

JUDITH LUMLEY CENTRE



**FOR WOMEN, CHILDREN
AND FAMILY HEALTH RESEARCH**

**Annual Report
2025**



Founding Director

Judith Lumley, AO

MA, MBBS, GradDipChildDev,
FAFPHM, FFPHM(UK)

Professor Emerita
Director 1991–2008

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Director's report

It is my pleasure to bring you our Annual Report for the Judith Lumley Centre, 2025.



Each year, we continue our reputation for impactful, high-quality research focussed on women's, children's and family health. Our researchers are from a range of disciplines, and work collaboratively

across the multiple programs of research showcased in this report. We take particular pride and care in supporting our emerging researchers and continuing our shared professional development. To achieve this, the Centre provides a rich, inclusive research culture for Centre members, with our regular lunchtime seminars, methods and journal clubs, and postgraduate presentations.

One of the highlights each year is to celebrate our higher-degree and early career researchers' achievements. This year, we celebrated a wonderful six higher-degree graduations: Dr Fiona Faulks; Dr Sarah Hay; Dr Brooke Henshall; Dr Res McCalman; Dr Anita Moorhead; Dr Lael Ridgway. Dr Faulks and Dr McCalman were each awarded a Nancy Millis medal for doctoral theses of exceptional merit. These graduations represent outstanding success from our early-career colleagues and the teams and supervisors around them. In other highlights, Sharon Mumford won the School of Nursing and Midwifery Three-Minute Thesis Competition; Jess McBurney was awarded the best student presentation at the Royal Women's Hospital Student Research Symposium; Elly Greenwood's publication was among the most highly-cited in *Journal of Advanced Nursing*, 2024; and the Fuchsia Study, led by Robyn Matthews and Rebecca Hyde won the School of Nursing and Midwifery Research Excellence Award. Details of these exciting projects are in this Report.

Another notable Centre highlight was that in June, Professor Lisa Amir was awarded a Member of the Order of Australia (AM) in the General Division, *for significant service to women's health, particularly breastfeeding research and support*. We are very proud to have Lisa Amir AM in our midst, and of this recognition of her outstanding clinical and research contributions.

We continue our robust publication record; in 2025 we had 85 journal publications; 4 commissioned research reports and 4 book chapters, with full details noted in this Report.

Our success and sustainability are under-pinned by research funding, and the lively partnerships and collaborations which make this possible. In 2025, JLC

researchers secured new or additional funding for the scale-up of Baggarrook Yurrongi, a culturally-tailored continuity of care midwifery model, across maternity services statewide from a Medical Research Future Fund grant, along with significant support from multiple philanthropic donors. The Fuchsia Study was supported through the Australian Nursing and Midwifery Foundation to investigate the wellbeing of the national midwifery workforce. A project on breastfeeding by cup for preterm infants was awarded a seed grant from the Human Milk Centre of Research Excellence; and several projects focussed on reproductive coercion and on equitable access to medical abortion for women living with a disability were funded by our School, and the Care Economy Research Institute at La Trobe. JLC researchers also partnered on an ARC Linkage for supporting safe working conditions for nurses.

Our community and industry dissemination continued strongly across 2025. Helen McLachlan, Della Forster and Stacey Hokke were invited to contribute to the South Australian Government's Select Committee's Inquiry into Stillbirth. Lisa Amir was among 2025's Highly Ranked Scholars - Lifetime, in top 0.05% in the speciality of breastfeeding, conferred by ScholarGPS. Robyn Matthews presented at ANMF and Australian College of Midwives (Victorian Branch); and Christine East delivered the inaugural Professorial Lecture at Australian College of Midwives.

In 2025, we said farewell to Dr Shannon Bennetts, a Senior Research Fellow, and member of JLC since 2014. Shannon's hard work and contributions to the Transition to Contemporary Parenthood, and the Work and Family Programs were instrumental in shaping their success. We thank Shannon for this excellent work. I am pleased to note that Shannon continues her research career and also remains as an Adjunct Senior Research Fellow at JLC.

In 2025, La Trobe was active in refreshing multiple strategies and priorities to lead us towards 2030, including the new Research and Innovation Strategy 2030; and the 2025-2030 Strategic Plan. Closer to home, the School of Nursing and Midwifery welcomed a new Dean, Professor Marie Gerdtz. I am excited about the leadership and vision captured by our University Strategies and our new Dean, and I am delighted to note that the work and vision of JLC continues to be highly valued in our refreshed context.

I would like to end by extending a warm thank you to my colleagues and Judith Lumley Centre members, with whom I work each week to progress our Research Agenda. Well done everyone on a(nother) extremely successful year, and I am looking forward to our work in 2026.

Professor Amanda Cooklin
Judith Lumley Centre Director

Research Programs

Breastfeeding



Program Lead: Professor Lisa Amir

The Centre is interested in all aspects of breastfeeding. Our staff and students have conducted randomised trials, cohort studies, cross-sectional studies, audits and qualitative studies in this area. Our projects include clinically focused studies on nipple and breast pain, infection and the use of medicines for breastfeeding women, as well as interventions aiming to increase the maintenance of breastfeeding in communities with low rates.

Mastitis continues to be a particular focus for the Centre. Results from our mixed method study looking at antibiotic prescribing for mastitis in breastfeeding women funded by Therapeutic Guidelines Ltd/RACGP Research Foundation were cited in the

recently released mastitis update in the *Therapeutic Guidelines: Antibiotic v17*. Analysis continues on breastmilk samples collected in Melbourne for the NHMRC-funded study led by A/Prof Wendy Ingman, one of our Adelaide collaborators. We celebrated publication of our international audit of management of mastitis and breast abscesses in five countries.

In November, two midwifery academics from Federal University of São Paulo Brazil, visited the Centre for a week. Dr Kelly Coca was a previous postdoc at JLC and she introduced Taniara de Souza Cunha, PhD candidate, who is studying nipple pain in lactation and infant latch.

Other international collaborations concluded with publications this year. I worked with Lester Jones, Adjunct Senior Research Fellow, on a project exploring breastfeeding pain in women in Singapore based on our Breastfeeding pain reasoning model. A study of postpartum women in Croatia during the pandemic, led by Dr Irena Zakarija-Grković (University of Split) had two publications in 2025 and we have a third paper ready to be submitted.

Highlights in 2025 included completing data collection for the NHMRC-funded multi-centred trial of domperidone for mothers of preterm infants with low milk production (SUMMIT) led by A/Prof Luke Grzeskowiak (Flinders University) and commencing recruitment for the NHMRC Partnership grant, *Pasteurised donor human milk supplementation for term babies*, led by A/Prof Jennifer Koplin (University of Queensland).

We were excited to see the impact of our breastfeeding in public project demonstrated by the publication of a Canadian report: *Breastfeeding-Friendly Public Spaces – A toolkit for local governments* based on our innovative design work with Jenny Donovan and Julie Rudner.

<https://breastfeedingchange.ca/systems-change-project/for-local-governments/>



Lisa (centre) with visiting academics Dr Kelly Coca & Taniara de Souza Cunha

Pasteurised donor human milk supplementation for term babies

Jennifer Koplin, University of Queensland; Vanessa Clifford, Murdoch Children's Research Institute; Lisa Amir, La Trobe University; Jane Fisher, Monash University; Kim Dalziel, University of Melbourne; Sarah Price, University of Melbourne; Anna Tottman, Royal Women's Hospital; Alice Rumbold, South Australian Health and Medical Research Institute; Kirsten Perrett, Murdoch Children's Research Institute; and Laura Klein, Australian Red Cross Lifeblood

This novel multi-centre randomised controlled trial will compare pasteurised donor human milk as supplemental nutrition for term infants of women with diabetes in pregnancy in the first four days of life, compared with standard care. The PRESENT (PasteuRisEd donor human milk SupplEmentatioN for Term babies) trial will commence at the Royal Women's Hospital as the first site. A qualitative sub-study will explore the maternal mental health impact of access to pasteurised donor human milk.

Funding: NHRMC Partnership Grant, 2023-2026, with Australian Red Cross Lifeblood; Ramsay Hospital Health Foundation

Status: recruitment commenced at Royal Women's Hospital in Dec 2025

Evaluation of the Milkdrop Breast Pump Cushion: a new device to help breastfeeding women using a breast pump

Rebecca Hyde, Lisa Amir, Anita Moorhead; with Lauren Indiveri-Clark, consumer

The Milkdrop breast pump cushion is a silicone device which attaches to the breast pump kit for electric breast pumps and aims to improve the comfort and experience of expressing for mothers. The study has three components: 1) women trialling the Milkdrop cushion for one week and providing feedback via two surveys and an expressing diary; 2) individual interviews with women from component one to further explore their experience of using the cushion; and 3) focus groups with lactation consultants to explore their thoughts on the product. Findings from this study will add to the limited evidence for the use of the Milkdrop cushion and may help to inform a larger trial.

Funding: Research Teams Seeding Grants: early- to mid-career researchers, School of Nursing & Midwifery, La Trobe University, 2021-22

Status: analysis in progress

Understanding community attitudes and identifying design solutions to increase women's comfort with breastfeeding in public

Lisa Amir, Stephanie Amir, Helene Johns; in collaboration with Julie Rudner, La Trobe University; Jenny Donovan, Inclusive Design; Miranda Buck, Australian Breastfeeding Association; Sinead Currie and Pat Hoddinott, University of Stirling, UK

This project explores design features and community attitudes that invite or deter breastfeeding in public. We conducted interviews and focus groups with breastfeeding mothers in three local government areas in 2016 (Rural City of Swan Hill, City of Greater Bendigo and City of Melbourne) and at the Royal Women's Hospital in 2018. We received input from over 80 mothers speaking five languages, as well as health professionals and council planning staff. Using these data, we developed design guidelines that outline how everyday shared spaces could become breastfeeding-friendly as well as the optimal design characteristics for dedicated breastfeeding spaces.

Funding: Building Healthy Communities Research Focus Area

Status: presented at local and international conferences; papers in preparation



Illustration from Jenny Donovan's report "Designing shared and public spaces to be breastfeeding friendly" (2019)

Understanding antibiotic prescribing for mastitis in breastfeeding women: a mixed method study

Lisa Amir, Sharinne Crawford, Méabh Cullinane; in collaboration with Luke Grzeskowiak, Flinders University

This project has two broad aims: 1) to describe how general practitioners (GPs) around Australia treat mastitis with antibiotics to see if they are following the antibiotic guidelines for best practice; 2) to understand how GPs make decisions about prescribing for breastfeeding women, and how they use guidelines. The first component uses the MedicinesInsight database (2011 to 2021) to extract data on antibiotics prescribed and investigations ordered for mastitis encounters in general practice. The second component is in-depth interviews with GPs.

Funding: Therapeutic Guidelines Ltd/RACGP Foundation
Status: data collection complete, presentation at local and international conferences; report submitted; two publications in *BMJ Open* and *BMC Primary Care* in 2024; impact: mastitis entry in *Therapeutic Guidelines: Antibiotic* updated in 2025

Improving management of mastitis in breastfeeding women: audit

Lisa Amir, La Trobe University; Irena Zakarija-Grkovic, Split University, Croatia; Kelly Coca, Universidade Federal de São Paulo, Brazil

The aim of this project is to improve the management of women with mastitis and breast abscesses during lactation, by focusing on care received in Emergency Departments to understand current practices. The project is being conducted at the Royal Women's Hospital, Melbourne, as well as hospital sites in Brazil, Croatia, Germany and Türkiye. An audit of medical records will examine antibiotic prescribing and use of investigations, which will be compared to best practice guidelines.

Funding: N/A
Status: results presented at the Lactation Consultants of Australian and New Zealand conference in Canberra and published in *J Hum Lact* in 2025

A paradigm shift in lactational mastitis

Lisa Amir; in collaboration with Wendy Ingman, University of Adelaide

This project explores the role of the innate immune system in the development of mastitis. This is the response of the host (animal/woman) that involves inflammation (including white blood cells) and the complement cascade system, rather than the more well-known adaptive immune system which includes antibody production. We will explore these inflammatory cells in human milk samples to improve our understanding of the role of inflammation in mastitis and explore the feasibility of using anti-inflammatory agents to prevent and treat mastitis.

The first component is a cohort study of multiparous women recruited at the Royal Women's Hospital to compare milk in women with and without a history of mastitis (ROBIN: Risk Of Breast Inflammation).

Funding: NHMRC Ideas Grant 2022-26
Status: data collection complete; samples sent to Adelaide; analysis ongoing



This is mastitis – Selfie by Remi Peers, Painting by Leanne Pearce

Child, family and community health



Program Lead: Professor Leesa Hooker

The Child, Family and Community Health research stream commenced in late 2019 and has grown to attract interest from government, industry and HDR scholars.

Our emerging team of Maternal and Child Health (MCH) clinician academics and researchers have established collaborative links with international public health nursing and health visitor academic researchers and services.

In Australia, we work with all tiers of government, including urban and rural MCH teams, and the non-government sector, to improve health services, client experiences and maternal, child and family health outcomes.

Victorian Association of Maternal and Child Health Nurses (VAMCHN): MCH Competency Standards project

Leesa Hooker, Bernice Boland and colleagues; in collaboration with the Victorian Association of Maternal and Child Health Nurses and the Australian Nursing and Midwifery Federation (Vic branch)

The Victorian Maternal and Child Health (MCH) professional standards were first developed in 1993. The current, fourth iteration of Standards are outdated and may not be meaningful to intended users. Current MCH nursing practice is dynamic, with significant policy change occurring since the existing standards were released in 2010. In addition, there is limited understanding on how the Standards are viewed and used. In conjunction with existing state government program guidelines, there is need for contemporary MCH nurse competency standards that can assist nurses to demonstrate continuing competence, frame professional development and improve clinical practice.

Using a parallel, mixed method design including document analysis, focus groups with nurse managers and an online MCH nurse questionnaire we aimed to explore views and experiences in using the current standards and to produce a contemporary document relevant and useful for all intended users.

Funding: Victorian Association of Maternal and Child Health Nurses (VAMCHN) and Australian Nursing and Midwifery Federation (ANMF)

Status: project completed; The Victorian MCH Nurse Professional Standards for Practice 2025 were published by VAMCHN

TRANSFORM: Transforming health systems to identify and respond to family violence – Maternal and Child Health services

Leesa Hooker, Catina Adams, Felicity Young; in collaboration with Kelsey Hegarty and the Safer Families CRE, University of Melbourne

This project extends extensive research conducted as part of the 2017-2023 NHMRC-funded Safer Families Centre of Research Excellence.

The TRANSFORM Project aims to develop and test a trauma and violence-informed 'model of care' for health services who are visited by people who may be experiencing family violence. The team have been focusing on Maternal and Child Health services and working with rural and metropolitan councils to improve the identification and support of women and children experiencing family violence. Systems change projects codesigned with local government included improved continuity of care between maternity services and MCH; health messaging scripts for family violence identification; and support.

The project was presented at the European Conference on Domestic Violence in 2023, NNVAWI conference 2024 and the MCaFHNA conference 2024.

<https://www.saferfamilies.org.au>

Funding: NHMRC Safer Families CRE via University of Melbourne

Status: project completed in 2025; manuscripts in draft and under review

The impact of family violence on children and parenting: Perspectives from women survivors of violence in Timor-Leste

Catina Adams, Kayli Wild, Guilhermina de Araujo, La Trobe University Centre for Human Security and Social Change, Leesa Hooker

Violence against women and children is extremely high in Timor-Leste, with 59% of women experiencing physical and/or sexual violence in their lifetime and 72% of both women and men experiencing violence as a child.

While the impact of violence on children has been well documented, most of this research has been conducted in high-income countries. Very little is known about the impact of abuse on children in Timor-Leste and in low- and middle-income countries generally.

This research examines:

- women's perspectives on how violence impacts their children's health and development;
- the power dynamics that influence access to support and
- how family violence affects women's ability to effectively parent their children.

The project was presented at the NNVAWI conference 2024, winning an award for the best nursing-centred practice presentation.

Funding: CI Wild received funding from an ARC DECRA Fellowship

Status: manuscripts under review

The caregiving experiences and support needs of neurodivergent parents of infants and children

Catina Adams, Leesa Hooker, Josie Barbaro, La Trobe University Olga Tennison Autism Research Centre, Susan Jack, McMaster University

Attention-deficit/Hyperactivity disorder (ADHD) is the most common neurodevelopmental disorder in children, with the prevalence in Australia up to 10% for children and up to 6% for adults. The prevalence of autism is estimated at up to 4% for adults and children.

Many neurodivergent individuals face challenges in navigating the complexities of the healthcare system. Two senate inquiries have reviewed support services for people with autism or ADHD. Both have highlighted the need to address healthcare practitioners' skills and knowledge to

improve support for neurodivergent people. Little is known about the caregiving experiences of neurodivergent parents and their parenting support needs.

This project uses a qualitative approach to learn from neurodivergent parents and Maternal and Child Health (MCH) nurses about what is needed to support neurodivergent parents of infants and children. By valuing and including the unique experiences of neurodivergent individuals, we can design a more inclusive, equitable, and client-centred MCH service.

Funding: Churchill Impact funding and La Trobe University, School of Nursing and Midwifery seed grant

Status: consumer panel recruited; focus groups conducted and data analysis underway; systematic review under peer review; presentation to the Australian Doula Conference, Melbourne, October 2025; conference abstract accepted for the INSAR Conference, Prague April 2026

CORNELIA: A housing intervention for pregnant women experiencing homelessness

Leesa Hooker, Jacqui Theobald, La Trobe University Rural Health School; in collaboration with Juliet Watson and Sue Ellen Murray, RMIT University

The Cornelia project aims to evaluate the impact of a supportive housing intervention for pregnant and homeless women. Using mixed methods, this project involves completing qualitative interviews with women at three different stages of the intervention (on recent arrival, on exit and six months post). Focus groups will be conducted with Cornelia staff and senior managers of involved organisations (Launch Housing, Housing First). We will also survey women participants at baseline, post and six months follow-up. RWH routine data will be collected and analysed to assess obstetric and neonatal outcomes between women using the Cornelia (case) service and all women using the RWH services (control) over a two-year period.

Funding: Royal Women's Hospital

Status: data collection complete; final report completed; manuscripts in draft

Maternal and Child Health Nurses' and consumers' experience of father and non-birthing parent inclusive practice in rural and urban MCH settings in Victoria

Kristina Edvardsson, Catina Adams, Bijaya Pokharel, Anne O'Neill, Leesa Hooker, Lael Ridgway, Christine East, Richard Gray, La Trobe University School of Nursing and Midwifery

Maternal and newborn health services have traditionally been directed towards mothers, however there is a growing body of research demonstrating the benefits of father/non-birthing parent engagement in maternal and newborn health, with benefits to the mothers, newborns and parents themselves. Interventions to engage fathers/non-birthing parents have also shown benefits in terms of strengthening family relationships, and support bonding between the non-birthing parents and the child.

The Victorian Maternal and Child Health (MCH) service provides population-based preventive health care for families with children from birth to school age through the promotion of health and development, early detection, and intervention for physical, emotional and social health issues.

This study sets out to explore MCH nurses' and fathers/non-birthing parents' perspectives and experiences of father/non-birthing parent inclusive practice in urban and rural MCH settings in Victoria, Australia, and to identify suitable strategies to improve inclusion of fathers/non-birthing parents in the MCH service. The team have conducted interviews with fathers/non-birth parents, and MCH nurses, and undertaken a systematic review to synthesise the global literature on father and non-birth parent engagement in MCH settings.

Funding: La Trobe University, School of Nursing and Midwifery seed grant

Status: systematic review published; outcomes manuscript under review

Family Centred Care research in paediatrics – a systematic quantitative review

Ashleigh Butler, Lael Ridgway, Stacey Hokke, Kristina Edvardsson, Lisa McKenna, Bev Copnell, Christine East, Catina Adams, Ellen Henderson, Ulster University, UK

A 'State of the Science' look at Family Centred Care (FCC) research: How much research is there from the past 10 or so years on FCC? What discipline is it in (i.e., medical, nursing, allied health etc); what specialty areas (i.e., NICU, PICU, ED, general paediatrics, oncology, palliative care etc.); what methodologies are used; what countries is the research conducted in; what types of participants are included (e.g., are they looking at perspectives of parents, children, health care practitioners?). The aim is to look for where the research is clustered and where it is lacking, in order to provide recommendations for future research.

Funding: N/A

Status: completed; manuscript published 2025

The PICU Siblings Study: Supporting the inclusion of siblings when a child is critically ill

Ashleigh Butler, Jessica Appleyard (PhD candidate), The Royal Children's Hospital, Monash Children's Hospital, Sydney Children's Hospital Randwick, Queensland Children's Hospital, Gold Coast University Hospital, Perth Children's Hospital

Each year, around 13,000 children are admitted to a Paediatric Intensive Care Unit (PICU) in Australia due to life-threatening illness or injury. This critical illness and subsequent admission to PICU is often a major crisis for the whole family, with lasting social and emotional impacts for all family members. This program of research focuses on understanding this experience for one group of vital yet largely overlooked family members – the siblings.

Two-thirds of children admitted to PICU have at least one sibling. Yet, despite commitments to family-centred care, very little is known about how siblings are included during this time, how they experience their brother or sister's critical illness, or what kinds of support they need. Parents, while central to family care, often feel overwhelmed and unprepared to support their other children during a PICU admission—especially when faced with complex medical information, grief, and uncertainty.

The PICU siblings study is a co-designed multi-method program of research that aims to understand the experiences and needs of siblings of critically ill children,

and the families and healthcare staff who support them. The study involves 5 interconnected streams:

- Literature reviews (Systematic, scoping, concept analysis)
- Point prevalence pilot study of sibling inclusion in PICU
- Document analysis of PICU visitation and family centred care policy
- Observational study of sibling inclusion
- Multi-stakeholder interview study of siblings, families, and healthcare staff

The study is currently underway, and early findings are expected to be available in late 2026. The overall goal is to co-produce, in collaboration with the Australian College of Critical Care Nurses and the Australian and New Zealand Intensive Care Society, a set of national guidelines for sibling inclusion and support, and to develop staff education bundles, support pathways, parent and family information resources, and sibling support packs.

Funding: ARC DECRA Fellowship

Status: in progress; 2 papers published (Systematic review and concept analysis, both in *Intensive and Critical Care Nursing*), 1 expert commentary (*Intensive and Critical Care Nursing*, 2024), 1 paper under review, data collection underway

Baby Makes 3 – undergraduate nursing student module evaluation

Catina Adams, Kristina Edvardsson, Julian Morgan (HealthAbility), Louisa Mitchell (HealthAbility)

Research Project with La Trobe Students – to test the Baby Makes 3 online module with around 600 La Trobe students. The module is an online, self-paced training module, designed to support gender equality in perinatal care. The research will evaluate the e-learning modules and assess participants' attitudes, knowledge, and impact before and after completing the online module.

Funding: N/A

Status: ethics application being drafted

Victorian MCH Nurse Student Employment model evaluation

Catina Adams, Karen Gates (SaferCare)

To address extreme workforce shortages, a time-limited workforce initiative was developed to employ MCH nursing students with a limited scope of practice to undertake MCH program activities from birth to six weeks. The study evaluated the program adoption, implementation and impact of the Victorian Maternal and Child Health Nurse Student employment Model. The evaluation used a retrospective, post-implementation quasi-experimental mixed methods design.

Three surveys were developed with quantitative and qualitative questions and issued to students, student supports, and service providers of the program to assess the model's value, program principles' adoption, implementation constraints and opportunities, the model's acceptability by staff and the model's impact (increased workforce capacity and service delivery). Focus groups with selected participants were also held to gain a deeper understanding of implementation constraints and opportunities.

Funding: N/A

Status: completed; reports and manuscripts being drafted

Mother and infant health and maternity services

Program Leads: Professor Della Forster
Professor Helen McLachlan
Professor Christine East



The Judith Lumley Centre (JLC) has a long history of researching mother and infant health and wellbeing, models of maternity care as well as the maternity care workforce. Our aim is to make sure the best possible outcomes are achieved for women, their infants, and the maternity care workforce.

Some of our studies focus on specific groups such as women with disabilities, those having a First Nations baby, or who have migrated to Australia. We are undertaking many state-wide and national studies in this area, mostly with a focus on describing and improving current practice.

A 2025 highlight was receipt of a large Medical Research Future Fund (MRFF) grant, led by Della Forster, to implement and expand culturally safe continuity of care for women having a First Nations baby in Victoria.

Prevention of adverse child behavioural development following maternal depression in pregnancy: Beating the blues before birth

Christine East; in collaboration with Jeanette Milgrom, University of Melbourne; Helen Skouteris, Monash University; Megan Galbally, Murdoch University; Vivette Glover, Imperial College London, UK

There is substantial evidence that maternal depression during pregnancy can affect fetal and child neurodevelopment. Children of women depressed in pregnancy are likely to have an increased risk of behavioural problems such as anxiety, depression and attention deficit/ hyperactivity, with effects on mental health lasting at least to adolescence. This randomised controlled trial compares medium-term change in child outcomes following cognitive behavioural treatment of depression in pregnancy or usual care. It has transitioned to being known as “Beating the Blues Before Birth” and continues to recruit.

Funding: NHMRC Project Grant APP1143448

Status: in progress

Exploring the impact of caseload midwifery on preterm birth among socially disadvantaged women (the MAGNOLIA trial)

Helen McLachlan, Della Forster, Michelle Newton, Touran Shafiei, Fiona McLardie-Hore, Sophia Holmlund, Clair Bennett, Rebecca Hyde, Amanda Rehayem, Amy Volich, Stacey Hokke, Robyn Matthews, Ann Hallett; in collaboration with Méabh Cullinane, Peter MacCallum Cancer Centre; Stefan Kane, University of Melbourne; Jane Sandall, King’s College London, UK; Rocco Cuzzilla, Royal Women’s Hospital; Emily Callander, Monash University; Cattram Nguyen, Murdoch Children’s Research Institute; Michael Kingsley, University of Auckland, New Zealand; Mia Ahlberg, Karolinska Institute, Sweden

In Australia, approximately 27,000 babies are born preterm each year. Preterm birth is a key indicator of poorer short and long-term health. Poor birth outcomes such as preterm birth are substantially more common for socially disadvantaged populations.

The MAGNOLIA trial is investigating whether receiving continuity of care from one midwife through pregnancy, birth and after-birth (known as *caseload midwifery*) reduces preterm birth among socially disadvantaged women. It will also investigate women’s views and satisfaction with care provision; midwives’ experiences of providing care; stakeholder views on implementation of the caseload model; and conduct a cost-effectiveness analysis of the model.

We are recruiting 1,894 women to the MAGNOLIA trial from hospital sites in metropolitan Melbourne. Approximately half of these women will be randomly allocated to receive caseload midwifery care throughout their pregnancy and birth (the intervention), while the other half will be allocated to choose from all other standard care options available to them at that trial site.

A nested sub-study will be conducted alongside the trial at the Royal Women's Hospital to explore whether the caseload model reduces the physiological stress response in women allocated to that trial arm.

Funding: NHMRC Medical Research Future Fund (MRFF) 2019 Preventive and Public Health Research Grant
Status: recruitment and data collection ongoing

The GEM Study: Exploring the impact of Group prEgnancy Midwife-led care on caesarean section rates and infant health: a multi-site randomised controlled trial

Della Forster, Helen McLachlan, Touran Shafiei, Robyn Matthews, Rebecca Hyde; in collaboration with Stefan Kane, Sue Jacobs, Tram Nguyen, Jenny Ryan and Trish Ryan, Royal Women's Hospital; Colleen White, Peninsula Health; Jackie Sacco, Mercy Hospital for Women; Kate Brewer, Barwon Health; Emily Callander, Monash University; Fleur D'Altera, consumer

Group-based pregnancy care is undertaken in groups of 6–10 women for 6–8 sessions with two midwives and includes education and physical pregnancy checks. Evidence regarding potential benefit or harm is inconclusive, with some suggestion the model is associated with fewer preterm births. A Cochrane review concludes more evidence is needed.

We are conducting a two-arm, multi-site randomised controlled trial, at several maternity hospitals in Melbourne. We will recruit 3,083 women of low- to moderate-obstetric risk, having their first baby, to compare the effectiveness of midwife-led group pregnancy care (Group Care) with standard individual based pregnancy care (Usual Care). The primary objective is to evaluate the impact of Group Care on caesarean section rates in primiparous women compared with usual care; with the main secondary outcome evaluating the impact of Group Care on women having a 'healthy' infant. We are collecting data on women's clinical outcomes and views and experiences; views and experiences of support people; views and experiences of midwives working in Group Care; and an economic evaluation of Group Care.

Funding: Medical Research Future Fund (MRFF) – Preventative and Public Health Research (PPHR) Initiative - 2020 Maternal First 2000 Days and Childhood Health.
Status: recruitment and data collection ongoing

The FUCHSIA Cohort study: FUTURE proofing the midwifery workforce in Victoria: a statewide longitudinal Cohort study exploring Health, wellbeing and SustainAbility

Della Forster, Robyn Matthews, Rebecca Hyde, Touran Shafiei, Michelle Newton, Helen McLachlan, Amanda Cooklin, Charlie Benzie, Emily Callander, Monash University and Kathryn Brundell, La Trobe University School of Nursing and Midwifery

Midwives are integral for ensuring high-quality care and positive outcomes for women and newborns globally. However, without acceptable staffing levels and skill mix there is a potential for a reduction in the quality of care. There are significant problems with retention and equitable distribution of midwives across rural, regional, and metropolitan areas in Australia. There is also local and international evidence the midwifery profession is facing significant challenges, e.g., high rates of burnout and mental health issues, job dissatisfaction, and an ageing workforce that is predominantly part-time. Very few studies of Australian midwives have been conducted longitudinally so most evidence is based on cross-sectional studies, which may over-emphasise the causal link between workforce challenges, health outcomes and intention to leave the profession.

We have conducted a longitudinal cohort study using a group of midwifery students and midwives who agreed to participate from the FUCHSIA study in 2021. We have conducted annual surveys of this group at five timepoints (2021(baseline) – 2025 (final)). A total of 382 participants completed at least two surveys (or more) during the cohort study.

We aim to describe the career trajectories and wellbeing of midwifery students and midwives over a five-year period and explore the risk or preventative factors that affect these and what that means for the sustainability of the midwifery profession.

Funding: Australian Nursing and Midwifery Federation – Victorian branch

Status: data collection complete for 2022, 2023, 2024 and 2025 surveys; analyses and manuscript preparation of findings underway

Induction of labour and respectful maternity care

Melissa Buultjens, La Trobe University School of Psychology and Public Health, Christine East, Jennifer Fielding, Royal Women's Hospital, Amy Dawes, Australian Birth Trauma Australia, Jasmine Love, Shannon Bennetts, Michelle White, La Trobe University School of Nursing and Midwifery, Therese Hungerford-Morgan, Georgette Costa, Andy Ackerly, Mercy Health

Rates of induction of labour (IOL) have increased substantially in Australia over the past two decades with around one in three women undergoing an induced labour.

Respectful maternity care inspires us to ensure that women are being provided with information that is relevant, accurate, timely and culturally appropriate when they consider induction of labour.

We have surveyed women nation wide to ascertain the information they want to receive and actually receive. We found that many respondents did not recall being aware that they had a choice, an adequate understanding of the risks and benefits, with around half feeling that they were pressured into making a decision.

We plan to use these findings to develop a decision aid that incorporates the principles of respectful maternity care.

Funding: Mercy Health Academic Research; Mercy La Trobe ARCH

Status: manuscript submitted

Your views matter: exploring the experiences, satisfaction and needs of parents of infants admitted to Newborn Services at the Royal Women's Hospital

Rebecca Hyde, Della Forster, Touran Shafiei, Anita Moorhead, Helen McLachlan; in collaboration with Sue Jacobs and Laura Bignell, Royal Women's Hospital; Silvana Favorito, consumer

Consumer satisfaction is now a fundamental aspect of evaluating the delivery of health care services in today's society. Traditionally, long term outcomes of neonatal intensive care were measured mainly in relation to clinical indicators, but consumer satisfaction is increasingly becoming a quality of care indicator for paediatric and neonatal units. Past explorations of families' experiences of neonatal care at the Women's have been limited and have not included all families whose babies have been admitted to the neonatal intensive or special care (NISC).

The aim of *Your Views Matter* was to explore the satisfaction, experiences and needs of parents whose babies had been admitted to NISC at the Women's, in order to inform the way future care is provided.

A cross-sectional survey was undertaken. Families who had a baby or babies admitted to NISC were assessed for eligibility (admitted \geq 4 hours and discharged from NISC by 6 months of age).

Eligible families were sent a survey in the mail followed by three reminders. Families who had experienced the death of their baby during their admission were also included in the study and were sent a more tailored invitation to participate, followed by a modified survey if they indicated they would like to participate. A total of 1,014 surveys (or invitations to participate) were sent (990 to non-bereaved families and 24 to bereaved families). Of these, 318 surveys were returned – 32% (314/990) of non-bereaved families, and 57% (4/7) of bereaved families who indicated they wanted to participate.

Families had high levels of satisfaction with care, however level of satisfaction differed depending on gestation of baby at birth, with lower infant gestational age associated with higher parental satisfaction.

Funding: The Royal Women's Hospital Foundation
Status: data collection complete; analyses and manuscript preparation underway

Midwives' views and experiences of supporting women to manage labour pain

Laura Whitburn, Christine East, Lester Jones; in collaboration with Kate Dawson, Australian Catholic University; Elizabeth Newnham, Flinders University

This national survey study aimed to explore midwives' experiences of supporting women to manage pain during childbirth. It focused on the midwives' attitudes towards labour pain, and the communication (verbal and non-verbal) and strategies that midwives use to support birthing women. A total of 557 midwives across Australia participated in the survey, and 17 completed an interview. Findings relating to midwives' ways of working and associated workplace barriers and facilitators were published in 2025 in *Sexual and Reproductive Healthcare*. Findings relating to the effects of communication used by caregivers on women's birth experiences were presented at the 2025 Perinatal Society of Australia and New Zealand congress.

Funding: N/A

Status: publication, further manuscript preparation; dissemination

Retrospective cohort study of postpartum haemorrhage and induction of labour in Victoria, Australia, 2018-2022.

Christine East, Melissa Buultjens; in collaboration with Mary-Ann Davey, Monash University; Rangi de Silva, The University of Melbourne

Reported rates of severe postpartum haemorrhage (PPH) have risen to around 3% in Victorian public hospitals. In this study, we are looking at modifiable and non-modifiable risk factors for this obstetric emergency among women giving birth in Victoria. This research builds on findings from our recent review of 10 years of recommendations from Victoria's Consultative Council on Obstetric and Paediatric Mortality and Morbidity, including those for preventing and managing PPH.

Induction of labour (IOL) involves the use of medications or other methods to bring on, that is 'induce' uterine contractions, which leads to childbirth. It is a commonly and increasingly performed obstetric procedure. We will examine five years of detail from Victoria in order to provide women with appropriate information about likely outcomes when their labours have been induced, including method of giving birth (vaginal, caesarean), PPH and having their baby admitted to the Special Care Nursery or Neonatal Intensive Care Nursery.

Funding: N/A

Status: data acquired; analyses undertaken; manuscripts in preparation

The TULIP study: Telehealth Use In Pregnancy – A pilot randomised controlled trial

Della Forster, Robyn Matthews, Rebecca Hyde, Touran Shafiei, Helen McLachlan, Christine East; in collaboration with Stefan Kane and Jeanie Cheong, Royal Women's Hospital; Sue Walker, Lisa Hui and Andrea Dodd, Mercy Hospital for Women; and Emily Callander, Monash University

Pregnancy care has traditionally been delivered through face-to-face visits, however as a result of the COVID-19 pandemic, there was a rapid move to having pregnancy care via telehealth. This rapid change led to concerns about what this meant for clinical outcomes and also consumer experiences. Despite these concerns, many health services plan to continue to offer telehealth for pregnancy care in some way.

We conducted a two-site, pilot randomised controlled study with 137 pregnant women, comparing all face-to-face pregnancy care with combined telehealth and face-

to-face care. Overall, 53% of women from both trial arms reported that they would like some form of telehealth as part of their care for future pregnancies. This study found that women and clinicians were generally positive about telehealth, but some concerns highlighted by women and clinicians, notably related to safety and the standard of care. The findings found some benefits of face-to-face care over combined care, however an adequately powered RCT is needed to determine if these differences significantly impact women's and infants' outcomes. Funding has now been obtained for a larger RCT to test the use of telehealth for routine pregnancy care and assess the safety, efficacy, cost implications, and importantly, explore women's experiences.

Funding: Norman Beischer Medical Research Foundation Innovation Grant, 2021

Status: data analysis and manuscript preparation underway

Telehealth Use in pregnancy in Lieu of In Person (TULIP): A non-inferiority randomised controlled trial

Della Forster, Touran Shafiei, Helen McLachlan, Rebecca Hyde, Laura Whitburn, Robyn Matthews, Charlie Benzie, Clair Bennett, Stacey Hokke, Leesa Hooker; in collaboration with Stefan Kane and Trish Ryan, the Royal Women's Hospital; Jeannie Cheong and Catram Nguyen, MCRI; Emily Callander, Monash University; Sarah Wise, UTS; Charlotte McArthur, Kathryn Floros and Marielle Babineau, consumers.

During the COVID-19 pandemic, maternity services rapidly adopted telehealth for routine pregnancy care. While many services plan to continue offering telehealth, there is limited evidence about its safety, effectiveness, and impact on women's experiences and health outcomes when used in place of face-to-face care.

The TULIP study is investigating whether providing routine pregnancy care using a combination of video-based telehealth and face-to-face visits is no worse than all face-to-face care for women with low to moderate obstetric risk. The study will also examine women's experiences and satisfaction with care, clinicians' and stakeholders' views on telehealth, patterns of health service use, and cost-effectiveness.

We are recruiting 3,496 women receiving public maternity care at a tertiary maternity hospital in Melbourne. Half of participants will be randomly allocated to receive all pregnancy visits face-to-face (usual care), while the other half will enable women to have a minimum of one and up to five routine pregnancy visits via video-based telehealth, with remaining visits conducted in person.

The study will compare maternal and neonatal outcomes between groups, as well as psychosocial outcomes including mental health, fear of childbirth, disclosure of family violence, breastfeeding outcomes, and overall experience of care. The project includes strong consumer involvement and governance arrangements to ensure safety and quality throughout the study.

Funding: NHMRC 2023 TCR Ensuring the Quality and Safety of Telehealth

Status: preparing for project to commence in 2026

Evaluating the Neonatal Postnatal Support Nurse pilot program on a postnatal ward at Werribee Mercy Hospital

Christine East, Natalie Stevens, Jennifer McLeod, Melanie Miller, Hooria Nasserri for Werribee Mercy Hospital

The Victorian Government is piloting a new model of care, known as the Neonatal Postnatal Support Nurse (NPSN) program at Werribee Mercy Hospital, Joan Kirner Women's and Children's Hospital and Barwon Health. This model gives registered nurses the opportunity to gain employment on postnatal wards in the delivery of maternal and newborn care.

The NPSNs are supernumerary to current midwifery staff allocations at three selected Victorian maternity services and will be responsible for the provision of maternal and/or newborn care.

The pilot requires an evaluation of the program to examine work satisfaction and retention of midwifery staff and NPSNs, and the satisfaction of women cared for under this new model. We are collaborating with a similar evaluation led by Deakin University and Joan Kirner Women's and Children's Hospital and Barwon Health.

Funding: Victorian Government

Status: ongoing surveys of women; surveys of NPSNs and Midwives at baseline, 6- and 12-months

The mABLE Study (Exploring the needs and outcomes of pregnant women with disabilities)

Della Forster, Charlie Benzie, Helen McLachlan and Stacey Hokke

Women with disabilities represent a significant proportion of the maternity population, yet disability identification and documentation within maternity

services remains inconsistent. Limited routine data exist to describe the prevalence, care experiences, and outcomes of women with disabilities during pregnancy, birth, and the postnatal period. This evaluation aimed to examine disability identification practices, women's experiences of maternity care, and clinician perspectives within a large tertiary maternity service.

The evaluation drew on multiple data sources, including analysis of routinely collected maternity data, survey responses from women who self-identified as having a disability, and feedback from clinicians involved in their care. Findings demonstrated that disability prevalence within maternity services is highly sensitive to the wording and placement of disability identification questions. Women reported that they were comfortable being asked about disability status when questions were clear, respectful, and linked to care planning.

Women who identified as having a disability were generally satisfied with the clinical aspects of their maternity care. However, key areas for improvement were identified, including communication, continuity of care, proactive recognition of disability-related needs, and reduced reliance on women to repeatedly self-advocate across care settings. Clinicians similarly reported challenges related to unclear documentation, limited guidance on how disability information should inform care, and variable confidence in supporting women with diverse disabilities.

Analysis of perinatal outcomes indicated that women with disabilities were more likely to experience complex pregnancies and higher rates of intervention, reinforcing the importance of early identification and coordinated, individualised models of care. The evaluation highlighted that while specialised services provide critical support for some women, system-wide improvements are required to ensure equitable, consistent, and disability-inclusive maternity care.

Key recommendations arising from the evaluation include improving disability identification processes, enhanced visibility of disability information within electronic medical records, targeted workforce education, and models of care that promote continuity and coordinated support. These findings provide an evidence base to inform service redesign, policy development, and future research aimed at improving maternity care for women with disabilities.

Funding: The Victorian Nurses and Midwives Trust (VNMT)

Status: evaluation completed; recommendations disseminated and informing service improvement initiatives; manuscripts in preparation

Implementing and expanding culturally tailored continuity of care for women having a First Nations baby in Victoria: A co-design approach to improve outcomes for mothers and babies

Della Forster, Helen McLachlan, Julie Andrews, Fiona McLardie-Hore, Touran Shafiei, Teagan Treacher, Robyn Matthews, Stacey Hokke; in collaboration with Aunty Gina Bundle; Res McCalman, Charles Darwin University; Tanisha Springall, Griffith University; Storm Henry and Stefan Kane, the Royal Women's Hospital; Danielle Cameron, Peninsula Health; and Kelsey Youngblutt, consumer

First Nations mothers and babies experience an unacceptable gap in health outcomes compared with non-First Nations families, with lifelong impacts. Culturally tailored continuity of midwife care, where women having a First Nations baby are offered access to a known midwife who cares for them throughout pregnancy, birth and postpartum, improves outcomes, but access is very limited.

From 2017-2020, a model of culturally tailored continuity of care (Baggarrook Yurrongi) was successfully implemented at three maternity hospitals in Melbourne. Building on the Baggarrook Yurrongi study, this 5-year multi-site research translation project aims to implement and evaluate a similar model at five new health services across regional and metropolitan Victoria - Bendigo Health, Eastern Health (Box Hill Hospital and The Angliss Hospital), Mildura Base Public Hospital and Peninsula Health (MRFF funding). Philanthropic funding will support further roll-out of the model at other sites across Victoria.

We will support partner organisations to work closely with local First Nations community and health services to co-design, implement and proactively offer a culturally tailored caseload model to all women having a First Nations baby. We will undertake a mixed methods evaluation of model implementation, key clinical and psychological outcomes, impact on out of home care, and financial costs; and optimise model sustainability at each site to develop a model for roll out across the state.

This project is featured in La Trobe University's *Make Your Impact* philanthropic campaign.

Funding: NHMRC Medical Research Future Fund (MRFF) 2024 Maternal Health and Healthy Lifestyles grant; philanthropic support

Status: in progress, project planning and community consultation underway at each site

Baggarrook Yurrongi: Improving the health of Aboriginal mothers and babies through continuity of midwife care: A multi methods translational study

Helen McLachlan, Della Forster, Michelle Newton, Catherine Chamberlain, Fiona McLardie-Hore, Res McCalman; in collaboration with Sue Kildea, Charles Darwin University; Jane Freemantle, Ngaree Blow, Karyn Ferguson and Jeremy Oats, University of Melbourne; Jennifer Brown, Deakin University; Georgia Dickinson, Victorian Aboriginal Community Controlled Health Organisation; Marika Jackomos, Mercy Hospital for Women; Sue Jacobs and Jenny Ryan, the Royal Women's Hospital; Susan Donath, Murdoch Children's Research Institute; Lisa Gold, Deakin University

The Baggarrook Yurrongi (Woiwurrung language of the Wurundjeri people) meaning 'Woman's Journey' and the Nuraagh Manma Buliana (Yorta Yorta language meaning 'All of us working together in pregnancy') was a five-year NHMRC funded Partnership Project with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), the Royal Women's Hospital, the Mercy Hospital for Women, Sunshine Hospital (Joan Kirner Women's and Children's) and Goulburn Valley Health. The primary aim of the project was to explore the capacity of maternity services to implement a new, culturally safe model of care for Aboriginal and/or Torres Strait Islander women (or women having an Aboriginal and/or Torres Strait Islander baby). Women were proactively offered 'caseload' midwifery: they received continuity of care from a primary midwife through pregnancy, labour, birth and postpartum.



Image La Trobe University

The study also explored the effect of the model on perinatal outcomes for Aboriginal women and their infants, women's experiences of care as well as midwives' views and experiences. The model was introduced at the Royal Women's Hospital in March 2017, Sunshine Hospital in October 2017, and the Mercy Hospital in April 2018, and is embedded at the three sites

In 2022 we published our primary study outcomes of model implementation in the Lancet journal's *EClinical Medicine*, reporting a 90% uptake of the model and a 21-fold increase in First Nations women accessing the model. In 2023 we reported on breastfeeding outcomes, midwives' satisfaction, and accurate identification and documentation of women having a First Nations baby.

A highlight was publication of an invited commentary in the Lancet journal *EClinical Medicine* (2023) which called for upscaling Baggarrook models.

Analysis of clinical outcomes are finalised and manuscript submitted. Further highlights of the project have been the receipt of multiple awards (e.g. Engagement Australia award, Victorian Public Health award) and being a finalist in the Universities Australia 'Shaping Australia awards' which recognises an individual or team's work, research or otherwise that has changed or has the potential to change the lives of Australians for the better.

Funding: NHMRC Partnership Grant and funding from five partner organisations

Status: in progress; main findings published; 10 papers published, others in draft

Perinatal mental health

Program Lead: Associate Professor Touran Shafiei



Perinatal mental illness is a major public health issue, with potential serious health consequences for the woman, her infant and family members. In Australia, up to one in five women (more than 60,000 women) experience depression and/or anxiety per year, posing a significant health and economic burden.

This research program aims to build evidence about the critical factors around maternal emotional wellbeing and then to design, test and implement evidence-based interventions to improve maternal mental health.

We are currently undertaking a large NHMRC-funded randomised controlled trial (DAISY) which aims to evaluate the impact of proactive telephone peer support on preventing postnatal depression and anxiety.

DAISY: preventing postnatal depression in new mothers using telephone peer support – a randomised controlled trial

Della Forster, Helen McLachlan, Touran Shafiei, Jan Nicholson, Jessica McBurney, Heather Grimes, Catina Adams; in collaboration with Alan Shiell, La Trobe University School of Psychology and Public Health; Cindy-Lee Dennis, University of Toronto; Tram Nguyen, Royal Women's Hospital; Cattram Nguyen, Murdoch Children's Research Institute; Jane Fisher, Monash University; in collaboration with Hume and Wyndham Local Government Areas (LGAs), Royal Women's Hospital and PANDA (Perinatal Anxiety and Depression Australia)

In Australia, 17% of new mothers experience postnatal depression (PND), with potential serious health consequences for the woman, her infant and family members. However, one in three Victorian new mothers experiencing PND do not seek help. The DAISY study is a multi-site, two-arm randomised controlled trial (RCT) matching peer volunteer mothers with a lived experience of postnatal depression and/or anxiety (from which they have recovered) with new mothers at increased risk of postnatal depression or anxiety. New mothers, who are at slightly higher risk than average of developing depression and/or anxiety, are recruited from the postnatal units at the Women's. Mothers randomly allocated to peer support group receive proactive telephone-based support from a peer volunteer up until six months postpartum, and both groups receive all the usual care and supports available as part of routine care.

The aim of DAISY is to test whether proactive peer support by telephone decreases the risk of postnatal

depression at six months postpartum. A range of other health outcomes are also measured, along with exploring the cost-effectiveness of such a service. We will recruit 1,060 women to the study and aim to train about 200 peer volunteer mothers to provide the telephone support.

Funding: NHMRC Project Grant GNT1141284
Status: data collection completed; data analysis in progress; papers in preparation



Pexels, Laura Garcia

IVY: investigating an online community of support for emotional health in pregnancy

Della Forster, Touran Shafiei, Helen McLachlan, Laura Biggs, Sara Couch; in collaboration with Terri Smith, Cathy Wyatt, PANDA; Greg Wadley, University of Melbourne

This study aimed to develop and test the feasibility, acceptability and functionality of a moderated online peer support App to be used on smartphones, tablets or computers, to reduce perinatal depression and anxiety in women at increased risk. The project has been undertaken in collaboration with Australia's peak consumer perinatal mental health organisation PANDA – Perinatal Anxiety & Depression Australia.

An iterative user-centred approach was used to design and develop the App, via a series of interviews, focus groups and design workshops with consumers, stakeholders and software designers. We then conducted a pilot randomised controlled trial (RCT) of the App with 100 pregnant women to test potential impact and engagement as well as to inform a large adequately powered RCT.

Funding: Norman Beischer Medical Research Foundation; Building Healthy Communities RFA, La Trobe University

Status: app developed; final report submitted to the funding body; data analysis in progress; papers in preparation

Identifying the perinatal mental health needs of immigrant and refugee women

Touran Shafiei, Margaret Flood, Jessica McBurney; in partnership with Multicultural Centre for Women's Health

Compared to native-born women, immigrant and refugee women are more likely to experience perinatal mental illness, less likely to seek help for their emotional difficulties and less likely to use perinatal mental health services. We conducted a study of perinatal mental health needs of immigrant and refugee women living in the North Division of Victoria, to gain a better understanding of the local barriers and facilitators to immigrant women's access to health services during the perinatal period. The study had three components:

1. A literature review of perinatal mental health, its prevalence, impacts and risk factors, with a focus on the experiences of immigrant and refugee women and their health seeking;
2. 'Response mapping' to identify the range of current perinatal support services and related activities in the North Division and current perinatal support programs and services which are specifically for immigrant and refugee women; and
3. In-depth interviews with service providers about the gaps and facilitators of providing mental health services to immigrant women during pregnancy and after birth.

Funding: Department of Health, Victoria

Status: final report submitted to the funding body; paper in preparation

Sexual and reproductive health

**Program Leads: Associate Professor Kristina Edvardsson
Emeritus Professor Angela Taft**



Sexual and reproductive health is a human right and planned parenthood confers significant health benefits for women and their families. This program of work addresses sexual and reproductive health and the desire by women and pregnancy-capable people, and their families to effectively control their fertility and maximise their opportunities for a planned and wanted pregnancy and birth.

We use both epidemiological and ethnographic methods to investigate the prevalence of, attitudes to, and use of contraception, emergency contraception, the measurement of and extent of reproductive coercion and safe and unsafe pregnancy termination in Australia and other countries (e.g. Timor-Leste and Ghana). We aim to improve the access, equity, effectiveness, quality and affordability of sexual and reproductive health services.

In 2025 the team had several highlights:

- Prof Kristina Edvardsson, Emeritus Prof Angela Taft, and three of the Centre's PhD students (D. LaGrappe, G. Edwards, and B. Pike) engaged in a range of activities delivered through the NHMRC Centre of Research Excellence (CRE) in Women's Sexual and Reproductive Health in Primary Care (SPHERE), led by Prof Danielle Mazza at Monash University (grant period 2024–2028).
- K. Edvardsson participated in a four-day SPHERE collaborative meeting at the Monash University Prato Centre in Prato, Italy, from 30 June to 3 July 2025. Members of the CRE, including senior and early-career researchers, presented their work and discussed collaborative opportunities and future project ideas.
- The team published a data-linkage study in the *International Journal of Epidemiology* on *Time trends and characteristics associated with abortion method used by young Australian women* (Edvardsson et al.)
- Three PhD candidates had their papers accepted and published: **Genevieve Edwards** led a systematic review on *The Influence of Rurality on Women's Decision Making and Pregnancy Choices Following an Unintended Pregnancy*; **Brianna Pike** led a systematic review on *How Reproductive Coercion and Abuse Shapes Survivors' Safety and Life Circumstances*; **Desiree LaGrappe** led a paper on the *Development of a comprehensive measure of reproductive coercion and abuse for global use: A Delphi study* (see Publications).
- Desiree LaGrappe was nominated by the Australian Academy of Science for nomination to attend the 75th Lindau Nobel Laureate Meeting in 2026. The meetings are an opportunity for a global cohort of exceptional early career researchers to connect with Nobel laureates. Final selections by the Lindau Council are anticipated early 2026.
- The team welcomed a new PhD candidate, Marianne Maslamoney, who will focus her studies on *The societal impact of menstrual health education* (supervisors: K Edvardsson & C Murray)
- K. Edvardsson, together with collaborator Mridula Shankar from the University of Melbourne, was invited on 10 September to the Monash University Department of General Practice to present work on *"Linking Data for Better Insights."*
- The team secured seven seed grants from La Trobe University and the NHMRC SPHERE CRE (J Moulton et al., B Pike et al., D LaGrappe et al., C Benzie et al., K Edvardsson in collaboration with University of Sydney).
- The team also secured a La Trobe International Research Visitor Scheme grant (D LaGrappe et al). This grant will facilitate a visit in 2026 from Emeritus Professor Elizabeth Miller, who following many years with the University of Pittsburgh in the USA, now serves as a collaborative research scientist in the National Center for Child Health and Development in Japan. Her role includes fostering international research partnerships across the Asia-Pacific. Emeritus Professor Miller is globally recognised for her expertise in adolescent health and pioneering work on reproductive coercion. A core focus of her visit will be capacity building among our ECRs.

Testing a methodological approach for measuring agreement across data sources and trends in the incidence and methods of induced abortion by characteristics of young women in Australia using self-report and linked administrative health data

Kristina Edvardsson, Leesa Hooker, Angela Taft; in collaboration with Mridula Shankar, University of Melbourne, Kirsten Black and Deborah Bateson, University of Sydney; Wendy V Norman, University of British Columbia, Canada; Katrina Moss, University of Queensland; Melissa Harris, Nick Egan, Peta Forder, University of Newcastle

Induced abortion is a common reproductive experience for women in Australia and is recognised as an essential service. Presently abortion data for public health planning and assessment is limited, and there is no national routine data collection on abortions. In this study, we will develop a method (algorithm) to identify abortion events using self-report surveys and three administrative datasets. The algorithm will form a key to several sub-studies undertaken by the team and collaborators.

We utilise self-reported abortion data from six waves of the ALSWH's new young cohort (2013-2019) and its linkages with the Medicare Benefits Schedule, Pharmaceutical Benefits Scheme and the National Morbidity Hospital Database to: (1) evaluate levels of agreement between self-report and administrative data, and (2) test a measurement approach for ascertainment of abortion method, time trends in method distribution and characteristics associated with method type among this sample of young women.

Funding: La Trobe University, ABC grant

Status: one paper published in *International Journal of Epidemiology*, one manuscript submitted

Changes in pharmacy dispensing of in MS2-Step (mifepristone-misoprostol) in Australia after regulatory removal of distribution restrictions

Kristina Edvardsson K, Jessica Moulton, Xia Li; in collaboration with Danielle Mazza, Monash University; Philip Goldstone, MS Health; Lucy Cheng and Laura Schummers, University of British Columbia, Canada; and Daniel Grossman, University of California, San Francisco.

Prior to 2023, Australia imposed dispensing restrictions on mifepristone, which is approved for medication abortion ≤ 63 days' gestation and marketed in a combipack with misoprostol as MS-2 Step®. The regulatory restrictions included requirements for physicians and pharmacists to complete training and register as prescribers and dispensers.

We assessed whether the number and geographic distribution of pharmacies ordering the mifepristone-misoprostol combipack increased after the 2023 regulatory changes, using an interrupted times-series analysis (ITS) of monthly sales. Data were obtained from MS Health, the sole Australian distributor of mifepristone.

Funding: N/A

Status: paper submitted; abstract submitted to Society of Family Planning Annual Meeting 2026, which will be held 17–19 October in San Francisco, USA



Digital futures in reproductive health: Emergency care and referral and support service provider perspectives on abortion seekers' unmet needs and opportunities for AI support in medication abortion

Jessica Moulton and Kristina Edvardsson; Danielle Mazza, Monash University; Catherine Bateman, Latrobe Community Health Service; Karen Freilich, GP; Carolyn Mogharbel, 1800 My Options; Joanna Lawrence and Hui Bing (Adeline) Ooi, Northern Health; Patricia Lohr, British Pregnancy Advisory Service, UK.

There is growing global interest in integrating AI into abortion care, demonstrated by the emergence of AI supported private telehealth abortion providers such as Carafem in the United States and Aya Contigo in Venezuela. Aunty Jane, a nurse-led abortion telehealth provider with AI chat support, also launched in September 2025 in Australia. However, despite increasing use of these technologies, provider perspectives on the integration of AI in abortion care is limited, particularly in the Australian context.

The aims of this study are to explore physicians', nurses', and referral service providers' experiences and perspectives of unmet needs in abortion care, and opportunities for Artificial Intelligence (AI) integration in abortion care, with a focus on acceptability, usefulness, and alignment with the clinical context.

This study will complement the work of SPHERE PhD candidate Imogen Summers, who will be exploring abortion seekers' views and experiences (supervised by D Mazza, K Edvardsson and O Ivanova).

Funding: CERi Industry Partner Development Fund, La Trobe University; seed grant, NHMRC SPHERE CRE
Status: ongoing; ethics application submitted; data collection scheduled mid-2026

Co-designing conversational AI to detect reproductive coercion and abuse: A feasibility consultation

Brianna Pike, Kristina Edvardsson, Leesa Hooker; in collaboration with Keren Moran and Noa Peer, Spring Alaska (Industry Partner).

This qualitative feasibility study examines whether conversational AI could ethically enhance reproductive coercion and abuse detection. The research investigates acceptability (survivor perspectives), clinical utility (practitioner perspectives), and technical-ethical viability (expert consultation). Data collection includes Survivor and Practitioner Focus Groups and expert consultations.

Funding: CERi Industry Partner Development Fund, La Trobe University.
Status: Ongoing. Ethics approval obtained.

Harnessing the power of digital technology and AI to safely identify and support women experiencing sexual/domestic violence and reproductive coercion in a virtual emergency department setting.

Kristina Edvardsson, Bijaya Pokharel, Rebecca Jessup, Adam Semciw, Leesa Hooker, Wei Xiang; in collaboration with Elanor Johnson, Loren Sher, Vinita Rane, Northern Health.

This pilot study aims to harness the power of AI to identify at-risk patients for FDSV/RC in a virtual emergency department setting, develop safe screening modes and culturally safe support pathways.

Funding: La Trobe Research Capability
Status: ongoing; one paper submitted (E Johnson lead); funding applications under development

Reproductive coercion and abuse: Defining the domain and developing a comprehensive and validated prevalence measure

Desiree LaGrappe, Angela Taft, Leesa Hooker, Kristina Edvardsson; in collaboration with Laura Tarzia, University of Melbourne

Reproductive coercion and abuse (RCA) describes controlling behaviours infringing on autonomy over reproductive health decisions about pregnancy, abortion, and/or contraceptive use. This type of abuse is a distinct form of gender-based violence, overlapping with domestic, family, and sexual violence. Public health policies and interventions to address RCA are beginning to advance to scale, yet neither an internationally accepted definition nor a comprehensive, validated measure are available.

The lack of a conceptually clear and consistently used definition and measure hinders the ability to make progress in understanding and preventing RCA and its harm. To address this public health research gap, this study is developing a new rigorous and comprehensive RCA measure for global cross-cultural use, with an overall goal to pilot prevalence in Australian Maternal and Child Health (MCH) settings.

This research is a part of SPHERE, the NHMRC Centre of Research Excellence in Sexual and Reproductive Health for Women in Primary Care.

Funding: Postgraduate Scholarship (NHMRC Project GNT2013949), CERi Industry Partner Development Fund

Status: ongoing; one paper accepted for publication, one paper submitted, and findings presented in 2025 at the European Domestic Violence Conference in Barcelona, Spain

Improving access: Understanding, strengthening and expanding the medication abortion provider workforce in Victoria

Jessica Moulton, Desiree LaGrappe, Leesa Hooker and Kristina Edvardsson; in collaboration with Carolyn Mogharbel, 1800 My Options

To address gaps in abortion service provision and workforce capacity in Victoria, this research will examine the sociodemographic and professional characteristics of medication abortion providers, explore the structural and contextual factors that facilitate or constrain their practice, and identify actionable strategies to strengthen, support, and expand the workforce. The study, undertaken in collaboration with 1800 My Options, will inform approaches to improve provider recruitment, retention, and support, ultimately enhancing equitable access to abortion services across the state, particularly in under-served areas.

Funding: Seed grant, School of Nursing and Midwifery, La Trobe University

Status: ongoing

Clinicians' perspectives on Medication Abortion care for women with disabilities

Charlie Benzie, Rebecca Hyde, Robyn Matthews, Jessica Moulton, Kath Brundell, Kristina Edvardsson and Amanda Cooklin

Understanding the barriers that prevent women with disabilities from accessing quality abortion care, and their specific support needs, is critical to identifying inequities and informing a person-centred and inclusive approach to services. Included in this should be insights from clinicians about the experiences of those who have accessed care and barriers that have been conducted. Despite the importance of tailored support, there is limited evidence about the specific needs of women with disabilities in the context of medication abortion care. This project aims to address this gap by exploring clinician perspectives to inform inclusive, safe, and supportive care pathways for women with disabilities accessing medication abortion in Victoria.

Funding: Seed grant, School of Nursing and Midwifery, La Trobe University

Status: ongoing; ethics application submitted

COLLABORATIVE WORK

SPHERE – The Centre of Research Excellence in Women’s Sexual and Reproductive Health in Primary Care

Kristina Edvardsson, Angela Taft; in collaboration with Danielle Mazza and Jane Fisher, Monash University, Kirsten Black and Deborah Bateson, University of Sydney; Wendy Norman, University of British Columbia, Canada; Gita Mishra, University of Queensland; Luke Grzeskowiak, Flinders University; Laura Tarzia, University of Melbourne; Sharon Cameron, University of Edinburgh, UK

Australia’s 6 million women of reproductive age continue to struggle with accessing high quality care to optimise their health prior to pregnancy, prevent unplanned pregnancy or terminate a pregnancy when desired or required. The aim of SPHERE 2.0 is to increase access to high quality, patient-centred sexual and reproductive health care so that women in Australia can achieve bodily autonomy and have the number of children they want when they want them.



Pexels, Gilberto Olympio

Transition to contemporary parenthood – preparation and support



Program Lead: Professor Amanda Cooklin

The Transition to Contemporary Parenthood Program – Preparation and Support (TCPP) was established in 2013 as the result of a major gift from Mrs Roberta Holmes. TCPP focussed on innovative research to identify the best ways to support mothers and fathers in their roles as parents. The program examined the influence of contemporary factors on parents and how these affect children’s healthy development and family life, with evidence used to inform the design of new or improved programs and supports for parents.

While the major projects arising from the initial gift have now concluded, new collaborations were established and reflected in our ongoing work. These newly-funded projects now reflect long-standing collaborations arising from TCPP, especially with The Australian National University, Deakin University, Murdoch Children’s Research Institute, the Parenting Research Centre and Queensland University of Technology.

Parenting, parent wellbeing and children and young people in Australia

Amanda Cooklin, Jan Nicholson, Stacey Hokke, Clair Bennett, Jasmine Love, Shannon Bennetts; Jodi Oakman; Kate McCredie; in collaboration with Lyndall Strazdins, Tinh Doan and Liana Leach, Australian National University; Rebecca Giallo, Deakin University.

Growing Up in Australia, the *Longitudinal Study of Australian Children* (LSAC) collects data every two years on 10,000 Australian children and their parents. The study is funded by Commonwealth Department of Social Services, managed by the Australian Institute of Family Studies, with data collected by Roy Morgan. Jan Nicholson is a founding member of the LSAC Scientific Advisory Committee and past Chair; Amanda Cooklin is a current member of the Scientific Advisory Committee.

This ongoing program of analytic work uses LSAC data to build understanding of the contemporary issues affecting the health and wellbeing of mothers and fathers. Excitingly, the LSAC ‘Study Children’ are now moving into early adulthood, with rich data to explore their wellbeing, and the intergenerational transfer of health, resources and relationships.

In 2025 a highlight was the publication of the LSAC Cohort Profile paper in the *International Journal of Epidemiology*, co-led by Amanda Cooklin and Meredith O’Connor (MCRI); with co-authorship from past and present members of the LSAC Study Advisory Committee; from the Australian Institute of Family Studies; and acknowledgement of the array of important contributions to the study over the 20 years of LSAC.

Status: ongoing; over 50 papers published using LSAC data; LSAC Cohort Profile Paper published in 2025



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COLLABORATIVE WORK

Suicide prevention among men in early fatherhood: Determining the effectiveness of Working out Dads

Amanda Cooklin, Jan Nicholson; in collaboration with Rebecca Giallo, Deakin University and Murdoch Children's Research Institute; Liana Leach, Australian National University; Jemimah Ride, University of Melbourne; Brian Oldenburg, La Trobe University; Anneke Grobler, Stephanie Brown, Murdoch Children's Research Institute; Catherine Wood, Swinburne University of Technology; Craig Garfield, Northwestern University, USA; and Tweddle Child and Family Services, Melbourne

Designed in partnership with Tweddle Child and Family Services, *Working out Dads* is a suicide prevention intervention targeting men in early fatherhood. The program is a 6-week gym-based peer support program, targeted for fathers experiencing poor mental health or suicidal ideation. Led by Professor Giallo, this project is a randomised controlled trial aimed at generating robust evidence about the effectiveness, cost-effectiveness and scalability of *Working out Dads* as a targeted prevention approach to improve fathers' mental health, social support and help seeking.

Funding: MRFF Million Minds Mission Suicide Prevention Grant (2020–2024)

Status: Completed; data collection from n=222 participants; protocol paper published, final papers in preparation; stakeholder and community forum in 2024

Differences in how men and women are studied in alcohol research: A systematic review

Amanda Cooklin; Megan Cook, Sarah McLean, Amy Pennay, Ben Riordan, Gabriel Caluzzi, Sarah Callinan from the Centre for Alcohol Policy Research, La Trobe University

Alongside broader gender parity debates, research on alcohol/substance use and gender has developed considerably in the last few decades. However, there are significant gaps in alcohol studies which may impact the framing of existing methodologies and research, ultimately shaping public discourse. The aim of the proposed study is to understand epistemological and methodological differences in published research on men's and women's alcohol consumption. This review will form the basis for establishing a funded program of work.

Funding: La Trobe Research Theme, ABC Grant, 2023-24 to the Centre for Alcohol Policy Research

Status: completed: two papers published, two international conference presentations

Safeguarding the mental health of families in rural communities affected by environmental threats

Jan Nicholson; Amanda Cooklin, Leesa Hooker, Rebecca Giallo (Chief Investigator), Suzanne Robinson; Matthew Fuller-Tyszkiewicz; John Toumbourou; Monique Seymour; Laura Alston; Alison Kennedy, Deakin University; in collaboration with Rachel Roberts, University of Adelaide; Anneke Grobler; Alison Fogarty, Murdoch Children's Research Institute; Liana Leach, The Australian National University and Mark Feinberg, Pennsylvania State University

This project is a new research-practice partnership to look at new ways to build family resilience in the face of natural disasters and environmental threats. Rural communities are often affected by natural disasters such as floods, fires, drought and storms. Recovering and rebuilding after extreme weather events can take a long time. The process can take its toll on families, contributing greatly to stress, health and wellbeing difficulties.

We are partnering with Professor Rebecca Giallo from SEED Lifespan and the School of Psychology at Deakin University to explore how to best promote the resilience of families in rural communities facing existing and future environmental threats. This will include investigating whether Family Foundations, a family-based program developed in the US, can strengthen relationships and promote mental health among families with young children (0-12 years).

This is the first trial of Family Foundations with families living in regional and rural areas in Australia. In partnership with a range of health service partners across Victoria, we will test an innovative implementation model to deliver support options to families. This model will support our rural health workforce to deliver Family Foundations via telehealth, making it more accessible to families living in regional and rural areas of Victoria.

Funding: MRFF Mental Health Research Grant, two-year project, 2024

Status: training, recruitment and data collection in progress

Critical moments in response for children affected by family substance abuse

Amanda Cooklin in collaboration with Anne-Marie Laslett (Chief Investigator), Sarah MacLean, Heng Jiang, Koen Smit; Kylie Lee, Centre for Alcohol Policy Research, La Trobe University; James Petty, Victorian Alcohol and Drug Association; Diana Egerton-Warburton, Monash Health; Gillian Shorter, Queen's University Belfast; Bridget Freisthler, University of Tennessee; Rebecca Jenkinson, Australian Human Rights Commission; Eleanor Costello, Alcohol and Drug Foundation; Michelle Silbert, Australian Institute of Family Studies

In Australia, multiple systems are involved when children are harmed by their families' alcohol and other drug misuse. The critical moments where opportunities exist for supporting children and their families in these systems are unclear.

This project will study the experiences, trajectories and risks for children from families with substance use problems. Using a range of approaches, we will study service systems, and children's experiences of them, alongside children's conditions and contexts of life to provide a holistic understanding of interventions, costs and impacts.

Our evidence will inform crucial improvements to services and systems and inform policies to prevent further harm, in turn benefitting Australian children and their futures. This will bring long-term national economic, social and health benefits for children by improving family, substance use, health, justice and child protection services and reducing service need for the one in five children affected by familial substance misuse in Australia.

Our established strong links with key service organisations and young people will ensure dissemination of recommendations through reports, workshops and media. This project will inform national strategies seeking to improve the care economy and the wellbeing of children and young people. Australian insights will inform development of best-practice services and policies to reduce harm from family substance misuse cross-nationally.

Funding: Australian Research Council Linkage Grant, 2024-2027

Status: advisory group and project staff recruited; data collection and analysis commenced



Work and family

Program Lead: Professor Amanda Cooklin

This program of work aims to understand the role that parents' jobs and employment conditions have on parenting, parent-child relationships and family health and wellbeing.

These issues have become particularly salient in the wake of the COVID-19 pandemic, where ~40% of Australian employees now regularly work from home. The effects of this on family relationships, gendered division of labour, and parents' health and

wellbeing are only just being understood, and we contribute to this growing evidence.

This program builds on our long-standing collaborations with The Australian National University, Deakin University and the Work-Research Institute at Oslo Metropolitan University, Norway.

The great disruption of COVID-19: reimagining the work-family interface

Amanda Cooklin, Stacey Hokke, Jasmine Love, Jodi Oakman, Jan Nicholson; in collaboration with Liana Leach and Tinh Doan, Australian National University; and Rebecca Giallo, Deakin University

In 2023, we were awarded funding from the Australian Research Council to build on our collaborative Families at Work program of research (2016-2021). This project aims to highlight new possibilities to re-imagine and reduce parents' work-family conflicts. COVID-19 brought an unprecedented disruption to Australian parents' work-care routines, with different effects for women, and those working 'at work' versus at home. Using mixed methods approaches across two Streams, and multiple Australian datasets collected pre- and post-pandemic, this unique project intends to identify families who are at risk of longer-term scarring to family wellbeing from work-care conflicts; and critical workplace supports which may prevent this. Together, this urgently-needed evidence contributes to family-friendly work for diverse parents, employers and policy, protecting social and economic participation for Australian parents.

Funding: Australian Research Council (Discovery Project # 230100498; 2023-2025)

Status: 4 peer-reviewed publications, one book chapter; further in preparation; 2 PhD scholars contributing; two conference presentations; Forum May 2025 (see "Spotlight" in this issue).

Fathers at work: identifying workplace barriers and supports for fathers to combine work and care

Stacey Hokke, Sharinne Crawford, Shannon Bennetts, Jasmine Love, Jan Nicholson, Amanda Cooklin; with Liana Leach, Australian National University

Gender inequities in work and care persist and have likely been exacerbated by the "she-cession" due to the COVID-19 pandemic. Evidence suggests that fathers' unpaid care work has increased slightly due to the pandemic – but so has mothers', and all parents remain constrained by gendered notions of 'who works and who cares'.

This project aims to explore Australian fathers' work-family experiences to investigate how workplaces have (or have not) supported fathers to combine work and care, before, during and since the pandemic. We use a qualitative phenomenological study design; data are collected using in-depth semi-structured interviews with fathers of child(ren) aged 0–18 years, employed in an organisation.

Funding: La Trobe University Transforming Human Societies Research Focus Area Grant Ready Scheme

Status: completed; papers in submission

Parents' work-family interface, health and wellbeing

Amanda Cooklin, Jan Nicholson; Stacey Hokke; Jasmine Love; Kate McCredie in collaboration with Liana Leach, Lyndall Strazdins, Yixuan Zhao, Tianying Wang, Peter Butterworth, Australian National University; and Jodi Oakman and Victoria Weale from the School of Psychology and Public Health, La Trobe.

This ongoing, collaborative program of research uses available national, longitudinal and cohort data to identify the adverse effects of poor-quality jobs, work-family conflict, and time pressure on employees and their families across the life-course.

In 2025, PhD scholars attached to this project published papers on the longitudinal associations between parents' job quality and teenagers' academic achievement (Kate McCredie, La Trobe); and on the associations between work-family conflict and major mental health diagnoses (Tianying Wang, ANU).

Funding: Australian Research Council (A Cooklin Future Fellowship FT200100209)

Status: ongoing



Pexels

COLLABORATIVE WORK

Evidence-based interventions to improve working conditions for nurses

Amanda Cooklin, in collaboration with Jodi Oakman (lead); Wendy MacDonald, Victoria, Weale, Ali Lakhani (La Trobe University); and Natassia Goode (WorkSafe Vic).

This project aims to investigate the processes by which hospitals implement an innovative new 'toolkit' of evidence-based procedures to reduce workplace exposures to hazards that affect risk of musculoskeletal disorders and chronic stress in nurses. Implementation science will inform the formulation of indicators of intervention quality. Impacts on hazard exposures will be quantified and likely cost-benefits for workplaces calculated. The anticipated outcomes will inform the development and dissemination of new resources and guidance that promote more widespread workplace use of cost-effective management methods, with expected future improvements in working conditions for nurses.

Funding: Australian Research Council Linkage Project LP240200644 (2025-2029).

Status: project establishment; Advisory Group formed and project staff recruited

'Upwards support' for managers at work: Does gender and parent status matter?

Amanda Cooklin; in collaboration with Nina Junker and Wendy Nilsen, Oslo Metropolitan University, Norway; Eunae Cho, Taipei Medical University, Taiwan

This project is an international collaboration and aims to investigate whether stereotypes about 'working mothers' influence the support managers receive from their staff in the workplace. Based on gender role theory, we hypothesize that asking for practical support at work may serve as a penalty for women and mothers, but not for men and fathers, in supervisory roles. It is a collaboration between researchers in Germany, Singapore, Norway and Australia, with data collected in each setting to yield cross-national comparisons. In 2024, we completed further fieldwork in Germany and Norway to add to the original sample (collected in 2020) and analyses are underway.

Status: findings in preparation

Sustainable working conditions: Requirements to enable long working lives?

Amanda Cooklin; in collaboration with Jodi Oakman (Chief Investigator), Melissa Graham, Katrina Lambert (School of Psychology and Public Health, La Trobe University); and Liana Leach (The Australian National University).

Optimisation of working conditions is critical to address current workforce shortages that are exacerbated by an ageing population and well-established gender inequities in the labour market. Increasing workforce participation of older workers could deliver significant benefits to Australian society, estimated at \$48 billion per annum. This project will generate a comprehensive new body of rigorous evidence on 'new ways' of working emerging after the COVID-19 disruption. We will identify the key requirements to design and support sustainable work with a focus on age and gender. Key benefits will be resultant improvements in productivity and quality of work and in workforce participation, enhancing Australia's leadership in this area. Good quality and safe work are central to assisting Australia in meeting four UN Sustainable Development Goals: 'gender equality', 'good work and wellbeing', 'decent work and economic growth' and 'reduced inequalities'. Results will be disseminated to policy makers, workplace health practitioners and employers who can use project outputs to design, deploy and then evaluate the impact of sustainable working conditions on ageing worker retention and subsequent economic benefits.

Funding: Australian Research Council (Discovery Project DP250100393)

Status: project commenced 2025; Advisory Group formed and project staff recruited

Spotlights 2025

The great work-family disruption: Re-imagining the work-family interface in Australia

Amanda Cooklin

The COVID-19 pandemic brought an unprecedented disruption to Australian parents' work-care routines. While the peak of the disruption was in 2020-2021, the effects on work and care are ongoing.

In 2023, we received national funding from the Australian Research Council (Discovery Project) to explore the work-care disruption across the short (2021-2021) and longer term (2023-2024), including the effects on the wellbeing of working parents and their families.

What did we do?

We conducted a mixed methods study including secondary quantitative data analysis on four national longitudinal datasets:

- Mothers from the Longitudinal Study of Australian Children (2018-2022);
- Employed parents from the Families at Work during COVID-19 study (2016 & 2020-2021);
- Employees (parents & non-parents) from the Employees Working at Home Study (2021-2022); and
- Parents from the Household, Income and Labour Dynamics in Australia Study (2005-2022).

We also conducted in-depth qualitative interviews with 11 mothers and six fathers who were working from home at least two days per week in 2024.



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What did we learn?

Parents' work-care disruption was far and wide in 2020:

While one third of parents reported 'low disruption', 58% reported 'moderate' disruption and 6% were impacted significantly.

Parents who were most disrupted by the pandemic tended to report a combination of work-care burdens, including:

- New job insecurity;
- Major changes at work (e.g. stood down, changes to pay or work schedule);
- Significant increases in care-giving load; and
- Increased emotional and practical family support.

Some parents were more 'at risk' of disruption than others

The disruption was not equally distributed. Parents who were more impacted tended to be in lower paid and less secure work with fewer hours. Mothers tended to face greater disruptions, with mothers with poorer health, lower quality partner relationships, living in a metropolitan area or with a family member with a disability being more vulnerable.

The disruption negatively impacted the mental health of parents and their families

From before-to-after the pandemic:

- Parents' mental health on average deteriorated;
- The risk of serious mental illness increased by 233%;
- 45% of parents reported chronic and persistent work-family conflict;
- 12% reported newly emerging work-family conflicts;
- 22% reported some easing of conflicts.

Parents facing a greater work-care disruption had the poorest mental health and wellbeing over time.

The 'new normal': Hybrid work helps families to balance work and care:

In our qualitative interviews, parents shared that home and hybrid working allowed them to better manage their responsibilities both at work and at home. Key advantages of working from home for parents:

- Greater job productivity and focus;
- Integration of household jobs into the workday; and
- More quality time with children, including more engagement in children's school and extracurricular activities.

This contributed to better mental health including reductions in time pressure and stress and improved work-family balance.

However, working from home does come with disadvantages including blurred work-home boundaries and a lack of social connection. Further, our survey data highlights that working from home more than preferred can lead to increased stress and burnout.

How can organisations best support parents to work flexibly:

- Support flexible work arrangements for all employees
- Tailor flexible arrangements to individual needs
- Trust employees with the autonomy to work flexibly
- Provide clear expectations about the job role
- Facilitate social connections and onsite collaboration (e.g., designated office days, adequate meeting spaces)
- Management should model flexible and remote working practice to help normalise flexible work.

Re-shaping family-friendly work: A research, policy and practice forum

In May, we held a research, practice and policy forum to present our findings to colleagues, researchers and industry experts. A panel of experts in parenting research and support, HR and parents came together to discuss our research findings to generate recommendations for workplaces, managers and policy makers for how they can best support working parents.

Project team: Amanda Cooklin, Jan Nicholson, Stacey Hokke, Jasmine Love, Clair Bennett, Jodi Oakman, Helen Findley, Kate McCredie (La Trobe); Liana Leach, Tinh Doan (Australian National University); Rebecca Giallo (Deakin University).



Work-Family Research, Practice and Policy forum, May 2025

Maggie Flood

Postgraduate student professional development bursary

In 2021 Dr Maggie Flood, a former PhD student and staff member at the Judith Lumley Centre, established the Maggie Flood Postgraduate Student Professional Development Bursary.

This annual bursary is a \$1000 donation awarded to a JLC postgraduate student to support professional development (such as conference fees or relevant courses) or to cover research-related costs (such as interview transcription or participant gift cards).

Originally established for five years, this annual bursary has been extended by Maggie for an additional five years. The first five recipients reflect on what they have been able to achieve with this donation:

Kerryn O'Rourke 2021



I gratefully received the Maggie Flood Bursary in 2021 during the final stages of my PhD. I used the bursary to support open access publication costs for my paper, How and when doula support increases confidence in women experiencing socioeconomic adversity: Findings from a

realist evaluation of an Australian volunteer doula program, published in *PLOS ONE* in 2022.

Making the paper freely available allows the findings to be accessed and used by community organisations, practitioners, policymakers, and others working in maternal and social support services, rather than being limited to academic audiences. The bursary helped ensure this research could reach and inform the services and communities it was designed to support.

Deb Pidd 2022



Receiving the Maggie Flood Bursary has been an incredibly meaningful experience for me, both personally and professionally. It enabled me to complete three Blue Knot Foundation training courses on complex trauma that have deeply shaped the way I now think about

trauma and safety. These learnings have strengthened my capacity to engage sensitively with women who share their stories of traumatic birth and have reinforced my commitment to advocating for care that is compassionate, respectful, and genuinely woman-centred. I would not have been able to access this training without the bursary, and I am profoundly grateful for the generosity and belief in my work. The impact of this support will extend well beyond my doctoral research and into my ongoing practice as a midwife and advocate for women and families.

Robyn Matthews 2023



I was awarded the Maggie Flood Bursary in 2023, which made a significant difference to my PhD journey. In April 2024, I travelled to New Zealand to present two accepted abstracts—one poster and one oral presentation—at the Perinatal Society of

Australia and New Zealand (PSANZ) conference.

As a part-time PhD candidate without external funding, attending conferences, especially international ones, has been financially challenging. The Maggie Flood Bursary enabled me to cover the full cost of a one-year PSANZ membership (which made me eligible for presenter awards), my conference registration, and two networking events.

With this support, I was able to share my research with an international audience, build valuable professional connections, and ultimately received the New Investigator (Oral) Award – Midwifery.

Mercy Henry 2024

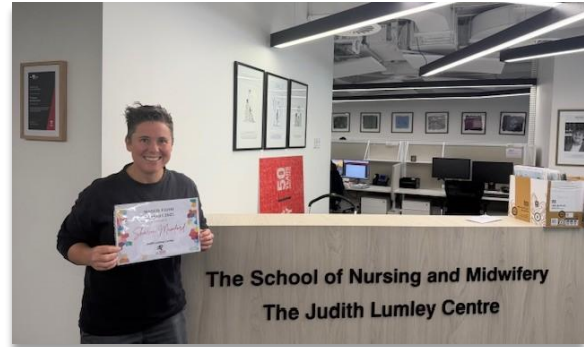
The Maggie Flood Bursary fund supported my 2025 Professional Doctorate research project by enabling the provision of gift cards to participants across both phases of the study. These gift cards were offered to South Asian migrant women participants in 2025 and will be offered to Maternal and Child Health Nurses (MCHNs) in 2026 for the recognition of their time and contribution to the research. This funding support was critical in facilitating ethical and respectful participant engagement, improving recruitment and retention, and acknowledging the value of participants' lived experiences and professional insights.

The Maggie Flood Bursary played a meaningful role in advancing my research grounded in equity, respect, and social impact.



Sharon Mumford 2025

My research examines the midwifery workforce crisis in Australia, with a focus on the health, financial wellbeing, clinical placement experiences, and workforce readiness of Victorian midwifery students. This work draws on data from a statewide, population-based cross-sectional survey.



The financial support provided through the Maggie Flood bursary will enable me to attend the Australian College of Midwives (ACM) Conference in 2026. This opportunity will allow me to share my research with a national audience, strengthen meaningful professional connections, and further develop my understanding of research processes as well as practical strategies to support and sustain the midwifery workforce.

Staff

The Judith Lumley Centre brings together a multi-disciplinary team of researchers with qualifications and experience in epidemiology, women's health policy, education, psychology, historical and social research, biomedical research, consumer advocacy, anthropology, medicine, nursing and midwifery.

We have not listed our field and casual staff here but would like to acknowledge their highly valuable contributions to our projects.

Professor and Director

Amanda Cooklin

BA(Hons), MPH (WomH), PhD

Professors

Lisa Amir

MBBS, MMed(WomH), PhD, IBCLC

Christine East

RN, RM, DAppSc(ClinNurs), BAppSc(Nurs), Grad Cert Health Studies, Grad Cert Univ Teaching, MMSc, PhD

Kristina Edvardsson

RN, MHSc, PhD

Della Forster

RN, RM, DipAppSc, BHSc, MMid, PhD

Leesa Hooker

RN, RM, CertCritCare, PGDipPH(ChildFamHealthNurs), MHSc, GradCert Biostat, PhD

Helen McLachlan

RN, GradDipAdvNurs(Mid), MNursStud, PhD

Associate Professors

Touran Shafiei

BMid, GradDip Biostat, PhD

Senior Research Fellow

Laura Whitburn

BPhysio, PhD

Research Fellows

Clair Bennett

BA(Hons), DPpsych, PhD

Shannon Bennetts

BA(Hons), PhD

Charlie Benzie

RN, RM, PhD

Margaret Flood

RN, RM, PhD

Stacey Hokke

BBiomedSc(Hons), PhD

Research Officers

Noushin Arefadib

Helen Findley

Jess Halloran

Renee Kam

Desiree LaGrappé

Stefia Lam

Jasmine Love

Robyn Matthews

Jessica McBurney

Res McCalman

Kate McCredie

Fiona McLardie-Hore

Jess Moulton

Catherine O'Donnell

Megan Ross

Emeritus Professor

Angela Taft

BA, DipEd, MPH, PhD
Director 2013–2016

Adjunct Professors

Catherine Chamberlain

MScPHP, MPH, GCIRL, GCHSM, BSc(RM) PhD
University of Melbourne

Tanya Farrell

DipAppSc, MNurs, PostGradChildHealth
Victorian Department of Health and Human Services

Ingrid Mogren

PhD
Umeå University, Sweden

Michelle Newton

GradDipAppSc(Nurs), PGradDip H Ed, MMid, PhD

Jan Nicholson

BSc(Hons), MSc, PhD

Wendy Pollock

RN, RM, GradDipEd, GradCertALL, PhD
Northumbria University

Jane Sandall, CBE

PhD, RN, RM, HV, BSc, MSc,
King's College London, UK

Rhonda Small

BA, DipEd, GradDipLib, GradDipEpid, PhD
Director 2008–2013

Honorary Associate

Emma Toone

BHScND, GradDipPsychoanalStud, MCPP
Berry Street Innovations Partnership

Staff

Honorary Research Fellows

Guilhermina de Araujo

BA(CommunityDev)
Independent Consultant,
Timor Leste

Beatriz Paulina Ayala Quintanilla

MBBS, PhD(Med), MPH, PhD
Peruvian National Institute of
Health

Sharinne Crawford

BAppSci(Hons), PhD
Monash University

Méabh Cullinane

BSc, PhD
University of Melbourne &
Peter MacCallum Cancer
Centre

Naomi Hackworth

BSc BA(Hons),
DPsych(Health)
Parenting Research Centre

Lester Jones

BBSc, BAppSc(Physio),
MScMed(PainMgt), PhD
Singapore Institute of
Technology, Singapore

Hassan Vally

BSc(Hons, MAppEpid,
GradCert (Higher Edu), PhD
Deakin University

Elizabeth Westrupp

MPsych, PhD
Deakin University

Ingrid Wilson

BA(Hons), GradDipLaw, PhD
Singapore Institute of
Technology, Singapore

Higher degree research

PhD graduates 2025

Sarah Hay

Exploring the Views and Experiences of Women, Partners and Staff regarding a New Pregnancy and Early Parenting Resource: A Multi-Method study



Dr Hay explored the perspectives of women, their partners, and maternity staff in relation to a newly developed educational resource designed to support prospective parents. While the resource was positively received and

valued by participants, it did not result in measurable improvements in emotional wellbeing or parenting outcomes for women or their partners. The study generated valuable insights into the challenges and considerations involved in implementing educational innovations within complex clinical settings.

Supervised by Helen McLachlan, Michelle Newton and Touran Shafiei

Fiona Faulks

Social Vulnerability and Disparities in Perinatal Health for Victorian Women: Determining Gaps in Outcomes, Access, and Equity



Dr Fiona Faulks explored the impact of social vulnerability on perinatal health for women living in Victoria. Using a multimethod approach, the study found associations between adverse perinatal outcomes and maternal social disadvantage and mental illness, in addition to identifying barriers and enablers rural women face in accessing perinatal care.

Supervised by Touran Shafiei, Kristina Edvardsson and Méabh Cullinane

Brooke Henshall

The PRIMROSE Project: Understanding Physiological Birth in the Contemporary Australian Setting: Developing a Consensus Statement of Physiological Birth Using a Mixed Method Explanatory Sequential Design



Dr Henshall explored how key maternity stakeholders understand physiological birth within the Australian context.

Across four sequential studies, this research found that physiological birth is an ambiguous and multi-faceted concept, with interpretations shaped by individuals' roles in birth. Midwives, obstetricians, doulas, women, and support people often described physiological birth differently, reflecting their professional frameworks, experiences, and priorities within maternity care. An Australian consensus statement was created, shifting from medical terminology to focus on women-centric care and shared decision-making.

Supervised by Christine East, Jennifer Davis and Heather Grimes

Res McCalman

What are the views and experiences of Aboriginal and Torres Strait Islander women having a baby in Victoria?



Dr McCalman explored the experiences of women having a First Nations baby in Naarm (Melbourne) in three hospitals where culturally tailored midwifery continuity models were implemented. Women reported feeling safe, connected and supported

within a maternity system that could be fragmented and complex, recommending the need for widespread model implementation.

Supervised by Helen McLachlan, Della Forster and Michelle Newton

Anita Moorhead

Exploring the Safety, Efficacy and Experience of Antenatal Breastmilk Expressing for Women with Diabetes in Pregnancy: The Diabetes and Antenatal Milk Expressing (DAME) Randomised Controlled Trial

Dr Moorhead studied the safety, efficacy and experience of advising antenatal expressing for women with diabetes in pregnancy. Her research found increased rates of exclusive breastmilk feeding in hospital, no evidence of harm, and no effect on women's milk 'coming in'. Participants described mixed feelings about expressing. The research findings are now informing practice.

Supervised by Della Forster, Lisa Amir and Sharinne Crawford



Lael Ridgway

Family-Centred Care in Maternal and Child Health Nursing

Dr Ridgway explored family-centred care in Maternal and Child Health nursing and described how health and education organisations adapted to the COVID-19 restrictions. She developed and applied a model for family-centred care that will guide service provision and education and support flexible, responsive care in early childhood health services.

Supervised by Lisa McKenna, Stacey Hokke, Jan Nicholson, and Naomi Hackworth



Postgraduate Students

Molly Allen-Leap

What are the experiences of migrant and refugee women when seeking support for family violence from their GP?

Supervised by Angela Taft, Leesa Hooker, Kayli Wild and Ingrid Wilson

Jess Appleyard

Siblings in PICU: An exploration of sibling inclusion and support when a child is critically ill

Supervised by Ashleigh Butler, Bev Copnell and Cheryle Moss

Bianca Blanch

An examination of how to improve Australian mothers' experience of return to work

Supervised by Lisa Amir, Amanda Cooklin

Corinne Boulter

Identifying the lactation support needs of mothers with preterm infants in Neonatal Intensive Care Units

Supervised by Lisa Amir and Ranmali Rodrigo

Rachel Byrne

Challenges and triumphs: The experiences of LGBTQIA+ families accessing maternal and child health

Supervised by Amanda Cooklin, Catina Adams and Leesa Hooker

Erin Church

The Newborn Traffic Light Tool: a feasibility study of its use in the Neonatal Unit

Supervised by Christine East and Rachael Duncan

Genevieve Edwards

Understanding the factors influencing pregnancy outcomes for women in rural Australia who experience an unintended pregnancy

Supervised by Kristina Edvardsson and Leesa Hooker

Sanaz Fayazzi

Barriers and enablers to accessing maternal care services among migrant women in Australia

Supervised by Touran Shafiei, Amanda Cooklin and Noushin Arefadib

Dinithi Fernando

Perinatal depression and anxiety among South Asian women in Australia

Supervised by Touran Shafiei, Amanda Cooklin and Clair Bennett

Helen Findley

The great disruption of Covid-19: Reimagining the work-family interface

Supervised by Amanda Cooklin, Stacey Hokke, Jodi Oakman (Health & Society), Natalie Amos (ARCHS) and Liana Leach (Australian National University)

Elenora Greenwood

Autism coming to hospital: Optimising care for patients with autism spectrum disorder

Supervised by Amanda Cooklin, Josie Barbaro (School of Psychology and Public Health) and Charne Miller (University of Melbourne)

Nicole Hartney

Defining best practice for women's oral intake in labour

Supervised by Christine East, Laura Whitburn and Darren Lowen (Northern Health)

Mercy Henry

Family violence support systems for south east Asian community

Kristina Edvardsson, Touran Shafiei and Joyce Jiang (Multicultural Centre for Women's Health)

Ann (Kathryn) Hindell

Maternal and child health service data-critical analysis

Supervised by Leesa Hooker and Catina Adams

Kim Howland

An exploration of tele practice in the Victorian maternal and child health services

Supervised by Leesa Hooker and Kristina Edvardsson

Rebecca Hyde

Your views matter – Exploring families experience of care in the newborn intensive care

Supervised by Della Forster, Helen McLachlan, Touran Shafiei and Sue Jacobs (Royal Women's Hospital)

Desireé LaGrappe

Maternal and Child Health Nursing: A golden opportunity to integrate screening for reproductive coercion and increase effective contraception use in Australia and beyond?

Supervised by Kristina Edvardsson, Leesa Hooker and Angela Taft

Helen Lees

How does the Victorian maternal and child health service demonstrate it is making a difference to the health outcomes of children

Supervised by Leesa Hooker and Kristina Edvardsson

Robyn Matthews

EXPerT study – Exploring midwives' perceptions of 'expertise' and experiences of work

Supervised by Della Forster, Michelle Newton, Touran Shafiei and Fleur Llewellyn (Royal Women's Hospital)

Jessica McBurney

Exploring volunteers' experience of and motivations for providing peer support in the DAISY (Depression and Anxiety peer Support study) randomised controlled trial

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Kate McCredie

The long arm of the job: Parents' jobs and adolescent academic achievement

Supervised by Amanda Cooklin, Stacey Hokke and Liana Leach (Australian National University)

Sharon Mumford

FUCHSIA: Future proofing the midwifery workforce in Victoria: A statewide cross-sectional survey exploring health, wellbeing and sustainability

Supervised by Michelle Newton and Helen McLachlan

Kristina Neal

Supporting lactation in mothers of preterm infants

Supervised by Lisa Amir, Ranmali Rodrigo and Olivia Hollingdrake

Meriem Perona

Pre-hospital management of atypical acute coronary syndrome by Victorian emergency ambulance paramedics

Supervised by Amanda Cooklin, Aziz Rahman (Federation University), Peter O'Meara (Monash University) and Omar Farouque (Austin Health)

Deborah Pidd

Identifying a woman-centred evidenced-based pathway for women who have experienced a previous psychologically traumatic birth

Supervised by Christine East, Catina Adams, Ingrid Wilson and Michelle Newton

Brianna Pike

How does reproductive coercion impact safety, life choices and help-seeking behaviours?

Supervised by Kristina Edvardsson and Leesa Hooker

Amanda Rehayem

Exploring the impact of caseload midwifery on preterm birth among vulnerable and disadvantaged women: a multi-centre randomised controlled trial (MAGNOLIA Trial)

Supervised by Helen McLachlan, Della Forster and Emily Callander (Monash University)

Tanisha Springall

Exploring the impact of culturally responsive maternity care on outcomes for First Nations women and infants in Victoria, Australia

Supervised by Helen McLachlan, Della Forster and Kerry Hall (Griffith University)

Stefanie Zugna

Evaluation of the impact of the Maternity and Newborn Emergencies (MANE) education program on safety culture in health organisations

Supervised by Helen McLachlan, Della Forster and Méabh Cullinane

Lunchtime Seminars

2025

5 FEBRUARY

Prof Anne-Marie Laslett
*Centre for Alcohol Policy Research,
La Trobe University*

Contexts, predictors and
frameworks for prevention of
alcohol's harm to others

19 FEBRUARY

Dr Hanna Ulfsdottir
Karolinska Institute, Sweden

Waterbirth and peer learning at a
birthing unit

5 MARCH

Desirée LaGrappe
*Judith Lumley Centre, La Trobe
University*

The value of cultural exchange and
the future of Fulbright: Reflections
on researching reproductive health
and gender-based violence in
Vietnam

2 APRIL

Dr Christine Murray
*School of Nursing & Midwifery, La
Trobe University*

My African adventures

7 MAY

Dr Meredith O'Connor
*Murdoch Children's Research
Institute*

The Melbourne Children's
LifeCourse Initiative: An open
science data resource for advancing
health and wellbeing over the life
span

4 JUNE

Joy Adcock
*School of Nursing & Midwifery, La
Trobe University*

Insights from a homebirth midwife

2 JULY

Dr Jennifer Ayton
University of Tasmania

R.E.S.P.E.C.T and maternity health
care

6 AUGUST

Lynnelle Moran
Australian Catholic University

How do professional connections
and relationships impact midwives'
wellbeing and career sustainability?

3 SEPTEMBER

Prof Mei Krishnasamy
*University of Melbourne and Peter
MacCallum Cancer Centre*

Dr Meabh Cullinane
Peter MacCallum Cancer Centre

Overcoming inequity of opportunity
for optimal pain and symptom
management for Australians
affected by pancreatic cancer

1 OCTOBER

Prof Amanda Cooklin, Dr Stacey
Hokke, Dr Clair Bennett, & Jasmine
Love
*Judith Lumley Centre, La Trobe
University*

A/Prof Liana Leach, *Australian
National University*

The great work-family disruption:
Reshaping family-friendly work for
Australian parents

5 NOVEMBER

Dr Jenny Kruger
*Auckland Bioengineering Institute,
University of Auckland, New Zealand*

Bioengineering meets
physiotherapy: Innovative solutions
to an old problem

3 DECEMBER

Prof Jennifer Power
*Australian Research Centre in Sex,
Health and Society, La Trobe
University*

Sex education as women's
work? Supporting parents and
carers to speak with children about
sex and relationships



La Trobe University Bundoora
Campus

Awards

Member of the Order of Australia (AM) in the General Division

Professor Lisa Amir was recognised in 2025 “For significant service to women’s health, particularly breastfeeding research and support”



School of Nursing & Midwifery 3MT Competition

PhD scholar Sharon Mumford won the School of Nursing and Midwifery 3-Minute Thesis heat. Sharon’s PhD is exploring the health and wellbeing of midwifery students, their clinical placement environment, and their financial circumstances during their midwifery education in Victoria



Nancy Millis Medal

Awarded to authors of theses of exceptional quality. In 2025, two of our graduating students received this medal:

Dr Fiona Faulks

Social vulnerability and disparities in perinatal health for Victorian women: determining gaps in outcomes, access, and equity. Supervised by Touran Shafiei and Kristina Edvardsson.

Dr Res McCalman

What are the views and experiences of Aboriginal and Torres Strait Islander women having a baby in Victoria? Supervised by Helen McLachlan, Della Forster and Michelle Newton

SNM Research Excellence Award

Future-proofing the midwifery workforce

The aim of the FUCHSIA Cohort Study is to explore midwives’ and midwifery students’ views and experiences of (education and) working in the midwifery profession over a five-year period, and to track changes over time (2021-2025).

Robyn Matthews, Rebecca Hyde, Della Forster, Helen McLachlan, Touran Shafiei, Charlie Benzie, Sharon Mumford, Amanda Cooklin, Michelle Newton.

Best postgraduate student presentation, Royal Women’s Hospital Student Symposium

Jessica McBurney for her presentation on Recruiting, training and retaining volunteers in the DAISY randomised controlled trial (RCT) exploring telephone peer support for prevention of postnatal depression



Publications

Breastfeeding

Program lead: Professor Lisa Amir

Amir LH, Coca KP, Mello Da Silva MJ, Okada MM, Onat Demir G, Duran B, Kargin S, Gullu K, Delic L, Dragicevic M, Rosenbauer M, Ngan MM, Jeong W, Saha MR, Zakarija-Grkovic I. Management of mastitis in the hospital setting: An international audit study. *J Hum Lact* 2025; 41(4):401-11.

Amir LH, Drandic D, Pavicic Bosnjak A, Vidovic Roguljic A, Thomson G, Zakarija-Grkovic I. Maternal physical health and breastfeeding problems in Croatia: national online survey of new mothers. *Sex Reprod Healthc* 2025; 46:101149.

Biggar ER, McKenna L, Amir LH. Breastfeeding experiences of mothers with visual impairment: A scoping review. *Matern Child Nutr* 2025; 21(4):e70061.

Ghith A, Maliki R, Grzeskowiak LE, Amir LH, Ingman WV. Challenges and opportunities in quantifying bioactive compounds in human breastmilk. *Biomolecules* 2025; 15(3):325.

Jones LE, Amir LH, Shi En Chew N, Yun Low S, Yu Ting Woo V, Fok D, Peng Mei Ng Y, Amin Z. Do lactating mothers' descriptions of breastfeeding pain align with a biopsychosocial pain reasoning tool? A qualitative study. *Brain Sci* 2025; 15(10):1087.

Moorhead AM, Forster DA, Donath S, De Bortoli J, Amir LH. Does antenatal expressing affect onset of lactogenesis for women with diabetes? Results from a randomised controlled trial and cohort study. *Aust N Z J Obstet Gynaecol* 2025; 65:441-48.

Zakarija-Grkovic I, Drandic D, Pavicic Bosnjak A, Vidovic Roguljic A, Thomson G, Amir LH. Adherence to Baby Friendly Hospital Initiative global standards during the COVID-19 pandemic: a nationwide, cross-sectional study. *Acta Paediatr* 2025; Online ahead of print.

OTHER PUBLICATIONS

Erfina E, Haji Hashim S, Safari K, Bennetts S, East C. A review of digital health interventions to support breastfeeding in low- and middle-income countries: La Trobe University; 2025.

Child, family and community health

Program leads: Professor Leesa Hooker, Dr Catina Adams

Adams C, Bennetts S, Ridgway L, Hooker L, East C, Edvardsson K. Father and non-birth parent experience of child and family health services: a systematic review and meta-synthesis. *Aust J Prim Health* 2025; 31:PY24228.

Howland K, Edvardsson K, Lees H, Hooker L. Telehealth use in the well-child health setting. A systematic review of acceptability and effectiveness for families and practitioners. *Int J Nurs Stud Adv* 2025; 8:100277.

Nightingale HJ, Hooker L, Mnatzaganian G, Kingsley M. Midwives' management of gestational weight gain: Clinical practice behaviours and determinants using Normalisation Process Theory. *Women Birth* 2025; 38(5):101957.

O'Neill A, Hooker L, Edvardsson K. Clinical supervision practices with Australian child and family health nurses: Exploring facilitators and barriers. *J Adv Nurs* 2025; Online ahead of print.

Ridgway L, McKenna L, Hokke S, Hackworth N, Nicholson JM. Education for family-centred care: A qualitative study with educators of advanced practice child and family health nurses. *Nurse Educ Pract* 2025; 84:104313.

OTHER PUBLICATIONS

Adams C, Hooker L. Maternal, child and family health. In: Guzys D, Brown R, Halcomb E, Whitehead D, editors. *An Introduction to Community and Primary Health Care* 4th ed: Cambridge University Press; 2025. p. 280-91.

Mother and infant health and maternity services

Program leads: Professor Della Forster, Professor Helen McLachlan, Professor Christine East

Axmon A, Liu C, Grotta A, Edvardsson K, Sandberg M. Maternal outcomes among women with intellectual disabilities in comparison with the general population (IDcare). *AJOG Glob Rep* 2025; 5(4):100569.

Dawson K, Newnham E, Jones L, East C, Whitburn L. Exploring Australian midwives' approaches to labour pain and workplace realities: Philosophies in practice. *Sex Reprod Healthc* 2025; 46:101163.

Forster DA, Hyde R, Matthews R, Benzie CA. Beyond COVID-19: Reported clinical practices in maternity care in Victoria during the COVID-19 pandemic and implications for the future - A statewide review. *Aust N Z J Obstet Gynaecol* 2025; 65(3):343-50.

Gordon F, Whitburn LY, Newton M. Understanding the impact of Australian Health Practitioner Regulation Agency notifications on midwives' wellbeing, midwifery practise, and career: A qualitative study. *Midwifery* 2025; 148:104471.

Hashim SH, Erfina E, Abdul-Mumin KH, Sharbini S, Safari K, East C. Healthcare-seeking behaviours among women with hypertensive disorders of pregnancy in Asia: A scoping review. *Midwifery* 2025; 148:104541.

Henshall BI, Grimes HA, Davis J, East CE. The PRIMROSE Project: What is 'physiological birth'? A quantitative approach to the perceptions of the Australian population. *Midwifery* 2025; 145:104375.

Henshall BI, Grimes HA, Davis J, East CE. The PRIMROSE project: What is 'physiological birth'? Exploring the perceptions of care providers and birthing persons in Australia: A qualitative descriptive study. *Midwifery* 2025; 150:104617.

Love AMA, Cai RY, Rideout B, Hollenberg L, Clapham H, McKeown G, Edwards C, Robinson A, Benzie C, Gibbs V. Stories of competence, challenges, and coping: The experiences of Australian Autistic people during pregnancy and early parenthood. *Autism in Adulthood* 2025; Online ahead of print.

Mumford SJ, Benzie CA, Newton MS, Hyde RL, Matthews RP, Cooklin AR, McLachlan HL. "At what cost? Exploring the financial circumstances of Victorian midwifery students: A population-based cross-sectional study". *Women Birth* 2025; 38(6):102116.

Murray C, George M, Davis J, Edvardsson K. Women's choices and preferences for subsequent mode of birth following an obstetric anal sphincter injury (OASI): A scoping review. *Midwifery* 2025; 150:104588.

Newton MS, Crawford SB, Holmlund S, McCalman P, McLardie-Hore FE, Forster DA, McLachlan HL. Stronger connections for better outcomes: Exploring the views and experiences of midwives working in a culturally tailored caseload midwifery model for women having a First Nations baby in Australia. *Women Birth* 2025; 38(5):102086.

Pidd DJ, Adams CL, Newton M, East CE. Women's insights into choice, empowerment, and control in a subsequent pregnancy following a negative birth experience: A multimethod study. *Women Birth* 2025; 39(1):102124.

Pidd DJ, Adams CL, East CE, Wilson IM, Newton MS. Enhancing woman-centred care for pregnant women who have experienced a previous traumatic birth: An Australian Modified Delphi Study. *Midwifery* 2025; 142:104303.

Xu VX, Mogren I, Bergstrom C, Edvardsson K, Small R, Flood M, Holmlund S, Aldrich R, Brennecke S, McDonald S, McEvoy M, Said JM, Shembrey M, Yuen N, East CE. Health professionals' experiences and views on obstetric ultrasound in Victoria, Australia: A cross-sectional survey. *Aust N Z J Obstet Gynaecol* 2025; 65(2):190-97.

Zugna SA, McLachlan HL, Cullinane M, Newton M, Forster DA. Exploring rural maternity clinicians' views of an interprofessional education program. *Health Education in Practice: Journal of Research for Professional Learning* 2025; 8(1):1-17.

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Henry S, Cullen S, Donnelly J, Sundberg J, Ratajczak T, McLachlan H, Forster D, Vasquez P, Reynolds K, Reppington P, McCalman R, Walker S, Onwuka S, McEvoy E, Jones K, Gallagher C, Marriott R, Bundle G, Chamberlain C. Working towards safe and sacred care: University of Melbourne; 2025.

Forster D, Benzie C, McLachlan H, Hokke S. Exploring the needs and outcomes of pregnant women with disabilities. Melbourne: La Trobe University; 2025.

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East C, Pliszka M, Regnier L, Flood M. The potential for routinely weighing/measuring blood loss following vaginal birth to improve ascertainment: a retrospective study at two Victorian hospitals. Melbourne: La Trobe University; 2025.

McKellar L, Kuipers Y, Cummins A, Brosnan C, Groizard J, Buyx P, Gillett K, Whitburn L, Newnham L. Overview of humanisation concepts. In: Newnham E, McKellar L, Mayra K, Kuipers Y, editors. *Humanising Birth: Considerations for the Global Maternity Crisis*. Cham.: Springer; 2025. p. 13-30.

Sexual and reproductive health

Program lead: Professor Kristina Edvardsson

Edvardsson K, Egan N, Taft A, Norman WV, Harris ML, Black KI, Bateson D, Hooker L, Shankar M. Time trends and characteristics associated with abortion method used by young Australian women. *Int J Epidemiol* 2025; 54(2):dyaf028.

Edwards G, Hooker L, Edvardsson K. The influence of rurality on women's decision making and pregnancy choices following an unintended pregnancy: A systematic review. *Womens Health (Lond)* 2025; 21:17455057251348986.

James S, Melwani S, Gwini SM, Black KI, Taft A, Bateson D, Norman WV, Mazza D. The knowledge, attitudes and practices of practice nurses in the provision of medication abortion: A cross-sectional survey. *J Adv Nurs* 2025; Online ahead of print.

James S, Melwani S, Gwini SM, Black KI, Taft A, Bateson D, Norman WV, Mazza D. Practice nurse provision of long-acting reversible contraception: A cross-sectional survey of knowledge and practices. *J Adv Nurs* 2025; Online ahead of print.

Kassie GM, Mazza D, Edvardsson K, Black KI, Schummers L, Norman WV, Grzeskowiak LE. Provision of contraceptive prescriptions following medication abortion in Australian general practice: A National Longitudinal Study using MedicineInsight, 2013-2022. *Contraception* 2025; Online ahead of print.

Mazza D, Assifi AR, McGeechan K, Haas M, Peipert JF, Lucke J, Taft A, McNamee K, Black KI. Increasing the uptake of long-acting reversible contraception through family practice: the Australian Contraceptive CHOICE Project (ACCORd) cluster randomized controlled trial 3-year follow-up. *Am J Obstet Gynecol* 2025; 233(4):299.

Pike B, Hooker L, LaGrappe D, Edvardsson K. How reproductive coercion and abuse shapes survivors' safety and life circumstances: A systematic review. *Journal of Family Violence* 2025; Online first.

Saldanha S, Botfield JR, LaGrappe D, Moradi M, Mazza D. Reproductive coercion and associated health consequences: A scoping review. *Trauma Violence Abuse* 2025; Online first.

Srinivasan S, James SM, Kwek J, Black K, Taft AJ, Bateson D, Norman WV, Mazza D. What do Australian primary care clinicians need to provide long-acting reversible contraception and early medical abortion? A content analysis of a virtual community of practice. *BMJ Sex Reprod Health* 2025; 51(2):94-101.

Transition to contemporary parenthood – preparation and support

Program lead: Professor Amanda Cooklin

Bennett C, Westrupp EM, Bennetts SK, Love J, Hackworth NJ, Berthelsen D, Nicholson JM. An early parenting intervention focused on enriched parent-child interactions improves effortful control in the early years of school. *Child Dev* 2025; 96(1):355-74.

Bennetts SK, Love J, Hokke S, Bennett C, Gilbert H, Treyvaud K, Williams R, Nicholson JM, Crawford SB. 'They take the fear out of failing': Children's and parents' experiences of the Risky Kids Program in Australia. *J Community Psychol* 2025; 53(2):e70001.

Cook M, Pennay A, Caluzzi G, Cooklin A, MacLean S, Riordan B, Torney A, Callinan S. Examining gender in alcohol research: A systematic review of gender differences in how men and women are studied in alcohol research. *Int J Drug Policy* 2025; 138:104763.

Cook M, Pennay A, MacLean S, Caluzzi G, Riordan B, Cooklin A, Torney A, Callinan S. Gender differences in alcohol research: A focus on how men and women are studied in Australia and Aotearoa New Zealand. *Drug Alcohol Rev* 2025; 44(5):1304-07.

Cooklin AR, O'Connor M, Nicholson JM, Berthelsen D, Hockey P, Faulkner A, Edwards B, Smithers LG, Slade T, Moshion J, Strazdins L, Sanson AV, Zubrick SR. Cohort profile: Growing up in Australia: the Longitudinal Study of Australian Children (LSAC). *Int J Epidemiol* 2025; 54(6):dyaf168.

Fogarty A, McMahon G, Hosking C, Fletcher R, Delgado J, de Andrade D, Leach L, Cooklin A, Giallo R. Suicide in Victorian fathers. *Aust N Z J Psychiatry* 2025; 59(11):946-49.

Heris CL, Glover T, Bright T, Graham S, Bennetts SK, Jones KA, Kennedy M, Atkinson C, Chamberlain C. First Nations parents' experiences of COVID-19 and associations with symptoms of complex post-traumatic stress disorder. *First Nations Health and Wellbeing - The Lowitja Journal* 2025; 3:100086.

Honisset S, Lingam R, Eapen V, Oldenburg B, Hackworth N, Hiscock H, Charalambous G, Minton L, Pringle G, Woolfenden S, Dalziel K, Eastwood J, Goldfeld S. A novel digital platform to support child and family mental health in Australia (Child and Family eHub): Protocol for a mixed methods evaluation. *JMIR Res Protoc* 2025; 14:e72548.

Reid C, Smullen F, Bennetts SK, Amir LH, Chamberlain C. Trauma-informed primary health care for parents: Multidisciplinary experiences in rural service implementation. *Aust Social Work* 2025; 78(4): 379-94.

Sandborg J, Markides BR, Simmons S, Downing KL, Nicholson JM, Orellana L, Koorts H, Carson V, Salmon J, Hesketh KD. Parental and demographic predictors of engagement in an mHealth intervention: Observational study from the Let's Grow trial. *JMIR Mhealth Uhealth* 2025; 13:e60478.

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Smith CE, Hnatiuk JA, Crawford SB, Hesketh KD. Examining cross-sectional associations between Australian parents' physical activity levels and their parenting confidence. *BMC Public Health* 2025; 25:1686.

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Bennetts SK, Crawford SB, Howell TJ, Giles FC, Burke K. Companionship in times of uncertainty: The role of pets for families with children during COVID-19. In: Savic M, Patulny R, J F, editors. *Social Connection in Everyday Spaces*. Bristol University Press; 2025. p. 71-86.

Work and family

Program lead: Professor Amanda Cooklin

Bennett C, Giallo R, Hokke S, Love J, Leach L, McCredie K, Oakman J, Cooklin A. Working at home, caring at home during the pandemic: Profiles of working parents and links to parents' wellbeing from an Australian prospective study. *J Occup Environ Med* 2025; Online ahead of print.

Hokke S, Bennetts SK, Love J, Leach L, Crawford S, Cooklin A. What happened to parents' work-family conflict from before to during COVID-19? Findings from a longitudinal Australian study. *Community, Work & Family* 2025; 28(4):519-40.

Leach L, Doan T, Giallo R, Love J, Hokke S, Oakman J, Findley H, Nicholson JM, Cooklin AR. Disruption and inequity in work, family and mental health: a longitudinal study of Australian mothers before and during the COVID-19 pandemic. *BMC Public Health* 2025; 25:2292.

Love J, Hokke S, Cooklin AR. Time pressure in employed parents of adolescents: The role of work and family drivers and workplace supports. *Journal of Family and Economic Issues* 2025; 46:79-92.

Love J, Lambert KA, Cooklin A, Hokke S, Leach L, Giallo R, Doan T, Findley H, Oakman J. Mismatch between actual and preferred number of days working from home: parental status, work-family conflict, and stress. *Community, Work & Family* 2025; Online first.

McCredie K, Hokke S, Leach L, Cooklin AR. Longitudinal associations between parents' job characteristics, parenting, and adolescent academic outcomes. *Family Relations* 2025; 74:197-214.

Oakman J, Macdonald WA, McCredie K, Clune S. Impact of work-related psychosocial versus biomechanical hazards on risk of musculoskeletal disorders: A systematic review and meta-analysis. *Appl Ergon* 2025; 125:104481.

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Wang T, Butterworth P, Cooklin A, Strazdins L, Leach L. Investigating the association between Work Family Conflict (WFC) and Major Depression Disorder (MDD). *J Occup Environ Med* 2025; 67(9):e630-41.

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Bloomer MJ, Butler AE, Brooks LA, Coventry A, McKeever S, Ranse K, Rowe J, Thomas S, Thornton R. Parents' and nurses' experiences of end-of-life care in intensive care for children: A systematic review. *Aust Crit Care* 2025; 38(6):101455.

Butler AE, Appleyard J, Manning JC. "We are family, I got all my siblings with me?" - Bringing sibling support in PICU into focus. *Intensive Crit Care Nurs* 2025; 91:104196.

Butler AE, Bichard E, Masterson K, Appleyard J, Apriyanti E, Megersa ND, Collins C, McKeever S, Manning JC, Seaton SE. Exploring 'family' in paediatric intensive care family-centred-care research: A concept analysis. *Intensive Crit Care Nurs* 2025; 88:103972.

Butler AE, Ridgway L, Henderson EM, Hokke S, Edvardsson K, Adams C, Greenwood E, East C, Safari K, Arefadib N, McKenna L, Copnell B. Family-centred care research in paediatrics: A scoping review. *J Child Health Care* 2025; Online ahead of print:13674935251337492.

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GBD Acute and Chronic Care Collaborators. Characterising acute and chronic care needs: insights from the Global Burden of Disease Study 2019. *Nat Commun* 2025; 16(1):4235.

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GBD Disease and Injury and Risk Factor Collaborators. Burden of 375 diseases and injuries, risk-attributable burden of 88 risk factors, and healthy life expectancy in 204 countries and territories, including 660 subnational locations, 1990-2023: a systematic analysis for the Global Burden of Disease Study 2023. *Lancet* 2025; 406(10513):1873-922.

GBD Europe Life Expectancy Collaborators. Changing life expectancy in European countries 1990-2021: a subanalysis of causes and risk factors from the Global Burden of Disease Study 2021. *Lancet Public Health* 2025; 10(3):e172-e88.

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Jones LE, Heng H, Heywood S, J K, Amir LH. A brief workplace education intervention to improve pain literacy in physiotherapists: a novel use of the Pain and Movement Reasoning Model. *Asia Pacific Journal of Pain* 2025; 35(1):33-8.

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Wilson IM, Tan KC, Tan JYS, Jones L, Dawood K, Mack W. "I (am) scared I will hurt him, then I will regret it forever": Singaporean caregiver perspectives and elder abuse risk. *J Elder Abuse Negl* 2025; 37(2):150-80.

Wong SR, Wilson IM, Jones LE, Teo E, Chong STJ, Chia JLX, Sin G, Amin Z. Parental perception of pain in premature babies in neonatal intensive care unit: a qualitative study. *J Perinatol* 2025; 45:1693–99.

OTHER PUBLICATIONS

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Reducing Gender-based Violence Research group (ReGEN, La Trobe Rural Health School)

Program lead: Professor Leesa Hooker

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Trawalla Foundation **\$67,500.00**

Baggarrook Yurrongi First Nations midwifery program \$67,500.00

Sax Institute **\$10,304.00**

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La Trobe University proudly acknowledges the Traditional Custodians of the lands where its campuses are located in Victoria and New South Wales. We recognise that Indigenous Australians have an ongoing connection to the land and value their unique contribution, both to the University and the wider Australian society.

La Trobe University is committed to providing opportunities for Aboriginal and Torres Strait Islander people, both as individuals and communities, through teaching and learning, research and community partnerships across all of our campuses.

The wedge-tailed eagle (*Aquila audax*) is one of the world's largest. The Wurundjeri people – traditional owners of the land where the Judith Lumley Centre is located and where most of our work is conducted – know the wedge-tailed eagle as Bunjil, the creator spirit of the Kulin Nations.

There is a special synergy between Bunjil and the La Trobe logo of an eagle. The symbolism and significance for both La Trobe and for Aboriginal people challenges us all to 'gamagoen yarrbat' – to soar.



JUDITH LUMLEY CENTRE

FOR WOMEN,
CHILDREN AND
FAMILY HEALTH
RESEARCH

CONTACT US:

T: +61 3 9479 8800

E: jlc@latrobe.edu.au

W: latrobe.edu.au/jlc



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