

Annual Victorian women's health & wellbeing forum

Introduction

The fourth annual Victorian Women's Health and Wellbeing Forum was held on 19th May 2006 at the Moonee Valley Racing Club. Officially opened by the Hon Mary Delahunty, MP and attended by over 150 women, the forum represented a milestone for DHS, as it marked the completion of the first iteration of the Women's Health and Wellbeing Strategy (WHWB).

Having been operational since 2000 the aim of the strategy has been to improve the health and wellbeing of Victorian women, particularly those who are most disadvantaged, and to provide policy leadership about gender issues within DHS. The first strategy was the result of consultations with over 2000 women and organisations and during its four year operation has seen over 160 initiatives being implemented throughout the department. It was also with great pleasure, that the Hon Bronwyn Pike, MP Minister for Health, announced at the completion of the forum that the commitment to women's health and wellbeing is still strong, with another iteration of the strategy due to be released in September 2006.

The forum was organised in partnership with the Office of Women's Policy, and provided participants with the opportunity to:

- Learn about and discuss emerging health issues and challenges that women face during different stages of their life;
- Showcase local good practice; and
- Provide input in to the next iteration of Women's Health and Wellbeing Strategy, which the Department of Human Services has made a commitment to implementing.

Keynote address

Associate Professor Siobhan Austen, Director of Women in Social and Economic Research at Curtin University presented the keynote address. Siobhan's presentation identified the emerging health related factors that will impact on women's health during different stages of their life. Siobhan's presentation challenged forum participants to

identify the strategies and policies that will need to be out in place over the next decade to respond to the growing number and complexity of women's health care needs.

Workshops

Workshops held at the forum were also divided into life stages: adolescence, the parenting years, mid life and later life. Picking up from where Siobhan's presentation concluded, the workshops presented local examples of good practice. They also provided participants with the opportunity to share and discuss their programs and consider if they could be extended or replicated in other parts of Victoria. Below is a list of issues that were highlighted during the workshops.

Workshop one: Adolescence.

- Early intervention models that include access to a matrix of services were considered to be most useful for meeting the needs of adolescents. Their diversity as a population group demands that both links to generic health and wellbeing programs and targeted programs need to be developed.
- The key to success when working with young people is in relationship building. Non-recurrent funding does not allow this work to be sustained.
- Young people need opportunities to develop leadership skills at work, school and university. This allows them to develop the confidence to take control in making decisions about their own health needs. Similarly the capacity of professionals who work with young people needs to be developed to allow the process of self-determination to take place. Respectful relationships mirror how you can respect yourself.
- Young women need to be educated in personal safety concepts. They need to be empowered to be assertive and encouraged to be participants in determining their own wellbeing needs. Transport, particularly in rural areas needs to be upgraded, as it is considered to be the biggest barrier to young people accessing services and the reason why they take personal safety risks.

Workshop two: the parenting years

- Women's particular social and economic experiences and status means that they face specific challenges as parents. This needs to be the starting point for government policy, programs and services responses to motherhood.

- Feeling anxious and stressed as a parent is a normal sign of adjustment and does not need to be pathologised by the medical profession. Instead the focus needs to be on building resilience.
- The need for broad social connection was considered critical during these years in maintaining a women's health. Spaces where parents can come together and discuss their feelings and share ideas need to be maintained. Rather than a focus on medical solutions, there needs to be greater recognition and support for multi-disciplinary approaches, including neighbourhood houses, community health services, and community based projects.
- One size doesn't fit all. Our perceptions of what constitutes a family unit and how family units operate needs to change to address stereotypes and stigma. Parenting needs to be seen as a joint responsibility. We need to challenge the iconic presentation of mother and baby and move towards more diverse and inclusive images.

Workshop three: mid life

- Whilst mid life had previously been categorised as a time when women experience a break from primary care giving roles, this is no longer the case. As more women choose to have children later in life or as families blend together, women of this age still find themselves raising children and often caring for elderly parents at the same time. This places additional stress on women that needs to be understood and considered.
- Isolation is of specific concern to women in rural areas. In particular as there are few GP's or health care workers who can support women through menopause or situations of domestic violence. Whilst it was acknowledged that these issues affect different cultural groups in different ways, self-esteem, body image and cognitive changes were recurrent themes.
- Financial security is a major concern, with women still earning only 80% of mens income. Women are far more likely to spend time out of the workforce, caring for children and other family members, and are under prepared financially for retirement, even though they will have a greater life expectancy. Women need skilling for long-term employment.
- Health policies need to be holistic in their approach and not reactive to chronic disease. Opportunities to remain in touch and connected are important, as is early intervention. Positive education on health issues related to midlife need to be

addressed earlier in a woman's life, so as to prepare her what lies ahead and to let her know what help is available.

Workshop four: later years.

- Confidence in mobility needs to be addressed. This includes prevalence and injuries from falls, safety and physical strength. Physical health impacts on a person's mental health and cannot be separated.
- We need to find ways to maintain and develop opportunities for social connectedness. Older women do not lose their usefulness after a certain age and should be seen as a valuable resource.
- Menopause and the impact on women's routines and daily lives cannot be underestimated as a health concern.
- Specific health issues such as incontinence and dementia need to be managed and prepared for better. Again these issues need to be discussed earlier in a person's life, as they do not always have their onset in the later years.
- Financial security, affordable housing and care needs require greater resourcing. Women are living longer, and although many remain involved, fears for basic safety and security impact on a woman's ability to actively participate in their community.

Women's health and wellbeing needs to be a partnership arrangement

Whilst recognising that appropriate health care services are pivotal in developing responsive services for women, there was also a strong belief that if change is to take place, then partnerships must be formed. Because women are so diverse, different programs, and mediums need to be accessed – we know that active participation in community projects assists in enhancing a woman's wellbeing.

Panel presentations reflected the diversity of models that are presently being implemented throughout Victoria. To complement this work, two very different theatrical performances were also showcased to the larger forum. Theatre Company *Somebody's Daughter* performed excerpts from their current project involving at risk young offenders from the Albury Wodonga region. Their heartfelt messages and non-verbal communication touched all those who watched this extraordinary performance. Later, Comedienne Nelly Thomas

gave us all a good laugh as she performed her incisive one-woman show '*Why being a woman is good for your health*'.

The next iteration of the women's health and wellbeing strategy

Whilst the good work that has been done to date was acknowledged, there was still strong recognition that there is a long way to go. The achievements to date reflect the fact that the health and wellbeing issues women face are not separate from each other but often overlap. As we tackle one health and wellbeing issue we become aware of other issues that also need to be addressed. There is no 'one size' fits all, nor one single solution that addresses the myriad of issues that women are facing each day. Conversely we know that if we can effect change in one area of a woman's life that it can have the effect of improving their health in so many ways. With these this in mind, these are some of the common themes that participants identified as important to be included in the next iteration of the women's health and wellbeing strategy.

- The WHWB strategy needs to lead a change in direction that moves away from pathologising normal difficulties that women face during different stages of their life.
- Policy, program and service responses need to be informed by a social model of health with an emphasis on prevention.
- Policy, programs and services across the whole of government need to avoid service gaps, duplication, promote consistency and be funded to ensure sustainability where appropriate.
- Women need to be empowered to be become more involved in their own health and well being outcomes
- The WHWB strategy has a roll to play in showcasing new ideas and good practice to progress women's health issues in the regions.

What participants had to say about the forum

"Excellent! Loved learning about current Victorian initiatives and in identifying new opportunities to work collaboratively"

"I enjoyed the opportunity to be involved with the 'big picture' in women's health and wellbeing"

“The most useful thing about this event was that it provided time for reflection on systemic responses to women’s life stages”

“The small group sessions were dynamic and interactive, with some great issues raised, deliberated and discussed.”

“What a dynamic bunch of women!”

“Exceeded my expectations – Fabulous”

“Powerful presentation of issues by Somebody’s Daughter.”

“Thanks Nelly, so good to have a laugh!”