

Victorian Women's Health and Wellbeing Strategy

Annual Action Plan 2003-2004



VALUING VICTORIA'S WOMEN

**Victorian Women's
Health and Wellbeing
Strategy**

**2003–2004
Annual Action Plan**

July 2003

Overview

The Victorian Women's Health and Wellbeing Strategy 2002-2006 was launched in August 2002. The goal of the Strategy is to continue to improve the health and wellbeing of Victorian women, particularly those most disadvantaged. The Strategy comprises a Policy Statement and an Implementation Framework, built on Annual Action Plans and featuring an Annual Forum.

Initiatives within the Action Plans will 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 the Department's programs will be identified under each of the five areas for action, and published in this Annual Action Plan. The specific areas in the Department 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 the Department of Human Services.

Enquiries about this publication

By Mail

Women's Health and Wellbeing Strategy
Policy and Strategic Projects Division
Department of Human Services
Level 5, 555 Collins Street
Melbourne VIC 3000

By Fax

(03) 96168899

By Email

Deb Pietsch deb.pietsch@dhs.vic.gov.au

(03) 96168611

This paper is also published on www.women.vic.gov.au

Victorian Government Department of Human Services,
Melbourne, Victoria.

© Copyright State of Victoria 2003

Ministerial Foreword for the Year 2 Action Plan 2003-2004

The Minister for Health, Hon Bronwyn Pike

I am very pleased to present the second Annual Action Plan for the Victorian Women's Health and Wellbeing Strategy.

The aim of the Strategy is to continue to improve the health and wellbeing of Victorian women, particularly those most disadvantaged.

Much has already been achieved in developing services for women in Victoria. This Strategy, launched in August 2002, provides a framework for extending that work. For the first time, Victoria has a policy framework with a specific focus on the health and wellbeing of women.

As we implemented the first year Action Plan, we learned a good deal about taking a gendered approach to policy development and service delivery. The first Action Plan demonstrated that the full range of services provided or funded by the Department of Human Services is relevant to women's health and wellbeing, from maternity and family support services to aged care and housing services.

Through this second Action Plan, we aspire to continued improvement. For instance, we intend to increase our focus on sustaining and supporting women in leadership, and to improve the sexual and reproductive health of young women in rural communities. To further support new mothers, a new program will be implemented in designated public metropolitan obstetric hospitals to respond early to women with mental health needs. Women in prison, women who live in drought affected areas and women who have a disability will benefit from the Department's continued focus on gender in its work.

Consultation has been a hallmark of the *Women's Health and Wellbeing Strategy* since it was first conceived. The first *Annual Victorian Women's Health and Wellbeing Forum* was held in May 2003. Women, service providers, academics and government officers gathered to discuss progress under the first Annual Action Plan and consider emerging issues. As part of a cycle of annual planning and review, future annual forums will continue to ensure that Victorian women influence the way the *Women's Health and Wellbeing Strategy* is put into action.

It is important to note that the *Women's Health and Wellbeing Strategy* forms part of the whole of government platform for women. The new Forward Plan for Women 2003-2006 will provide a blueprint for the way government accounts for its provision of services to Victorian women. It will address health, wellbeing and community strengthening in addition to women's representation and equity; education, work and economic independence; and justice and safety.

I look forward to the implementation of this exciting Action Plan, highlighting forty nine initiatives, to further promote the health and wellbeing of Victorian women.



A handwritten signature in cursive script that reads "Bronwyn Pike". The signature is written in dark ink on a white background.

Hon Bronwyn Pike MP

KEY ACTION AREA 1: Increase Women's Participation and Leadership

Initiative 1.1

Strategic Consumer Advocacy Project by Women with Disabilities

Purpose:

To develop a new model of advocacy for women with disabilities.

Description:

The Strategic Consumer Advocacy Project will:

- focus on more disadvantaged, hard to reach women;
- facilitate leadership and mentoring opportunities through participation in advocacy, peer support and representation at all levels of government and community life, particularly targeting young women with disabilities;
- develop partnerships that strengthen local and specialist advocacy provision in relation to issues affecting women with disabilities.

The model will be developed via a review of literature and previous work in this area, consultation and a forum.

Milestones:

Sep 03 – Review of literature and previous work

Oct 03 – Consultation process commences

Mar 04 – Consultation results documented

Apr 04 – Forum held

May 04 – Forum outcomes documented, including advocacy model

Jun 04 – Priority partnerships established

Estimated Benefits for Women:

Increased confidence, skills and participation of women with disabilities in the community.

DHS Responsibility:

Innovation Project and Quality Systems Unit, Disability Services.

Initiative 1.2

Women's Leadership Forums and Training

Purpose:

To promote leadership for women with disabilities.

Description:

Under the guidance of a reference group, leadership forums will be developed and conducted, with a celebratory dinner showcasing the leadership achievements of women with disabilities.

Milestones:

Sep 03 – Creation of reference group

Feb 04 – Development of forum structure and content

Mar 04 – Initial forum

Mar 04 – Celebratory dinner

Jun 04 – Second forum

Estimated Benefits for Women:

Increased confidence, skills and participation of women with disabilities in undertaking leadership roles in the community.

DHS Responsibility:

Innovation Project and Quality Systems Unit, Disability Services.

Initiative 1.3

A Gendered Approach to the Active Participation Strategy

Purpose:

To expand the Active Participation Strategies to include previously 'hard to reach' communities of women with disabilities.

Description:

Building on the highly successful Participation Strategy, this enhanced approach will focus on ways to involve women with disabilities who are currently less well represented, for example, young women, Koori women and women from C&LD backgrounds.

Milestones:

Feb 04 – Develop demonstration project

Jun 04 – Progress report due

Estimated Benefits for Women:

Greater confidence for women with disabilities in shaping their community and representing women with disabilities.

DHS Responsibility:

Innovation Project and Quality Systems Unit, Disability Services.

Initiative 1.4

Women's Participation and Leadership in Local Drought Community Recovery Committees (CRC's)

Purpose:

To encourage local female leaders to participate in the planning and implementation of community development activities.

Description:

Women will be encouraged to take an active role in the Local Drought Community Recovery Committees (CRC's) which support community connectedness and resilience. A range of initiatives and events will be implemented responding to local need. An evaluation to assess the success of the initiatives will be implemented and will include a gender analysis.

Milestones:

Jun 03- CRC's established and women participating identified
 Jul/Aug 03 - Implement targeted program to support women in these roles and document progress
 Dec 03 - Evaluation

Estimated Benefits for Women:

An increase in the capacity and confidence of women to take leadership roles in local communities.

DHS Responsibility

Primary and Community Health, Rural and Regional Health and Aged Care Services

Initiative 1.5

Enhancing Health Promotion and Physical Activity amongst Older Women through Information about Recreational Opportunities

Purpose:

To promote physical activity and health promotion messages for older women.

Description:

To address the issue of increasing physical activity amongst older women in

Victoria, the Seniors Recreation Guide being developed by the Office of Senior Victorians, in association with Sport and Recreation, will contain a chapter offering particular recreation ideas and opportunities for older women.

Milestones:

Jun 03 - Reference group established
 Dec 03 - Recreation Guide completed

Estimated Benefits for Women:

Support and empowerment of older women to improve their health and wellbeing by increasing their physical activity.

DHS Responsibility:

Office of Senior Victorians, Rural and Regional Health and Aged Care Services in partnership with Sport and Recreation Victoria.

Initiative 1.6

Leadership Development for Women

Purpose:

To increase women's participation in tailored Leadership Development Programs (LDP's).

Description:

This initiative aims to eventually increase the proportion of women in senior leadership positions within the Department. It will achieve this by providing tailored leadership development, particularly promoted to potential female leaders within the DHS to enhance their leadership capability.

Milestones:

Oct 03 - 1st LDP completed

Estimated Benefits for Women:

Greater recognition and active support within DHS of women's leadership capability and contribution

The learnings from this work to be made available to non-government organisations in the human services sectors

DHS Responsibility:

HR Executive Services - Operations Division.

Initiative 1.7

Mentoring Program for Women: a Partnership Between Service Providers and the Department of Human Services

Purpose:

To identify high performing/potential female leaders in the Department of Human Services (DHS), and agencies receiving DHS funding, for access to mentoring opportunities between DHS and agencies receiving DHS funding.

Description

The establishment of a Leadership Development Pool will enable a targeted mentoring strategy between DHS and agencies receiving DHS funding. Mentoring opportunities will be provided for young women in the health sector and young women in DHS which will draw on the experience and knowledge of successful female leaders in both sectors.

Benefits of the strategy:

- provide an invaluable developmental opportunity to young women

- provide an opportunity for young women to draw on the enormous breadth of knowledge and experience held by established female leaders
- help to retain high performing leaders
- facilitate mutual sharing of learnings between professionals, encouraging greater collaboration and potentially career progression between sectors
- build capacity of human service sectors.

Milestones:

Oct 03 – Talent Pool established

Oct 04 – First participants to have completed LDP activities

Estimated Benefits for Women:

An increase in the leadership capability and confidence of young women in DHS and non-government organisations.

DHS Responsibility:

HR Executive Services – Operations Division.

Initiative 1.8

Improving Women's Participation in Metropolitan Health Service Boards

Purpose:

To encourage women to participate more fully on boards and committees of management of metropolitan health services.

Description:

A range of initiatives are being developed to strengthen and resource Metropolitan Health Service Boards. A Governance Reform Panel has been established to:

- Propose ways of strengthening the capacity of Boards of Governance responsible for Metropolitan Health Services and Victoria's major regional hospitals
- Develop a framework for balancing governance autonomy with accountability to the Minister
- Assess the adequacy of current administrative and legislative provisions for ensuring timely and reasonable action can be taken by the Minister and Department to ensure performance of health services
- Propose administrative, legislative or regulatory changes to give effect to the new framework.

The Governance Reform Panel will review relevant Government policies and guidelines, including the Victorian Women's Health and Wellbeing Policy Framework, in developing its recommendations.

Estimated Benefits for Women:

Increased opportunities for leadership and decision making by women on health boards, and greater representation of women's health and wellbeing needs within the health system.

Milestone:

Aug 03 – the Panel is due to report to the Minister

DHS Responsibilities:

Governance and Risk Management, Metropolitan Health and Aged Care Services.

Initiative 1.9

Rural Health Boards of Management Training and Development Project

Purpose:

To identify the education and training needs of Boards of Management of rural health agencies with particular reference to governance issues, leadership and current health policy, management directions, gender issues and the development of an appropriate training program.

Description:

To heighten and further develop the skills of Boards of Management, a series of training and development programs will be delivered in 03–04. The trainers are aware of issues facing Boards including gender-specific issues such as recruitment and retention of female board members. The first phase of the program involves a comprehensive needs analysis that will identify all relevant issues to Boards including gender-related issues. In phase two, these needs will be addressed through the delivery of the training and education program. It is expected that implementation of the project will address gender-related issues that are identified in the needs analysis. The Reference Group will monitor issues raised in training including for example, recruitment and retention of female board members.

Milestones:

Jun 03 – Reference Group established

Aug 03 – Needs Analysis completed

Sep 03– Training commences

KEY ACTION AREA 2: Increase Access that Embraces Diversity

Estimated Benefits for Women:

Increased opportunities for leadership and decision making by women on health boards, and greater representation of women's health and wellbeing needs within the health system.

DHS Responsibility:

Rural and Regional Health Services Branch, Rural and Regional Health and Aged Care Services

Initiative 2.1

Developing a Gender Focus in the Cultural and Linguistic Diversity (C&LD) Strategy for Disability Services

Purpose:

The C&LD Strategy aims to improve and enhance the planning and delivery of disability support services to people with a disability and their parents, carers and families who come from C&LD backgrounds. Working with the Victorian Women's Health and Wellbeing Strategy, the C&LD Strategy will commit to a gender focus in several key elements of its implementation.

Description:

Through attention to gender issues during the consultation phase, the Key Action Areas of the C&LD Strategy which take account of gender in:

- Planning, delivering and evaluating culturally responsive disability support services
- C&LD representation at decision making levels
- Providing information on disability services and programs, that is relevant, understandable and accessible to C&LD communities
- Raising the cultural awareness, knowledge and skills of staff across the disability service system
- Promoting the best use of interpreting and translating services
- Service approaches that respond to specific needs of people.

Milestones:

Aug 03 – initial consultations completed

Jul 03 – implementation of and briefing about C&LD Strategy implemented

Estimated Benefits for Women:

Women with a disability from C&LD backgrounds will experience improved and more appropriate service responses from disability support services.

DHS Responsibility:

Service Access Unit, Disability Services.

Initiative 2.2

Enhanced information for women on DisabilityOnline

Purpose:

To heighten gender considerations in terms of access and content for women with disabilities in the DisabilityOnline project.

Description:

DisabilityOnline was created by Disability Services to aggregate and present a broad range of information that may be useful for people with a disability, their families and carers. It includes details of a range of supports and services provided by the community service sector. In 2003–04, DisabilityOnline will commit to:

- devise and implement a survey mechanism to assess the demand for additional Disability Online information geared toward the needs of women, in conjunction with Disability Services Health and Wellbeing Unit;
- increase the number of Disability Online articles devoted to issues of

concern to women, beyond the current 144;

- encourage an increase in the number of services listed in the Disability Online Service directory that cater to the needs of women – presently there are 3,185;
- develop a new category in the Useful links section to highlight quality web sites that address women's health and other issues.

Milestones:

Sep 03 – Increase number of articles on women's issues

Sep 03 – New category in the Useful links section highlighting women's health contacts

Oct 03 – Survey implemented

Estimated Benefits for Women:

Women with disabilities will have improved and more extensive access to appropriate information and resources.

DHS Responsibility:

Service Access Unit and Health and Wellbeing Unit, Disability Services.

Initiative 2.3

Health Promotion for Women Living in Drought Affected Areas

Purpose:

To increase awareness and understanding of depression (facts, consequences, treatment and support requirements) as well as support access to appropriate services.

Description:

1 in 4 women experience depression in their lives. A stressful life event (such as

the financial stress of drought) is a risk factor as is social isolation. Information and education sessions will be held for community groups and specifically target women's groups. Workforce development activities targeted at the health promotion workforce (predominantly women) will also promote capacity to provide ongoing support to women in these communities.

Milestones:

May–Jun 03 – Health Professionals Depression workshops – 'Lets not end the drought with our tears'

Jul–Aug 03 – targeted information and education program to women's groups in drought affected areas.

Estimated Benefits for Women:

Enhanced knowledge and capacity for women in responding to stressful life events and provision of appropriate and effective support to women living in drought affected areas.

DHS responsibility:

Primary and Community Health, Rural and Regional Health and Aged Care Services.

Initiative 2.4

Enhancing Health Promotion and Physical Activity amongst Older Aboriginal Women

Purpose:

To promote culturally appropriate physical activity and health promotion messages for Aboriginal women.

Description:

To address the issue of increased physical activity amongst older Aboriginal women, two physical activity programs

will be trialled during 2003–04. The first pilot will be run through the Neighbourhood Renewal platform in rural Victoria. A local reference group comprising the Community Committee in partnership with relevant Aboriginal Organisations will be established to oversee and evaluate the program. The second pilot will be run during the annual four day camp for indigenous and non-indigenous elders conducted during the Victorian Seniors Festival.

Milestones:

Jul 03 – Reference groups established

Dec 03 – Activity program components finalised

Apr 04 – Activity program completed

Jun 04 – Evaluation finalised

Estimated Benefits for Women:

Support and empowerment of older Aboriginal women to improve their health by increasing their physical activity.

Increased awareness of mainstream service providers of the health and wellbeing issues facing older Aboriginal women.

DHS Responsibility:

Office of Senior Victorians and Aged Care Branch, Rural and Regional Health and Aged Care Services in partnership with Neighbourhood Renewal, Office of Housing.

Initiative 2.5**A World of Approaches to Health and Wellbeing for Older Women from Culturally and Linguistically Diverse Backgrounds****Purpose:**

To increase access for older women from culturally and linguistically diverse (C&LD) backgrounds to wholistic and complimentary therapies.

Description:

As part of the Seniors Festival Program, a women-specific “come and try” day will be held in outer metropolitan Melbourne. With a specific focus on older C&LD women, the day will provide a range of experiences of traditional, complementary and alternative therapies to enhance their health and wellbeing.

Particular focus will be paid to the complimentary therapies that these women bring from their own cultures and communities, and opportunities for them to share these ideas will feature prominently throughout the event.

A reference group will guide and evaluate the event.

Milestones:

Sep 03 – Reference group established

Mar 04 – Event staged in Seniors week

Estimated Benefits for Women:

Greater recognition and promotion of culturally diverse approaches to health and wellbeing as contributed by women.

DHS Responsibility:

Office of Senior Victorians and Aged

Care. Branch, Rural and Regional Health and Aged Care Services

Initiative 2.6**Extending Health Promotion to Women of C&LD Background In Prison****Purpose:**

To build on a successful health promotion program with women in prison by providing education to health service providers to assist in a smooth transition for women post release in relation to their health care.

Description:

A series of health promotion workshops will be held for women in prison, which will provide information and skill development in accessing quality health services both in prison and post release from prison.

Working Women’s Health will deliver these health promotion workshops in a range of community languages, and also develop two professional development sessions for health service providers to be delivered in areas where women settle post release. These professional development sessions will enhance awareness of the needs of women post prison release and provide skill development for services that women access post release from prison. Learnings from last year’s series of workshops with women in prisons will contribute to the content of the workshops.

Milestones:

Dec 03 – 18 workshops of health promotion to women of C&LD background in prison

Jun 04 – 2 workshops for health service providers in areas where women post prison release settle

Jun 04 – completion of evaluation report

Estimated Benefits for Women:

Women of C&LD background in and post prison will experience an increased understanding of health and wellbeing issues and resources available.

Providers will have an improved understanding issues facing C&LD women in and post release from prison.

DHS Responsibility:

Primary Health Programs, Rural and Regional Health and Aged Care Services

Initiative 2.7**Training Rural Health Service Providers to Respond to Young Women in Reference to their Sexual and Reproductive Health****Purpose:**

To improve the sexual and reproductive health of young women in rural communities by developing the skills of health professionals in school, the community and women’s health settings.

Description:

Family Planning Victoria will provide family planning training to generalist service providers in rural regions. This will increase access for young women in rural Victoria to trained sexual and reproductive health service providers.

Using data sources and regional office information, one rural Department of Human Services (DHS) region with poor sexual and reproductive health outcomes

for young women will be chosen for trialling this approach in the first year.

DHS and the local service sector, including Community and Women's Health Services and Secondary Schools Nurses, will identify services best placed to reach young women and target appropriate staff to participate in training.

Milestones:

Jul 03 – Region identified

Jun 04 – Training provided to up to 10 practitioners

Evaluation after each practitioner attends course to ensure increased knowledge of sexual and reproductive health issues for young people.

Estimated Benefits for Women:

Young women in rural areas will receive more informed service provision in relation to their sexual and reproductive health.

DHS Responsibility:

Primary Health Programs, Rural and Regional Health and Aged Care Services.

Initiative 2.8

Enhancing Access to Information on Gender Specific Services

Purpose:

To improve the availability and accessibility of gender specific services information online by way of the Statewide Services Directory.

Description:

The online Statewide Services Directory which includes services provided by health, disability and community service

agencies is being redeveloped during 2003. This redevelopment will improve the capacity for agencies to have direct input of information about their service, and will include key information related to gender specific service delivery. Relevant agencies will be encouraged to take active responsibility for including and updating information of this kind.

Milestones:

Dec 03 – marketing of the capacities of the Statewide Services Directory

Jun 04 – provision of advice and support to agencies offering gender specific services leading to improved availability and accessibility of gender specific services information.

Estimated Benefits for Women:

Over time the amount of optional gender specific information entered onto the Statewide Services Directory will increase.

Over time the amount of agency initiated gender specific information entered onto the Statewide Services Directory will increase.

DHS Responsibility:

Primary Care Partnerships Projects, Rural and Regional Health and Aged Care Services.

Initiative 2.9

Increase the Number of Women Aged 50–69 Screened for Breast Cancer

Purpose:

To reduce deaths and health care costs from breast cancer, by increasing capacity of Breast Screen Victoria to provide free breast screening to women aged 50–69, and achieving the nationally agreed screening target of 70%.

Description:

To increase the number of women aged 50–69 screened for breast cancer to 200,000 in 2003–2004 to reach a screening target of 63% and working towards reaching the National target of 70% over the next 4 years. Of particular importance will be strategies to increase the screening rates of Aboriginal women, and women from metropolitan Melbourne. Both of these groups show lower than average presentations for breast screening services.

Milestones:

Jul 03– 04 – Screening 200,000 women

Estimated Benefits for Women:

A target of 200,000 women aged 50 – 69 will access breast screening services in 2003–2004, with a particular focus on Aboriginal women and women from metropolitan Melbourne.

DHS Responsibility:

Prevention and Perinatal Health, Rural and Regional Health and Aged Care Services.

Initiative 2.10**Extending Koori Maternity Services****Purpose:**

To increase access to culturally appropriate support for Aboriginal women during pregnancy, birth and the postnatal period. This will include a number of young women under 20 years of age.

Description:

The Koori Maternity Services Program funds eight Aboriginal Cooperatives to provide culturally appropriate support to Koori women during pregnancy, birth and in the immediate postnatal period.

The proposal is to develop two new Koori maternity services within existing Aboriginal Health Cooperatives at Bunurong Medical Service in Dandenong and at Echuca Health House. Both services will be built on a clinical-linkage-advocacy-health promotion model with a full time Aboriginal health worker and a midwife, and a focus on providing an outreach component.

Milestones:

Jun 04 – two new services established
03-04 – monitoring at regular intervals

Estimated Benefits for Women:

More Aboriginal women will be able to access culturally appropriate support during pregnancy, birth and the immediate postnatal period.

DHS Responsibility

Acute Programs, Metropolitan Health and Aged Care Services.

Initiative 2.11**A Costing Study to determine the levels of recurrent funding required to provide breast prostheses for women undergoing mastectomy in public hospitals****Purpose:**

To determine the recurrent cost of providing quality fitted breast prostheses for women undergoing mastectomy for breast cancer in public hospitals.

Description:

BreastCare Victoria, in collaboration with public hospitals, will conduct a costing study to determine the levels of recurrent funding required to provide breast prostheses for women undergoing mastectomy in public hospitals.

Milestones:

Sep 03 – Preparation of background information and methodology to conduct the study.
Nov 03 – Completion of data collection and analysis.
Jan 04 – First draft of the project report.
Mar 04 – Final project report and recommendations.

Estimated Benefits for Women:

The costing study will inform the development of policy to improve equity and consistency in the provision of breast prostheses through public hospitals in Victoria.

DHS Responsibility:

BreastCare Co-ordination Unit, Metropolitan Health and Aged Care Services.

Initiative 2.12**To Enhance Women's Access to Quality Support, Information and Resources on Breast Disease through Breacan – A Consumer Run Breast Cancer Resource Service****Purpose:**

To continue the establishment of BreaCan and the growth of the statewide service.

Description:

As BreaCan moves into full operation, 2003/04 will see an increased profile and utilisation of the service. An exploration of ways to enhance regional and rural users' access to information and support will be carried out, which will include a series of pilots to trial a state-wide service.

Milestones:

Dec 03 – Commence development of regional pilot projects. Ongoing process evaluation report to be submitted to BreastCare Victoria.
Jun 04 – Review the ongoing profile and use of the BreaCan service. Ongoing process evaluation report to be submitted to BreastCare Victoria.

Estimated Benefits for Women:

Women's increased capacity to access a Consumer Run Resource Centre to better meet their breast cancer information and support needs.

DHS Responsibility:

BreastCare co-ordination Unit, Metropolitan Health and Aged Care Services.

Initiative 2.13

Improving Access to Drug and Alcohol Services

Purpose:

To implement recommendations of a recently completed childcare review for drug treatment services in order to increase access to child care for service users.

Description:

A review was undertaken in 2002 to determine the demand and need for childcare services by users of drug treatment services and make recommendations as to how best to meet those needs. A Childcare Steering Committee was formed to oversee the project and to consider the report's recommendations. Approximately \$175,000 has been set aside over the next 3 financial years to help address childcare needs in the alcohol and drug treatment areas.

Milestones:

Jul 03 – Committee recommends Year 1 Actions

Oct 03 – 1st Project(s) developed

Estimated Benefits for Women:

Improved child care support for women accessing alcohol and drug treatment services.

DHS Responsibility:

Drug Policy and Services Branch, Rural and Regional Health and Aged Care Services.

Initiative 2.14

Improved Homelessness and Support Responses to Same Sex Attracted Young People

Purpose:

To improve access to safe supported accommodation for young lesbians experiencing homelessness, by developing improved homelessness responses to same sex attracted young people.

Description:

Same sex attracted young people often experience family and social disruption, discrimination and homelessness related to their sexuality. Their subsequent access to and experience of homelessness services may be similarly compromised. Young lesbians may find mixed gender accommodation settings inappropriate or unsafe for a range of reasons.

The development of inclusive policies and procedures will serve to highlight the links between sexuality and homelessness, explore links between sexual abuse and sexuality and the dual impact of these experiences on homelessness, review service practice and requirements for young same sex attracted and transgendered clients, and ensure same sex attracted and transgendered young people are appropriately accommodated and supported.

Promoting non-discriminatory housing and support options within the homelessness service system, and improving understanding of sexuality issues through further practice development among workers will counter discrimination, and address service

concerns about their ability to respond effectively to same sex attracted young people.

Milestones:

Aug 03 – Expressions of interest

Nov 03 – Appointment of agency to deliver project

Jan 04 – Commencement of project

Dec 04 – Reporting phase

2005/06 – Evaluation of initiatives under the Youth Homelessness Action Plan will occur

Estimated Benefits for Women:

Improved sensitivity and informed service provision within the homelessness sector for same sex attracted young women.

DHS Responsibility

Homelessness Assistance Unit, Office of Housing.

Initiative 2.15

Parenting Education Best Practice Grants

Purpose:

To enable service providers in the family and parenting services sector to share innovative models of service delivery in parent education.

Description:

One of the objectives of the grants will be to showcase exemplary practice and innovative service models to Indigenous and culturally and linguistically diverse communities, young women and women who are socially isolated. One outcome of the best practice grants will be that these groups of women have improved access to parenting education and support

through the shared learnings across the family and parenting services sector.

Milestones:

Aug 03 – Funding round to be advertised
 Nov 03 – Grants approved
 Jun 04 – Projects completed

Estimated Benefits for Women:

Increased access and utilisation of family and parenting services by women of diverse backgrounds.

DHS Responsibility:

Family & Community Support Branch, Community Care Division.

Initiative 2.16

Increasing Awareness of the High Risk of Osteoporosis for Women with a Disability

Purpose:

To develop strategies to provide information to women with disabilities and their carers on osteoporosis, including preventative and treatment strategies.

Description:

There is a higher risk of osteoporosis for women with disabilities than the mainstream population. Reducing risk of osteoporosis will lead to improved quality of life for women with a disability. To address this, specifically targeted and accessible preventative and treatment information, and strategies for dissemination of this information, will be developed. Through increasing awareness of osteoporosis, it is anticipated that this will assist in managing the significant cost impact to

the broader health care system, for example due to bone fractures.

Milestones:

Oct 03 – Project Brief finalised
 Oct 03 – Commencement of developmental work
 Dec 03 – Completion of developmental work
 Feb 04 – Field testing and revision
 Mar 04 – Dissemination
 Evaluation upon completion.

Estimated Benefits for Women:

More women with disabilities will have improved access to information about treatment and support for osteoporosis.

DHS Responsibility:

Nutrition and Dietetics Unit, Disability Services.

Initiative 2.17

Best Start Project

Purpose:

To improve the health development learning and well being of all Victorian children from pregnancy through to transition to school (usually taken to be 0 to 8 years of age). The project is jointly auspiced by the Department of Human Service and the Department of Education and Training.

Description:

Local demonstration projects are being guided by partnerships that comprise parents, early years health, care and education providers, professionals and local community leaders. Partnerships are undertaking a comprehensive planning process, including service

mapping, consultations with parents and service providers and analysis of local needs. Action Plans are guiding the implementation of the projects over the next three years. Action Plans will assess needs and identify a range of local projects that will assist women, including those that may be socially isolated, at risk or disadvantaged, to access a range of parenting support services. These may include access to playgroups, parenting programs, post natal depression support groups and lactation support programs.

Milestones:

Sep 03 – Action Plans developed
 Jul 03 – Implementation of Best Start demonstration activity

Estimated Benefits for Women:

Increase leadership and decision making opportunities for women in the planning and development of local Action Plans.

Increased access to effective Early Years services by women who are parents and carers from diverse groups.

DHS Responsibility:

Family & Community Support Branch, Community Care Division.

Initiative 2.18

Maternal and Child Health Service Improvement Project

Purpose:

To identify improvements to the Maternal and Child Health Service (MCH) to strengthen its contribution to promoting health and wellbeing outcomes for women and families.

Description:

The MCH Service Improvement Project will refocus the Service to increase participation by women and support a diverse range of mothers and families, including vulnerable mothers and families, and women with mental health issues. The project will develop initiatives and opportunities to build community capacity in response to the needs of mothers and children. This will include a focus on the role of first-time mothers' groups, and dissemination of materials such as the recently developed brochure on SIDS for women with literacy issues. The project will also consider the training needs for the staff to ensure that it is able to support women and families. Local service improvements will be articulated in municipal Early Years Plans.

Milestones:

Dec 03 – Development of final report
 Jul 04 – Implementation of municipal Early Years Plans

Estimated Benefits for Women:

Women will experience a Maternal and Child Health Service more attuned to contemporary needs.

DHS Responsibility

Family and Community Support Branch, Community Care Division.

Initiative 2.18

Chlamydia Community Awareness Initiative

Purpose:

To increase awareness of Chlamydia infection, and its prevention and management amongst young women and men in Victoria.

Description:

The campaign builds on the community awareness campaign implemented as part of the Year One Action Plan. The campaign employs a “narrow cast” convenience advertising campaign targeting 16–29 year olds. This involves the installation of appropriately designed A4 messages with take away information in the public toilet areas of identified venues in rural and metropolitan areas. In addition, the campaign will include advertisements in bus and tram interiors on routes that travel to and from university campuses.

The campaign will include an evaluation that analyses its effectiveness by age group and gender.

Milestones:

Jun 03 – Sep 03 – Campaign will be conducted
 Dec 03 – Evaluation completed.

Estimated Benefits for Women:

Increased awareness and knowledge amongst targeted young women about Chlamydia.

Reduction in the incidence of Chlamydia and the harmful effects of untreated Chlamydia.

DHS Responsibility:

BBV/STI Program, Communicable

Diseases Section, Regional and Rural Health and Aged Care Services

Initiative 2.19

Local Community Partnership Projects

Purpose:

To provide grants that will enable the implementation of strategies to target women in relation to problem gambling.

To reduce and prevent harm experienced by women arising from problem gambling.

Description:

The Department of Human Services will be implementing a grants scheme in 2003/04 and 2005/06. This scheme will involve the allocation of grants to community based organizations for the delivery of problem gambling strategies and activities. DHS have identified women as one of the priority target groups for activities funded through the grants scheme.

Milestones:

Dec 03 – first round of grant payments made.
 Jun 04 – evaluation undertaken
 Evaluation will be undertaken.

Estimated Benefits for Women::

Local Community Partnership Projects funded through the grants scheme with a focus on women, may assist in reducing and preventing the harm arising from problem gambling for women.

DHS Responsibility

Community Building Unit, Community Care Division.

KEY ACTION AREA 3: Enhance Women's Safety and Security

Initiative 2.20

Development of responses to assist women from culturally and linguistically diverse backgrounds in addressing problem gambling

Purpose:

To develop responses that will reduce and prevent harm arising from problem gambling for women in Culturally and linguistically diverse (C&LD) communities.

Description:

In 2003-04 and 2004-05 the Department of Human Services will be implementing a range of responses to assist in addressing problem gambling in C&LD communities. These responses will include specific responses for women in C&LD communities, in accordance with identified need.

Milestones:

Sep 03 – A needs analysis will be concluded to inform the development of responses.

Jan 04 – Department of Human Services will commence allocating funding for responses.

Estimated Benefits for Women::

Responses developed to assist in addressing problem gambling in C&LD communities, that target women, may assist in reducing and preventing the harm arising from problem gambling for women.

DHS Responsibility

Community Building Unit, Community Care Division.

Initiative 2.21

A new problem gambling television advertisement to target women aged 25-39 years

Purpose:

To raise awareness of problem gambling issues and services available;

- To encourage women to encourage women to access support with regard to problem gambling issues;
- To encourage women to persevere with counseling, or with their own self-help strategies; and
- To help de-stigmatise problem gambling.

Description:

A new television advertisement has been developed for the "Think of What You're Really Gambling With" campaign. This advertisement targets women aged 25-39 years. This advertisement will be released in 2003.

Milestones:

Mar 03 – This advertisement will form part of Phase 3 of the Problem Gambling Communication Strategy

Estimated Benefit for Women:

Women successfully targeted by the advertisements will be better informed about problem gambling issues and Services.

DHS responsibility

Community Building Unit, Community Care Division

Key initiatives being undertaken by DHS in relation to women's safety have been described in the Women's Safety Strategy, launched in October 2002. The Strategy is being developed collaboratively by a number of Government departments, coordinated by the Office of Women's Policy in the Department of Victorian Communities. The Strategy aims to ensure that Government and non-government agencies work together in a co-ordinated way to reduce violence against women.

The *Women's Safety Strategy* includes more than 40 initiatives by various Government and non-government agencies to make Victorian women safer. Significant progress has already been made. Key initiatives include:

- A *Statewide Steering Committee to Reduce Family Violence* has been established by Victoria Police and the Office of Women's Policy. This committee of Government and non-government agencies is developing a best practice framework for an integrated response to family violence.
- Victoria Police has reviewed police procedure in relation to violence against women and is now implementing 25 recommendations to improve police responses. They are developing a police code of practice for responding to family violence and are improving police training on family violence and sexual assault.
- Two new Statewide Steering Committees – one to reduce sexual assault and one to reduce violence against women in workplaces – will meet for the first time in June 2003.

Like the committee on family violence, they will look at making women safer through increasing co-operation across Government and non-government agencies.

- A Family Violence Private Rental Brokerage Program has been established to help women and children who have experienced family violence. The program is being offered through Domestic Violence Outreach Services in six locations across Victoria. It is designed to help individual women and women with children who are re-establishing themselves after family violence to meet initial rental payments.

Additionally, the Department of Human Services will implement the following initiatives in 2003–2004:

Initiative 3.1

Violence and Women with Disabilities Project

Purpose:

To further strengthen partnerships between disability and family violence sectors in response to women who have a disability and who experience violence.

Description:

In response to a successful pilot run in 2002–03 under the Women's Safety Strategy, this project will be enhanced to deliver:

- implementation of an interagency agreement;
- resourcing of the community sector by supporting three agencies to develop accessible information about their service and improve consultation practices to increase accessibility for women with disabilities;
- implementation of training outcomes by mentoring and training programs;
- identify policy barriers and restrictive practices at service level;
- influence key agencies to collect information on violence and women with disabilities to provide evidence based needs data;
- This project is being delivered by the Domestic Violence and Incest Resource Centre.

Milestones:

Dec 03 – Interagency agreement becomes a working document

Dec 03 – Support three agencies to produce accessible information about their services

Dec 03– Undertake training in three regions

Dec 03 – Identify key agencies and negotiate commitment of collect data on violence and women with disabilities

June 04 – Facilitate evaluation of the interagency agreement

Jun 04 – Data collection process agreed and commenced

Estimated Benefits for Women:

Improved and more accessible family violence services for women with disabilities

Greater knowledge and awareness of violence and women with disabilities within the disability and family violence service sectors

DHS Responsibility:

Health and Wellbeing Unit, Disability Services.

Initiative 3.2

Improve Knowledge of and Sensitivity to Violence Against Women for Staff who Work with Women who have a Disability

Purpose:

To improve staff knowledge of and capacity to respond to issues around violence against women.

Description:

Women with disabilities experience higher than average levels of violence and sexual abuse. Information on domestic violence, indicators of abuse, support for victims of abuse, and relevant services will be added to the revised human

relations policy the Personal Relations, Sexuality and Sexual Health Policy and Guidelines developed by Disability Services. The guidelines will be implemented with statewide training that highlights key issues.

Milestones:

Jan 04 – Guidelines released

Jun 04 – Training provided to all DHS regions

Estimated Benefits for Women:

Women with disabilities will experience improved responses from disability service providers in relation to violence against women.

DHS Responsibility:

Health and Wellbeing Unit, Disability Services.

Initiative 3.3

Molly's House Women's Refuge Disability Accessible Unit Research Project

Purpose:

To investigate under-utilisation of the disability accessible unit managed by Molly's House Inc. with a view to improving awareness of, access to and use of the facility (and associated women's crisis services) by women with disabilities who are experiencing domestic violence.

Description:

A one-off grant has been approved to Molly's House Women's Refuge to:

- employ a short-term project worker to investigate past and current under-utilisation of their disability accessible unit; and

- provide a written report of the project's findings, including recommendations as to how the facility and associated domestic violence crisis services might better meet the needs of women with disabilities in the future.

Milestones:

Aug 03 – Project worker employed

Sep 03 – Consultation process commences

Nov 03 – Consultation process finishes

Jan 04 – Draft Report

Mar 04 – Final Report

Estimated Benefits for Women:

Improved understanding within domestic violence services about the needs of women with disabilities.

Provision of domestic violence services sensitive to the needs of women with disabilities.

DHS Responsibility:

Disability Services, Western Metropolitan Region (WMR) – Disability Partnerships and Service Planning Team.

Initiative 3.4

Family Violence and Parenting Support for Young Mothers Experiencing Homelessness

Purpose:

To improve support around parenting and family violence issues for young women with children who are experiencing homelessness.

Description:

Around a third of all young people in Victorian homelessness services are

accompanied by dependent children. The majority of these sole parents are young women who are particularly vulnerable to family violence, which may be a causal factor in their homelessness, or a current aspect of their lives.

This initiative will establish a pilot project to identify ways in which parenting and family violence specific information and support can be developed and extended to young women in homelessness services who are pregnant or parenting. This will assist them to re-establish their lives free of violence and with enhanced parenting skills.

Milestones:

Aug 03 – Expressions of interest

Nov 03 – Appointment of agency to deliver project

Jan 04 – Commencement of project

Dec 04 – Reporting phase

2005/06 – Evaluation of initiatives under the YHAP will occur.

Estimated Benefits for Women:

Improved parenting skills for young homeless mothers.

Young women will be more informed about family violence.

DHS Responsibility:

Homelessness Assistance Unit, Office of Housing.

KEY ACTION AREA 4: Improve Women's Mental and Emotional Health

Initiative 4.1

Expanding Mental Health Services for Women: Consultation Liaison Psychiatry

Purpose:

Introduction of a mental health consultation liaison function to designated metropolitan public hospital obstetric services.

Description:

This initiative is consistent with the New Directions for Victoria's Mental Health Services: The Next Five Years policy. It will assist in the early identification and treatment of women who are at risk of developing a mental illness and who require joint management of mental health and pregnancy issues. A mental health consultation and liaison function will be introduced to selected metropolitan public hospital obstetric services. Consultant Psychiatrists will be employed by area mental health services. The psychiatrists will provide secondary consultation and some direct assessment and referral.

Formal links between area mental health services, specialist public mother baby psychiatric services and selected public hospital obstetric units will be established.

Milestones:

Jul 03 – Service development brief completed

Sep 03 – Service provider selected

Oct 03 – commence funding of service

Estimated Benefits for Women:

Early detection and enhanced treatment capacity will result in improved access and service responses to vulnerable women at a critical life stage.

DHS Responsibility:

Mental Health Branch, Metropolitan Health and Aged Care Services.

Initiative 4.2

Increasing Appropriate Counselling Responses to Women in Community Health Settings

Purpose:

To build and document evidence-based practices in community health counselling services.

Description:

In the Review of Counselling in Community Health it was identified that in 1999–2000 just on two thirds of people seen for 'generalist' counselling were women. As one of the quality initiatives to improve counselling responses to women utilising community health program funded counselling services, a project promoting evidence-based practices in counselling services will be undertaken in 03–04.

This initiative will comprise a literature review on evidence-based treatments for common mental health problems and associated social problems. Amongst other things, it will include syndromes and focal problems (such as depression and anxiety) as well as family and relationship problems, (including family violence, and

focal problems for children and adolescents). The evidence will be considered with regard to issues of gender, age, ethnicity and social status within the community health setting.

A publication outlining a summary of evidence and expert consensus about treatments and approaches will be developed in close consultation with practitioners and other key stakeholders. In the first instance, a pilot professional development program will be developed which will examine the best method to disseminate the material and enhance counselling skills.

Milestones:

Dec 03 – Literature review completed

Feb 04 – Publication completed

Apr 04 – Pilot Training Program completed

Estimated Benefits for Women:

Providers will have an improved understanding of the impact of a range of factors including gender and their relationship to the selection of appropriate counselling interventions. Consequently women will experience improved counselling services within community health settings.

DHS Responsibility:

Community Health Policy Unit, Rural and Regional Health and Aged Care Services.

KEY ACTION AREA 5: Extend Knowledge of Women's Health and Promote Ongoing Improvements

Initiative 5.1

Burden of Disease – Violence against Women as a Risk Factor

Purpose:

To quantify the burden of disease attributable to violence against women.

Description:

DHS will embark on a joint project with VicHealth to obtain epidemiological data from the relevant literature and local data sources. Gaps will be identified in the literature and future research opportunities recommended.

Milestones:

Sep 03 – Appointment of researcher
Oct 03 – Advisory Group established
Mar 04 – Completed project report

Estimated Benefits for Women:

Increased knowledge about the burden of disease attributable to violence against women resulting in improved program development and service responses.

DHS Responsibility:

Health Surveillance and Evaluation Section – Rural and Regional Health and Aged Care Services.

Initiative 5.2

Enhancing DHS Knowledge on Aboriginal Women's Health and Wellbeing

Purpose:

To present appropriate information to assist and recommend action on Aboriginal women's key health issues for incorporation into Regional Aboriginal Services Plans.

Description:

The Koori Human Services Unit (KHSU), Department of Human Services, will collect and collate data on Aboriginal women's health and wellbeing in the areas of education and workforce development; maternal mortality; low birth weight; and chronic illnesses among Aboriginal women, such as diabetes and end stage renal dialysis (ESRD). This information will inform the development of Regional Aboriginal Services Plans.

Milestones:

Sep, Dec, Mar, Jun 03/04 (Quarterly) – collection of diabetes and end stage renal dialysis by KHSU

June 04 (Annual) – collection of maternal mortality, low birth weight, education and workforce development by KHSU

June 04 (Annual) – collection provided to Regions to assist development of Regional Aboriginal Services Plans.

Estimated Benefits for Women:

Increased awareness of Aboriginal women's health and wellbeing issues within regional planning will improve local service responses.

DHS Responsibility:

Koori Human Services Unit, Policy and Strategic Projects Division.

Initiative 5.3:

Gendered Evaluation of State Disability Plan Innovation Grants Program

Purpose:

To ensure that all evaluations of projects funded under the State Disability Plan Innovation Grants Program use a gender focus that explores outcomes and issues for both women and men.

Description:

The State Disability Plan Innovation Grants Program is designed to promote new approaches to individualised support for people with disability within an accessible community context. By ensuring that a gendered approach is applied to the evaluation of this Grant Program, the recommendations arising can more accurately identify future directions that will deliver positive outcomes for women and men.

Milestones:

Oct 03 – Evaluation to commence
Aug 04 – Final report by evaluation team

Estimated Benefits for Women:

The State Disability Plan Innovation Grants Program will increasingly become more responsive to meeting women's needs.

DHS Responsibility:

Innovation Project, Disability Services.

*Initiative 5.4***Gendered Review of the Health-Related Practice Instructions in the Intellectual Disability Services Accommodation Services Practice Instruction Manuals****Purpose:**

To improve awareness of, and support to direct care workers, around women's and men's health needs by identifying and addressing gaps in practice instruction manuals.

Description:

Initial feedback and review of the manuals indicates a lack of women's and men's health information available to direct care staff. For example, there is no information about paptests or menopause. The review will identify gaps and work toward addressing these.

Milestones:

Nov 03 – Review of health related practice instructions completed

Estimated Benefits for Women:

Improved and more informed service responses to women by direct care staff in disability services with regard to their health and wellbeing needs.

DHS Responsibility:

Housing and Support Unit, Disability Services.

*Initiative 5.5***Improve Knowledge of and Sensitivity to Women's Sexual Health Needs for Staff who Work with Women who have a Disability****Purpose:**

Improve staff knowledge of and sensitivity to women's health needs by adding sexual health issues and information to the revised Disability Services Human Relations Policy.

Description:

The Personal Relations, Sexuality and Sexual Health Policy and Guidelines document is expected to be released in 2003. The prior document had no information about women's sexual health needs. The revised policy includes information on aspects of women's sexual health including sections on women's health in general, menopause, paptests, breast screening, conception and the morning after pill, pregnancy and termination.

Milestones:

Jan 04 – Guidelines released

Jun 04 – Training provided to all DHS regions

Estimated Benefits for Women:

Improved and more informed service responses to women with disabilities with regard to their sexual health needs.

DHS Responsibility:

Health and Wellbeing Unit, Disability Services.

*Initiative 5.6***Regional Perspectives in Gender Analysis and Planning****Purpose:**

To enhance the Department of Human Services' (DHS) understanding and experience in the use of gendered data and evaluation processes to inform regional planning processes.

Description:

DHS Regional managers and health promotion staff meet regularly to share information and discuss issues affecting regional effectiveness. Over 2003/04 the issue of gender approaches will be a regular agenda item to further discussions regarding gender tools and data used in planning processes. Additionally, a "quick guide to gender data analysis" will be developed and trialled throughout DHS program areas.

Milestones:

Discussions at statewide meetings on a bi annual basis

Dec 04 – Data analysis tools developed ready for trialling

Jun 04 – Evaluation of use and effectiveness of data tools

Estimated Benefits for Women:

More informed regional planning to effectively address women's health and wellbeing needs.

DHS Responsibility:

Regional Operations Performance, Operations Division and Policy Projects Branch, Policy and Strategic Projects Division.

Initiative 5.7**Regional Training for Department of Human Services (DHS) Staff and DHS Funded Service Providers on Gender Frameworks and the Social Model of Health****Purpose:**

To enhance the knowledge and skills of regional DHS staff and funded agencies undertaking initiatives outlined in the Year Two Women's Health and Wellbeing Action Plan in the areas of gender analysis and evaluation.

Description:

Arising from evaluation of the first year of implementation of the Women's Health and Wellbeing Strategy, a series of briefing sessions will be held throughout the state to support the implementation of the Year Two Annual Action Plan.

Staff from Policy and Strategic Projects, regional DHS and regional specialist services will provide case studies and discuss with participants practical ways to incorporate gender considerations in their policy, program and service planning implementation.

Milestones:

Nov 03 – Regional briefings completed

Estimated Benefits for Women:

Heightened awareness of gender in regional planning and improved service delivery for women.

DHS Responsibility:

Regional Operations Performance – Operations Division and Policy Projects

Branch, Policy and Strategic Projects Division.

Initiative 5.8**Gendered Evaluation of the Education and Training Projects in Dementia Care and Management in Acute Settings****Purpose:**

To evaluate from a gendered perspective the effectiveness of the training project in Dementia Care, which aims to promote:

- a responsive service environment in the acute sector for people with dementia, and their families and carers, and
- continuity of care between service providers of people with dementia, especially at the time of discharge from an acute care setting.

Description:

Up to four metropolitan and rural public hospitals around the state are being funded to complete projects in educating and training staff in dementia care and management. The projects need to be based on:

- A multi strategy education and training program incorporating the whole acute setting, from admission to discharge and discharge planning
- A multidisciplinary and whole of facility approach
- Involving carers in caring throughout the acute setting experience
- Implementing sustainable initiatives which can be transferred to other hospitals and settings.

Evaluation of projects will include consideration of gender issues related to women with dementia and female family members and carers engaged in caring for people with dementia while in-patients in an acute health service.

Milestones:

June 03 – Initial meeting with evaluation team

Quarterly Steering Committee/ progress meetings

June 04 – Projects completed

June 04 – Documentation of processes by hospitals

Estimated Benefits for Women:

Greater understanding among relevant services providers in acute settings about specific issues for women with dementia and their carers who are predominantly women, leading to improved service delivery and referral practices.

DHS Responsibility:

Aged Care Branch Rural and Regional Health and Aged Care Services, with contributions from Nurse Policy, Continuing Care, Rural Health and relevant regions.

Initiative 5.9

Initiatives from the Gay and Lesbian Health Action Plan: Training for Staff Regarding Gay And Lesbian Health Issues

Purpose:

Ensure that the particular needs of lesbians are addressed in sensitivity training for Department of Human Services (DHS) staff and mainstream health professionals to be delivered by the recently announced Gay and Lesbian Health Resource Unit.

Description:

The Victorian Government has made a commitment to funding a Gay and Lesbian Health Resource Unit for the next four years. A major task identified for the Unit is the provision of sensitivity training for mainstream health services to ensure better access to health services for the gay men and lesbians. DHS staff will also be included in the training programs to increase sensitivity to gay and lesbian issues in policy and program planning and design.

Milestones:

Jun 04 – Development of information material

Jun 04 – Development of training programs

Evaluation to be conducted at the end of the training program

Estimated Benefits for Women:

Heightened sensitivity for DHS staff and health services providers about the needs and issues of lesbians, resulting in improved service delivery.

DHS Responsibility:

Social and Environmental Health, Rural and Regional Health and Aged Care Services.

Initiative 5.10

Prevention and Early Detection Strategies for Obesity and Diabetes

Purpose:

Ensure that gender issues are addressed in the development of statewide strategies aimed at the prevention of obesity and diabetes.

Description:

The Government has made a commitment to providing funds of \$10m over the next four years for strategies aimed at the prevention and early detection of obesity and diabetes. Whilst this is an issue for the whole community there is a need for the strategies to be sensitive to the specific issues faced by women with respect to the physiology of healthy weight maintenance and to the sensitivities of women, particularly young women around the issue of body image, healthy eating and healthy weight.

Milestones:

Jan 04 – Establishment of community based intervention projects and social marketing campaigns

Jul 04 – Monitoring and evaluation of funded initiatives

Estimated Benefits for Women:

Greater recognition and increased understanding in the community with regard to the specific issues facing women in relation to obesity and diabetes

Empowerment of individual women to address these health issues

DHS Responsibility:

Food and Health Development , Rural and Regional Health and Aged Care Services.

Initiative 5.11

Evaluation of the Victorian Tertiary Alcohol Campaign

Purpose:

To conduct an evaluation of the Victorian Tertiary Alcohol Campaign to assess its effectiveness. As part of this evaluation, a gender specific comparison will be made between female and male students to determine and compare how each group received the campaign.

Description:

In 2001, the Victorian Government released the Victorian Alcohol Strategy: Stage One, which sought to address alcohol-related issues and concerns in the community. One concern that was identified in the Strategy was the harmful patterns of alcohol use among tertiary students. As a result, the Government developed a specific tertiary alcohol campaign. The campaign will consist of a number of concepts that will be distributed and implemented across 9 Victorian tertiary institutions and 18 TAFE campuses, such as in pubs/bars around campuses, bathroom facilities and bus stops. Collateral items will also be

distributed around tertiary institutions that will promote the Australian Alcohol Guidelines.

Throughout the roll-out of the campaign, an evaluation will be conducted to measure the level of awareness of the campaign messages among tertiary students. As part of this, a gender specific comparison will be made between male and female students to determine how each group received the campaign. If differences are found, this could provide direction as to how females should be targeted in future alcohol campaigns.

Milestones:

July 03 – Campaign commences

Nov 03 – Campaign completed

Jan 04 – Evaluation completed

Estimated Benefits for Women:

Greater understanding of young women's utilisation of alcohol and more effective health promotion strategies in addressing this issue

DHS Responsibility:

Drug Policy and Services Branch, Rural and Regional Health and Aged Care Services.

Initiative 5.12

Extend the joint professional training for family violence workers and community health workers

Purpose

To further develop the training program to provide training to family violence and community health workers in problem gambling issues and services.

To increase community knowledge of problem gambling issues and services.

Description:

Gambler's Help City have worked in partnership with family violence and community health agencies to develop and implement problem gambling training for workers. In 2003 DHS will work with Gambler's Help Services to further develop this training program, so that it can be delivered to other workers.

Milestones:

Jan 04 - the training program will be developed, as part of a broader training package for professionals

2003/04 – Training delivered.

Estimated Benefit for Women:

Women affected by problem gambling who access family violence and community health services may receive information about problem gambling issues or be referred to Problem Gambling Services.

Family Violence and Community Health Services will provide a more informed response to women accessing services experiencing problem gambling issues.

DHS responsibility

Community Building Unit, Community Care Division.

