait Islander students and emerging leaders. These learnings provide the foundation for future plans and recommendations that will sustain the USLC's growth and impact as it enters its second decade.

1. Respond to student feedback

Continue to embed feedback into program planning, delivery, and policy development to ensure ongoing improvement.

2. Expand program reach

Explore new delivery models—including regional and online options to increase access nationally and internationally.

3. Strengthen USLC alumni engagement

Create ongoing opportunities for alumni to stay connected, offer mentorship, and grow their leadership.

4. Secure sustainable investment

Build long-term partnerships with government, universities, and community to sustain USLC as a core IAHA initiative.

5. Influence and transform education systems

Translate USLC learnings into systemic change through knowledge translation with universities and educators to embed best practice interdisciplinary education, culturally responsive teaching, learning, and assessment, to improve cultural safety for Aboriginal and Torres Strait Islander students, strengthen retention and success, and graduate more culturally responsive non-Indigenous graduates.



Scan to watch
Lorraine Randall's USLC
and Careers Week
Testimonial



GLOSSARY

ABBREVIATIONS

Term	Definition
CR Framework	The IAHA Cultural Responsiveness in Action Framework
HFTC	Health Fusion Team Challenge
IAHA	Indigenous Allied Health Australia
IHFTC	Indigenous Health Fusion Team Challenge
QUT	Queensland University of Technology
USLC	Ultimate Student Leadership Challenge

TERMS

Term	Definition
Case scenario	A real-world complex health or community situation presented to student teams to explore and respond to. Case scenarios invite students to draw on cultural knowledge, interprofessional collaboration, and problem-solving skills.
Cultural Mentors	Aboriginal and/or Torres Strait Islander Elders, knowledge holders, lived experience or educators who guide students through cultural learning and leadership. Cultural support and guidance are provided to individuals and teams, and are provided throughout the entire USLC event.
Cultural mentors (international First Nations case scenario)	First Nations Elders, knowledge holders, lived experience or educators who guide students through cultural learning and leadership. Cultural support and guidance are provided to individuals and teams, and are provided throughout the entire USLC event.
Team Facilitators	Past Student alumni who guide activities, conversations, and processes, ensuring participation, cultural safety, and team cohesion.
Indigenous	When referring to Aboriginal and Torres Strait Islander peoples, IAHA use Aboriginal and Torres Strait Islander in full. Outside of usage in the context of Indigenous Allied Health Australia's name, the term 'Indigenous' is used to refer to First Nations people globally
Professional Mentors	Health professionals who share discipline expertise, career insights, and culturally responsive practice. The diversity of professional mentors provided is determined by the case scenario and the availability of mentors.
Students	IAHA Aboriginal and Torres Strait Islander allied health student members participating in the USLC as emerging leaders.

APPENDIX: USLC PARTICIPANT CHARACTERISTICS BETWEEN 2013 AND 2024

TOTAL NUMBER OF PARTICIPANTS	196		100%
NUMBER OF ATTENDANCES PER PARTICIPANT (N = 196; MISSING = 0)	1	143	73%
	2	38	19.4%
	3	11	5.6%
	4	3	1.5%
	5	1	0.5%
TOTAL NUMBER OF ATTENDANCES	269		100%
PARTICIPANT ATTENDANCES PER YEAR (N = 269; MISSING = 0)	2013	19	7.1%
	2014	25	9.3%
	2015	35	13%
	2016	36	13.4%
	2017	38	14.1%
	2018	29	10.8%
	2019	25	9.3%
	2020	0	0%
	2021	0	0%
	2022	20	7.4%
	2023	19	7.1%
	2024	23	8.5%
GENDER (N = 269; MISSING = 0)	Male	61	22.7%
	Female	207	77%
	Non-binary	1	0.3%
YEAR OF COURSE (N = 242; MISSING = 27)	1st	30	12.4%
	2nd	66	27.3%
	3rd	80	33.1%
	4th	63	26%
	5th	3	1.2%

ALLIED HEALTH DISCIPLINES REPRESENTED (MISSING = 0)	Social Work	36	13.4%
	Occupational Therapy	30	11.2%
	Sport and Exercise Sciences	23	8.6%
	Physiotherapy	20	7.4%
	Psychology	20	7.4%
	Speech Pathology	19	7.1%
	Mental Health	17	6.3%
	Nursing	14	5.2%
	Pharmacy	11	4.1%
	Medicine	11	4.1%
	Dental	9	3.3%
	Paramedicine	7	2.6%
	Dietetics	6	2.2%
	Podiatry	5	1.8%
	Public Health	5	1.8%
	Counselling	4	1.5%
	Nutrition	4	1.5%
	Biomedical Sciences	4	1.5%
	Health Science	4	1.5%
	Medical Imaging	4	1.5%
	Oral Health	4	1.5%
	Exercise Physiology	3	1.1%
	Optometry	3	1.1%
	Radiography	2	0.7%
Radiation Therapy	1	0.4%	
Osteopathy	1	0.4%	
Rehabilitation Assistant	1	0.4%	
Community Welfare	1	0.4%	



UNIVERSITIES REPRESENTED (N = 267; MISSING = 2)	Queensland University of Technology	32	12%
	James Cook University	28	10.5%
	Charles Sturt University	24	9%
	University of Queensland	18	6.7%
	University of the Sunshine Coast	17	6.4%
	Griffith University	16	6%
	University of South Australia	16	6%
	Charles Darwin University	15	5.6%
	University of Newcastle	13	4.9%
	Australian Catholic University	12	4.5%
	Central Queensland University	12	4.5%
	Flinders University	11	4.1%
	Curtin University	9	3.4%
	University of Canberra	6	2.2%
	University of Wollongong	6	2.2%
	University of Western Australia	5	1.9%
	Deakin University	4	1.5%
	University of New South Wales	3	1.1%
	Australian National University	2	0.7%
	Edith Cowan University	2	0.7%
	Monash University	2	0.7%
	RMIT University	2	0.7%
	University of Adelaide	2	0.7%
	Western Sydney University	2	0.7%
	La Trobe University	1	0.4%
	University of New England	1	0.4%
	University of Notre Dame Australia	1	0.4%
	University of Southern Queensland	1	0.4%
	University of Sydney	1	0.4%
	University of Technology Sydney	1	0.4%
	Australian College of Professions	1	0.4%
	Tabor College	1	0.4%

STATE AND TERRITORIES REPRESENTED (N = 267; MISSING = 2)	Queensland	135	50.6
	New South Wales	52	19.5
	South Australia	30	11.2
	Western Australia	17	6.3
	Northern Territory	15	5.6
	Australian Capital Territory	9	3.4
	Victoria	9	3.4
	Tasmania	0	0

STUDENTS SELF-ASSESSMENT FOLLOWING COMPLETION OF THE USLC/HFTC

FOR EACH OF THE STATEMENTS, HOW WOULD YOU NOW RATE YOUR?	PRE USLC MEAN (SD)	POST USLC MEAN (SD)	P	HEDGES G
Intercultural knowledge	6.41	8.23	<.001	0.95
Impact of cultural knowledge	6.95	8.55	0.004	0.66
Comfort with using cultural knowledge	6.73	8.32	0.002	0.72
Communication skills	7.23	8.36	0.023	0.51
Understanding of the importance of allied health	8.45	8.91	0.241	0.25
Understanding of other health disciplines	6.64	8.36	0.004	0.66
Ability to work with cultural diversity and sensitivity	7.32	8.45	0.025	0.50
Confidence in skills, knowledge and ability for shared decision making	6.59	8.64	<.001	0.84
Understanding of the importance of the client's engagement and informed consent in making decisions	8.41	9.18	0.06	0.41
Understanding of the historical, social, and cultural contexts that influence Aboriginal and Torres Strait Islander health	7.55	8.32	0.181	0.29
Ability to self-reflect	7.5	8.77	0.004	0.66
Leadership capabilities	6.82	7.95	<.001	0.81
Confidence in public speaking	5.82	7.82	0.003	0.69
Ability to work collaboratively in a team	7.64	8.59	0.022	0.51
Ability to resolve conflict	6.5	7.59	0.009	0.59
Network of Aboriginal and Torres Strait Islander university health students	5.55	8.68	<.001	0.96

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