

## Case study 5: Muku (Ear) Indigenous Research Program

***“Our kids are seen faster and in ways that respect who we are and how we live.”***

Aboriginal and Torres Strait Islander children experience the highest rates of chronic otitis media globally, affecting up to 70% in some remote communities. Often beginning in infancy, the condition can cause persistent hearing loss that undermines language development, learning, school engagement, employment opportunities, and cultural and social inclusion.

Despite decades of research and interventions, ear disease continues to drive health inequity. There has been no sustained national leadership or coordinated approach to prevention and care, leaving communities to bear the ongoing burden.

To address this challenge, Professor Kelvin Kong and fellow collaborators developed Muku (Ear) Indigenous Research – an overarching framework that unites a suite of Aboriginal-led research, clinical initiatives, and community engagement activities under a shared vision for culturally grounded ear health care.

Derived from the Gathang word for “ear,” Muku serves as a cultural anchor for this work, connecting research and clinical practice with Country, language, and community. It represents a collective identity for the projects led by Professor Kong and his team at the University of Newcastle and the Hunter Medical Research Institute (HMRI).

These projects aim to:

- Improve ear health outcomes for Aboriginal and Torres Strait Islander peoples.
- Embed community co-design and cultural safety in research.
- Develop telehealth ENT clinics, audiology-led models, and workforce pathways for Indigenous clinicians.

These efforts respond to stark realities: 43% of Aboriginal and Torres Strait Islander people aged 7+ have measurable hearing loss,<sup>1</sup> and otitis media affects up to 70% of children in remote communities.



Scan to watch the *Hear the Difference* video and learn more about *Muku (Ear) Indigenous Research Program*



Figure 21. Professor Kelvin Kong, advancing ear-health care for Aboriginal and Torres Strait Islander children.

Central to Muku’s success is Wukul Yabang – Aboriginal Health Research Community Panel, which guides research priorities and ensures cultural safety. This co-design approach builds trust and relevance, leading to a number of improved health outcomes including access to ENT specialists through telehealth and creating pathways for Indigenous researchers.

Engagement initiatives such as the Muku Research Kids STEM program inspire the next generation of Aboriginal and Torres Strait Islander researchers, fostering long-term capacity building.

Muku aligns with the University’s Indigenous Education & Research Framework and Research Our Way – Aboriginal Health Research Strategy, which prioritise Aboriginal governance, cultural safety, and community benefit. By embedding co-design and culturally grounded care into health research, Muku exemplifies these principles and works to address systemic health inequities.



Figure 22. Muku (Ear) Indigenous Research Program collaborators, Professor Kelvin Kong and Dr Guy Cameron. Figure 23. Classroom image of Marcus, recipient of telehealth ear-health care, from the ‘Hear the Difference’ video. Figure 24. Marcus having his ears checked by an Aboriginal Health Practitioner, clinic image from the ‘Hear the Difference’ video.

1 Australian Institute of Health and Welfare (2024). *Ear and hearing health of Aboriginal and Torres Strait Islander people 2024: Measured hearing loss.*