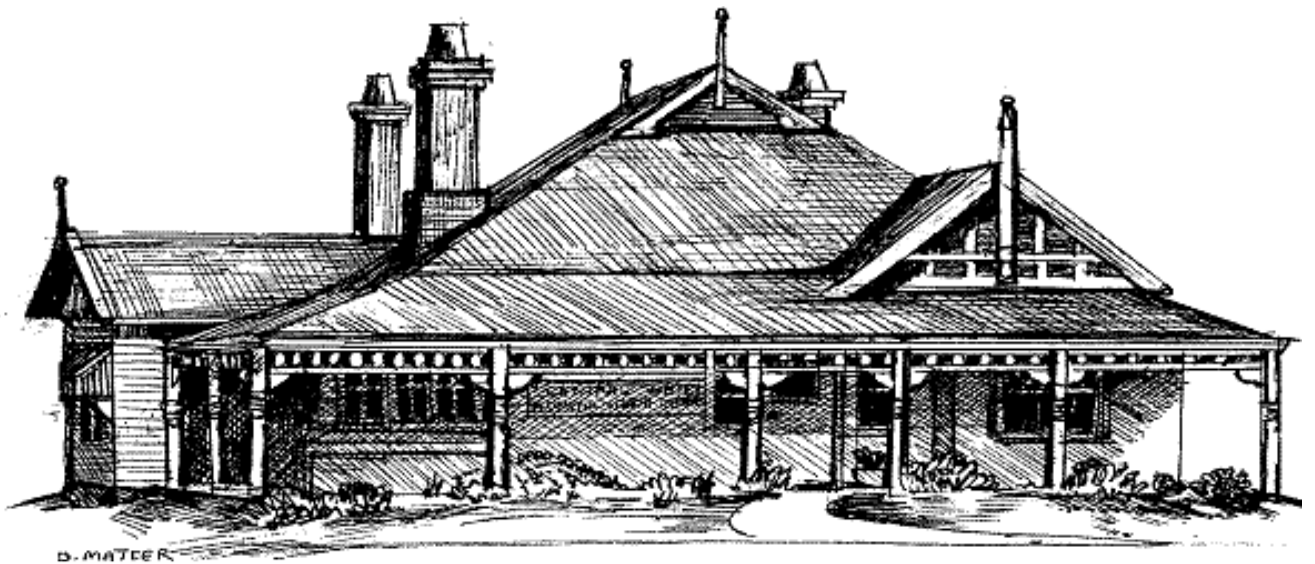


**Central West Women's Health Centre
Inc
Annual Report
2010/2011**



20 William Street

PO Box 674

Bathurst NSW 2795

Central West Women's Health Centre Inc.

25th Annual Report July 2010 – June 2011

Summary

The Central West Women's Health Centre has this year provided a range of health education programs, preventive health screening, alternative health services, counselling and information to women in the Central West of NSW.

The Centre also responds sensitively and professionally to provide crisis support, ongoing counselling and referral to women and children who have been sexually abused, as well as to women who are subjected to, or are at risk of, physical and emotional violence.

Staff and management of the Centre are committed to helping to bring about changes which will make the community safer, fairer and more supportive for women.

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website: www.cwwhc.org.au

Funded by:
NSW Health Services
NSW Department of Human Services
(Community Services)

Donation by:
Bathurst City Council

Special thanks to **Clements Accounting** for their continued support

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Our Vision

Women being heard, having choices, creating health and well being.

Our Mission

To be a leader in providing opportunities to women and children, other health providers and the community through holistic health services, information, advocacy and social action.

Our Values

We are a feminist organisation, which means we:

- Value women's own knowledge and skills and their right to make informed decisions about their health.
- Recognise the social, environmental, economic, spiritual, physical, political, emotional and cultural factors influence women's health.
- Acknowledge and value change across a woman's lifespan.
- Challenge the effects of sex role stereotyping and gender discrimination.
- Value relationships which respect individual difference, encourage personal growth and are open to change.

Service Principles

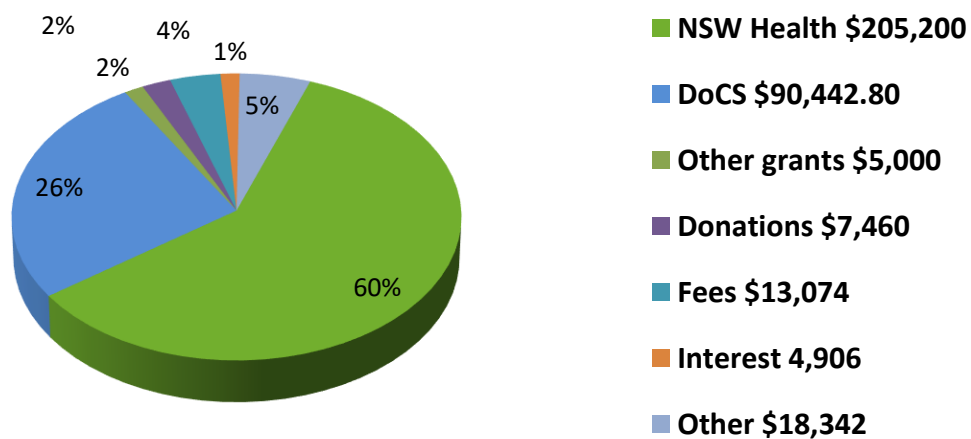
- We are a community based, non-government organisation run by and for women.
- We are a public benevolent institution providing a direct service to disadvantaged women.
- We focus on prevention and early intervention.
- We work in partnership with other agencies.
- We are accessible to all women.
- We strive to maintain ethical standards in all our activities.
- We are committed to best practice.
- Our work environment reflects our values.

Priority Outcomes for Women

- Reduction in prevalence and impact of depression on women.
- Reduction in prevalence and impact of violence experienced by women and children.
- Increase in levels of healthy lifestyles for women.
- Increase access to reproductive health services that provide choice.

Welcome to our 25th Annual Report

This AGM rounds off another busy year in our provision of health services to women and children in the Central West. The Centre was responsible for administering a budgeted income totalling \$329,000. This encompassed 7 paid staff (4.5 full time equivalent), 4 visiting practitioners and 2 major funding areas.



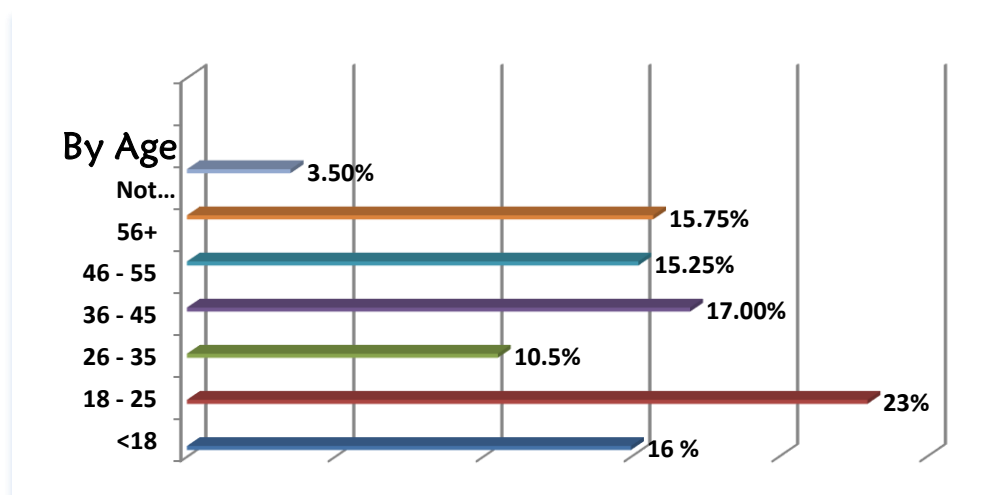
Highlights of the year included:

- A National Australian Crime and Violence Prevention Award Certificate of Merit presented in May 2011 for the Stalking Project.
- A cervical screening provider number was issued to our women's health nurse thanks to the efforts of Jane Beach, Women's Health Co-ordinator with Area Health. This means that our nurse can perform cervical screening without having to have a doctor on site. To our knowledge we are the first Women's Health Centre to have achieved this.
- White Balloon Day and International Women's Day celebrations.

767 clients used Centre services this year with over **3006** direct client contacts provided. In addition, health promotion workshops were provided to **805** women and children.

Practitioner	Funding Source	Direct Client Contacts	Outreach Health Promo
Generalist Counsellor	Health	397	
Health Promotion worker	Health	776	454
Nurse	Health	514	343
Frontline Officer	Health/DoCS	89	
Manager	Health/DoCS	116	
CSA Counsellor	DoCS	253	8
Doctor	Medicare	196	
Herbalist	Fees	6	
Yoga Instructor	Fees	379	
Massage Therapist	Fees	38	
WH Physiotherapist	Fees	242	
Total Client Contacts		3006	805

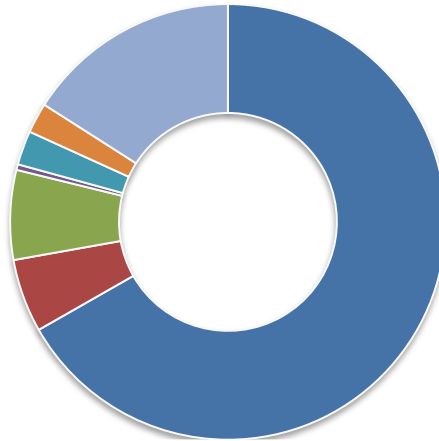
184 women and children from **58** different postcodes outside the Bathurst area accessed our services during the year. This is significant in a rural area where our local postcode 2795 alone spans 95 localities, 18 public schools and 6 government areas. While we provided a measure of outreach services, in many cases clients preferred to travel long distances to access a service perceived as safe, confidential and women friendly.



Only 16.75% of our clients were in permanent full time employment. 14.25% worked part-time and 9.5% casual. 31% of our clients were students, 21.5% were pensioners and 17% had no income.

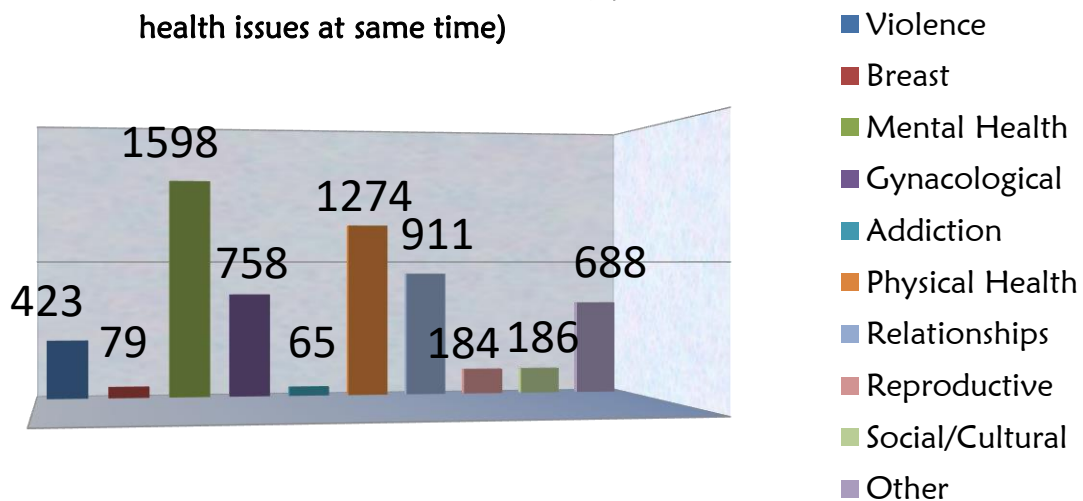
Contacts by Cultural Diversity

- Australian
- ATSI
- UK
- African
- European
- Other
- Not recorded



119 different presenting health issues were recorded, requiring a diversity of staff skills and training. It is worth noting that many clients present with several health issues at the same time.

By Health Issue - client contacts (client may present with several health issues at same time)



As is normally the case, there was a blend of success and challenges over the year:

Strategic Planning

A new Strategic Plan was developed in May with three key result areas:

1. Governance; systems management and human resource management
2. Access; services and program design; service implementation
3. Community development; networks; funding partnerships and contracts

Particular emphasis in the plan related to:

a) Funding Growth

This was not a successful year for funding submissions. A primary goal for the Centre was to continue our valuable work in the newly emerging field of Stalking through the establishment of a national resource centre. We were looking for \$54,000 per annum for the part time service and submissions were sent to NSW Health, Office for Women, Attorney General's and the Law and Justice Foundation. Regretfully we were not able to attract funding and the stalking project was shut down in December.

b) Alliances and Partnerships

One of the strengths of Central West Women's Health Centre is the quality of partnerships we have formed. In the 2010/2011 funding year a blend of formal partnerships and informal collaborations occurred throughout the year with 24 other local agencies.

c) Quality Assurance

In 2009/2010, the Centre was reviewed against 17 Quality Standards and 4 Women's Health Standards. The resulting report indicated that 20 Standards were met and 1 was met in part. 41 recommendations for improvement were made to the Centre which have been incorporated into a three-year quality plan.

Many thanks to NSW Health for funding QMS for this audit.

d) Service Priorities

Centre services are extremely focused. Service planning occurs quarterly against the four priority women's health outcomes criteria: depression/mental health; violence; healthy lifestyles; and reproductive health services that provide choice. A description of how these criteria were met, are detailed in the forthcoming service reports.

Staffing

During the year the organisation underwent a number of staffing changes.

We said goodbye to Michelle Enright who had filled in for the Health Education position whilst Kathleen Gallagher was on sick leave secondment.

Tanya Peachey left the service in December 2010 and Sandy Keech moved from the generalist counselling position to take up the role of child sexual assault. We were fortunate at this time to welcome Linda Leard to our counselling team.

Kathleen Gallagher and Tracy Sherman resigned from their health promotion and administration positions respectively in June 2011.

Visiting Practitioners

This year there were changes to our visiting practitioner services

- At the end of March, Dr Jane Lawrence wound up her popular bulk billed clinics at the Women's Health Centre. As these clinics are not funded, infrastructure has not kept up with changes in general practice. For instance, we cannot afford the medical computer software that enable doctors to provide Care Plans, access electronic results etc. These apply constraints to a modern day practice that make it difficult to provide quality care and generate the Medicare rebates needed to attract a visiting practitioner.

Whilst the demand for a doctor's clinic remains, the above situation would preclude their interest in working at the Centre.

- Sharon Caragher discontinued her popular massage therapy clinics in January and we welcomed Kirsty Lewin to the practice.
- Lisa Milton continues to provide a valued women's health physiotherapy clinic 1½ days a week.
- Judith Burton attends a visiting herbalist clinic, as required.

Our visiting practitioners all offer very low fees or bulk bill and this commitment has enabled the Centre to offer a more holistic range of services to our more disadvantaged clients.

Mention must also be made of Robyn Ryan who ran a very popular patchwork and quilting class each Thursday. The wonderful example of women's art enhances our Centre greatly.

Future Directions

The Centre faces some significant challenges ahead. Funding has not kept up with the costs of running a modern day health service and proactive measures need to be taken to ensure the ongoing financial viability of the organisation.

In recent years the Centre has established three innovative projects - the Invisible Sentence, Stalking: Prevent; Protect; Progress and the Aboriginal Mother & Daughter Gathering Programs. More work needs to be done in promoting these programs and maintaining our position as a lead agency in these areas.

In Conclusion

The Centre Board would like to express our thanks and appreciation for support from our sponsors. Your kind donations have enhanced our services delivery.

Thank you to all staff at the Centre who have given 100% in the past year to provide high quality service to the women of the Central West.

Staff would also like to take this opportunity to thank members of the Board of Management for their commitment and support. The time taken out of very busy lives to volunteer to deal with the complex issues facing the Centre is gratefully acknowledged, as well as the knowledge and skills each member brings.

Board of Management 2010/2011

Name	Office Held	Occupation
Maureen Markwick	Chair	Bookkeeper
Jennifer Quill	Deputy Chair	Manager
Sue Smidt	Treasurer	Co-ordinator
Sylvia Latham	Secretary	Retiree
Narelle Pabis	Ordinary Member	Manager
Kerry Silverson Marston	Ordinary Member	Educator
Tracy Sherman	Staff Rep	Administration Worker
Lee Hagan	Staff Rep	WH Nurse
Susan Clarke-Lindfield	Manager	Manager

Funded by the NSW Health Services (Western LHD): Staff

Name	Position	Hours p/week
Susan Clarke-Lindfield	Manager	22.5
Michelle Enright (6 months)	Health Education	20
Kathleen Gallagher	Project Worker	20
Lee Hagan	WH Nurse	21
Sandy Keech (7 months)	Generalist Counsellor	25
Linda Laird (3 months)	Generalist Counsellor	21
Tracy Sherman	Administration Worker	22.5

Funded by the NSW Human Services (Community Services): Staff

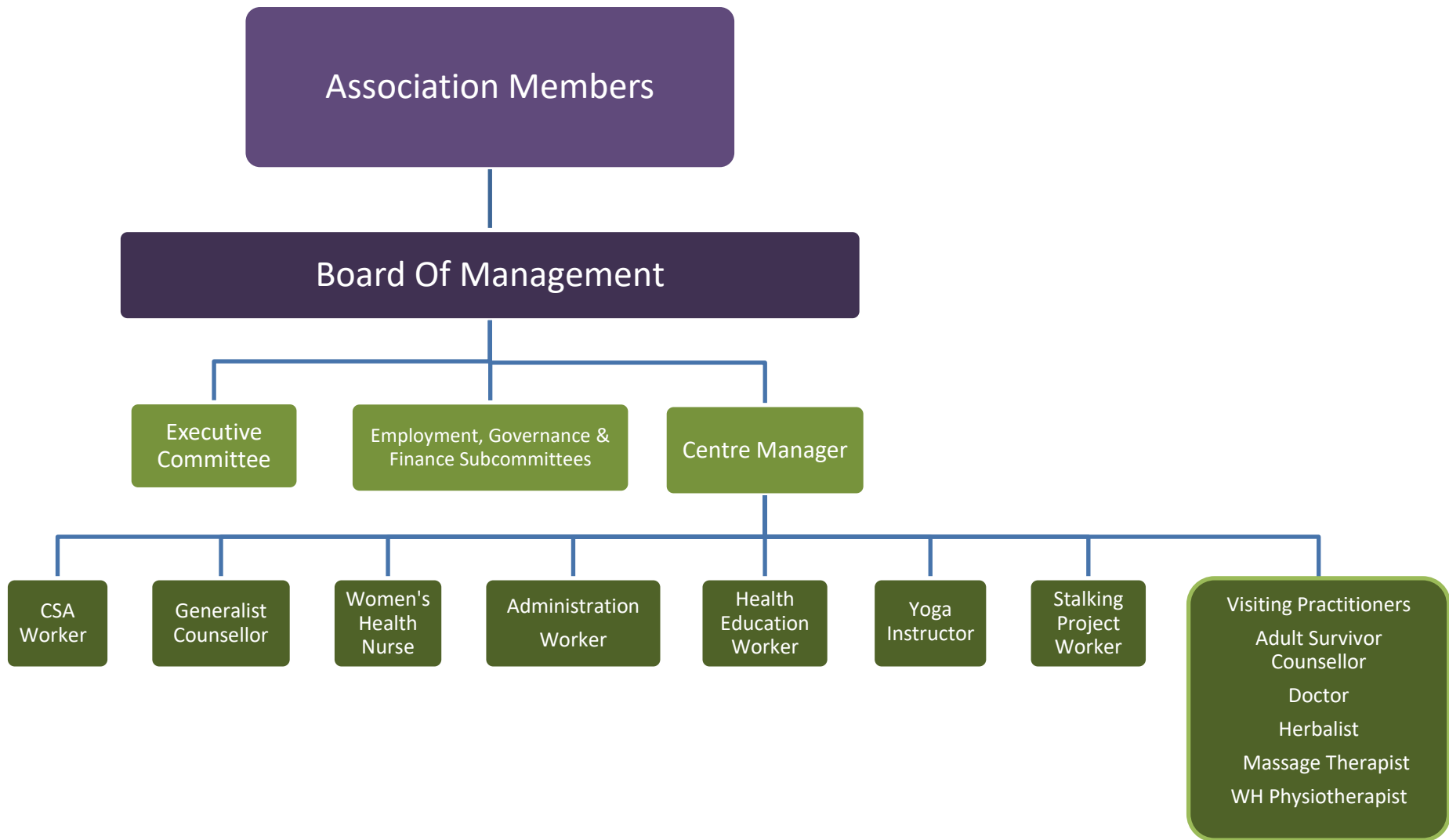
Name	Position	Hours p/week
Susan Clarke-Lindfield	Manager	7.5
Tanya Peachey (6 months)	CSA Counsellor	28
Sandy Keech (5 months)	CSA Counsellor	27
Tracy Sherman	Administration Worker	7.5

Position funded by fees:

Beryl Shephard	Yoga	3.5
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Visiting Practitioners:

Jane Lawrence (9 months)	Doctor	4
Sharon Caragher (6 mths)	Massage Therapist	5
Kirsty Lewin (6 months)	Massage Therapist	5
Judith Boag	Herbalist	Variable
Lisa Milton	Women's Health Physio	10



Instrument of Delegation

The Board of Management makes the major decisions on policy, long term goals, employment, legal matters and finance. Day to day decisions and the actual work of the service are the responsibility of paid staff. These responsibilities are delegated by the Committee through policy, job descriptions and employment contracts.

Legal Obligations	
Ensure that the organization abides by its policies and procedures, meets legislative requirements e.g. Privacy, ADA, EEO, Trade Practices, Industrial Relations	Manager
Ensure day to day OH&S mutual responsibility is met.	Manager / OH&S Officer
Financial Management	
Ensure adequate financial systems and records are maintained according to accounting standards.	Finance Sub-committee
Be responsible for the day to day financial management.	Manager
Approve budgeted expenditure and up to \$250 over	Manager
Approve petty cash expenditure up to \$20	Administration Worker
Approve expenditure for group activities up to \$50 per transaction.	Program facilitator
Be signatories for cheques / EFT Transfers	3 Staff / 3 Board
Strategic Planning	
Ensure that strategic planning occurs	Governance Sub-committee/Manager
Implement the strategic direction	Manager
Employment and Staff Management	
Be responsible for staff management on a day to day basis.	Manager
Ensure that industrial relations obligations are met.	Manager / Employment Subcommittee
Recruit and terminate staff according to appropriate awards and Centre policy	Manager / Employment Subcommittee
Annually review the Manager's performance	Employment Sub-committee
Annually review staff performance	Manager
Implement disputes procedures	Manager / Employment Subcommittee
Accountability and Reporting	
Ensure program and service compliance with contractual obligations	Manager / Governance Subcommittee

Women's Health Nurse Annual Report

Hi, my name is Lee Hagan and I work 3 days a week at the Centre. This last year has been another busy one. We have seen a couple of staff members leave, and some new ones start. There is always an interesting and varied range of women and work that is coming and going on here. Apart from doing clinics, health education sessions, attending meetings and networking with other agencies in our community, I attend professional education training courses, Board meetings, and various other meetings throughout the year. I also try to connect with other agencies to offer outreach education to, or collaborate on joint projects. I find the job of Women's Health nurse to be varied, challenging and very enjoyable.

I have also taken on the Walking Ladies Group every Monday morning since early June 2010, as our Health Education Worker has left. I am really enjoying (and benefiting from) the walks around the Macquarie River.

In 2010/2011, I saw **289** women in in-house clinics and **48** in outreach clinics. **62** women and girls received health education in in-house groups and **362** women/girls received either health education or health promotion outreach programs from me directly.

There were women from all our 'target groups' – CALD, ATSI, young women and girls 'at risk' of pregnancy and STI's, unemployed women, remote rural women, older women, women with disabilities, and women with mental illnesses. **46** women also received information and referrals over the phone.

A Synopsis of my annual clinical service provision

- 157 women had a **Pap smear**
- 39 women had a **Breast examination** (many women do their own and are comfortable with that, and state they have no lumps or worries, and so decline my offer of breast examination)
- 143 women had an **STI screen and discussion about 'safer sex' issues.**
- 16 tested positive for **Chlamydia** and were referred to GWAHS Sexual Health Service.
- 56 women were seen as **Outreach clinic clients**
- 14 women had their **Blood pressure** taken
- 3 women had **Emergency contraception**
- 13 women had a **Pregnancy test**
- 12 women required **Pregnancy options counselling**
- 43 women sought **Contraception education**
- 32 women sought **Menopause education** in the clinics (not group)
- 65 women were **Referred to a GP** for medical opinion of identified problems
- 12 women sought **Intake** for counselling from the nurse
- 19 women consented to **Referral to a counsellor** for further assistance
- 6 women wanted **Referral for a termination of pregnancy** after pregnancy counselling.
- 57 women were screened for **domestic violence**, with no current reports of DV.

Training completed this year has been in the following areas;

- Pregnancy Prevention in young women (2 day 'Core of Life' program)
- Keep them Safe (Mandatory Reporting) at Bathurst TAFE
- Smoking and Quit Smoking case management and NRT provision in Blayney, run by the Cancer Council
- Continence Management Certificate II in Sydney

- Advanced Group work for Trainers in Sydney, a 2 day course to assist group facilitation.

In-house groups facilitated or co-facilitated this year have been;

- the ‘Mothers and Daughters ‘ Groups, now called ‘Puberty Matters’ (4 per year)
- the Midlife Menopause group (in Nov. 2010)
- the 8 week Quit Smoking for Women Group in May-July 2011

Outreach education groups on a variety of women’s health topics have been to:

Carers, young mums, sex education / self esteem in local Bathurst primary and high schools in the region, CSU students half day clinics at Charles Sturt Uni, Breast Cancer Survivors Encore group, Portland and Oberon High School Healthy Relationships Days, a stall at Dr Sandra Cabot’s Oberon Community Talk, Menopause group for women with a mental illness, Aboriginal women and girls Peer Sex Education, and Sex education and half day clinics for psychiatric inpatients at Bloomfield Hospital.

Community Action and Networking activities attended this year were;

International Women’s Day

16 Days of Action against Domestic Violence

Aboriginal NAIDOC Week Celebration near Macquarie River and

‘Sorry Day’ celebrations at Kelso Community Centre

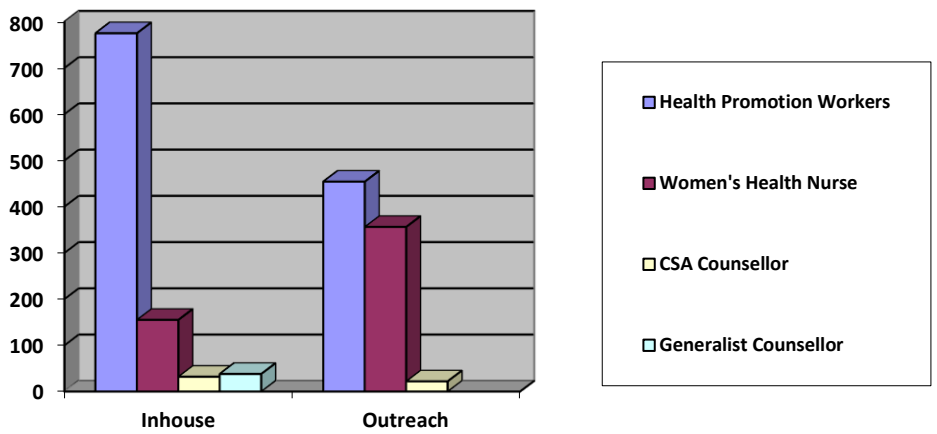
Pink Ribbon Day (Breast Cancer awareness) and

Healthy Hearts for Women’s Day at Bathurst Hospital.

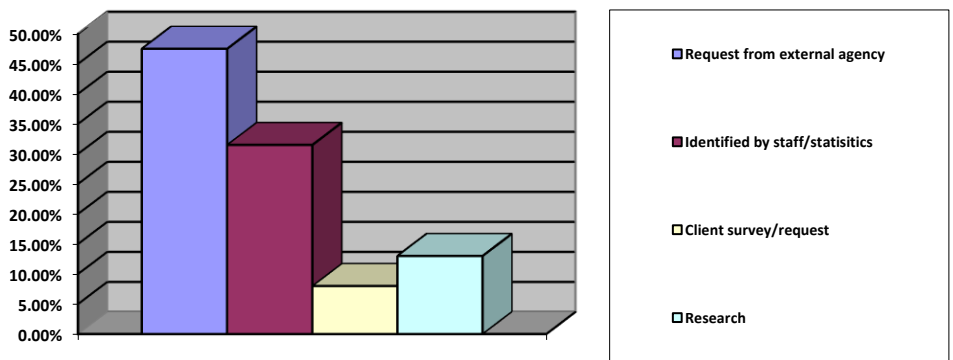
All these activities are a great way to mix and mingle with the female community of Bathurst and ‘catch up’ on how the lives of women and girls are going in our town. I look forward to another action-packed year for 2011-2012!

Health Promotion Program Annual Report

Central West Women’s Health Centre conducts both in-house and outreach health promotion and health education activities. As well as employing a dedicated health promotion worker (HP), all Centre staff have health education and promotion in their job descriptions. Sometimes projects are done jointly with the HP worker, sometimes they are conducted by a lone facilitator. At other times, staff work collaboratively with other health and welfare professionals and co-facilitate with them.



The Centre received numerous requests from community based organisations, external agencies and from our client base for our current programs. Requests for programs to be produced around specific target groups were also addressed.



During the year, staff provided 61 groups/talks/workshops over 254 sessions to 2495 participants.

Objective 1

To provide access for disadvantaged women ie. lesbians, Aboriginal and CALD women to antenatal and postnatal health services by providing free Well Women's clinics, midwife consultation, education and health talks.

- **Post natal Body Image and Self Esteem** talks to Young Mums Group at BenSoc and Bathurst Family Support

Objective 2

To raise awareness of benefits of cervical and breast cancer screening and provide accessible screening services for women from low screening.

- **CSU female students:** we provided information on the CSU clinic and sexual and reproductive health in Orientation Week.

Objective 3

To provide a range of health care options and strategies for women experiencing depression and other mental health issues.

- **Easy Walk, Stretch and Nutrition Group** for women suffering mental illness
- **Walking Group:** (see Objective 6)
- **Sex Education:** information for women with mental health issues at Bloomfield Hospital and Bathurst Independent Living Skills
- **Menopause education** to Mission Australia's Mental Health Recovery Support Group

- **Spring Into Summer** Last year we developed a new program to try and help meet the physical needs of obese women with mental health issues. Regretfully we were not able to obtain funding this year to include the popular aqua aerobic component. A reduced program involving a weights circuit was run; however it was not as popular with our target group.

Objective 4

To provide women with a managed and holistic range of clinical, health promotion and counselling services to deal with the physical and emotional impact of sexual and reproductive life cycle issues.

- **Puberty Matters** (*formerly called Mothers & Daughters*) This course is designed to promote open communication between mothers and their daughters around a range of issues regarding puberty and menstruation. The group is run four times a year and is advertised through school newsletters.
- We partnered with GWAHS Aboriginal Maternal Health Strategy workers on Outreach Education of the **Core of Life Program** (preventing teenage pregnancy) to students of Years 11-12 at Kelso High School in December 2010.
- **Time management** talk to carers at Frank Whitton Village .
- **Sexual health talks** to the Young Mum's Group at Benevolent Society and Bathurst Family Support on the benefits of breast screening, pap screening, STI screening and using contraception.
- **Sexual Health Lectures and Presentations:** We provided talks on sexual health to the following local schools:
 - Puberty and Sex Education/self esteem Outreach Education at:
 - Eglinton Primary School
 - Kelso Primary
 - Blayney Primary School
 - Oberon Primary School
 - Rockley Primary School
 - Outreach High School sex education/DV/SA/ Self Esteem sessions at:
 - Portland High School
 - Oberon High School

- **Menopause - Let's Talk About It!:** A course for women to promote a holistic approach to peri menopause and menopause. Facilitated by our HP worker, sessions were presented by our nurse, herbalist, women's health physiotherapist and generalist counsellor. The program was redesigned last year following a quality assessment against adult education and feminist best practice.
- **Aboriginal Mothers and Daughters Gathering Program.** Work continued to be undertaken by our women's health nurse (author of the program) and manager to edit and streamline the program layout in preparation for printing. Funding will be sought early next year with a view to launching and distributing throughout NSW.

Objective 5

To provide a range of medical and complementary treatment options, education talks and counselling services for women involved in substance abuse.

- The Centre was fortunate to receive a \$5,000 grant from the Cancer Council to run an 8 week **Quit Smoking Group** for Women. Our women's health nurse attended training and commenced the program in April.

Objective 6

To provide women with affordable and accessible physical activities while promoting social networks and support.

- This year we had a strong focus on physical activities for disadvantaged women. Collaborations with BenSoc, Bathurst Independent Living and GWAHS enabled us to run:
 - **Tai chi** for intellectually/physically disabled women
 - **Human Movement Yoga** for women intellectually disabled
 - **Easy Walk, Stretch and Nutrition Group for women suffering mental illness**

- We ran a highly popular **Breathing Stretching and Meditation (BSM) program** aimed at promoting stress management and healthy lifestyles. Participants were mainly professional women who met once a week for the first half of the funding year. Regretfully we had to cancel it when the Centre moved to Modern Awards in 2011 and could no longer afford to run the program after hours.
- **Walking Group** – This group has been established to offer local women a fun, free, physical activity that aims to reduce isolation and the risks associated with a sedentary life style while promoting good health habits and companionship. Walking group is run from the Centre each Monday morning at 9.30am. After a one hour walk, the ladies choose a location to have morning tea together. The group now runs all year round due to demand!
- **Encore:** Our nurse provided advice on health care and HP worker ran a Physical Activity Session outlining gentle exercises that the ladies could practice to build up their strength and stamina following their breast cancer treatment.
- **Yoga:** Beryl Shephard continued to provide her popular program three days per week.
- Our manager oversaw the popular **Quilting** group – see page 34

Objective 7

To reduce the prevalence of and impact of violence toward women.

- Stalking Awareness and Prevention Training: Lectures were given at Charles Sturt University and Orange Women’s Health Nurses cluster meeting.
 - Stalking Resource Centre Website and victim’s handbook were developed. These will be launched in the upcoming year.
1. Participated in the **LoveBites** program with students in Orange and Portland
 2. **Women Choice and Change** program with Relationships Australia
 3. **DV Support Group** was run in partnership with Probation and Parole

Strengthening Community Action

- International Women's Day Celebrations: Our Centre collaborated with Bathurst Regional Council to run a successful International Women's Day Dinner at the Vanilla Bean Restaurant. See page 32
- Pink Ribbon Day: In September 2010 our nurse promoted Pink Ribbon Day via a stall and ribbon sales at Bathurst Hospital.
- White Balloon Day: a major campaign was run in the Bathurst CBD to raise awareness of child sexual assault. Approx 75% of businesses purchased white balloons to display. A sausage sizzle rounded off the event. Many thanks to our volunteer Bec Ryan for co-ordinating the day.
- Outreach Information stall at Blayney Bowling Club, for Women's Health issues and Dr Sandra Cabot visit.

Re-Orienting Health Services

The Women's Health Centre continues to strengthen its links and partnerships in our local and district communities. Staff work closely with many of the government and non-government agencies to promote the freedom of choice and wellbeing of women.

Our manager represented the Centre on:

- Women's Health NSW Board of Management
- Bathurst Domestic Violence Liaison Committee
- Joint Investigative Response Team (JIRT)
- On-call Sexual Assault Counselling Service

Our generalist counsellor represented the Centre on

- Bathurst Family Support's Management Committee

Our administration worker represented the Centre on

- Bathurst Interagency

Our nurse represented the Centre on

- GWAHS Women's Health Cluster meetings.

In conclusion

In December 2010, we said goodbye to Michelle Enright whose contract ended with the closing of the Stalking project and in June 2011 we said goodbye to Kathleen Gallagher. These wonderful highly skilled women brought energy and vision to the health promotion program and they are sadly missed.

The Women's Health Centre has a strong preventative primary health care focus and there is a huge community need for health promotion activities. We look forward to a diverse and vibrant program next year.



Monday Morning Women's Walking Group

Child & Adolescent Sexual Assault Service Annual Report

This year has been a challenging one for the Child & Adolescent Sexual Assault Service with Tanya leaving the centre in November 2010 and Sandy Keech juggling clients from the Generalist Counselling Service as well as the Child & Adolescent Sexual Assault Service. Sandy finally moved into the CSA position at the beginning of February 2011 and it has been both a rewarding and challenging transition. Some of the old clients have returned after a break from counselling but unfortunately many have not.

The service has continued to provide support and counselling to children (male and female) under the age of eighteen who have experienced sexual assault, are suspected or at risk of being sexually assaulted along, children who have been affected by domestic violence, support and counselling to non offending family members of the children . This has been achieved through one to one counselling sessions, telephone support and counselling, and outreach services to Lithgow, Blayney and Oberon.

However along with seeing clients Sandy has been kept busy assisting with supporting and training our new Generalist Counsellor Linda Leard who began in April 2011, refining the Protective Behaviours program, and attending training. Sandy was successful in bringing two lots of ECAV training to Bathurst. The first training, Foundations for Working with Adults Who Have Been Sexually Assaulted as Children, was held in June with 19 participants, some from as far away as Cooma and Leeton. The second training, Working Therapeutically with Children and Young People Who Have Experienced Sexual Assault, will be held in October this year; many who attended the training in June have expressed interest in attending this training also.

2010-2011 has seen Sandy complete a Graduate Diploma in Psychology, attend the CASAC conference in April, attend training in Karitane's Parent Child Interaction Therapy, ECAV's Foundations for Working with Adults Who Have Been Sexually Assaulted as Children and Expressive Therapies with Troubled & Traumatized Youth at Centacare.

Unfortunately, problems encountered with our database have made reporting statistics difficult this year, it is anticipated that some of these issues will be rectified

in the near future making reporting in relation to the Child and Adolescent Service more available and accurate.

The 2010/2011 year has seen approximately 50 children access services through the Child and Adolescent Sexual Assault. The most notable issues children presented to the service with were, in addition to child sexual assault and domestic violence, anxiety /panic disorders, self esteem, stress, family issues and relationships.

Objective 1

To support children, young people, individuals and families so that they can enhance their independence, safety, self esteem, and /or quality of life within the community.

The past twelve months has seen CWWHC has provide 253 occasions of service for clients of the Child & Adolescent Sexual Assault Service

Referrals were received throughout the year from services such as JIRT, On-Call Sexual Assault Service, Lithgow Family Support, and Bathurst Family Support.

The majority of the children seen received counselling for child sexual assault and / or protective behaviours education.

Objective 2

To build strong communities and social capital undertaking community development, so that communities are well informed, resourced and connected, and equity and diversity are embraced.

Attendance at the CASAC Conference has allowed me to meet with other Child & Adolescent Sexual Assault Counsellors. Committee meetings and training events have provided opportunities for networking throughout the year. I organised ECAV training focusing on sexual assault to come to Bathurst due to many practitioners in the area having expressing their lack of confidence in dealing with sexual assault victims, this was a wonderful networking opportunity as well as a chance to have sexual assault brought to the forefront of issues for service providers and assist them to offer clients who have been sexually assaulted a more holistic and higher standard of service delivery.

Generalist Counselling Annual Report.

The Generalist Counselling position was managed by two counsellors in the 2010/2011 financial year. Sandy Keech worked the first two quarters before brilliantly and boldly juggling both Generalist Counsellor and Child Sexual Assault Counsellor Positions through the third quarter. With the employment of Linda Leard as the Generalist Counsellor in April, Sandy was free to move into the Child Sexual Assault position permanently.

Our counselling service has continued to provide individual counselling to girls and women from a strengths based, solution focused and feminist framework which, includes advocacy and referral. We have continued to offer outreach and telephone counselling to improve access for women isolated by distance, transport difficulties or ill-health. The flexibility of the service to provide short, medium and long-term counselling increases our capacity to provide a client focused, needs driven service and, potentially differentiates this service from other counselling services. In doing so we remain accessible to a portion of the community, often trauma affected with long term health & lifestyle problems, who might otherwise find continued care difficult due to their erratic patterns of accessing support.

Advocacy and support for women affected by domestic violence and adult or child sexual abuse was a strong focus of the service. Variations in the employment structure of local agencies such as, the absence of a Sexual Assault Counsellor at GWAHS, continues to affect the flow of clientele to this position.

Service provision

Over the year there were 397 contacts with the Generalist Counselling Service. The majority of these contacts were individual counselling sessions numbering 245 with outreach and telephone support /counselling, featuring heavily.

The range and pattern of issues women are dealing with seems similar to past years. It seems women often present when they hit a personal crisis point with a varying number of interrelated problems. Due to the complexity and often long term

existence of these difficulties, counselling can be intense, complex and include referral to complimentary services and social supports.

As co-occurring problems are the norm rather than the exception, the number of issues addressed is far greater than the number of clients seen. A breakdown of the major issues addressed and their frequency of occurrence is presented in the table below.

Issues		Issue	
Family Issues / Relationships	45	Anxiety/ Panic / Stress	56
Trauma/ Violence	35	Depression / Mental Health	8
Parenting	4	Housing /Financial	6
Legal	6	Grief & Loss	4
Anger	9	Self Esteem	4

Issues for consideration.

As had been anticipated, it is likely the availability of psychologists and social workers through Medicare has impacted service demand. Two other problems that seem to make accessing counselling difficult for women are;

1. A lack of affordable occasional childcare and the inability of the centre to safely provide childcare.
2. Limited availability of counselling appointments outside of working hours.

Networking, Social Action, Therapeutic Groups and Educational Talks

Throughout the year Linda and Sandy have been involved in many interagency and independent activities including;

- White Ribbon Day
- Interagency & Bathurst Family Support meetings
- Aboriginal Lands Council Sorry Day and Aboriginal Arts and Culture Festival
- Disability Services and Advocacy Forum
- Mothers and Daughters Group
- Organising local training: Adults Sexually Assaulted As Children Training

Training and Supervision.

Regular professional supervision for this position has been provided by Maria Woods formerly of GWAHS and currently with JIRT.

Training has included:

- Case Management Introduction.
- Keeping them Safe.
- Foundations for Working with Adults Sexually Assaulted as Children.

Visiting Practitioners

Doctor

Dr Jane Lawrence ran our Well Women's Clinic until April 2011 which was a popular service among clients to our Centre. The clinic ran on Monday mornings from 9.30am to 12.30pm and is a service that is strongly missed by women in the community.

During the past year Jane recorded 196 client contacts, of which pap smears and breast checks were two of the most common services provided.

Thank you Jane for the service you have provided, you are greatly missed.

Massage Therapist

Sharon Caragher's popular massage therapy clinic is ran until January this year servicing the needs of women at our centre. Everyone was sad to see her go and wish Sharon well in the future. Kirsty Lewin started working from our rooms in March this year and is intent on building her client base and service to the community. Kirsty provides therapeutic massage and kinesiology appointments on Thursdays. We will be pleased to support Kirsty in her endeavours to provide services to her clients and increase numbers in the coming year.

Herbalist

Our resident herbalist, Judith Burton, continues to provide a service through our Centre to suit the needs of her clients. Judith is a Naturopathic Herbalist and Iridologist.

Women's Health Physiotherapist

Lisa continued as sole practitioner in her third year of operating "*Lisa Milton Women's Health Physiotherapy*" within the CWWHC. Women with a variety of symptoms related to pelvic floor muscle dysfunction attended this practice. Lisa is completing postgraduate study through the University of Melbourne in 2011.

Women were referred by GPs and medical specialists, or in many cases, self-referred. Some women are entirely self funding, and others claim private health insurance rebates. Some clients are referred by GPs on the "Enhanced Primary Care Program", providing them with a partial Medicare rebate.

Private practice fees apply, and cost of initial consultation increased for the first time since the practice opened in 2009. The physiotherapy practice was billed for the use of the large clinic room (Mondays and Fridays).

Lisa has plans to relocate her practice within Bathurst after the completion of her postgraduate studies which will provide her with the skills to manage male pelvic floor dysfunction. Obviously it is not possible to treat these clients at CWWHC. She remains extremely grateful for the assistance and support she receives from Susan Clarke-Lindfield and other staff at CWWHC in her first three years of private practice.

Lisa Milton

BAppSc(Phty) Postgrad Cert Continence & Pelvic Floor Rehabilitation



Highlights 2010-2011

Australian Crime And Violence Prevention Award 2010

The Centre was delighted to receive a Certificate of Merit and \$1,000 for its valuable work in the field of stalking.



The major aims of the Stalking project were to:

- Assist victims of stalking with up-to-date knowledge and tools to better protect themselves.
- Assist service providers/teachers/law enforcement personnel and other stakeholders by providing them with the skills and resources to support clients who are being stalked.

According to a study conducted by Purcell, Pathé and Mullen (2006), 23% of the Australian population reported having been stalked and 10% have been subjected at some time to an episode of protracted harassment. The study goes on to state that the experience of being stalked is common and appears to be increasing. Assaults by stalkers are disturbingly frequent. Most victims report significant disruption to their daily functioning irrespective of exposure to associated violence.

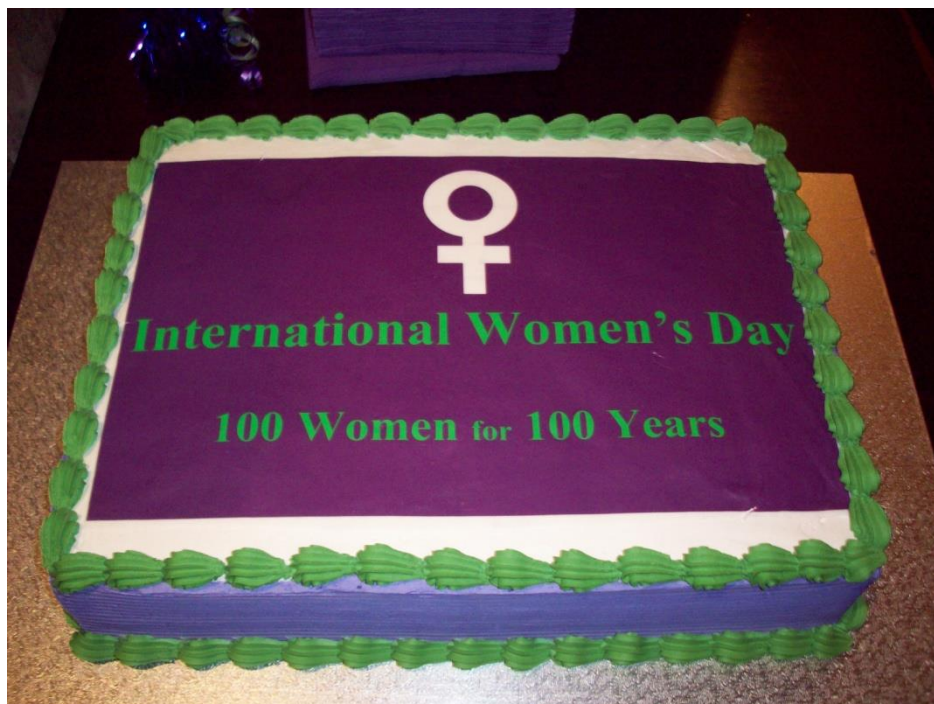
Many thanks to all that have supported the project over the past 2 1/2 years.

International Women's Day 2011

This year we hosted the '100 Years for 100 Women' dinner in partnership with Bathurst Regional Council. The dinner celebrated 100 years of International Women's Day with 100 women attending the dinner. Whilst enjoying a complimentary drink, guests were inspired and energized by local flamenco dancers and an African drumming group.

After the first course, participants heard from a local academic and historian, Associate Professor Leonora Ritter. Leonora's talk celebrated the past and embraced the future, starting with some history of IWD, but also focusing on what women have to offer in making today's world a better place. Leonora challenged the audience to resurrect the values of nurturing, sensitivity, communication and cooperation.

Over forty local women from all walks of life and ages were photographed for a Power Point presentation shown on the night. Women were asked to nominate 'The Best Innovation for Women in the Last 100 Years'. The women's photographs and quotes were displayed on the night. A diverse range of innovations were mentioned, including electricity, the contraceptive pill, the washing machine, mammograms and improved telecommunications, that enable families to stay in touch over long distances.



The night was completed with the cutting of the '100 Women for 100 Years' cake. The cake was decorated in the colours of International Women's Day, purple and green.

100 women attended.

Feedback from the night was overwhelmingly positive with repeated requests to hold a similar event next year. The tickets had sold out two weeks prior to the event and there was a waiting list of over 40 women.

'Thursdays in Black'

If you have attended the centre on a Thursday you may have noticed everyone wearing their black shirts that have been embroidered with the centre's name on the front and a large 'Thursdays in Black' print on the back.

This was a chance for our centre to have a chance to say "no" to domestic violence, sexual assault, rape, incest, murder, female infanticide, genital mutilation, sexual harassment, discrimination and sex trafficking.

'Thursday's in Black' is a human rights campaign started by the World Council of Churches during the 1980s as a peaceful way of saying "I support the human right of women to live in a world without violence, rape and fear" and has grown to become an international phenomenon.

With roots in groups such as 'Mothers of the Disappeared' in Argentina, 'Black Sash' in South Africa and the 'Women in Black' movements in Israel-Palestine and the former Yugoslavia, 'Thursdays in Black' encourages people to wear the black campaign T-shirt every Thursday as a sign of their support.



Quality Quilts

The quilting group has finished its third year at the Central West Women's Health Centre. The members of the group really enjoy their time together working with English piecing and quilting. Over the past year, they have completed a range of projects and are putting the final touches to sampler quilts which showcase their creativity through design, pattern making and the use of colour. All projects are been handmade in the time honoured fashion used long before machines were used for such work.

The group meets each Thursday afternoon and would be happy to discuss their work with others. It is hoped that there may be an exhibition before the end of 2012.



Centre Spot Evaluation – September 2010

Background

The Central West Women's Health Centre was established in 1986 after two years of lobbying and submission writing by a group of concerned women who wanted to see better services for women in the area.

As part of the strategic planning process (and CQI) a process for client consultation and input was discussed. It was agreed to conduct a short survey for clients to provide feedback on the services provided. A number of implementation methods were considered including a mail out to clients or providing the survey to clients to take home and return at a later date. It was agreed that it was more advantageous to provide surveys to clients at the centre prior to appointments and request they complete them before leaving.

The survey was provided to all clients who visited the centre from Monday 20th September to the Friday 1st October 2010. Each visiting client was asked to complete the survey and to place the completed survey in a box within the reception area.

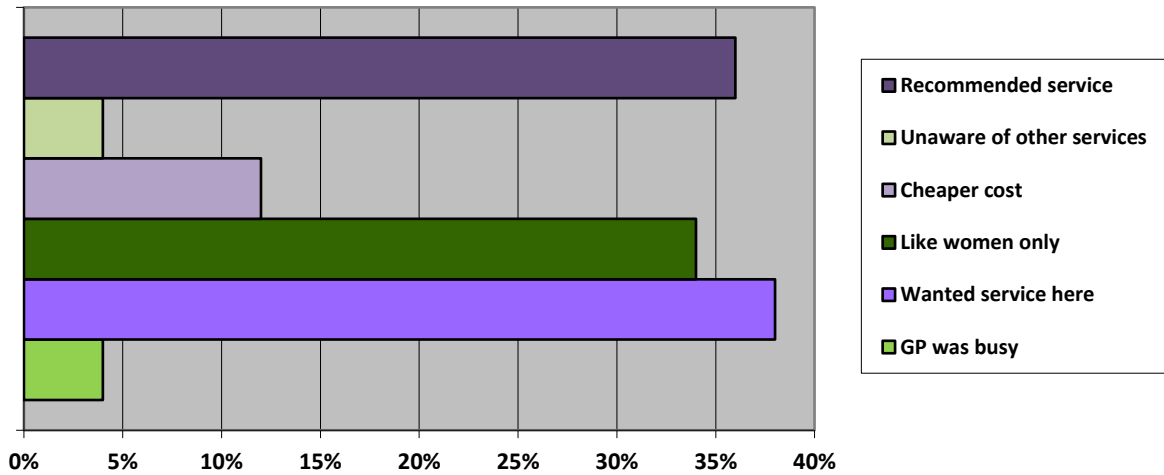
It is not known what numbers of clients did not complete the survey and/or failed to place them in the box or declined to be involved. Fifty completed surveys were returned.

Some respondents did not answer every question.

SURVEY RESULTS

Questions 1

What is the main reason you chose this service as opposed to another service?



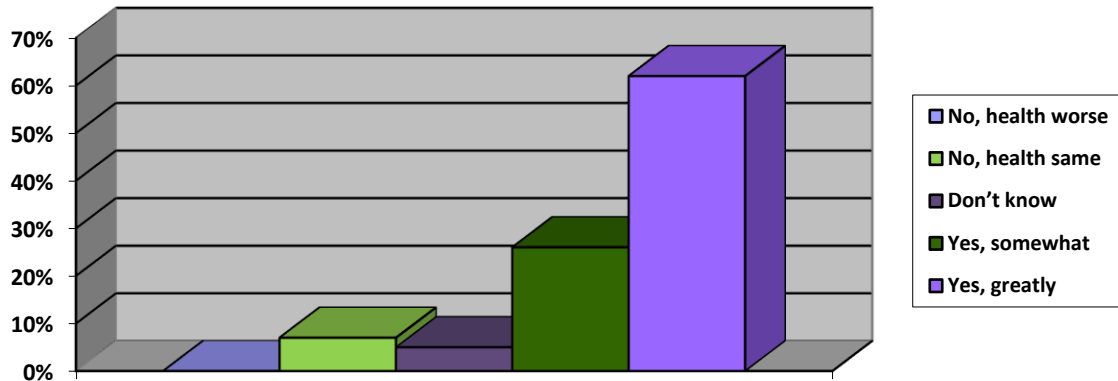
Question 2

If this service was not available where else would you seek help/advice/ healthcare?

Wouldn't Seek Help	12%
Go to GP	40%
Go to another community organisation	10%
Call a hotline	10%
Ask friends	26%
Google	2%

Question 3

This question asked respondents if they thought this service had made a significant improvement to their health.



Question 4

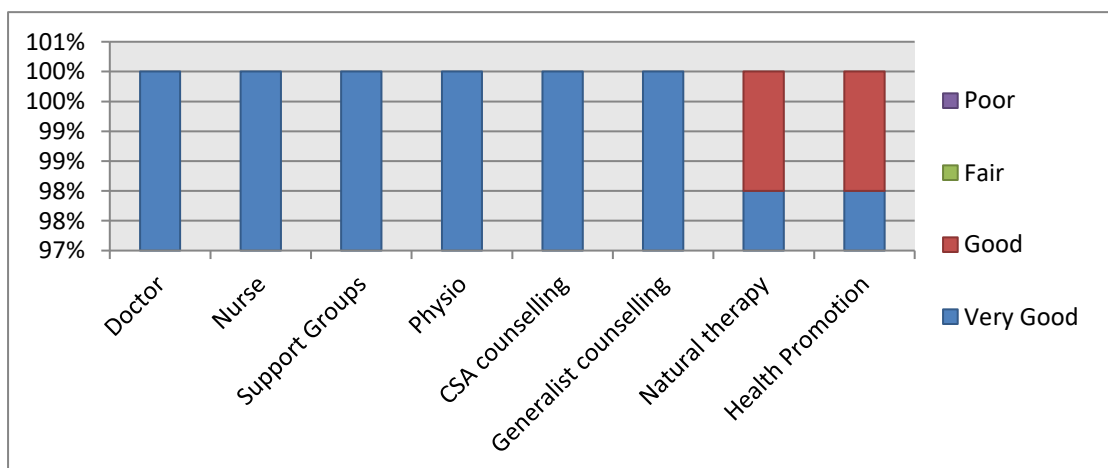
This question asked respondent to rate the quality of the service they were receiving by ticking one of the following four choices:

Very good good fair poor

The services identified as doctor, nurse, support groups, yoga, massage, generalist counselling, CSA, women's health physio were rated as very good by all respondents (100%) who answered this question.

The category natural therapy and health promotion were rated as 98% very good and 2% good.

No respondent had identified that they were visiting the service adult survivors of child sexual assault so consequently they were not rated in this question.



Question 5

What are the most positive aspects about the services available at the Centre?

- For women to have somewhere to get help
- Always make you feel welcome
- All the different services available here
- Respect and kindness of staff
- Excellent staff, service and advice
- Tell someone our problems All services aimed at helping/assisting the women
- The availability of essential services
- The welcoming atmosphere
- Tanya Peachey has been a fantastic support
- Women can feel support without fear
- Don't have to wait long between appointments.
- The commitment and dedication of the staff
- Friendly staff and atmosphere x 7
- Relaxed atmosphere x 4
- Female only x 2
- Very helpful, efficient
- Non-judgemental
- Great personal support
- Great information x 2
- Physio interested in my problem and wanting to help me
- The excellent staff, who are positive and affirming
- Improvement of my symptoms since seeing physio
- Friendly x 7
- Inviting
- Supportive x 2
- Approachable
- Affordable x 2
- Not available elsewhere
- Fast & efficient service
- Easy to get to
- Contact with me re results
- The personnel, carers are warm & empathetic & listen
- Professional
- Clean toilets
- We get help
- Flexibility
- Comforting x 2
- Helps me a lot
- Helpful x 2
- They take a personal interest
- Focus on women
- Understanding

Question 6

Clients were asked if there were any services that they had difficulty gaining access to. Only two women responded to this question.

One had problems booking into massage stating a long waiting list and unsuitable hours.

The second respondent identified both yoga and massage with cost and distance.

Question 7

What are the most negative aspects about the services available at the Centre?

- Closed on Tuesdays
- Didn't know about the service
- BSM only available once a week
- Close at lunch and before 5pm
- Cost

Question 8 related to their most recent visit:

In terms of your satisfaction in meeting your expectations, how would you rate the following?

	Very good	Good	Fair	Poor	Very Poor	Don't Know
Time spent with healthcare provider	81%	10%				9%
Explanations about your problem and management	85%	14%				1%
Interest of the healthcare provider in how you felt	88%	11%				1%
Opportunity to ask questions	88%	11%				1%
Technical skills (thoroughness, competence)	88%	10%				2%
Personal manner (courtesy, respect, sensitivity)	97%	2%				1%
Your understand of your rights	76%	15%				9%
Your comfort level with your ability to exert your rights	83%	9%				8%
The cost to you of the visit	73%	13%	5%		2%	7%

Financial Reports

Combined Financial Accounts

NSW Health Service Funding

For Clinical, Counselling and

Health Promotion Services

**Department Human Services
(Community Services)
Funding**

For Child Sexual Assault Services