



Women's Health East

Investing in Equality and Wellbeing for Women

A STRATEGY FOR EQUALITY:
Action plan 2021-2023

Acknowledgement of Country

Women's Health East acknowledges the Traditional Owners of the land on which we work, the Wurundjeri people of the Kulin Nations. We pay our respects to their Elders past and present.

About Women's Health East

Women's Health East is the women's health promotion agency for the Eastern Metropolitan Region of Melbourne. We aim to improve health outcomes for women across the seven local government areas of Boroondara, Knox, Maroondah, Manningham, Monash, Whitehorse and the Yarra Ranges. Women's Health East also influences women's health and wellbeing at a state and national level.

Our vision is equality, empowerment, health and wellbeing for all women.

Women's Health East works across three, interlinked strategic priorities: Advance Gender Equality, Prevent Violence against Women, and Improve Women's Sexual and Reproductive Health.

Suggested Citation

Women's Health East 2021, A Strategy for Equality: Action Plan 2021 - 2023, WHE, Melbourne.

A Strategy for Equality: Action Plan 2021-2023

This document has been developed to accompany Women's Health East's A Strategy for Equality: Women's Sexual and Reproductive Health in Melbourne's East 2020-2025. A Strategy for Equality and the Background Paper identify key sexual and reproductive health (SRH) priorities and priority populations in the Eastern Metropolitan Region and articulate a framework for improving women's SRH through enhancing equity, increasing access to key services and improving the capability of the healthcare system to address women's SRH.

The purpose of this Action Plan is to operationalise that framework and outline the collective actions that will be undertaken by the Eastern Metropolitan Region Sexual and Reproductive Health Strategic Reference Group to improve the SRH of women, trans men, non-binary and gender diverse people across the EMR for the next two years.

Monitoring and Evaluation

The EMR SRH Strategic Reference Group will be responsible for the ongoing monitoring of A Strategy for Equality: Action Plan 2021-2023, through regular meetings of the SRG and the Implementation Sub-Committee. Each action has an assigned Project Lead and Support Partners, who will work towards meeting the agreed process measures. Additionally, formal evaluation of the SRG partnership and collaborative actions at 12 and 24 months will allow us to evaluate the achievement of the agreed impact indicators and the effectiveness of the partnerships.

The following EMR SRH Strategic Reference Group members contributed to the development of A Strategy for Equality: Action Plan 2021-2023, and are committed to its implementation:

- Ø Access HC
- Ø City of Boroondara
- Ø City of Monash
- Ø Deakin University
- Ø EACH
- Ø Family Planning Victoria (FPV)
- Ø Jean Hailes for Women's Health
- Ø Knox City Council
- Ø LiverWell
- Ø Marie Stopes Australia
- Ø Monash University
- Ø Multicultural Centre for Women's Health (MCWH)
- Ø Neami National
- Ø Outer East Primary Care Partnership (OEPCCP)
- Ø Yarra Ranges Council

PRIORITY: EQUITY

Objective 1: Apply and promote a sex positive, intersectional gender lens to sexual and reproductive health planning, service provision and health promotion activities.				Impact indicator: The extent to which SRH planning, service provision and health promotion activities reflect the specific SRH needs of identified priority populations.		
Action	Partner(s)	Priority population(s) where relevant	Output	Process measures(s)	Data collection method(s)	Timeframe
Action 1.1.: Promote sexual and reproductive health information and services to local Aboriginal and Torres Strait Islander women through local Indigenous community service.	Project lead(s): EACH, WHE. Supporting partner(s): Jean Hailes, EH, FPV	Aboriginal and Torres Strait Islander women.	Delivery of 1 x informal meeting with local Aboriginal and Torres Strait Islander women to discuss sexual and reproductive health information and culturally safe services in the EMR.	# attendees at the meeting. Participant satisfaction with meeting.	Attendance records at 1 x meeting. Discussion with participants.	Dec 2021 – March 2022
Action 1.2: Promote sexual and reproductive health information and services to local women from culturally and linguistically diverse backgrounds through the Bilingual Health Education Officers.	Project lead(s): , WHE Supporting partner(s): MCWH, Jean Hailes, Neami, EACH	Women from culturally and linguistically diverse backgrounds.	Delivery of at least x1 information session to Mandarin speaking women in the EMR around cancer screening. Delivery of at least x1 information session to Hakha-Chin speaking women in the EMR around women’s health.	# of sessions delivered. # of participants per session. % of participants who state their knowledge of cancer screening has increased as a result of attending the session. % of participants who state their knowledge of women’s health has increased as a result of attending the session.	Attendance records at session(s). Participant feedback forms.	July 2021 – December 2021
Action 1.3: Host an event as part of Women’s Health Week (6 th - 10 th September) to raise awareness and address a specific SRH issue in the EMR.	Project lead(s): WHE Supporting partner(s): Jean Hailes	N/A	X1 event held between 6 th -10 th September.	# attendees at event. Attendee satisfaction with event.	Event registrations. Discussion with attendees.	July 2021 – October 2021

<p>Action 1.4: Facilitate a professional development session to build the capacity of health promotion and community health practitioners around SRH promotion program planning and development.</p>	<p>Project lead(s): FPV, Jean Hailes, MCWH, WHE</p> <p>Supporting partner(s): Access HC</p>	<p>N/A</p>	<p>X1 PD session held for HP and community health practitioners in the EMR.</p>	<p># attendees at session.</p> <p>% attendees who felt their learning needs were met.</p> <p>% attendees who felt they had improved knowledge around SRH promotion as a result of attending the session.</p>	<p>Session registrations.</p> <p>Attendee feedback surveys.</p>	<p>March 2022 – August 2022</p>
<p>Objective 2: Challenge and reduce stigma and discrimination around women’s sexual and reproductive health issues in health and community settings.</p>				<p>Impact Indicator: Proportion of SRG members who demonstrate a commitment to publicly supporting all aspects of women’s SRH and rights.</p>		
Action	Potential Partners	Priority population(s) where relevant	Output	Process measure(s)	Data collection method(s)	Timeframe
<p>Action 2.1: Promote positive messages around women’s sexual health, International Safe Abortion Day and World Contraception Day through a social media campaign during Sexual and Reproductive Health Week.</p>	<p>Project lead(s): WHE, WHSs SRH Social Media Working Group</p> <p>Supporting partner(s): All members of the SRG.</p>	<p>N/A</p>	<p>At least seven tiles/posts/reels created by the WHSs SRH Social Media Working Group and shared with SRG members and other partners.</p> <p>X1 campaign toolkit created to support SRG members to develop their own SRH Week content.</p>	<p>Reach of posts developed for SRH Week campaign.</p> <p># of organisations that share SRH Week content across their organisations’ social media platforms.</p> <p># or organisations that create their own content for SRH Week.</p>	<p>Social media analytics (posts, shares, engagement).</p>	<p>July 2021 – November 2021</p>
<p>Action 2.2: Challenge and reduce stigma and discrimination towards women and people experiencing menopause in workplace settings through the adoption of a workplace menopause policy.</p>	<p>Project lead(s): WHE</p> <p>Supporting partner(s): All members of the SRG</p>	<p>Women experiencing menopause.</p>	<p>Development of x1 written resource to encourage and support organisations to adopt a workplace menopause policy.</p> <p>At least x2 engagements with partners supporting policy implementation.</p>	<p>% of SRG members that adopt a workplace menopause policy.</p> <p>Facilitators and enablers identified.</p>	<p>Survey of SRG members.</p> <p>Focused discussion with SRG members.</p>	<p>July 2021 - June 2022</p>

Action 2.3: Investigate opportunities to raise community awareness around STIs and increase testing rates among young people in the EMR.	Project lead(s): WHE, EH, EACH, Access HC Supporting partner(s): FPV, Deakin University, Monash University	Young women	At least x1 meeting held to discuss potential projects and capacity. X1 project outline completed.	# meetings held. 100% project partners in support of project proposal.	Meeting minutes. Project outline.	Dec 2021 – May 2022
Objective 3: Integrate a focus on reproductive coercion and sexual violence into women’s health programs, service delivery and prevention of violence against women activities.				Impact indicator: Regional partners working in the prevention of violence against women demonstrate increased awareness of the implications of reproductive coercion and sexual violence on women’s SRH.		
Action	Potential partner(s)	Priority population(s) where relevant	Output	Process measure(s)	Data collection method(s)	Timeframe
Action 3.1: Collaborate with the TFER partnership on the 16 Days of Activism campaign to introduce content focused on addressing reproductive coercion and/or sexual violence affecting women living with disability.	Project lead(s): WHE. Supporting partner(s): All members of the SRG and TFER partnership.	Women living with disability.	Development of 2 – 3 x pieces of content focused on reproductive coercion and/or sexual violence for use during the 16 Days of Activism campaign.	# of posts created for the 16 Days of Activism campaign. Reach of posts.	Social media analytics.	Aug 2021 – Dec 2021
Action 3.2: Explore opportunities to integrate training on recognising reproductive coercion into settings such as higher education and maternal and child health services.	Project lead(s): WHE Supporting partner(s): EMR Councils, Monash University, Deakin University	Young women. New parents.	At least x1 meeting exploring project options with university SRG members. At least x1 meeting exploring project options with EMR council SRG members.	# meetings held.	Meeting minutes. Project outline.	July 2022 – Dec 2022
Action 3.3: Strengthen the capacity of the SRG to address reproductive coercion and sexual violence by recruiting representatives from family violence organisations to join the SRG.	Project lead(s): All members of the SRG Supporting partner(s):	N/A	At least x2 family violence organisations invited to join SRG.	# representatives from family violence organisations on SRG.	SRG membership.	July 2021 – June 2023

PRIORITY: CAPABILITY

Objective 4. Enable practitioners to deliver safe, appropriate, and responsive sexual and reproductive health information, services and referral pathways.				Impact Indicator: Practitioners in the EMR have increased capacity to meet the SRH needs of all women in the region.		
Action	Project partner(s)	Priority population(s) where relevant	Output	Process measure(s)	Data collection method(s)	Timeframe
<p>Action 4.1: Deliver early medical abortion capacity building forums for primary healthcare providers in the Eastern Metropolitan Region.</p>	<p>Project lead(s): EACH, FPV, Royal Women’s Hospital, 1800 MY OPTIONS, WHE. Supporting partner(s): Eastern Metro Primary Health Network.</p>	All women of reproductive age.	Delivery of 2 x forums on early medical abortion to general practitioners, practice nurses and managers, and pharmacists in the EMR.	<p># forums delivered.</p> <p># attendees.</p> <p>% of participants who agree they are likely/very likely to become a medical abortion provider.</p>	<p>Registration data.</p> <p>Feedback forms.</p>	Jan 2022 – June 2022
<p>Action 4.2: Enhance LiverWell/Hepatitis Victoria’s HepReady training package by applying a social determinants of health lens to better demonstrate the ways viral hepatitis impacts people differently based on a range of social factors, with a focus on gender.</p>	<p>Project lead(s): WHE, LiverWell/Hepatitis Victoria</p>	Women at risk of/living with viral hepatitis.	X1 training module added to LiverWell/Hepatitis Victoria’s online HepReady training portal.	% of participants who agree that learning objectives were met.	HepReady participant evaluation surveys.	July 2021 – Dec 2021
<p>Action 4.3a: Audit current physical health screening processes, with a focus on understanding gaps in sexual and reproductive health screening.</p> <p>Action 4.3b: Train staff in sexual and reproductive health screening, including referral options</p>	<p>Project lead(s): Neami National</p>	Women experiencing severe and persistent mental health issues.	<p>Staff provided training and guidance in sexual and reproductive health screening.</p> <p>Improved referral pathways to provide support for women experiencing sexual and reproductive health issues.</p>	% of staff who report increased confidence in sexual and reproductive health screening and intervention.	<p>Staff survey.</p> <p>Referral out data.</p>	July 2021 - Dec 2021

Objective 5: Improve the collection and use of quantitative and qualitative sexual and reproductive data and information.				Impact Indicator: SRG members report increased access to, sharing and use of SRH data, research, activities and news.		
Action	Project partner(s)	Priority population(s) where relevant	Output	Process measure(s)	Data collection method(s)	Timeframe
Action 5.1: Develop and distribute a quarterly or six-monthly electronic newsletter to partners in the region on current and upcoming sexual and reproductive health activities, advocacy, research and news.	Project lead(s): WHE Supporting partner(s): All members of the SRG	N/A	Delivery of 2-4 x electronic newsletters disseminated to regional partners via the SRG per year.	# of subscribers on mailing list. # of subscribers who agree the newsletter is valuable.	2-4 x newsletters.	July 2022 – June 2023
Action 5.2: Develop a sexual and reproductive health knowledge repository via The Well, containing a list of up-to-date resources, research findings, reports etc. on sexual and reproductive health, available to all partners.	Project lead(s): WHE, OEPCP Supporting partner(s): FPV, Jean Hailes, Deakin University, Monash University	N/A	The establishment of sexual and reproductive health as a portal on <i>The Well</i> online knowledge resource.	# visits to repository per month. # resources added to repository each quarter.	The Well analytics. Review/audit/inventory of The Well.	Jan 2022 – June 2022

PRIORITY: ACCESS

Objective 6. Address the economic, political and social factors influencing women’s sexual and reproductive health-seeking behaviours.				Impact Indicator: SRG members agree that implementation of <i>A Strategy for Equality</i> has enhanced collaborative action on SRH and provided a platform for advocacy on key SRH issues.		
Action	Project partner(s)	Priority population(s) where relevant	Output	Process measure(s)	Data collection method(s)	Timeframe
Action 6.1: Continue to grow the membership of the SRG and strengthen its capacity to advocate for local women’s sexual and reproductive health priorities through greater engagement and coordination of members.	Project lead(s): WHE Supporting partner(s): All members of the SRG	N/A	At least x2 new SRG members per year. At least x1 submission as a partnership in response to an advocacy opportunity.	# SRG members. # SRG meetings that meet quorum. Submission completed.	SRG membership list. Meeting minutes.	July 2021 – June 2023
Action 6.2: Promote the 1800 MY OPTIONS service in community health settings and through social media.	Project lead(s): WHE, community health service members of the SRG Supporting partner(s): All members of the SRG	N/A	SRG members promote 1800 MY OPTIONS across their social media platforms. SRG community health members distribute 1800 MY OPTIONS collateral at their service.	Reach of promotion on social media. # promotional materials distributed via SRG.	Social media analytics. Survey of SRG members.	September 2021, March 2022, September 2022, March 2023
Objective 7. Identify and address the distinct barriers to accessing specialist services for key sexual and reproductive health issues and priority populations.				Impact Indicator: Opportunities have been identified and implemented to address the distinct barriers faced by specific priority populations in the EMR.		
Action	Project partner(s)	Priority population(s) where relevant	Output	Process measure(s)	Data collection method(s)	Timeframe
Action 7.1: Establish and promote a gender affirming clinic in the EMR to support trans and gender diverse people seeking sexual and reproductive healthcare.	Project lead(s): EACH, FPV Supporting partner(s): WHE, all members of the SRG.	LGBTI women.	As per EACH and FPV’s implementation and evaluation plans.	# promotional materials distributed via SRG.	Feedback from SRG members.	TBC

<p>Action 7.2: Investigate opportunities to promote EACH's SRH Hub and Women's Health Clinic among local Indigenous communities.</p>	<p>Project lead(s): EACH, WHE</p> <p>Supporting partner(s):, All members of the SRG.</p>	<p>Aboriginal and Torres Strait Islander women.</p>	<p>At least x1 meeting held between WHE and EACH to explore options potential projects.</p> <p>At least x1 local indigenous service approached to join project.</p> <p>X1 project plan developed.</p>	<p># meetings held.</p> <p>Project plan completed.</p>	<p>Meeting minutes.</p> <p>Project plan.</p>	<p>Jan 2022 – June 2022</p>
<p>Action 7.3: Build the SRG's understanding of the sexual health priorities of women living with disability through a review of available literature, an environmental scan and consultation with community members and service providers in order to develop effective actions to address the identified priorities.</p>	<p>Project lead(s): WHE</p> <p>Supporting partner(s):, All members of the SRG</p>	<p>Women living with disability.</p>	<p>X1 research report with proposed actions.</p>	<p>Report completed and read by SRG members.</p>	<p>Meeting minutes.</p>	<p>Jan 2023 – June 2023</p>