

VALUING VICTORIA'S WOMEN

VICTORIAN WOMEN'S  
**Health and Wellbeing**  
STRATEGY

ANNUAL ACTION PLAN 2002–2003

# OVERVIEW

This Action Plan forms part of the implementation framework for the Women's Health and Wellbeing Strategy.

The goal of the Victorian Women's Health and Wellbeing Strategy is to continue to improve the health and wellbeing of Victorian women, particularly those who are most disadvantaged.

Initiatives within the Action Plan encompass the broad spectrum of the responsibilities of the Department of Human Services (DHS) for health, aged care, disability, housing and family services. All are relevant to the health and wellbeing of women.

Every year, a range of initiatives from across DHS will be identified under each of the five areas for action, and published in this Annual Statement. The specific Division or Divisions responsible for each initiative will be identified, as will the milestones to be achieved. The selection of initiatives will be informed by:

- review of actions from the previous year;
- feedback from the Annual Forum, and broader Government consultative mechanisms; and
- analysis of emerging issues.

Regular monitoring of the Action Plan will be undertaken by the Policy and Strategy Projects Division within DHS.

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## Areas for Action 1 **INCREASE WOMEN'S PARTICIPATION AND LEADERSHIP**

### *Initiative 1.1*

#### **Consumer-run Breast Cancer Resource Centre**

##### **Purpose**

To enhance women's access to quality support information and resources on breast disease

##### **Description**

A Consumer-run Breast Cancer Resource Centre will be established as a statewide and information network and drop in centre.

##### **Milestones**

Sep '02 – information ready for statewide dissemination

Feb '03 – opening of drop in centre

##### **DHS Responsibility**

Breast Care Co-ordination Unit – Metropolitan Health and Aged Care Services Division

### *Initiative 1.2*

#### **Patient held medical record for maternity services**

##### **Purpose**

To improve collaboration between women and health care providers in relation to birthing services and options

##### **Description**

A patient held medical record will be developed and evaluated with a group of women for the duration of their pregnancy and into the postnatal period. This initiative will assist in women participating more fully in decision-making around their birthing options, and also improve coordination of maternity services. It will complement and dovetail with child health records.

##### **Milestones**

June '03 – draft of record complete and evaluation plan agreed

##### **DHS Responsibility**

Effectiveness Unit – Metropolitan Health and Aged Care Services Division

### *Initiative 1.3*

#### **Young Aboriginal women in health leadership**

##### **Purpose**

To support young Aboriginal women in health leadership and health advocacy within Aboriginal communities

##### **Description**

Young Aboriginal women are taking a more active role in the leadership of their communities. This requires resourcing and support. 3 leadership events will be conducted in the next 12 months, 2 rural and 1 metropolitan to provide mentoring and skill development in the area of health advocacy and health leadership within Aboriginal communities. One of the initiatives will be a "think tank" forum to plan the way forward for promotion and resourcing of Aboriginal young women as leaders. Aboriginal women Elders will be engaged to support this process.

##### **Milestones**

Oct '02 – reference group established

July '03 – leadership events completed

##### **DHS Responsibility**

Policy Projects – Policy and Strategic Projects Division

### *Initiative 1.4*

#### **Women's improved health and wellbeing through Neighbourhood Renewal Projects**

##### **Purpose**

To increase the health and wellbeing of women living in neighbourhood renewal areas through increased employment and training, participation in governance and consultation processes and improved safety

##### **Description**

To improve the health and wellbeing of women living in neighbourhood renewal areas through increased employment and training – for example by participating in Community Jobs Programs in Neighbourhood Renewal Areas; women's participation in governance structures and consultation processes; and by improving the safety, security and stability of accommodation for women and their families who reside in neighbourhood renewal areas. Neighbourhood renewal action plans will be developed which will include specific strategies to improve health and wellbeing, employment, personal safety and reduce crime. Action Plans will be developed in the following neighbourhood renewal areas: Latrobe Valley, Wendouree West, East Eaglehawk, Collingwood/Fitzroy, Maidstone, Braybrook, Corio/Norlane, Seymour and Parkside Estate Shepparton. Women will be encouraged to participate in local decision-making structures, such as Neighbourhood Renewal Steering Committees so that Action Plans are responsive to and benefit the particular needs of women.

##### **Milestones**

Aug '02 – governance and consultation arrangements established

May '03 – Neighbourhood Renewal Action Plans completed for nominated neighbourhoods

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### **DHS Responsibility**

Neighbourhood Renewal – Office of Housing

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#### *Initiative 1.5*

### **Social citizenship for women with disabilities**

#### **Purpose**

To contribute to the wellbeing of women with disabilities through the promotion of social citizenship

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#### **Description**

Consultation with women with disabilities indicates the need for opportunities that will promote and/or support their participation in women's and disability movements, in events such as International Day for People with a Disability and in Disability Services Active Participation Strategy aimed at increasing the participation of people with a disability in the planning, delivery, monitoring and review of disability services.

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#### **Milestones**

June '03 – publication of four articles promoting the diversity of human experience for women with disabilities

June '03 – at least 50% of the participants in Disability Services Active Participation being women with disabilities

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#### **DHS Responsibility**

Disability Services

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## *Areas for Action 2* **INCREASE ACCESS THAT EMBRACES DIVERSITY**

#### *Initiative 2.1*

### **Enhancements for Aboriginal maternity services**

#### **Purpose**

To increase access to culturally appropriate support for Aboriginal women during pregnancy, birth and the postnatal period

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#### **Description**

To respond to identified service gaps in the Koori Maternity Services Program, a range of initiatives will be implemented in 2002/03. These include:

- the increase of staffing levels of midwives and/or Aboriginal maternity health workers in Melbourne, Mildura, Morwell, Wodonga and Shepparton
  - Initial planning for the establishment of 2 new services in Dandenong and Echuca.
  - Development of a minimum data set on activity and outcomes.
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#### **Milestones**

June '03 – minimum data set on activity and outcomes implemented

July '03 – staff training and information systems developed

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#### **DHS Responsibility**

Effectiveness Unit – Metropolitan Health and Aged Care Services Division

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#### *Initiative 2.2*

### **Physical activity for older women**

#### **Purpose**

To encourage older women to participate more regularly in physical activity

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#### **Description**

This initiative is one of 10 Older Person's Health Promotion projects being implemented across the state. The broad aim of these projects is to assist older people to lead healthy and independent lives and to support positive ageing. This women's specific initiative will be based in 4 communities; Vermont, Mooroolbark, Geelong and Bendigo and will identify barriers and supportive factors for regular exercise and develop strategies in response to these.

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#### **Milestones**

Timelines for women specific initiative:

July '02 – completion of needs assessment

Nov '02 – publication of resource directories of local activities

Mar '02 – report on findings of project and recommendations

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#### **Responsibility**

Health Development Unit – Rural & Regional Health & Aged Care Services

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### *Initiative 2.3*

## **Breast prosthesis information**

### **Purpose**

To develop an Information and Communication Strategy for women requiring breast prosthesis and to increase awareness and linkages for service providers

### **Description**

BreastCare Victoria (in consultation with Disability Services) will fund the development of appropriate information products and provide training to key service providers

### **Milestones**

June '03 – completion of development and distribution of information products for consumers and relevant care providers

June '03 – 29 Aids and equipment Co-ordinators will have participated in appropriate education and training programs

### **DHS Responsibility**

Breast Care Co-ordination Unit – Metropolitan Health and Aged Care Services Division

### *Initiative 2.4*

## **Housing for women post release from prison**

### **Purpose**

To assist women leaving prison to access housing upon release from prison

### **Description**

Evidence suggests a link between reoffending behaviour and homelessness upon release from prison. This initiative will assist women at high risk of homelessness upon exiting prison to access 13 transitional properties per six months and other forms of short and long term accommodation. A dedicated Housing Placement Worker operates from the Dame Phyllis Frost Centre to place women in these properties.

### **Milestones**

June '03 – completion of acquisition of 13 properties

June '03 – 350 women will be provided with housing information, referral, placement and intensive housing assistance pre-release. 26 women will be provided with intensive post release support.

### **DHS Responsibility**

Office of Housing, Drug Policy Unit and Office of the Correctional Services Commissioner

### *Initiative 2.5*

## **Health promotion for women in refuges**

### **Purpose**

To increase health promotion awareness in women experiencing family and domestic violence and living in refuges

### **Description**

Recent studies conducted by the Royal Women's Hospital have shown that women who have experienced family and domestic violence have less access to health promotion information than the general population, and as a result, are often at greater risk of specific health issues such as cervical cancer. This initiative will provide health promotion training for workers in family and domestic violence crisis services and support closer partnerships with local GPs.

### **Milestones**

July '03 – statewide training of 150 Domestic Violence workers

### **DHS Responsibility**

Community Housing & Supported Accommodation and Assistance Program (SAAP) – Office of Housing

### *Initiative 2.6*

## **Enhanced screening initiatives for women of diverse backgrounds**

### **Purpose**

To enhance access to health screening services, particularly targeting population groups from diverse backgrounds

### **Description**

There are some groups of women, in particular women with disabilities, Aboriginal women and culturally and linguistically diverse (C&LD) women, who require special attention with regard to screening for breast and cervical cancer. For example, GP's often seem to consider that women with disabilities do not require education about or screening for cervical cancer. In addition physical access to health services and limited provision of information in languages other than English can provide barriers to early intervention. Initiatives will include planning forums with Aboriginal communities, professional development for GP's and service providers, further research on screening profiles, community education and a mini-grants program to support local responses to promoting screening messages.

### **Milestones**

June '03 – improved community ownership of the PapScreen Program by Aboriginal women, through forums and workshops for Aboriginal health workers, organised by PapScreen Victoria in conjunction with Aboriginal organisations

June '03 – Breast and Pap Planning Days, coordinated in collaboration with the Aboriginal community

June '03 – implementation of a mini-grants program run through PapScreen Victoria for C&LD women 60 and over

June '03 – identification and collation of information on the current screening rates and barriers for C&LD and Aboriginal women

June '03 – completion of a strategy that aims to increase cervical screening rates for women with disabilities

June '03 – completion of a series of forums targeting providers of services to women with disabilities regarding health promotion and screening information

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### **DHS Responsibility**

Health Development Unit – Rural and Regional Health and Aged Care Division and Disability Services

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#### *Initiative 2.7*

### **Enhancements to sexual health services for women with disabilities**

#### **Purpose**

To enhance the capacity of sexual health services to respond to women with disabilities

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#### **Description**

Women with disabilities are often stereotyped as not having sexual feelings or needs, not being sexually active and therefore not needing health-promoting information relating to sexuality, relationships and parenting. A checklist and assessment tool that will help make appropriate referrals to services is currently being developed and will be implemented.

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#### **Milestones**

August '02 – field testing of assessment tool

June '03 – checklist developed

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#### **DHS Responsibility**

Disability Services

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#### *Initiative 2.8*

### **Service provision to young women from SAHEL Africa**

#### **Purpose**

To improve the capacity of service providers to appropriately assess and support circumcised girls to reduce the negative impact of the practice on their overall health and wellbeing

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#### **Description**

Training and resourcing of health service providers to deliver sensitive health practice to circumcised girls who currently avoid seeking health care for fear of negative attitudes through uninformed service provision. An interactive training package will be developed and delivered to Community Health, Women's Health, Local Government service providers and Secondary School Nurses.

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### **Milestones**

Sep '02 – development of training package and trialing across Primary Health Services sector

Dec '02 – finalisation of information and resource manual for professionals

Aug '03 – completion of training for school nurses and maternal and child health nurses

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### **DHS Responsibility**

Primary Health Programs – Rural & Regional Health & Aged Care Services

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#### *Initiative 2.9*

### **Information and telecommunication for women with disabilities**

#### **Purpose**

To improve systems and responses for more efficient and effective communication for women with a disability and women who are carers from C&LD communities

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#### **Description**

Consultation indicates that women with disabilities can be highly dependent on accessible telecommunications for both information and support. This initiative is the first of a number aiming to improve access to telecommunication and information resources for women with disabilities and women as carers. Additional information brochures about health and wellbeing issues and support services will be made available in community languages.

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#### **Milestones**

Sep '02 – establishment of a new Disability Online website established that complies with the highest International Standards for website accessibility

Dec '02 – a single 1800 number, email addresses with TTY and fax facilities which was established in April 2002 for access to Intake and Response Services for Victoria and will be linked to Specialist Children's Services

July '03 – review and revision of information brochures on support services in community languages

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#### **DHS Responsibility**

Disability Services

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### *Initiative 2.10*

## **Respite services and supports for carers**

### **Purpose**

To increase support to carers through the allocation of \$1m growth funding for additional respite and carer support services

### **Description**

It is estimated that 70% of carers are female. To maintain their health and wellbeing, a range of initiatives will be introduced including Carer Support and Resource Workers, flexible respite options and increased funds to meet growing needs.

### **Milestones**

Sep '02 – allocation of \$1 million growth funding to appropriate agencies to establish additional respite and carer support services to meet the needs of a further 1000 carers

### **DHS Responsibility**

Aged Care – Rural & Regional Health & Aged Care Services

### *Initiative 2.11*

## **Health promotion for C&LD women in prison**

### **Purpose**

To increase the health and wellbeing knowledge of C&LD women who are in prison by implementing health promotion initiatives

### **Description**

Women in prison have poorer health and wellbeing status than those women in mainstream society. To begin to redress this disadvantage, especially for C&LD women, health promotion sessions will be delivered on reproductive and sexual health, occupational health and wellbeing, and alcohol and drugs, with specific topics being nominated by the groups.

### **Milestones**

June '03 – completion of 72 health promotion sessions conducted on a weekly or bi-weekly basis at each of the two prisons in up to six languages by bilingual health educators

June '03 – completion of gender and cross cultural training for prison staff

### **DHS Responsibility**

Primary and Community Health – Rural & Regional Health & Aged Care Services

### *Initiative 2.12*

## **Birthing option information in accessible formats**

### **Purpose**

To inform women about birthing options in culturally appropriate languages and accessible formats

### **Description**

Women with low proficiency in English are disadvantaged in understanding their birthing options when information explaining the benefits and risks of a range of options is not made available in their first language.

This initiative will provide women with the information they require through publications, a newly developed website, audiotapes and videos.

### **Milestones**

Aug '02 – launch of website

June '04 – development and dissemination of new information products

### **DHS Responsibility**

Effectiveness Unit – Metropolitan Health and Aged Care Services Division

### *Initiative 2.13*

## **Group training and support for women with problem gambling behaviours**

### **Purpose**

To reproduce the Ballarat Women's Problem Gambling Group Therapeutic Intervention Kit for Statewide use

### **Description**

The Gambler's Help service in Ballarat have developed a Women's Problem Gambling Group Therapeutic Intervention kit. This kit provides the tools for counselors to implement eight weeks of 2hr sessions to groups of women experiencing issues with Problem Gambling. The kit will be modified so that it translates to other regions across Victoria, and reproduced for other Gambler's Help services. Statewide publication and distribution will provide the opportunity for other services to conduct sessions with groups of women.

### **Milestones**

June '03 – training package to be modified, printed and distributed

### **DHS Responsibility**

Family and Community Support – Community Care

## Areas for Action 3 **ENHANCE SAFETY AND SECURITY**

A whole-of-government Women's Safety Strategy is being developed to reduce the level, and fear, of violence against women in Victoria. The Strategy will make a major contribution to creating "safe streets, homes and workplaces", which is one of eleven priority areas for the Government over the next ten years, as outlined in Growing Victoria Together.

The Women's Safety Strategy is being developed collaboratively by a number of Government departments, co-ordinated by the Office of Women's Policy in the Department of Premier and Cabinet. The policy directions contained in the Strategy are shared by all Government departments, demonstrating the importance of a whole of government approach to the issue of women's safety.

The Women's Safety Strategy touches on all of the responsibilities of DHS for health, community services, aged care, disability, housing and family services, because they are all relevant to women's safety. Key initiatives being undertaken by DHS in relation to women's safety have been described in the Women's Safety Strategy, and include the Indigenous Family Violence Strategy. Implementation of these initiatives will be achieved through improved program responses across DHS.

### *Initiative 3.1*

#### **Training for maternal and child health nurses in responding to homelessness and family violence**

##### **Purpose**

To enhance service response to women by training maternal and child health nurses about homelessness and family violence issues

##### **Description**

Many family and community services come into contact with people who are homeless, at risk of homelessness and experiencing family violence situations. These services can play an important role in providing information and referral services to assist people to access assistance. Early intervention and appropriate referral by these services would assist at risk groups to avoid homelessness and family violence by linking people into appropriate services quickly. Understanding how homelessness and family violence affects an individual or family can also improve the way in which health and community services are provided.

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##### **Milestones**

Oct '02 – completion of eight one-day programs (one in each of the five rural regions and three in the metropolitan area) will ensure that at least 80 nurses have a more in-depth understanding of family violence through targeted training programs

Dec '03 – completion of training for 530 maternal and child health nurses (full and part-time) to improve their identification and understanding of homelessness and family violence and awareness of the homelessness and family violence

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##### **DHS Responsibility**

Family & Community Support Branch – Community Care Division in partnership with the Community Housing & SAAP – Office of Housing

### *Initiative 3.2*

#### **Exploration of the links between family violence and gambling**

##### **Purpose**

To develop a tool to assist consumers and family violence workers in the identification of problem gambling issues

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##### **Description**

Women's Information Referral Service is a generalist point of contact for women, and for services who have clients with family violence issues. The development of a tool for consumers and staff to use to identify the issues and links between family violence and problem gambling will assist in addressing these two issues in partnership. The tool will be developed based on research and consultation with service providers and staff on the most appropriate and meaningful way to access this type of information.

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##### **Milestones**

June '03 – development of resource tool

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##### **DHS Responsibility**

Family and Community Support – Community Care

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## Areas for Action 4 **IMPROVING WOMEN'S MENTAL AND EMOTIONAL HEALTH**

### *Initiative 4.1*

#### **Gender awareness in Victorian mental health services**

##### **Purpose**

To improve the safety of women in mental health residential treatment and support services, through accreditation mechanisms that include a gender focus

##### **Description**

Victorian Mental Health Services are subject to the Australian Health Care Agreement and through Commonwealth funding, will be accredited against the National Standards for Mental Health Services.

The accreditation process will evaluate the degree to which services have considered and addressed the particular needs of women against the Standards. This promotes safety issues for women in residential and inpatient services being identified and followed up.

Additionally there will be a focus on women within the Mental Health Branch quality monitoring strategy, which includes consumer and carer evaluation and outcome measurement.

##### **Milestones**

June '03 – completion of accreditation of all clinical and Psychiatric and Disability Support Services

June '04 – Incorporation of the "safety of women" mechanism in the Quality Monitoring Strategy

##### **DHS Responsibility**

Mental Health Branch – Metropolitan Health & Aged Care Services Division

### *Initiative 4.2*

#### **Women with postnatal depression**

##### **Purpose**

To improve the detection and promotion of effective primary care service provision for women at risk of antenatal and postnatal depression

##### **Description**

Postnatal depression affects 14% of women giving birth. Depression during and in the postnatal period has been linked to the development of behavioural and cognitive delays and the development of chronic depression in the children of these women. Most women suffering postnatal depression remain unidentified and untreated. As part of a national project auspiced by "beyondblue," this initiative seeks to evaluate the feasibility of using a simple screening tool to identify women at risk of postnatal depression in Victoria. A randomly selected sub sample of 400 women identified as at risk of depression will be offered specific intervention programs in addition to GP referral.

Treatments offered will be compared with routine care including outcome measures for infant, maternal and partner functioning.

##### **Milestones**

Dec '04 – completion of project to include development of database, screening tool and regular updates by beyondblue

##### **DHS Responsibility**

Mental Health Branch – Metropolitan Health & Aged Care Services Division

### *Initiative 4.3*

#### **In home support for mothers with a mental illness**

##### **Purpose**

To extend intensive in home support services for mothers with a mental illness

##### **Description**

Consumer and carer feedback has consistently suggested that most mothers will not ask for assistance or access more generic in home supports for fear that their mental illness will not be understood and that their children will be removed. The Mental Health Branch currently funds two best practice models providing intensive home based support and outreach to mothers with a mental illness in the Eastern and Northern metropolitan regions. This initiative will build on these models to support women with poor social, health and economic status.

##### **Milestones**

Jan'03 – employment of additional home based support workers

##### **DHS Responsibility**

Mental Health Branch – Metropolitan Health & Aged Care Services Division

### *Initiative 4.4*

#### **Partnerships between sexual assault, domestic violence and mental health services**

##### **Purpose**

To improve mental health client outcomes by facilitating improved relationships and service collaboration between domestic, violence sexual assault and specialist mental health services

##### **Description**

Women with a mental illness have been reported to experience poor access to mainstream domestic violence and sexual assault services. This may partly be due to a lack of understanding by workers in those services about working with women with mental illness. Also, some mental health clinicians can lack confidence and experience in dealing with sexual assault and domestic

violence issues. Mental health workers and staff in domestic violence and sexual assault services would benefit from information about, and encouragement to develop, collaborative practices to respond to the needs of women with a mental illness who are also survivors of domestic violence and / or sexual assault.

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### **Milestones**

Oct '02 – employment of a project officer to identify key issues in responding to women with a mental illness, and to disseminate best practice examples

Dec '02 – facilitated forum and announcement of an “Awards Program”

July '03 – completion of the project report

Sep '03 – finishing forum, report dissemination and awards conferral.

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### **DHS Responsibility**

Mental Health Branch – Metropolitan Health & Aged Care Services Division, in collaboration with Family and Community Support Unit – Community Care, and Home Finance and Community Programs Unit – Office of Housing

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## *Initiative 4.5*

### **Gender-specific training for Primary Mental Health and Early Intervention Teams**

#### **Purpose**

To provide gender-specific training for Primary Mental Health and Early Intervention teams to enhance their response to women

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#### **Description**

503,000 Australian women within a 12-month period experienced Depression (National Survey Of Mental Health And Wellbeing the Adult Survey – April 1999).

The largest number of women with depression seek treatment from, or present to primary health services, especially general practitioners. This initiative will provide gender specific training to Primary Mental Health and Early Intervention Teams on effective treatment approaches for women with high prevalence mental health disorders such as depression and anxiety.

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#### **Milestones**

Oct '02 – selection of an agency to develop the training

Apr '03 – completion of development of training program

July '03 – commencement of delivery of training to Primary Mental Health and Early Intervention Teams by July 2003

Mar '04 – completion of delivery of training to all Primary Mental Health and Early Intervention Teams

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#### **DHS Responsibility**

Mental Health Branch – Metropolitan Health & Aged Care Services Division

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## *Initiative 4.6*

### **Support for lesbian and gay young people**

#### **Purpose**

To increase supports for lesbian and gay young people in relation to their health and wellbeing

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#### **Description**

Lesbian and gay youth experience greater levels of discrimination and have different mental and emotional health issues from their mainstream counterparts. This initiative will evaluate models of practice that support lesbian and gay youth to receive appropriate health and wellbeing services within their local communities.

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#### **Milestones**

Dec '02 – completion of implementation plan, then progress report to reference group every 3 months

Oct '04 – Final report

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#### **DHS Responsibility**

Mental Health Branch – Rural & Regional Health & Aged Care Services Division

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## *Initiative 4.7*

### **Mental health training for secondary school nurses**

#### **Purpose**

To improve the capacity of secondary school nurses to provide support to young women to make decisions and access appropriate services that will enhance their mental and emotional health

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#### **Description**

Enhance the capacity for nurses employed in the Secondary School Nursing Program to support young women experiencing anxiety and depression through appropriate referral and advocacy by increasing the nurses' knowledge and expertise and by developing relevant assessment tools.

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#### **Milestones**

Dec '02 – identification of strategy to improve access to community health counselling services

June '03 – completion of mental health assessment tool

June '03 – completion of professional development for nurses

June '03 – dissemination of network information that will support nurses to initiate prevention and early intervention strategies in schools

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#### **DHS Responsibility**

Secondary School Nursing Program – Rural & Regional Health & Aged Care Services

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### *Initiative 4.8*

## **Problem Gambling training for telephone support workers**

### **Purpose**

To develop a training package for telephone support workers regarding problem gambling identification and referral

### **Description**

Telephone support workers provide advice to women on a range of interrelated issues. The development and delivery of training for these workers will assist in their ability to identify problem gambling issues, and appropriately refer women to Gambler's Help services.

### **Milestones**

June '03 – completion of training to telephone support workers

### **DHS Responsibility**

Family and Community Support – Community Care

### *Initiative 4.9*

## **Juvenile Justice Drug Strategy**

### **Purpose**

To develop a Juvenile Justice Drug Strategy to increase the responsiveness by the service system

### **Description**

There has been a significant increase in young people being apprehended and sentenced for drug or alcohol related offences, including young women. The Drug Strategy will define a set of approaches, procedures, services and strategies to build on current good practice and enable responsiveness to changing service needs and priorities. It will provide a cohesive framework, which is inclusive of gender, to assist in the achievement of

continuous improvement of practice, management and governance in Juvenile Justice centres.

### **Milestones**

Sep '02 – finalisation of steering committee

Dec '02 – identification of key implementation and practice issues in the development of the Juvenile Justice Drug Strategy

June '03 – completion of development of a draft Juvenile Justice Drug Strategy

### **DHS Responsibility**

Juvenile Justice – Community Care Division

### *Initiative 4.10*

## **Problem Gambling training for maternal and child health nurses**

### **Purpose**

To provide training on problem gambling for maternal and child health nurses

### **Description**

The Maternal and Child Health Service is a primary care service for families with children aged 0–6 years. One of the key elements of the Maternal and Child Health Service is a focus on the health and wellbeing of women. Training on issues regarding problem gambling will provide nurses with the skills to identify women and families that have gambling issues. It is expected that this training will result in increased awareness of problem gambling issues, and increased referral of women and/or their families to Gambler's Help services. Training will be provided through a variety of forums.

### **Milestones**

June '03 – completion of training sessions

### **DHS Responsibility**

Family and Community Support – Community Care

## *Areas for Action 5* **EXTEND KNOWLEDGE ON WOMEN'S HEALTH AND PROMOTE ONGOING IMPROVEMENTS**

### *Initiative 5.1*

## **Gender competency curriculum**

### **Purpose**

To increase understanding of gender issues in Disability Services direct care staff

### **Description**

Recent research and consultation has highlighted a range of key workforce challenges facing Disability Services in order to position it to deliver quality services to people with a disability. This initiative will develop training competencies that recognise

the individuality of and difference between, women and men with disabilities including professional development regarding management of the health needs of people with disabilities.

### **Milestones**

June '03 – progress report on health competencies developed in and or linked to training curriculum for disability services direct care staff

### **DHS Responsibility**

Disability Services

## *Initiative 5.2*

### **Smoking cessation initiatives for young women**

#### **Purpose**

To promote GP intervention to encourage smoking cessation in young people

#### **Description**

GPs are important agents of health behaviour change as they have the opportunity to affect a large proportion of young women in Victoria. A large component of the project initiative focuses on encouraging young women to quit smoking, as smoking prevalence rates among young women are on the increase. There are a number of gender specific smoking related harms for women, including links between smoking and breast cancer, and harms to unborn children as a result of pregnant women smoking. Therefore, intervention by GPs is considered an important aspect in advising and educating young women to the dangers of smoking and assisting them to quit.

#### **Milestones**

The project will commence in June 2002 and is expected to be completed in April 2004. Stages will include:

- document of current practice in terms of smoking cessation by GPs and develop survey questionnaire; distribute and collate results
- conducting GP focus groups in Melbourne and regional Victoria to identify barriers to GPs undertaking smoking cessation interventions and determine GP's preferred method of receiving information for undertaking interventions
- developing a GP resource including specific information for interventions with young women
- trialing the GP resource with selected GPs producing a final report
- conducting a project evaluation

#### **DHS Responsibility**

Tobacco Policy Unit – Drug Policy and Services

## *Initiative 5.3*

### **Smoking in pregnancy project**

#### **Purpose**

To develop and trial smoking cessation guidelines with pregnant women

#### **Description**

Smoking during pregnancy has been linked to pre-term birth and low birth weight. 30 % of pregnant women smoke. Research shows that brief intervention by health professionals can increase quit rates in pregnant women. This will complement the introduction of performance indicator reporting across Victorian Public Hospitals that provide maternity services.

#### **Milestones**

July '02 – development of best practice smoking cessation model

Dec '03 – implementation of smoking cessation guidelines in a Melbourne hospital

#### **DHS Responsibility**

Tobacco Policy Unit – Drug Policy and Services

## *Initiative 5.4*

### **Positive body image**

#### **Purpose**

To develop and disseminate best practice models effective in promoting positive body image

#### **Description**

Body image dissatisfaction is increasingly being recognised as an important target for public health action. Research evidence links body image dissatisfaction to physical and mental health concerns, especially, but not exclusively, in women. In Australian women, body image concerns mainly focus on concerns about weight even in underweight and healthy weight individuals and is reflected in unhealthy weight loss practices (crash dieting, fasting, laxative misuse, vomiting etc) in those in all weight ranges. Body image and related issues affect a significant proportion of the population. It is identified as one of the most common issues brought to Victorian Women's Health Services. This is also reflected in the number of people, particularly women, who adopt as a frequent or normal way of eating, weight reduction diets even if these not are necessary for any real health reason.

This project is intended to examine and disseminate available information to build the evidence regarding strategies and models that can be adopted by policy makers and service planners to promote positive and healthy body image.

#### **Milestones**

July '02 – finalisation of project resources

Dec '02 – successful dissemination strategy

#### **DHS Responsibility**

Health Development Section – Rural and Regional Health and Aged Care Services

## *Initiative 5.5*

### **Chlamydia and its effects on sexual and reproductive health**

#### **Purpose**

To improve the sexual health of women by increasing awareness of health professionals and the community concerning prevention and treatment of Chlamydia and by strengthening partner notification processes

#### **Description**

This initiative is designed to increase awareness of Chlamydia, its consequences and its prevention. Community advertising campaigns (pubs, nightclubs, tertiary institutions, magazines, youth radio) and Convenience Advertising (inside toilet doors) as well as strengthening of the Partner Notification processes are currently being implemented.

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## **Milestones**

By the end of June 2003 the following steps will have been taken:

- evaluation of the strategies that are in place for partner notification
  - a community awareness campaign targeting both young women and men
  - dissemination of Departmental guidelines for medical practitioners on partner notification for chlamydial infection
  - promotion in Departmental fact sheets, the website and through other relevant documents of the necessity and the options for undertaking partner notification
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## **DHS Responsibility**

Communicable Diseases – Rural & Regional Health & Aged Care Services

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### *Initiative 5.6*

## **Increasing gendered knowledge and expertise in Primary Care Partnerships**

### **Purpose**

To increase the capacity of Primary Care Partnerships (PCPs) to respond to the key health and wellbeing issues faced by women through increasing knowledge and expertise

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### **Description**

To enhance the awareness and understanding of the importance of considering the impact of gender in health service planning and service provision, further analysis of Community Health Plans from a gendered perspective will occur in 2002/03. This will inform communication and resourcing strategies to support PCPs in incorporating a gendered approach to planning, service delivery and health promotion.

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### **Milestones**

Mar '03 – demonstration of improved gender analysis in the Community Health Plans

June '03 – implementation of the Service Linkages Protocol Framework by a number of the Women's Health Services and PCPs

June '03 – improvement in the ability of PCP member agencies to undertake a gendered approach to planning, implementation, and evaluation of health promotion programs

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### **DHS Responsibility**

Primary and Community Health Unit – Rural & Regional Health & Aged Care Services

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### *Initiative 5.7*

## **Participation of women in PCP's**

### **Purpose**

To undertake research that will create a model of consumer, carer and community participation, which takes gender into account, for implementation within PCP's

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### **Description**

Consumer, carer and community engagement and participation are central to the effective development of PCP's and Community Health plans (which describe how services will plan, coordinate and deliver services). The PCP's have been given some guidance in the promotion of consumer, carer and community participation, however recent evaluation results suggest that further support in this complex area would be highly valued by the sector. A research project to create an inclusive model of participation will be developed by the Health Issues Centre specifically tailored to meet the needs of PCP's.

The outcomes of this project will reflect the understanding that participation is influenced by factors including gender, age, socio-economic status and cultural and linguistic diversity.

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### **Milestones**

June '03– completion of research project trial and evaluation

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### **DHS Responsibility**

Primary and Community Health Unit – Rural & Regional Health & Aged Care Services

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### *Initiative 5.8*

## **Falls prevention strategies**

### **Purpose**

To prevent falls and injuries from falls among residents in aged care facilities

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### **Description**

The female to male ratio of falls injuries in residential facilities is 3.4 to 1. To enhance quality of life and increase safe living environments amongst residents living in aged care facilities, it is proposed that falls prevention projects will be funded in residential aged care facilities in each DHS region. In rural regions, joint projects will be funded between co-located residential aged care and acute hospital settings.

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### **Milestones**

Sep '02 – commencement of projects

June '03 – completion of projects

June '03 – assessment of pre- and post- intervention data on the number of injurious falls among women in residential aged care facilities

June '03 – establishment of progress towards ongoing sustainable changed practices and safe environments in residential aged care facilities

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### **DHS Responsibility**

Aged Care – Rural & Regional Health & Aged Care Services

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