



**JUDITH
LUMLEY
CENTRE**

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

**2020 – 2021
BIENNIAL REPORT**



**LA TROBE
UNIVERSITY**



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Director's report

Welcome to the Judith Lumley Centre biennial report for 2020 and 2021. As was the case globally, these were difficult times for our JLC community. With most of us resident in Victoria, we experienced multiple lockdowns with our staff and students affected in a variety of ways. Some were at the forefront of the COVID response, research had to be paused or completely redesigned, and many were trying to work from home while caring for children and home schooling. With online technology, we had ad hoc “corridor conversations” and coffee meetings, and became familiar with each other’s children and pets. Our regular schedule of activities – journal club, postgrad meetings, methods seminars, lunchtime seminars, formal and informal Centre meetings, and “shut up and write” sessions were more important than ever for keeping us connected and grounded.

As we emerge from the severe restrictions of the first two years with COVID, we have a lot to be thankful for and to celebrate. Three of our staff – Amanda Cooklin, Kristina Edvardsson and Leesa Hooker – received recognition of their research and academic leadership with promotion to Associate Professor. Amanda was also the recipient of a highly competitive ARC Future Fellowship to continue to pursue her research on the impact of work on parents and children.

We have had around 150 peer-reviewed publications, major reports and book chapters across 2020 and 2021 – a rate of publication similar to previous years despite the considerable disruptions experienced. Likewise our funding has remained strong, with a growth of around 7% and 12% from 2019 to 2020 and 2021 respectively.

We also had five students complete their PhD or Professional Doctorate degrees in 2020 and 2021. Congratulations to Drs Nawal Abdulghani, Kate Dawson, Lester Jones, Christine Murray and Mercy Otsin and their supervisors.



We sadly farewell Associate Professor Catherine Chamberlain in 2020. Cath made enormous contributions to JLC through her program of research on how to support Aboriginal and Torres Strait Islander parents and children who have experienced complex trauma. We wish her all the best in her new position at the University of Melbourne.

One thing that has been reinforced for me over the last two years, is the importance of workplace culture. While we have a whole program of research devoted to this, COVID has really brought into focus the strengths of our JLC culture. I want to acknowledge the efforts that everyone associated with the Centre has made to look out for and support their colleagues.

I hope you enjoy reading this report.

Professor Jan Nicholson
Centre Director

Research Programs

Aboriginal and Torres Strait Islander family health

Program Leads: Associate Professor Catherine Chamberlain
Professor Helen McLachlan



The Judith Lumley Centre has a long-held commitment to reducing health inequities experienced by Aboriginal and Torres Strait Islander people.

Pregnancy and the early years after birth is a unique window of opportunity to address these inequities. We are currently undertaking two large NHMRC funded projects – both of which aim to improve the health of Aboriginal parents and their babies.

The *Healing the Past by Nurturing the Future* project is a four-year project which aims to co-design perinatal awareness, recognition, assessment and support strategies for Aboriginal parents experiencing complex trauma.

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' is a five-year project evaluating continuity of midwifery care for Aboriginal women.

Healing the past by nurturing the future

Catherine Chamberlain, Jan Nicholson, Yvonne Clark and Helen McLachlan; in collaboration with Graham Gee, Stephanie Brown, Deirdre Gartland and Fiona Mensah, Murdoch Children's Research Institute; Judy Atkinson and Caroline Atkinson, We Al-li Pty Ltd; Helen Herrman, Orygen; Karen Glover, South Australian Health and Medical Research Institute; Sandra Campbell, James Cook University; Tanja Hirvonen, Flinders University; Amanda Mitchell, Aboriginal Health Council of South Australia; Shawana Andrews, University of Melbourne; Sue Brennan, Monash University; Danielle Dyall, Aboriginal Medical Services Alliance Northern Territory

In partnership with the Central Australian Aboriginal Congress (Alice Springs), Nunkuwarrin Yunti of South Australia and the Women's and Children's Health Network (South Australia), the Royal Women's Hospital and Bouverie Family Healing Centre (Melbourne), we are undertaking a four-year Lowitja Institute and NHMRC funded community-based participatory action research study (2018-2021). The project aims to co-design acceptable and feasible perinatal awareness, recognition, assessment and support strategies for Aboriginal parents experiencing complex trauma.

We have completed the first three of four action research cycles, which includes comprehensive evidence reviews, discussion groups with senior Aboriginal leaders (*Deadly Nannas*) and Aboriginal parents, key stakeholder consultation and three key stakeholder workshops, as well as development of an Aboriginal Complex Trauma and Strengths Questionnaire. In 2021–22 we conducted analysis of psychometric evaluation interviews, a second round of parent discussion groups and discussion groups with service providers regarding the parental acceptability and service provider feasibility of proposed strategies. In 2021 we received an Ian Potter Foundation grant to develop program materials for implementation and evaluation (2021-2023).

Funding: NHMRC Project Grant, Lowitja Institute and Ian Potter Foundation grants.

Status: in progress,

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, Pamela 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') is 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 is 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 are proactively offered 'caseload' midwifery: they receive continuity of care from a primary midwife through pregnancy, labour, birth and postpartum. The study is also exploring 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. Uptake of the model has been high, and by the end of December 2020 (when data collection was completed), 663 women had received care within the culturally specific caseload model of care.

In 2021–22 we completed data analysis of our key study outcomes including model implementation, clinical outcomes, women's experiences, health economic outcomes as well as experiences of midwives and key stakeholders.

A highlight of the project to date was the project team winning a Victorian Public Healthcare Award in the category *Improving Aboriginal Health*.

Funding: NHMRC Partnership Grant and funding from five partner organisations

Status: in progress; publication in *Midwifery* (2019)

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.

We have partnerships with the major Victorian maternity services, maternal and child health services, and the Australian Breastfeeding Association, the main advocacy group in Australia.

In 2020, we received funding from the Therapeutic Guidelines Ltd/RACGP Research Foundation to conduct a mixed method study looking at antibiotic prescribing for mastitis in breastfeeding women. We are excited that the funders have recognised the need for improved understanding of general practitioners' use of guidelines during lactation, and strengthens our ongoing collaboration with A/Prof Luke Grzeskowiak in Adelaide.

Another mastitis project was funded in 2021. A/Prof Wendy Ingman, University of Adelaide, and Prof Lisa Amir received a three year National Health and Medical Research Council (NHMRC) Ideas Grant to investigate the role of immune factors in milk play in preventing and treating mastitis.

Development of a core outcome set for breastfeeding research: an international stakeholder Delphi survey

Lisa Amir, Clare Barnett, Christine East; on behalf of the Generic protocol for Cochrane breastfeeding reviews working party

This Delphi study aims to develop a core outcome set of key, agreed upon breastfeeding definitions to improve the consistency and uniformity of outcomes reported in trials and systematic reviews designed to support women to breastfeed. It will involve three rounds of surveys.

Status: first round conducted in 2020 before project was put on hold due to the COVID-19 pandemic.

Interventions for supporting breastfeeding: generic protocol for systematic reviews of randomised controlled trials

Christine East, Lisa Amir, Catherine Chamberlain; in collaboration with Leanne Jones, University of Liverpool; on behalf of the Generic protocol for Cochrane Breastfeeding Reviews Working Party

Many outcomes are reported in randomised controlled trials that aim to improve breastfeeding. Consistent with best practice, we are preparing a generic protocol to inform a core outcome set for systematic reviews of such interventions. The working group includes eminent international experts and consumer engagement through the Australian Breastfeeding Association.

Status: registered with COMET (www.comet-initiative.org/studies/details/1028), title registration with *Cochrane Pregnancy and Childbirth*, systematic review conducted (L Jones) to identify which outcomes are being reported currently in Cochrane Systematic Reviews and randomised controlled trials (completed), Delphi study in progress to inform the outcomes

The role of micro-organisms (*S. aureus* & *C. albicans*) in the pathogenesis of breast pain and infection in lactating women (CASTLE study)

Lisa Amir and Méabh Cullinane; in collaboration with Suzanne Garland and Sepehr Tabrizi, Bio21 Molecular Science & Biotechnology, University of Melbourne; Susan Donath, Murdoch Children's Research Institute; Catherine Bennett, Deakin University

This project is a descriptive study of 360 breastfeeding women, recruited from the Royal Women's Hospital and Frances Perry House. The aim of the study was to investigate the role of microorganisms in nipple and breast pain in breastfeeding women. Secondary outcomes were maternal physical and mental health in the first eight weeks postpartum.

Funding: NHMRC Health Professional Research Fellowship 2006–2010 (LA); NHMRC Project Grant 2009–2010; NHMRC Equipment Grant 2009–2010; Helen Macpherson Smith grant 2011–2012

Status: primary outcomes published in *BMJ Open* in 2013; ninth paper published in 2020; other papers under review

RUBY (Ringing Up about Breastfeeding early): proactive peer (mother-to-mother) breastfeeding support by telephone

Della Forster, Lisa Amir, Helen McLachlan, Touran Shafiei, Rhonda Small, Fiona McLardie-Hore, Heather Grimes, Christine East; in collaboration with Anita Moorhead, Royal Women's Hospital; Mary-Ann Davey, Monash University; Cindy-Lee Dennis, University of Toronto; Lisa Gold, Deakin University; Kate Mortensen and Susan Tawia, Australian Breastfeeding Association

The RUBY study aimed to determine whether proactive telephone-based peer support during the postnatal period increases the proportion of infants being breastfed at six months of age. RUBY was a multicentre, randomised controlled trial conducted in three hospitals in Victoria, between February 2013 and December 2015.

Over 1,150 first-time mothers intending to breastfeed were recruited at one of the three hospitals (Royal Women's, Monash Health, Western Health Sunshine) after birth and prior to hospital discharge. They were randomly assigned

to usual care or usual care plus proactive telephone-based breastfeeding support from a trained peer volunteer for up to six months postpartum.

The study found that infants of women allocated to telephone-based peer support were more likely than those allocated to usual care to be receiving breast milk at six months of age (intervention 75%, usual care 69%).

Funding: The Felton Bequest, Australia and La Trobe University

Status: protocol paper published in *BMC Pregnancy and Childbirth*; main outcomes paper published in *EClinicalMedicine* (2019); in 2020 women's experiences published in *BMJOpen* and volunteers' experiences in *PloSOne* and *Public Health Nutrition*

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

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 have developed design guidelines that outline how a range of everyday shared spaces could become breastfeeding-friendly as well as the optimal design characteristics for dedicated breastfeeding spaces. In 2019, we presented the findings at conferences, to participants, and local councils. In 2020, we shared our ideas with staff at the Department of Environment, Land, Water and Planning working on open space strategy for Melbourne.

Funding: Building Healthy Communities Research Focus Area

Status: presented at conferences in 2018, 2019; papers in preparation

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

Lisa Amir, Luke Grzeskowiak (University of Adelaide), Sharinne Crawford, Méabh Cullinane

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 NPS MedicineInsight database which includes information from over 60 million consultations with 2.7 million women of reproductive age from over 27,000 GPs during an eight year period. The second component will be in-depth interviews with GPs.

Funding: Therapeutic Guidelines Ltd/RACGP Foundation
Status: database analysis underway; interviews with GPs underway

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

Rebecca Hyde, Lisa Amir, Anita Moorhead, 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: ethics application underway

A paradigm shift in lactational mastitis

Lisa Amir, Wendy Ingman (University of Adelaide)

This project will explore 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. In her laboratory, Wendy has shown that a protein in the inflammatory pathway called the toll-like receptor 4 (TLR4) in mammary gland tissue is critically important in the development of mastitis. She has also shown that there are components in milk that may be protective against bacteria. We will explore these components 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.

Funding: NHMRC Ideas Grant 2022-24
Status: ethics application in preparation



Child, family and community health

Program Lead: Associate Professor Leesa Hooker



The Child, Family & 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 & 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.

Reconnecting mothers and children after violence (RECOVER): the Australian child–parent psychotherapy feasibility study

Leesa Hooker, Angela Taft; in collaboration with Cathy Humphreys, University of Melbourne; Sarah Wendt, Flinders University; Emma Toone, Berry Street Childhood Institute

Child-Parent Psychotherapy (CPP) is an intervention for children aged 0–5 years who have experienced traumatic events such as violence, and are experiencing mental health, attachment, and behavioural problems.

Therapeutic sessions with the child and primary caregiver seek to strengthen the caregiver-child relationship as a vehicle for restoring and protecting the child's health, development and wellbeing.

The aim of the RECOVER project is to pilot an Australian adaptation of the US-developed Lieberman CPP model of care for abused Victorian women and their children. This includes recruiting 30 mother-pre-school child dyads; delivery of CPP intervention according to family need (average 20–32 weeks); completing a qualitative process evaluation of the feasibility and acceptability of implementing CPP; and the piloting of the outcome measures. If effective, findings will inform future trials and expansion of CPP nationally.

Funding: NHMRC, Centre for Research Excellence (CRE) grant and post-doctoral fellowship (LH); Australia's National Research Organisation for Women's Safety (ANROWS) funding (April 2019) for interstate and rural expansion of RECOVER

Status: data collection continues; ANROWS second project report completed

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

Leesa Hooker, Lisa Auchettl, Bernice Boland; 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 aim to explore views and experiences in using the current standards and to produce a contemporary document that is relevant and useful to all intended users.

Funding: VAMCHN and ANMF

Status: ethics approved; data collection commenced in late 2020

Capacity building primary care responses to domestic violence in regional Brazil: Co-design and piloting of a health system model of care

Leesa Hooker, Angela Taft; in collaboration with Kelsey Hegarty, University of Melbourne; Marcos Signorelli, Federal University of Parana, Brazil

La Trobe University and University of Melbourne have partnered with Federal University of Parana, State University of West Parana, Brazil and the House of the Brazilian Woman to co-design a domestic violence (DV) primary care systems model of support, including DV training and resources for regional health services caring for families experiencing domestic violence.

Building on existing relationships with Parana DV services and the health care provider workforce, we aim to investigate existing healthcare provider DV training needs and primary health care system requirements through observation of current practices, interviews, and an online survey to all Parana coastal healthcare staff about their past DV training, current DV practices and needs.



The team will use these data to inform co-design of innovative training materials (informed by the WHO curriculum) for a regional Brazilian context. Concurrently, a co-designed systems model of DV care will be developed with The House of the Brazilian Woman, local staff and the research team.

Funding: Victorian Government Department of Jobs, Precincts and Regions

Status: Brazilian ethics approved, data collection commenced; Brazilian Masters student engaged in project



Mother and infant health and maternity services

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



JLC has a long history of researching mother and infant health and wellbeing, as well as exploring how maternity services are provided in hospitals and elsewhere, including work related to women's and care providers' views and experiences. Our aim is for our research to make sure the best possible outcomes are achieved for women and their infants.

Some of our studies focus on specific groups of women, for example immigrant women or other vulnerable groups. Other studies look more broadly. We are undertaking many state-wide and national studies in this area, mostly with a focus on describing and improving current practice.

A highlight of 2020 was receiving a large MRFF Preventative and Public Health grant to explore the impact of caseload midwifery on preterm birth among vulnerable and disadvantaged women. This grant builds on our previous work on midwife-led models of care, and consolidates two international collaborations – with Professor Jane Sandall, from Kings College in London, as well as with Dr Mia Ahlberg, from Karolinska Institute in Sweden.

The ABLE Study (Asking women aBout disabiliTiEs)

Charlie Smithson, Helen McLachlan, Della Forster, Michelle Newton

It is estimated that more than one billion people worldwide are living with a disability. However, limited information exists on the disability status and needs of women during pregnancy. In Australia, disability status is not included in the Perinatal National Minimum Data Set. While there is a limited amount of qualitative research focusing on the experiences of pregnancy and childbirth of women with a disability, there is an absence of quantifiable data. We aim to address this gap by exploring the prevalence and identification of women with disabilities who utilise maternity services at the Royal Women's Hospital. Two separate recruitment periods took place in 2019 using two different disability identification questions to attempt to determine optimal disability identification. A follow-up questionnaire was used to gain insight into the experiences of women who identify as having a disability about how they found their pregnancy, labour and birth and the early postnatal period.

We have also examined the perinatal outcomes of women with a disability who had specialised care through the Women with Individual Needs (WIN) Clinic at the Royal Women's Hospital and compared this with hospital-wide perinatal outcome data.

Funding: The Royal Women's Hospital
Status: data collected; analysis underway

Diabetes and antenatal milk expressing (DAME): a randomised controlled trial

Della Forster, Lisa Amir, Anita Moorhead, Christine East; in collaboration with Susan Jacobs, Peter Davis, Amanda Aylward and Rachael Ford, the Royal Women's Hospital; Susan Walker, Kerri McEgan, Gillian Opie and Catherine McNamara, Mercy Hospital for Women; Susan Donath, Murdoch Children's Research Institute; Lisa Gold, Deakin University

This world first study has found that women with diabetes in a low-risk pregnancy can safely express breast milk in late pregnancy, with the study dispelling concerns that the practice could cause harm to babies.

The DAME study explored the safety and effectiveness of advising women with diabetes in pregnancy to commence expressing breast milk from 36 weeks of pregnancy.

We recruited a total of 635 women and randomised them to the study – about half of them were advised to express. We recruited the women at six sites that provide pregnancy and birth care: the Royal Women’s Hospital, Mercy Hospital for Women, Monash Health, Barwon Health, the Women’s at Sandringham (part of the Royal Women’s Hospital) and Frankston Hospital, from June 2011 until October 2015. We collected data at recruitment in late pregnancy as well as from birth records, and then by telephone interview at two weeks and 12 weeks after birth.

The study found that for women with diabetes in pregnancy who were considered to be of low obstetric risk, there was no harm in advising them to express breast milk in late pregnancy. We also found evidence that infants of these women were more likely to receive only breast milk in the first 24 hours after birth.

The findings pave the way for clinicians to recommend that low-risk pregnant women with diabetes in pregnancy express and store breast milk to give to their newborns in the event they develop hypoglycaemia (low blood sugar levels) – a condition that can cause serious health problems in newborns.

The results of our study should not be extrapolated to high-risk groups with diabetes in pregnancy. The study results were published in *The Lancet* in 2017, and clinical guidelines have been developed based on the study outcomes.

A sub-study titled Views and experiences of women in the Diabetes and Antenatal Milk Expressing trial has been completed.

Funding: NHMRC Project Grant; La Trobe University
Status: ongoing; primary outcomes published in *The Lancet* in 2017; women’s experiences in *Maternal & Child Nutrition* in 2021; more papers in preparation, presentations at national and international conferences

ECO: exploring the introduction, expansion and sustainability of caseload midwifery in Australia

Michelle Newton, Kate Dawson, Della Forster, Helen McLachlan

Caseload midwifery is a maternity model of care, which aims to provide women with continuity of carer from a known midwife. There is strong evidence that caseload care decreases interventions (e.g. caesarean births, analgesia in labour) as well as increasing women’s satisfaction with care. Infant outcomes are also improved. Researchers from JLC led the largest randomised controlled trial of caseload care: They found that infants whose mothers were allocated to caseload were less likely to be admitted to the special care nursery and of low birthweight, and more likely to commence breastfeeding (McLachlan, Forster et al. 2012).

In the caseload model, women have a primary midwife, and each midwife carries a ‘caseload’ of women, to whom she provides care throughout the antenatal, intrapartum and postnatal periods, and works with two or three other midwives to form a small group, with each providing back up care for the others, to maintain care by known care givers. A study undertaken in Victoria found that midwives working in caseload were more satisfied and less burnt out than their standard care counterparts. However, there was some evidence that not all midwives want to work in this way, suggesting that the sustainability of the model needs exploration (Newton, McLachlan et al, 2016; Newton, McLachlan et al, 2015).

The ECO study aims to explore the sustainability of caseload midwifery in Australia. This model of care is being promoted as the ‘gold standard’ of care, and an increasing number of hospitals are introducing the model. However, very little is known about the workforce implications, and therefore the possible scale and sustainability of this style of care. This cross-sectional study involved contacting all public maternity hospitals in Australia to invite management and midwives to participate in the study. An online survey was sent to maternity managers of participating hospitals and then online or hard copy surveys were supplied to midwives around Australia. A survey of Victorian graduating midwifery students was also conducted to elicit their intent to work in a caseload model. We received responses from 149 maternity managers, 542 midwives from throughout Australia and from 129 graduating midwifery students from Victoria.

Status: Data collection complete; five papers published

Evaluation of the *Growing Together Parenting Kit*: a mixed methods study

Della Forster, Jan Nicholson, Helen McLachlan, Michelle Newton, Heather Grimes, Fiona McLardie-Hore, Touran Shafiei, Sarah Hay

The Royal Women's Hospital developed an educational kit for pregnant women about early parenting, known as *Growing Together*, with funding from the Victorian State Government. The kit has three components – an information book for parents that covers the journey from conception to one year of age, an App that has been specifically designed for the project, and a children's book that parents are encouraged to read to their infants.

We evaluated the kit using mixed methods, measuring a range of outcomes including parents' views and experiences of the care and information, women's experience of motherhood, attachment, infant development, and parental knowledge and confidence as well as the views and experiences of health professionals.

Funding: The Royal Women's Hospital
Status: data collection completed; final report submitted; protocol paper published in *BMC Psychology* (2019); second paper submitted, other outcome papers in preparation

Exploring the feasibility of conducting a multi-site randomised controlled trial to test if primary midwife-led care improves outcomes for socially vulnerable women

Helen McLachlan, Della Forster, Touran Shafiei, Michelle Newton, Molly Allen, Fiona Faulks; in collaboration with Jane Sandall, King's College, London; Mia Ahlberg, Karolinska Institute, Stockholm

This study explored the feasibility of conducting a randomised controlled trial to test if caseload midwifery care improves outcomes for socially vulnerable women. Caseload midwifery is a model of maternity care where women have continuity from a 'known' midwife during pregnancy, labour, birth and postpartum. For women who are socially disadvantaged or vulnerable, key perinatal outcomes are poorer overall than for women who are not from these groups, however, there have been no randomised trials of caseload midwifery care for socially vulnerable groups in Australia or elsewhere.

We conducted interviews with 70 pregnant women similar to those we would approach in a trial and found that the vast majority of women agreed that they would like to be offered caseload if it was offered in the future and would be willing to participate in a randomised trial. Our study also demonstrated strong commitment from our clinical partners to implement caseload for socially vulnerable women in a randomised trial.

Funding: Building Healthy Communities RFA, La Trobe University

Status: completed; successful MRFF Preventive and Public Health grant June 2020 to conduct RCT

Enhancing maternity care for migrants: research to action (EMMA)

Rhonda Small, in collaboration with Erica Schytt, Helena Lindgren, Ewa Andersson, Malin Arhne, Anna Wahlberg and Amani Eltayb, Karolinska Institute, Sweden; Ulrika Byrskog and Birgitta Essen, Uppsala University, Sweden

This program of work aims to develop and test innovative models of maternity care for migrant women in an effort to improve their experiences of antenatal and intrapartum care, their knowledge about childbearing and the health care system, their emotional wellbeing and ultimately, their pregnancy outcomes. There are four key projects in the program to date.

Study 1 aims to assess the acceptability and feasibility of group-based antenatal care, supported by childbirth-trained interpreters, for Somali women in the regional city of Borlänge and in a suburb of Stockholm, Spånga-Tensta.

Study 2 is a retrospective evaluation of a bilingual doula support program, investigating birth outcomes for migrant women who received support in labour in Gothenburg in the period 2008 to 2016 (n=1,500), with birth outcomes for migrant women who experienced usual care for labour and birth without doula support, and with birth outcomes for Swedish-born women giving birth during the same time period.

Study 3 is a randomised trial of bilingual doula support to evaluate the effectiveness of community-based doula support for improving the intrapartum care experiences and postnatal wellbeing of Somali, Eritrean, Arabic and Russian-speaking migrant women giving birth in Stockholm.

Study 4 is a quality improvement co-designed project for enhancing maternity care for migrant women at Södertälje Hospital, south of Stockholm. It involves an interpreter-facilitated hospital visit with a labour ward midwife during pregnancy, aims to assist non-Swedish speaking migrants familiarise themselves with how care for birth is provided in Sweden, providing an opportunity for information exchange during a visit to the labour ward where women will give birth.

Funding: Swedish Research Council and Stockholms Läns Landsting

Status: ongoing; publications in 2020: *BMJ Open* and *BMC Pregnancy and Childbirth*

GEM Care: exploring the feasibility and acceptability of group antenatal care and education – a pilot randomised controlled trial

Della Forster, Robyn Matthews, Rebecca Hyde; in collaboration with Kaye Dyson, Deborah Fox and Trish Ryan, the Royal Women's Hospital

Group-based antenatal care, pregnancy care and childbirth / parenting education is undertaken in groups of 8–10 women for 6–8 sessions with two midwives. 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 aimed to test the feasibility of implementing an adequately powered randomised controlled trial (RCT). For this we conducted a two-arm pilot RCT. We recruited 74 women to the pilot (with uptake rate of 32%), with 40 randomised to the intervention and 34 to usual care. Women allocated to the intervention received group-based antenatal care and education (known as *GEM Care*, Group Education and Midwifery Care). Usual care included hospital-based midwife, caseload or team care, or shared care with a general practitioner (GP). Participants were English-speaking, primiparous, low risk, with no more than 24 weeks gestation at booking. Clinical outcome data were collected from the medical record. A telephone interview at six weeks postpartum explored women's views. Focus groups explored midwives' views.

Women allocated to group care rated their pregnancy care overall very highly, and the pilot demonstrated that a larger, adequately powered RCT is feasible, and acceptable to women.

Funding: The Royal Women's Hospital

Status: analysis complete, dissemination of results underway, manuscript in preparation, a protocol to conduct an RCT developed

Maternity and newborn emergencies (MANE) program evaluation

Della Forster, Méabh Cullinane, Helen McLachlan, Michelle Newton, Stefanie Zugna

The Victorian Department of Health funded the *Maternity and Newborn Emergencies* (MANE) program, which was auspiced and run by the Royal Women's Hospital Maternity Services Education Program for regional and rural public maternity providers.

To inform the development of content, design and delivery of the program, a team from the Judith Lumley Centre evaluated MANE. The evaluation was conducted over a three-year period from 2017 to 2020. All rural and regional maternity service who received MANE participated in the evaluation, with in-depth case studies conducted at five maternity service sites. A final report was delivered to the Royal Women's Hospital and the Department of Health in December 2020, with outcome manuscripts in preparation.

Funding: Victorian Department of Health

Status: data collection and analysis complete, protocol paper accepted, final report submitted, further manuscripts in preparation

The 'EXPerT' Study: exploring nurses' and midwives' perceptions of 'expertise' and what it is like to work at a tertiary hospital

Della Forster, Robyn Matthews, Rebecca Hyde, Touran Shafiei, Michelle Newton; in collaboration with Fleur Llewelyn, the Royal Women's Hospital

In Australia the concept of 'expertise' within the midwifery and nursing workforce is traditionally based on number of years that the clinician has been practicing. As the number of years in the workforce increases, so does the level of compensation. Anecdotally though, when managers are arranging staffing for a given roster or shift, they may view each staff member not simply based on the number of years they have been practicing but also in terms of how much of an 'expert' they consider the staff member to be. Some staff exhibit a high level of perceived 'expertise' yet receive no formal recognition. What is 'expertise' from a practical point of view if it means more than just the number of years worked? There is a significant lack of research and understanding in this area.

Concurrently, recent evidence shows an increasing prevalence of midwives' and nurses' expressing stress and dissatisfaction about their work. At the Royal Women's Hospital in Melbourne, Victoria, there were anecdotal reports of increased staff dissatisfaction, worries about staff skill mix, and concerns about potential poor workforce retention among midwives and nurses. Given all these factors, we wanted to explore these issues, and also look at what factors positively or negatively affect staff experiences.

The purpose of the 'EXPerT' study is to develop a functional definition of expertise within the midwifery and nursing workforce (that can be applied to recruitment, rostering, supporting staff, skill mix and workforce strategies) and to explore midwives' and nurses' experiences of work and what factors affect their views.

Funding: The Royal Women's Hospital (staff support)
Status: data collection complete, first paper submitted, further analyses and manuscript preparation underway

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, the 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, 316 surveys were returned – 31% (312/990) 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

Register-based studies of birth outcomes among migrant women in Sweden and Norway

Rhonda Small; in collaboration with Erica Schytt, Sol Juárez, Anders Hjern, Sweden; Vigdis Aasheim, Roy Nilsen, Eline Skirnisdottir Vik, Dag Moster, Svein Rasmussen, Norway

Migrant women constitute a significant minority of women who give birth in Scandinavian countries, in Sweden and Norway contributing 28% and 27% respectively of the births annually. Up to now, the focus of research has been on women who have migrated from countries with particularly high risk for adverse outcomes and less is known about other large immigrant groups, including those who have arrived more recently. This research is adding to existing knowledge by including more detailed information on migration than has been done before (paternal origin, length of residence, reasons for migration), using population-based register data from Sweden and Norway.

The aim is to explore the associations between migration and adverse maternal and infant pregnancy outcomes in immigrant and in Swedish- and Norwegian-born women who gave birth between 1990 and 2016 in Sweden and in Norway.

Funding: none
Status: eight papers published, in 2020: *BMC Health Services Research, Sexual & Reproductive Healthcare* and *PLoS Medicine*.

Induction of labour and mapping maternal characteristics to maternal/neonatal outcomes

Christine East; in collaboration with Brooke Owen of the Mercy Hospital for Women

Induction of labour rates have risen dramatically in recent years. This ongoing project aims to explore the relationship between the characteristics of women whose labours are induced or not induced against clinical outcomes, including caesarean section, postpartum haemorrhage, admission to the NICU, babies born with growth restriction / large for gestational age and breastfeeding at time of hospital discharge at Mercy Health.

Funding: Mercy Health Academic Research; La Trobe Academic & Research Collaboration in Health (La Trobe ARCH)

Status: building on previous data analyses

Labour pain assessment: evaluation of a new woman-centred approach

Laura Whitburn, Christine East, Lester Jones; in collaboration with Mary-Ann Davey, Monash University

Current approaches to supporting women to manage labour pain need reconsideration. We have developed a multidimensional measurement tool to assess women's labour pain experience. We have funding for a pilot study to evaluate this new tool and to utilise women's feedback to facilitate the refinement of the labour pain assessment tool for use in a large longitudinal study.

Funding: Mercy Health Academic Research; LTU Social Research Assistance

Status: data analysis



Induction of labour: a shared decision. A pilot project to develop surveys for women before and after their induction of labour

Christine East; in collaboration with Melissa Buultjens, Lorelle Martin, La Trobe University and Jen Fielding, of Monash Health

This project forms part of an overall program of research that aims to explore women's experiences of shared involvement in decisions related to induction of labour (IOL), using surveys pre- and post-IOL. Funding has been obtained to develop and pilot a survey of women pre- and post-IOL.

Funding: Mercy Health Academic Research; La Trobe ARCH

Status: literature search; draft surveys developed

Postpartum haemorrhage

Christine East, Kritika Poudel

Postpartum haemorrhage (PPH) contributes to significant morbidity in Australian childbearing women, with rates of severe haemorrhage seeming to rise in the past decade. We have reviewed current evidence to develop evidence-based resources for clinicians to prevent and manage PPH. Our data modelling aims to develop hypotheses that can be tested at a Statewide level to examine trends, actions and sequelae.

Funding: La Trobe Alumni donation

Status: literature search; draft documents to be made available on OPAL; data modelling to develop research protocol(s)

Prevention of severe perineal trauma during childbirth

Christine East, Kritika Poudel

Perineal trauma is relatively common during vaginal birth, however, it can be minor, with speedy recovery. For some women, a more severe injury may occur, that requires specialised repair and may have an ongoing impact on maternal health and well-being. We are preparing evidence-based reviews of prevention and perineal management, with a view to make these accessible via La Trobe's OPAL platform. Data modelling at hospital-level allows for feedback to clinicians and will lead to future modelling in Statewide data sets.

Funding: La Trobe ARCH

Status: HREC proposals in development

Is there equity in telehealth?: Exploring the experience of telehealth services by patients with limited or no English proficiency

Natalija Nesvabda (Mercy Health), Maggie Pliszka (Mercy Health), Christine East, Rachael Duncan

The COVID-19 pandemic has seen a rapid change in the provision of telehealth (phone and video) services to patients. Our recent experience suggests that migrant patients, particularly those with limited or no proficiency in English (who need an interpreter), are experiencing additional barriers in accessing healthcare through telehealth. This pilot study aimed to gain a preliminary understanding of the experience of telehealth (phone and video) by two patient groups at Mercy Health, including pregnant women, where there is consistently high demand for interpreting services, given that they have limited or no proficiency in English, namely those whose preferred languages are Arabic or Chinese.

Funding: Mercy Health Academic Research, ARCH

Status: interviews conducted; data analysed

COLLABORATIVE WORK

My baby's movements: a stepped wedged cluster randomised trial of maternal awareness and reporting of decreased fetal movements to reduce stillbirth

Christine East, Della Forster; in collaboration with Vicki Flenady and Glenn Gardener, University of Queensland; Philippa Middleton, South Australian Health and Medical Research Institute Limited; Michael Coorey, Murdoch Children's Research Institute; David Ellwood, Griffith University; Caroline Crowther and Emily Callander, NHMRC Clinical Trials Centre; Jane Norman, Medical Research Council (MRC) Centre for Reproductive Health, Edinburgh, UK; Frances Boyle, University of Queensland

The My Baby's Movements study was aligned with the Stillbirth CRE (see below for more information). This was conducted in 26 Australian hospitals. Christine East is one of the chief investigators and also coordinated this from 2017–2019 in her previous role at Monash Health, while Della Forster and colleagues undertook this at the Royal Women's Hospital and Sue McDonald coordinated this at Mercy Health (2018–2019).

Funding: NHMRC Project Grant APP1067363

Status: main findings published, further manuscript submitted

Prevention of adverse child behavioural development following maternal depression in pregnancy

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.

Funding: NHMRC Project Grant APP1143448, 2018–2022

Status: in progress

Stillbirth Centre for Research Excellence

Christine East; in collaboration with Vicki Flenady, University of Queensland; David Ellwood, Griffith University; Philippa Middleton, South Australian Health and Medical Research Institute Limited; Jonathan Morris, Kolling Institute of Medical Research; Euan Wallace, Hudson Institute of Medical Research; Frances Boyle, University of Queensland; Adrienne Gordon, University of Sydney; Dell Horey, Susan McDonald, La Trobe University

The Stillbirth CRE has four priority areas: Implementing best practice to address known risk factors for stillbirth; developing novel methods of identifying the at-risk fetus; reducing the impact of stillbirth on mothers and families; and implementing a national perinatal mortality audit to prevent stillbirths. The Safer Baby Bundle aims to help women be aware of their baby's movements during pregnancy, stop smoking, sleep on their side, share in decision making and for clinicians to improve the detection of fetal growth restriction. This initiative is now embedded in clinical practice at Mercy Health.

Funding: NHMRC Project Grant APP1116640, 2017–2021

Status: in progress

Perinatal mental health

Program Lead: Dr 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) experiencing 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. In 2020, we had to pause participant recruitment due to COVID -19 pandemic restrictions. Given the high levels of stress and anxiety in the community and an increasing pool of trained volunteers available to provide telephone peer support, we commenced a DAISY sub-study offering eligible women birthing at the study sites self-referral to access support. This adjunct sub-study was not a trial.

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

Della Forster, Helen McLachlan, Touran Shafiei, Jan Nicholson, Jessica Bee, 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, the 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), the 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.

Initially, the new mothers were recruited up to 11 weeks postpartum from Hume and Wyndham LGAs, and included women who scored ≥ 9 and ≤ 20 on the Edinburgh Postnatal Depression Scale (used as

standard practice by Maternal and Child Health Nurses in Victoria). Recruitment via these LGAs was discontinued at the end of 2019 and started up at the Royal Women's Hospital. 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. Peer volunteers provide empathetic and emotional support by telephone, thus targeting key risk factors for depression and anxiety, i.e. social isolation and a lack of support. Peer volunteers also encourage help-seeking by providing information about existing clinical and support services as appropriate.

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

Status: volunteer recruitment and training underway in collaboration with PANDA; recruitment of new mothers began in May 2019; participant recruitment and data collection underway

Peer support for new mothers during COVID-19

Della Forster, Helen McLachlan, Touran Shafiei, Jan Nicholson, Jessica Bee, Meabh Cullinane, 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, the Royal Women's Hospital; Cattram Nguyen, Murdoch Children's Research Institute; the Royal Women's Hospital and PANDA (Perinatal Anxiety and Depression Australia)

In March 2020, with the advent of the COVID -19 pandemic and the subsequent restrictions, we had to pause DAISY recruitment.

Women birthing during COVID-19 lockdown had shorter postnatal stays, reduced interaction with health services and less social supports following birth. Levels of stress and anxiety was generally higher, and social isolation was greater than usual for new mothers. Given the potentially high levels of stress and anxiety in the community, and given we had an increasing pool of peer volunteers trained and available to provide telephone peer support, we commenced a DAISY sub-study where we offered all eligible women birthing at the study sites self-referral to access telephone peer support. All women who gave birth at the maternity services at hospital trial sites were provided a flier prior to hospital discharge postpartum. The flier provided a brief introduction to the sub-study with details of how to contact the study team, how to access further information and express their interest, including a QR code to scan, a URL link, a study email address, and a study phone number.

Interested women completed a baseline survey (assessing their eligibility) and provided their consent online. Eligible women who consented were matched with a peer volunteer mother to receive regular telephone support for a few months. Data on women's wellbeing and experiences of peer support were collected at completion of the support period.

This adjunct sub-study was not a trial: there was no randomisation to an intervention or comparison arm.

Funding: none

Status: peer support period and data collection completed; analysis underway

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

Perinatal mental illness is a major public health issue, with serious and costly health consequences for women, their infants and families. Many women don't seek help. Potential barriers include fear of stigmatisation, fear of failure and lack of support. These barriers may be overcome by more flexible models of support, such as an online peer support program.

This study aimed to develop and test the feasibility, acceptability and functionality of a moderated online peer support App to be used on smart phones, 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 of pilot RCT in progress; papers in preparation

Identifying the perinatal mental health needs of immigrant and refugee women

Touran Shafiei, Margaret Flood, Jessica Bee, 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. Migrant women form a significant proportion of the childbearing population in Australia. One third of women giving birth in Australia were born overseas. One third of refugees and asylum seekers who arrive in Australia come to Victoria.

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; presented at conferences in 2019, 2020; paper in preparation

Prevalence and pregnancy management of mental health issues in women booking for pregnancy care at the Women's

Touran Shafiei, Della Forster, Helen McLachlan

Although many studies have investigated the prevalence and risk factors of depression and anxiety after birth, fewer studies have explored them in pregnancy and there is limited literature on antenatal depression and anxiety. There is also no comprehensive data available on antenatal mental health problems at the local level.

We undertook a retrospective clinical audit of the prevalence and pregnancy management of mental health issues in women booking for pregnancy care at the Women's Hospital. The aim was to identify women who were documented as experiencing mental health problems during their pregnancy to ascertain their demographic characteristics, and any documented management and referrals during pregnancy care.

All women who attended booking visits at the Women's Hospital in 2 randomly selected months were included in the initial review. Pregnancy records of those who were identified as experiencing any mental health issues were explored further.

A data abstraction template was used to collect data on background characteristics (e.g. maternal age, parity, gestational age at pregnancy booking and country of birth) and data on mental health issues, previous history of mental health, and any documented management and referrals during pregnancy care. Data were collected from the hospital electronic data systems and medical histories for approximately 1200 pregnant women attending the Women's for their pregnancy care.

Funding: The Royal Women's Hospital

Status: data collected; analysis underway

Reproductive health and planned parenthood

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



Planned parenthood confers significant health benefits for women and their families and reproductive health is a human right. This program of work addresses the desire by women 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 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 2020, a highlight was the successful advocacy and evidence dissemination of the SPHERE Coalition for affordable and accessible sexual and reproductive health during COVID-19 and successful NHMRC funding for AUSCAPPS, see below.

<https://www.spherecre.org/coalition-outputs>

COLLABORATIVE WORK

Sphere -The Centre of Research Excellence in Sexual and Reproductive Health for Women: Achieving Better Outcomes through Primary Care

Angela Taft, Kristina Edvardsson; in collaboration with Danielle Mazza, Jane Fisher and Safeera Hussainy, Monash University; Kirsten Black, Jayne Lucke and Kevin McGeechan, University of Sydney; Marion Haas, UTS; Wendy Norman, University of British Columbia

Australian women continue to have poor sexual and reproductive health, which impacts on them, their families and the broader community. SPHERE has identified the following aims:

- improving the delivery of preconception care to optimise pregnancy outcomes
- increasing understanding, awareness and uptake of long-acting reversible contraception (LARC)
- increasing access and service provision of medical termination of pregnancy.

Consequently, SPHERE has developed a research program that is focused on three important areas of women's sexual and reproductive health: abortion, contraception, and preconception care.

In 2020, Kristina Edvardsson, with Angela Taft, Leesa Hooker and Mridula Shankar were successful in gaining SPHERE financial support to analyse sexual and reproductive health (SRH) data from the new young cohort of the Australian Longitudinal Study of Women's Health to examine unintended pregnancy and outcomes focussing on urban/rural differences.

Through 2019-2020, a Coalition on SRH during COVID-19 formed that aimed to give a strong, collective voice to secure high quality SRH services for women during the COVID-19 pandemic and beyond. The Coalition released eight statements (e.e. telehealth for early termination of pregnancy and access to LARC during COVID-19) and associated media releases.

In 2020, The AusCAPPS Network: A community of practice to support the provision of long-acting reversible contraception and medical termination of pregnancy in primary care was successfully funded under the umbrella of SPHERE.

Funding: NHMRC

Status: commenced

www.spherecre.org

The Australian contraceptive choice project (ACCORd)

Angela Taft; in collaboration with Danielle Mazza, Monash University; Kirsten Black, Jayne Lucke and Kevin McGeechan, University of Sydney; Marion Haas, UTS; Jeff Piepert, Washington University

International evidence demonstrates that long-acting reversible contraceptives (LARCs) are the most effective method to reduce unplanned pregnancy and abortion. Despite this, in Australia rates of LARC use remain low compared with less-effective forms of contraceptives. Our cluster randomised controlled trial was based on the successful US Contraceptive CHOICE Project. It tested a complex intervention in general practice consisting of online training for effectiveness-based contraceptive counselling for general practitioners, and access to rapid referral for LARC insertion clinics. The ACCORd study resulted in a significantly higher rate of LARC insertions in the intervention group compared with control.

Funding: NHMRC

Status: completed, outcomes paper published in *BJOG*. In 2020, two further papers were published on satisfaction with LARCs and a two-year follow-up protocol. Others (process evaluation and economic impact) have been drafted



Preventing and reducing violence against women and children



**Program Leads: Professor Angela Taft
Associate Professor Leesa Hooker**

The World Health Organization estimates that 1 in 3 women worldwide have experienced physical and / or sexual violence in their lifetime, mostly by an intimate partner. This research program aims to build a body of evidence for effective interventions to prevent and reduce the effects of family and gender-based violence, and sexual violence and harassment especially those that can be delivered in primary health care and community settings.

We also acknowledge the need to shape responses to the differing effects of family violence on diverse communities, such as migrant and refugee and Aboriginal communities.

HARMONY 12: a pragmatic cluster randomised controlled trial to strengthen primary care response to domestic violence among migrant and refugee communities

Angela Taft, Felicity Young, Molly Allen, Bijaya Pokharel, Xia Li, in collaboration with Gene Feder, University of Bristol; Kelsey Hegarty and Douglas Boyle, University of Melbourne; Danielle Mazza, Monash University; Jane Yelland and Cattram Nguyen, Murdoch Children's Research Institute; Richard Norman, Curtin University; Ruth Fox, InTouch Multicultural Centre Against Family Violence; Claudia Garcia-Moreno, World Health Organization

Harmony is an adaptation of a highly successful UK trial (Feder et al, 2006), with the addition of elements from two Australian studies, WEAVE (Hegarty et al, 2013) and MOSAIC (Taft et al, 2009), including cultural safety.

The primary aim is to test the effectiveness of culturally safe domestic and family violence (DFV) training, combined with the yearlong support of a bilingual advocate support worker, to increase the rates of GP identification, documentation and referrals of women experiencing DFV, especially those of migrant/refugee background.

A secondary aim is to evaluate routine GP systems software developed to collect aggregated anonymised

patient data on the identification, safety planning and referral of DFV incidents, as well as increase the coding of patient ethnicity.

Recruitment of clinics began in 2019. Following a six months suspension during the COVID-19 pandemic, we recruited 24 clinics but had 5 withdraw. Training was completed between October 2020 and June 2021. The protocol paper was published 2021 in *BMJ Open* and systematic review of culturally competent family violence response to women in primary care was submitted.

Funding: NHMRC, Commonwealth Department of Social Services and Victorian Government Multicultural Affairs and Social Cohesion

Status: Ongoing. One paper published and one submitted.

The HARMONY study has adapted a pre-existing RACGP accredited curriculum for primary care clinical and administrative staff. It is now online, culturally safe and sustainable, and suitable for co-delivery by a GP educator with a bilingual/bicultural DFV advocate educator. We have also designed quick methods for GPs to enter DFV and ethnicity data onto clinic computers.

Exploring the primary prevention of violence against women and family violence: Respect Victoria evidence review

Leesa Hooker; in collaboration with Kirsty Forsdike, La Trobe Business School and Emma Seal, Centre for Sport and Social Impact, La Trobe University

The aim of the Evidence Review was to provide key information for *Respect Victoria* to set a research agenda, critical to initiate within *Respect Victoria's* establishment phase. The review sets out current evaluation research on the primary prevention of family violence (FV) and violence against women (VAW), what interventions or programmatic elements of interventions are effective, and the extent and nature of current research funding for primary prevention interventions.

There are two parts to the Evidence Review: a critical review of the recent national and international literature on the effectiveness of primary prevention interventions in FV and VAW; and a scan of current research funding in primary prevention of FV and VAW in Australia.

Funding: Respect Victoria

Status: project completed; two reports submitted

Family violence training needs analysis and professional development plan for Victorian maternal and child health nurses

Angela Taft, Leesa Hooker, Jan Nicholson, Lael Ridgway

In 2018, the Victorian Government Department of Education and Training (DET) commissioned the Judith Lumley Centre to conduct a Maternal and Child Health (MCH) workforce family violence training needs analysis and develop a comprehensive, four-year, professional development plan in consultation with DET and key MCH and project stakeholders.

We conducted an analysis of state-wide routine data, stakeholder interviews and a state-wide survey of nurses to identify existing MCH nurse family violence knowledge, attitudes, skills and practices; explore MCH nurse family violence training needs and preferences.

Results were used to develop a *Training Needs Analysis Report* and a four-year *Professional Development Plan* for future implementation for the Victorian MCH workforce, including focus areas, objectives, learning outcomes,

timing and modes of delivery for the training. A complementary four-year evaluation strategy was also outlined.

Funding: Victorian Department of Education and Training

Status: project completed; two reports submitted; two papers e-published in 2020: *Australian Journal of Primary Health, Nurse Education Today*

Preventing sexual assault on campus: women's empowerment and safety through education and action (WEACT)

Leesa Hooker, Angela Taft, Jessica Ison; in collaboration with Kirsty Forsdike, La Trobe Business School; Elli Darwinkel, La Trobe Speak Up; Fiona Marshall, Monash University and Charlene Senn, University of Windsor, Canada

Young women on campus experience unacceptably high rates of avoidable rape / attempted rape by male acquaintances. More than 50% of Australian university students have experienced sexual harassment and 7% have been sexually assaulted in university settings. The Canadian *Enhanced Assess, Acknowledge, Act* (EAAA) program reduced campus completed rape and attempted rape by 50% (Senn et al., 2015), sustained two years post training (Senn, 2017).

The WEACT project aims to: assess the feasibility of implementing the EAAA sexual assault resistance education program into the Australian University context (recruitment, retention, fidelity); explore the acceptability of resistance education (and evaluation methods) for first year female students at La Trobe and Monash University campuses; improve student knowledge and self-efficacy of sexual assault; and reduce the incidence of sexual assault/rape experienced by students.

Pilot evaluation data will support a grant application for a national women's empowerment (WEACT) project evaluation.

Due to COVID-19 disruptions in early 2020, the WEACT project was placed on hold and alternative desk top data collection was completed, with the original feasibility study to recommence once COVID restrictions are lifted and students return to campus. The desk top WEACT project included a systematic scoping review of global evidence on sexual violence prevention and a nationwide, telephone survey of all Australian universities to explore sexual violence primary prevention strategies offered.

Funding: Transforming Human Societies RFA; Speak Up La Trobe University; Monash University

Status: project ongoing; manuscripts in progress

TramLAB: improving the safety of women and girls on public transport in Melbourne

Angela Taft, Leesa Hooker, Jess Ison; in collaboration with Kirsty Forsdike, La Trobe University; Nicole Kalms, Gene Bawden, Gill Matthewson, Hannah Korsmeyer and Isabella Webb, Monash University XYX Lab; Nicola Henry, RMIT University

There is a spectrum of sexual assault and harassment that a wide diversity of women and girls experience every day in their journeys to, on board and then in the final pathways from public transport to home. These journeys can generate fear and anxiety that mean many women change their behaviours, the routes they take and the level of vigilance they enact. The TramLAB project aims to provide evidence and recommendations for the enhanced safety of women and girls on public transport in Victoria.

In 2019, the La Trobe University team conducted 19 stakeholder interviews across seven organisations to explore what initiatives exist to improve women's safety on public transport and where barriers to change might be present; interviewed 41 female students and staff who have experienced fear in their transport journeys to our Bundoora campus to hear about their experiences; analysed available data from public transport providers and the police to identify improvements in data collection methods and how trends in women's safety could be monitored; and undertook an extensive literature review to ascertain what initiatives, evaluations and evidence-based practices exist both nationally and internationally.

From this research, XYX lab team members organised a workshop that brought together women from diverse backgrounds, stakeholders and designers to discuss, imagine and create a vision for a safer public transport journey.

In 2020, the findings from the research along with further research were used to develop four practical toolkits for interventions on public transport. Toolkits released:

- Communication Strategy about Sexual Harassment and Equitable Access on Public Transport
- Placemaking Case Study in Darebin City Council
- Public Transport Data Collection
- Training and Awareness for Public Service Providers and their staff

Funding: Victorian Department of Transport

Status: final report including four toolkits completed and delivered in 2020

<https://www.latrobe.edu.au/jlc/research/reducing-violence/tram-lab>

Training healthcare providers to respond to intimate partner violence against women

Leesa Hooker, Sonia Reisenhofer; in collaboration with Naira Kalra, Johns Hopkins University, USA; Gian Luca Di Tanna, University of London, UK; Claudia Garcia-Moreno, Department of Reproductive Health and Research, World Health Organization Geneva; Cochrane Developmental, Psychosocial and Learning Problems

Training healthcare providers on intimate partner violence and on responding to survivors of abuse is one approach that may improve providers' knowledge, attitudes and the care and health outcomes for survivors. Yet there is limited evidence on what interventions are effective to improve provider knowledge and practice.

This Cochrane Systematic Review aims to assess the effectiveness of training programs that seek to improve healthcare providers' identification of, and response to, intimate partner violence against women – compared to no intervention, wait list, placebo or usual care.

Status: Cochrane protocol published, second data search and synthesis complete, Cochrane review manuscript under review

Primary Prevention of Sexual Violence and Harassment against Women Project (ASaPP)

Leesa Hooker, Angela Taft, Jessica Ison, Felicity Young; in collaboration with Kirsty Forsdike, La Trobe Business School; Christopher Fisher, ARCSHS; Nicola Henry, RMIT

Gender based violence against women (VAW) is pervasive and harmful to individuals, communities, and the wider economy. National policy on prevention of VAW exists (The National Plan to Reduce Violence Against Women and their Children), although there is a lack of focus on the prevention of sexual violence and harassment (SVH) of women. This project identified effective primary prevention SVH interventions that informed a Theory of Change and future research on the prevention of SVH.

The project:

- identified high quality evaluated and effective primary prevention strategies that address key drivers and risk factors (at all levels) for SVH
- explored and prioritised high-risk cohorts/target audience for policy intervention, assessing barriers and enablers to engaging with primary prevention work

- synthesised data to identify the extent of SVH, levels of awareness, and attitudes and behaviours
- consulted widely with specialist organisations and experts on SVH to ensure findings and recommendations are meaningful to sexual violence service users and providers
- developed a Theory of Change framework with stakeholders

Funding: Department of Social Services

Status : Complete

Supporting the health system response to violence against women and children in Timor-Leste

Kayli Wild, Angela Taft, Leesa Hooker; in collaboration with Lidia Gomes, Timor-Leste National University; Angelina Fernandes, Cristal Institute, Timor-Leste; Guilhermina de Araujo, Institute for Human Security and Social Change, La Trobe University; Luisa Marcal, PRADET Timor-Leste

We collaborated with the two main nursing and midwifery training Universities in Timor-Leste to adapt and pilot the World Health Organization’s (WHO) new curriculum on responding to violence against women and children in low resource health systems. The outcomes from this work have provided the foundation for national systems-level approaches in Timor-Leste and have fed back into WHO’s global curriculum. The successive pilots showed a significant improvement to nursing and midwifery students’ knowledge, attitude and confidence in responding to violence against women and children, after training and sustained at 6-months follow-up. Following advocacy by our Timorese midwifery leaders, the Ministry of Higher Education has made responding to violence against women a core subject in all accredited midwifery programs nationally. We have now provided professional development and mentoring to lecturers at all six universities in Timor-Leste that offer nursing, midwifery and public health degrees.

Funding: ARC DECRA (DE170101454), WHO Geneva, Rotary Foundation (Rotary Manningham and Dili Lafaek)

Our Watch evaluation

Leesa Hooker in collaboration with Kirsty Forsdike, La Trobe Business School

The project evaluated Our Watch, the leading organisation for primary prevention of violence against women and their children in Australia. The evaluation used multiple innovative mixed methods in understanding the complex scope of work Our Watch has undertaken since its inception in 2013.

Status: The curriculum and supporting resources are available at:

<https://www.latrobe.edu.au/jlc/research/reducing-violence/timor-leste>

Preliminary analysis of evaluation data have been published in English and Tetum (Wild et al. 2020, de Araujo et al. 2020) as well as a paper on the implications for empathy in healthcare (Wild et al. 2020). A textbook is being written to accompany the curriculum, which will be one of the first university-level textbooks to be published in the national language, Tetum **Funding:** Department of Social Services

Status: Complete



COLLABORATION

Women's health and safety study: fertility, domestic violence and women's experiences of health services in Timor-Leste

Kayli Wild, Angela Taft; in collaboration with Linda Kelly and Guilhermina de Araujo, Institute for Human Security and Social Change, La Trobe University; Lidia Gomes and Joao Martins, Timor-Leste National University; Angelina Fernandes, Cristal Institute, Timor-Leste

This study documents the stories of 28 women who have experienced domestic and sexual violence in Timor-Leste to better understand the relationship between fertility and violence, how women enhance their own safety and sources of vulnerability and resilience. In-depth audio interviews with women were used to construct audio-visual learning resources, which were included in health provider training and informed the development of models of care based on the lived-experience and expressed needs of women. Because of this work, our researcher Guilhermina de Araujo, sits on the reference group of the US\$15 million UN Spotlight Initiative to address gender-based violence in Timor-Leste.

Funding: ARC DECRA (DE170101454)

Status: Based on the research findings from women, a series of policy briefs were developed for the Ministry of Health (barriers to accessing family planning for survivors of violence) and the UN Spotlight Initiative (interventions women want, and addressing the needs of vulnerable women and children during COVID-19). A critical ethnography on the health system response to violence was published in *Social Science and Medicine* (2020).

Harmonia: Communities Ending Gender-based Violence

Kayli Wild and Angela Taft; in collaboration with Xylia Ingham, Health Alliance International/HAMNASA, Timor-Leste; Susan Thompson, University of Washington, US; Linda Kelly and Guilhermina de Araujo, Institute for Human Security and Social Change, La Trobe University; Lidia Gomes, Timor-Leste National University

This project will work across 30 villages and two municipalities (Liquica and Ermera) of Timor-Leste to prevent and respond to gender-based violence (GBV) through two complementary approaches: engaging communities through participatory microplanning and improving the readiness of the health system to respond to survivors of violence. This project draws on our previous research with midwives and community leaders to implement a 'whole health facility' approach to training on GBV, utilising the WHO curriculum we previously adapted for Timor-Leste. It also connects the health system with community-level change to increase help-seeking and uptake of referrals when people experience violence. We will support the program, being implemented in Timor-Leste by Health Alliance International/HAMNASA, through input on study design, evaluation tools, data analysis, training materials and technical expertise.

Funding: USAID (72047220FA00002)

Status: Gender Equality and Social Inclusion Analysis complete (Wild et al. 2020); community baseline survey complete, health provider baseline survey complete.



Photo by Alexandrino de Carvalho, used with permission

Transition to contemporary parenthood – preparation and support



**Program Leads: Professor Jan Nicholson
Associate 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 undertakes innovative research to identify the best ways to support mothers and fathers in their roles as parents.

The program examines the influence of contemporary factors on parents and how these influence children's healthy development. This information is then used to improve the design of programs and supports for parents. Our collaborative work concerning the parents of children with Attention Deficit Hyperactivity Disorder is illustrative of this cycle of discovery research informing applied interventions.

Much of our work reflects long-standing collaborations, especially with The Australian National University, Deakin University, Murdoch Children's Research Institute, the Parenting Research Centre and Queensland University of Technology

EHLS at School: school-age follow-up of the Early Home Learning Study

Jan Nicholson, Shannon Bennetts, Jasmine Love, Clair Bennett; in collaboration with Elizabeth Westrupp, Deakin University; Donna Berthelsen, Queensland University of Technology; Naomi Hackworth, Parenting Research Centre; Fiona Mensah, Murdoch Children's Research Institute; Sheena Reilly, Griffith University; Lisa Gold; Deakin University; Penny Levickis, The University of Melbourne

The original *Early Home Learning Study* (EHLS) evaluated the "smalltalk" parenting program designed to support parents to create an enriched home learning environment for their young children. The study involved over 2,000 families with half participating in parent groups (for parents of infants) and half in playgroups (for parents of toddlers). The evaluation was conducted by the Parenting Research Centre, in partnership with and funded by the Victorian Department of Early Education and Childhood Development from 2010–2013.

Around five years later, the *EHLS at School* study followed up over 600 of the families who participated in the playgroups program, when their child was aged 7–8 years. The study aims to evaluate the longer-term outcomes of *smalltalk*, including impact on children's school readiness, language and literacy development.

Funding: National Health and Medical Research Council (NHMRC), together with the Victorian Government Department of Families, Fairness and Housing (DFFH)

Status: primary analyses completed; 5 papers published

Media reporting of 'stranger danger' and other factors relating to children's independent mobility

Sharinne Crawford, Shannon Bennetts, Jan Nicholson, Amanda Cooklin; in collaboration with Naomi Hackworth and Julie Green, Parenting Research Centre; Stephen Zubrick, University of Western Australia

Children's independent mobility has important health, social and emotional benefits, however parents commonly act as 'gatekeepers', restricting or encouraging their child's independence. The media may contribute to parents' perception of risk to children and provides a reference point for parents' decision-making around children's independent mobility.

This study evaluated the media climate during a three-month period in 2013 when 1,779 Victorian parents of children aged 9 to 15 years reported on their attitudes towards children's independent mobility via telephone interview. We examined print, online and television news

reports of the risks and benefits of children's independent mobility over this period and compared the media coverage to parents' ratings of concern about their child's independent mobility.

Funding: La Trobe University Social Research Assistance Platform

Status: completed; one paper under review; two papers and a report from the original survey published

Parenting in the age of social media: opportunities or disruptions?

Sharinne Crawford, Stacey Hokke, Amanda Cooklin, Shannon Bennetts, Jan Nicholson; in collaboration with Kimberley Mallan, Australian Catholic University; Tess Crane, School of Psychology and Public Health, La Trobe University

Parents are increasingly looking to social media for information and support during the transition to parenthood. Social norms and peer support are well established drivers of parents' wellbeing and parenting self-efficacy, yet how this operates – protectively or otherwise – via social media is unclear.

Applying a Social Norms theoretical framework, this study aims to investigate the influence of social media on Australian parents' experiences of early parenthood, social and emotional wellbeing and parenting self-efficacy, as well as shaping parenting attitudes, decision-making and behaviours. The mixed methods research was conducted in two phases: qualitative interviews were followed by a quantitative online survey.

Funding: Transforming Human Societies Research Focus Area

Status: interviews and analysis completed; quantitative online survey data collection completed and analysis underway; two papers in preparation.

Parenting, parent wellbeing and child development in Australia

Jan Nicholson, Amanda Cooklin; in collaboration with Lyndall Strazdins, Liana Leach and Huong Dinh, The Australian National University, Rebecca Giallo and Fiona Mensah, Murdoch Children's Research Institute, Sheena Reilly, Griffith University, Elizabeth Westrupp, 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 the Australian Bureau of Statistics. Jan Nicholson is a founding member of the LSAC Scientific Advisory Group and Chair since 2019; Amanda Cooklin is a current member of the Scientific Advisory Group.

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, and how this affects family functioning and shapes children's development. We examine a range of common child outcomes including socio-emotional adjustment, self-regulation, language, cognitive development and weight.

Funding: Roberta Holmes Donation

Status: ongoing; three papers published in 2020-21; Jan and Amanda have published over 50 papers using LSAC data

Parenting, Pets & Pandemic: exploring the role of pets for families with children during COVID-19

Shannon Bennetts, Sharinne Crawford, Jan Nicholson, Fiona Burgemeister, Tiffani Howell, Brian Ignacio, in collaboration with Kylie Burke, Metro North Health Service – Mental Health, Queensland; Catherine Chamberlain, The University of Melbourne.

The global COVID-19 pandemic has caused widespread and significant changes to the ways that we work, live, and study, disrupting opportunities to engage in social connections that help keep us mentally well. Parents and children have spent more time at home together with their pets, and there has been enormous demand for pet adoptions.

Conducted between July and October 2020, this national parent survey aimed to understand: how families with children were spending time with their cats and dogs, including new pets; associations between pet attachment and mental health; and benefits and challenges of having children and a cat or dog during the pandemic.

Funding: Australian Communities Foundation Roberta Holmes Transition to Contemporary Parenthood Program, La Trobe University

Status: ongoing, one paper published in *Anthrozoös* (2022).

COLLABORATIVE WORK

Calm Kids: a large-scale randomised controlled trial of the treatment of comorbid anxiety in children with ADHD to improve outcomes

Jan Nicholson; in collaboration with Emma Sciberras, Deakin University; Harriet Hiscock, Vicki Anderson and Daryl Efron, Murdoch Children's Research Institute; Ron Rapee, Macquarie University

Comorbid anxiety affects up to 50% of children with ADHD and often goes undetected and untreated. This is of concern given that anxiety exacerbates the impairments experienced by children with ADHD. Practical approaches that improve outcomes for children with ADHD are sorely needed. Identifying and managing comorbid anxiety may be one such approach. This randomized controlled trial aims to determine whether a 10-session cognitive behavioural therapy (CBT) intervention is effective in improving anxiety and wellbeing for children with ADHD and comorbid anxiety aged 8–12 years. Eligible children will be randomised to the anxiety intervention group (10 sessions of CBT over 12 weeks) versus usual care from their paediatrician.

Funding: NHMRC Project Grant GNT 1082232

Status: ongoing; one paper published

Children's Attention Project: longitudinal study of children with and without ADHD

Jan Nicholson; in collaboration with Emma Sciberras and Tim Silk, Deakin University; Daryl Efron and Vicki Anderson, Murdoch Children's Research Institute, Royal Children's Hospital and the University of Melbourne; Phillip Hazel, University of Sydney; Obi Ukuommune, University of Exeter, UK; Brad Jongeling, Joondalup Child Development Centre, Perth

The Children's Attention Project is a longitudinal study of a community sample of children with and without ADHD, examining the long-term effects of Attention Deficit Hyperactivity Disorder on children's behaviour, learning and day-to-day living. It includes an assessment of the influence of parenting and parent wellbeing on outcomes for these children. Children have been tracked from ages 6–8 to 10–11 years, with a subgroup who participated in a nested neuroimaging study.

Funding: NHMRC Project Grants GNT1065895, 2014–2018; 1008522, 2011–2015

Status: data collection completed; five papers published in 2020–21 including in *Neuroimage* (2021) and *Pediatrics* (2020); 18 previous publications

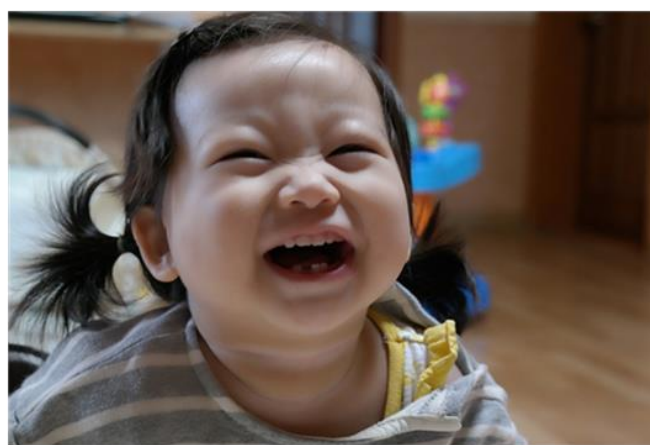
Let's Grow: maximising health potential through enhancement of movement behaviours from early life

Jan Nicholson and Sharinne Crawford; in collaboration with Kylie Hesketh, Jo Salmon, Liliana Orellana, Mohamed Abdelrazek, Harriet Koorts and Victoria Brown, Deakin University; Barbara Gelland and Rachel Taylor, University of Otago

Low levels of physical activity, high sedentary behaviour and insufficient sleep during early childhood are each associated with poor physical and psychosocial health and all show suboptimal levels from early life. Interventions to improve these behaviours seldom consider all three together. In this study, we evaluate the efficacy, maintenance, cost-effectiveness and scalability of an 18-month program to increase physical activity, decrease sedentary behaviour and optimise sleep in 2-year old children. Underpinned by an implementation science approach, scalability and stakeholder input are incorporated into all aspects to increase potential translatability into real-world practice.

Funding: NHMRC Project Grant GNT1162980

Status: recruitment completed; one paper published previously



More Than A Landlord: Responding to Aboriginal and Torres Strait Islander family aspirations to foster self-determination and social and emotional wellbeing

Jan Nicholson; in collaboration with Gregory Armstrong, Alison Brown, Rebecca Ritte, Kelsey Hegarty, Lea Waters, Kristy Meiselbach, University of Melbourne; Yin Paradies, Lata Satyen, Elizabeth Doery, Deakin University; Stephanie Brown, Graham Gee, Fiona Mensah, MCRI; Darren Smith, Samantha French, Aboriginal Housing Victoria.

More Than A Landlord is an innovative life coaching program that supports Indigenous families to articulate and achieve their short, medium and long-term aspirations. It seeks to promote social, emotional and cultural wellbeing (SEWB) by assisting parents, carers and children to set and achieve personal goals that will improve their lives. Life coaching is offered to Aboriginal Housing Victoria tenants in three urban areas: Mornington Peninsula, Healesville and northern metropolitan Melbourne. This Indigenous designed and led approach uses a strengths-based framework that supports self-determination with and for Indigenous families. The research evaluates its effects on the SEWB of Indigenous parents and their children.

Funding: NHMRC Targeted Research Grant GNT1154619.

Status: ongoing; one paper published in *BMC Public Health* (2021)

Parents that Mind: a mindful parenting intervention for parents of children with ADHD

Jan Nicholson; in collaboration with Subhadra Evans, Emma Sciberras, Sophie Leitch, Bibi Gerner and Nicole Rinehart, Deakin University

Parents of children with ADHD experience more severe stress in their parenting role than parents of children with other neurodevelopmental disabilities or physical illnesses. This project aims to co-design the *Parents that Mind Intervention* through focus groups with Australian parents of children with ADHD as well as interviews with Australian Clinical Psychologists and Paediatricians. This will enable understanding of the parenting stress experienced by parents of children with ADHD and identification of the barriers and enablers to parent participation in a mindful parenting intervention.

Funding: none

Status: ongoing; one paper published in *International Journal of Qualitative Studies on Health & Well-Being* (2019)

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

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

Early fatherhood is a critical life stage to be addressed in the prevention of suicide, a leading cause of death among young men, in Australia. One in ten fathers experience poor mental health, and 6% report suicidal ideation. Early fatherhood is an opportune time for prevention and intervention; fathers often attend child-focused services with their family and our research has shown that fathers are amenable to help and support during this time. However, evidence-based interventions are lacking.

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. Two pilot studies, led by Rebecca Giallo and Tweddle, have shown promising results. Fathers attending the program reported a reduction in mental health symptoms; found *Working out Dads* to be relevant, accessible and engaging.

Based on these promising pilot data, 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

- improving fathers' mental health;
- increasing social support;
- reduce barriers to help seeking; and
- reducing unmet need for health services.

Status: In progress, trial commenced Nov 2020.

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

'Take A Breath': videoconferencing group intervention for parents of children with life-threatening illness and injury

Jan Nicholson; in collaboration with Vicki Anderson, Frank Muscara, Meredith Rayner and Maria McCarthy, Murdoch Children's Research Institute and Royal Children's Hospital; Kylie Burke, University of Queensland; Robyn Walser, University of California, Berkeley

Parents of a child diagnosed with a life-threatening illness or injury often experience debilitating stress and anxiety. When this persists, it is associated with a range of difficulties for both parents and children. Building on findings from a longitudinal study of parents of these children, the *Take A Breath* program seeks to prevent or 'reduce parent traumatic symptoms. Using a videoconferencing format, parents take part in a brief group intervention from the comfort of their home.

Funding: Royal Children's Hospital Foundation

Status: completed; three papers published in 2020-21 including in *JAMA Network Open* (2020); seven previous publications

Ten-year follow-up of the Maternal Health Study

Jan Nicholson; in collaboration with Stephanie Brown, Kelsey Hegarty, Deirdre Gartland, Hannah Woolhouse, Rebecca Giallo, Fiona Mensah and Harriet Hiscock, Murdoch Children's Research Institute and University of Melbourne

The *Maternal Health Study* is a multi-wave, prospective cohort study investigating the health and well-being of over 1,500 first-time mothers recruited from six Melbourne hospitals between 2003 and 2005. Jan Nicholson provided advice around measures and data collection methods for the 10-year follow-up which involves greater focus on parenting and child outcomes and contributes to child-related papers.

Funding: NHMRC Project Grant GNT1048829

Status: completed; three papers published in 2020-21 including in *Paediatric & Perinatal Epidemiology* (2021)

Work and family

Program Lead: Associate 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 across 2020 and beyond due to the COVID-19 pandemic. Parents faced dramatic changes to work and family life due to lockdowns and work from home orders. Many families also had to contend with job changes and insecurity, increased caring responsibilities, remote learning, or having young adults moving back home. The effects of this on family relationships, health and wellbeing are only just being described, and we contribute to this growing evidence, taking a gendered lens to understand this.

In 2020 we launched new projects aimed at understanding the work-family nexus and wellbeing for parents via national, and international collaborations. Along with our existing projects, these new projects will allow us to explore key changes for parents 'before and after' COVID-19; to identify key workplace risk and protective factors for parents in the 'covid-normal' labour force.

Families at Work and Families at Work during COVID-19

Amanda Cooklin, Stacey Hokke, Shannon Bennetts, Jan Nicholson, Sharinne Crawford, Simon Mason, Jasmine Love; in collaboration with Liana Leach and Lyndall Strazdins, Australian National University

In 2020, we invited a sample of parents who had previously participated in a national survey (*Families at Work*, 2016-2017) to participate in a brief, 6-month prospective study across the peak of the COVID-19 pandemic. The original study was focussed on understanding the job conditions and supports that were linked to optimal health and wellbeing for parents (with children aged 0-18 yrs), including lower work-family conflicts, job stress and burnout. Given the overarching changes to jobs, work, childcare and education in 2020, we revisited these same research aims to establish what workplace supports remain critical for parents, and what new risks to parents' health and family wellbeing might be emerging.

The overall aims of this study were to:

- describe the current 'working from home' climate in COVID-19 shutdowns, including dynamic nature of change and transitions in parents' experiences

- describe the implications for parents' work-family strains, parenting and family wellbeing;
- understand the gendered nature of work-family experiences and how risks may be patterned by gender and
- understand the factors (past and concurrent) that support parents to 'thrive' or just 'survive' during a working from home requirement to support workplace policy into the 'COVID-normal' future.

Funding: supported by project funds attached to Amanda's Tracey Banivanua Mar Fellowship

Status: Data collection began in July 2020, final (6 month) follow-up completed for >1300 participants in 2021



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; in collaboration with Liana Leach, The 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. 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 after 2020. We also aim to understand fathers’ own narratives of work-family (im)balance and how this relates to their wellbeing.

Unique data from 2019-2021 will allow us to understand, from fathers’ perspectives, workplace factors which contribute to the gender imbalance in unpaid work, and their expectations for their future work and family balance. 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.

Our research will provide critical insight into how organisations can enable fathers to combine work and family, to provide parents of all genders with more equal opportunities to engage in work and care-giving roles.

Funding: Transforming Human Societies Research Focus Area Grant Ready Scheme

Status: Data collection completed Oct 2021; analysis ongoing.

Families working from home in 2020 & beyond

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

It is estimated that during the height of the pandemic, over 70% of the Australian labour force were working from home under work from home orders. Usually seen as a desirable ‘family-friendly’ work arrangement, working from home full-time enforces the co-location of both work and family demands in ways that may not suit all parents, with possible adverse consequences for parents’ mental health and family relationships. Coupled with school and

childcare closures in 2020, many families faced additional caring demands whilst trying to sustain their jobs, with the care burden likely falling predominantly to women.

Families Working from Home in 2020 is a prospective cohort study of parents, focussed on

- investigating the unique stressors and strains present in this new working from home climate and
- describing how parents’ and families fare and adapt (or struggle more) over time.

A convenience sample of parents with resident children (up to 25 yrs of age), who have worked at home since March 2020 are providing data over a 6-month period (at 4 timepoints). Parents will report on their mental health, work-family conflict, co-parenting dynamic (for coupled parents), work disruption, work-family boundary negotiation, domestic division of work, and on any supports from managers and their workplace.

Funding: supported by project funds attached to Amanda’s Tracey Banivanua Mar Fellowship

Status: Data collection ongoing

Work family balance, parenting and family health and wellbeing

Amanda Cooklin, Jan Nicholson, Simon Mason; in collaboration with Liana Leach, Lyndall Strazdins and Huong Dinh, Australian National University; Angela Martin, University of Tasmania; and Tammy Allen, University of South Florida.

This study uses national, longitudinal (2004–present) cohort data from over 5,000 employed parents and their children (Longitudinal Study of Australian Children) to identify the adverse effects of poor-quality jobs and work-family conflict on parents and children.

In 2020, we published two papers. The first focussed on self-employed parents in Australia (Dinh et al., 2020). Data from 1,948 mothers and 2,164 fathers were analysed. Six percent of parents had transitioned from consistent organisational employment to entrepreneurial work during their children’s early years (ages 4 – 13 yrs), and we compared these parents to those who remained working in an organisation.

Our results showed that for mothers, starting their own business meant they were able to attain more flexibility and control over their workload and work time; however, they also reported more conflicts and interference between family and working life, and lower overall satisfaction. Conversely, fathers reported fewer conflicts and greater flexibility, which helped to offset the longer work hours conferred by self-employment. While bringing some immediate benefits, we conclude that moving into self-employment may disadvantage mothers disproportionately, entrenching gender inequities in work and care. The paper is published in *Sex Roles*, and was accompanied by a successful media campaign. The second paper (Leach et al., 2020) found that over the longer-term, parents' work family conflict had measurable adverse effects on children's mental health and social development. These effects worsened the more persistent or accumulated parents' work-family conflicts were, in a 'dose-response' relationship. This paper was one of the first internationally to show a link between parents' work-family strains and children's mental health longitudinally.

Both Jan Nicholson and Amanda Cooklin are current members of the Consortium Advisory Group for the study (funded by Department of Social Services, managed by Australian Institute of Family Studies).

Funding: Australian Communities Foundation through the Transition to Contemporary Parenthood Program; Amanda was supported by the Tracey Banivanua Mar Fellowship

Status: Ongoing, two papers published in 2021: *Sex Roles* and *Social Psychiatry and Psychiatric Epidemiology*

COLLABORATION

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

Amanda Cooklin; in collaboration with Nina Junker, Goethe University, Frankfurt; Wendy Nilsen, Oslo Metropolitan University; 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.

Status: Data collection completed in Germany and Singapore; in Norway and Australia suspended due to the pandemic; findings in preparation

FLEX-IT: A mixed method study of information technology (IT) use in everyday life

Wendy Nilsen, Vilde Bernstrom, Ida Drange and colleagues from The Work Research Institute, OsloMet University; Julie Olson-Buchanan, California State University; Eunae Cho, Taipei Medical University, Taiwan; Nina Junker, Goethe University, Frankfurt; Ian Colman, University of Ottawa, Canada; Amanda Cooklin.

The boundaries between work and family domains have blurred, assisted and sustained by information technology. This can offer flexibility for working parents and promote work-life balance as parents can work at home, or do family-related tasks at work. Ultimately, this may be good for their families and their health. However, such cross-domain interference between work and home can also potentially interfere with family-life, leisure time and family relationships, increasing work-family spill-over and its adverse health effects. This international, multi-disciplinary collaborative project uses a series of integrated mixed-methods and datasets, across multiple settings. The overall aim is to understand 'healthy' and 'unhealthy' use of IT, across both work and family domains, considering personal, family and occupational characteristics. The project started mid-2019; Amanda Cooklin will be involved in one of the five study components – a longitudinal cohort study of parents planned for 2021.

Funding: Research Council of Norway, 2019-2023

Status: In progress

Case studies

Translation of evidence into teaching

While the impact of JLC research in industry settings is important, we are also pleased to see it incorporated in the education of health professionals through our curricula and short course offerings.

Influencing curriculum so that it is contemporary, relevant and meaningful can be achieved when using research that is having current effect on service provision and policy. JLC are leading work in this area and directly impacting the education of current and future health professionals.

Family violence impacts on the health and wellbeing of victim-survivors, and healthcare professionals are well placed to be first-line responders to family violence. Education for health care providers has been recommended by the World Health Organization (WHO), yet few Australian universities offer family violence subjects. In 2020, Leesa Hooker, Jess Ison, Angela Taft, Molly Allen and Michelle Newton developed a stand-alone subject (*Family Violence – Best Practice Response*) to be offered as elective subject for students enrolled in the second year of the Bachelor of Nursing. The interactive online subject was run as a pilot for 64 students, and is now an ongoing offering as an elective. It attracted over 200 undergraduate students from Nursing and other schools in the University in Semester 1, 2021. A pre-post evaluation of the pilot offering demonstrated significant improvements in feelings of preparedness to complete family violence work, perceived knowledge and increases in intimate partner violence knowledge domains, the greatest gains in family violence knowledge and opinions.

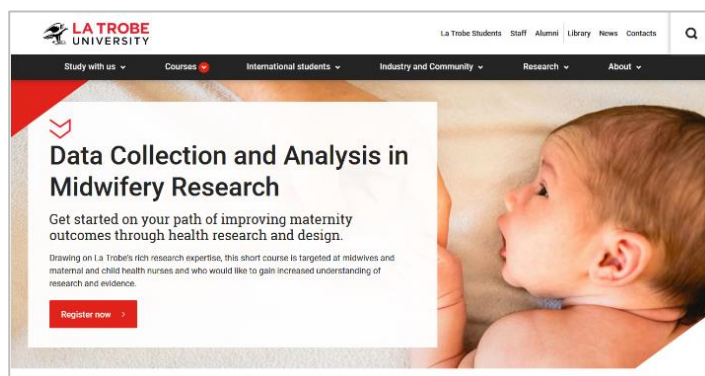
The translation of the Family Violence expertise in JLC extends to the international context with the work of Kalyli Wild, Leesa Hooker and Angela Taft in Timor Leste. The team were involved in a pilot of the WHO's new pre-service curriculum on responding to violence against women and children in low resource health systems in two nursing and midwifery training Universities in Timor-Leste. The outcomes from this work have provided a foundation for national systems-level approaches in Timor-Leste and have fed back into WHO's global curriculum. It has also led research projects that are directly impacting the health and wellbeing of First Nation's families – the *Baggarrook*

to the development of these resources into a continuous professional development course, and the first health professional textbook in Tetum, the Timorese language, is now in press.

Both the Undergraduate and Postgraduate Midwifery programs have drawn on the knowledge and expertise of JLC staff and alumni to contribute to core elements of the curriculum (Anita Moorhead and Lisa Amir – Breastfeeding; Maggie Flood – Perinatal data collection; Pam McCalman and Tanisha Springall – Indigenous perinatal issues; and Angela Taft and Leesa Hooker – Intimate partner violence). A number of subjects in the Graduate Diploma of Midwifery are now actively using JLC research to bring to life the concepts of research principles and impact.

Research and Evidence in Midwifery, led by Helen McLachlan and Heather Grimes, uses past and current JLC project leads to speak about their research, illustrating real life examples that have used specific methodologies. Speakers include Kate Dawson (ECO Project – cross-sectional survey), Lisa Amir (CAMEO Project – case-control study and CASTLE Project – cohort study), Michelle Newton (COSMOS workforce component - mixed-methods), Laura Whitburn (phenomenology), Ingrid Wilson (grounded theory), and Helen McLachlan (COSMOS – randomised controlled trials). Using projects that are relatable and of interest to students of midwifery allows the activity of research to come to life.

The subject **Indigenous Perinatal Health**, has been designed to introduce midwifery students to knowledge and skills in providing effective and safe care to Aboriginal and Torres Strait Islander families in the maternity context, and to consider how culturally safe midwifery practices can contribute to closing the gap in Indigenous health disadvantage. The subject uses two illustrations of JLC



Yurrongi / Nurragh Manma Buliana project, and the Healing the Past by Nurturing the Future project. Students are familiarised with the background, aims and outcomes of these projects in the maternity care context, and community members and the relevant internal or external stakeholders participate in the delivery of the content.

The ability to expand the impact of the work of JLC in translation of the research to education by using the La Trobe **short course and continuing professional development** platform is an exciting new opportunity for the work of JLC to be shared externally. Content from the above-mentioned research subject have been formatted for offering as CPD in two short courses – **Introduction to evidence-based midwifery practice** and **Data collection and analysis in midwifery research**. Work is now underway to transform the content of the Indigenous Perinatal Health subject into a short course format – **First Nations Perinatal Health**, and planning for a new continuing professional development (CPD) short course with a Family Violence focus using the foundations of the Family Violence Best Response subject combined with elements of the WHO curricula is also underway.

Michelle Newton

Supporting the health system response to violence against women in Timor-Leste

We have focussed on producing research outputs tailored to the context that can be used by students, University educators, practising health providers, in-service trainers and policy-makers. We have found creative outputs in the local language to be the most important aspect of our work, including the production of videos, policy briefs, targeted reports, training resources, and a university-level textbook in Tetum language.

As a group of researchers, we aim to understand the drivers of health system change to effectively address gender-based violence. We aim to bring the experience and perspectives of practitioners and women survivors of

violence to the co-design of policy, service delivery and training. Having a health workforce that is capable of challenging social norms around gender and acceptability of violence, and is skilled in assisting vulnerable women and children, can have a significant impact on reducing gender-based violence across society. The role of the health sector is particularly important in countries such as Timor-Leste, where half of women of reproductive age have experienced physical or sexual violence from their intimate partner (GDS et al. 2018; TAF 2016).

When we started this research collaboration with the National University of Timor-Leste in 2016 we had a shared vision – that healthcare providers throughout Timor-Leste are confident and supported to assist survivors of violence to safety, and are advocates for change in their communities. Since then we have worked on a program of research, curriculum development and systems of training and support in pursuit of this vision.

With the hard work of many of our collaborators from Timorese universities, local and international NGOs, government ministries and UN agencies, we are starting to see the impact of this work. All six Universities that have health-related degrees are ready to take up the pre-service curriculum and we will continue to mentor them as they begin to teach the subject. The curriculum has been adapted as in-service training with our colleagues at Health Alliance International and is now being piloted along with a system of follow-up support for implementation in two municipalities in Timor-Leste. By working with national researchers and trainers throughout the process we are in a position to support them to scale up successful models that reach all health providers and can transform the health sector response to gender-based violence across the country.

Kayli Wild



Photo by Alexandrino de Carvalho, used with permission

TramLAB

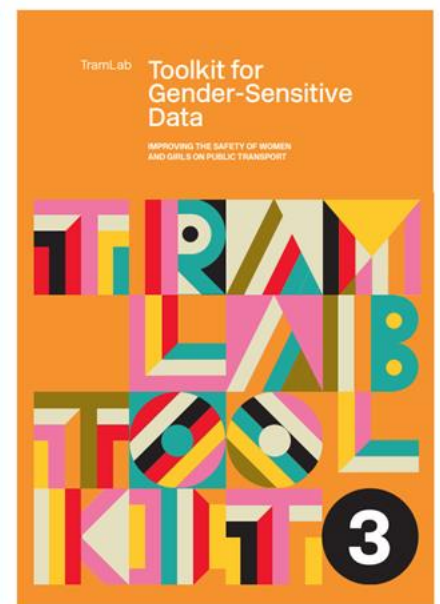
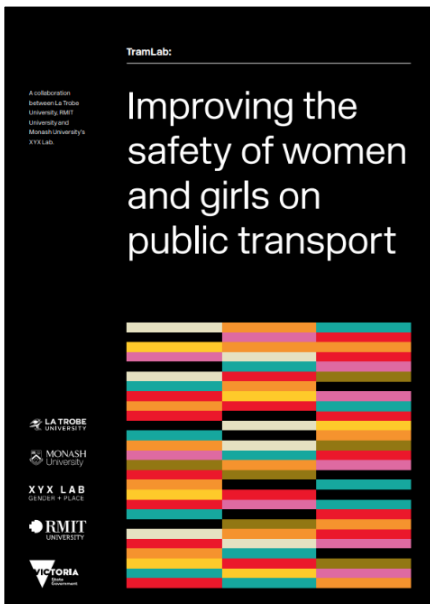
The TramLAB project brought together the twenty years of applied public health studies on violence against women we have at the Judith Lumley Centre at La Trobe, together with expertise from the Design and Social Context Centre at RMIT and Space, Gender, and Communication from the XYX lab at Monash.

Aiia Maasarwe, a female Palestinian Israeli student at La Trobe University was coming home in the evening to Bundoora on the 86 tram from a concert she had been attending. Aiia's death was the most recent in a string of murders and rapes of young women in similar circumstances.

The rape and murder of young women are at the extreme end of a spectrum of sexual assault and harassment that a wide diversity of women and girls experience every day in their journeys to, on board and then in the final pathways from public transport to home. These journeys can generate fear and anxiety that mean many women change their behaviours, the routes they take and the level of vigilance they enact. We wanted to change this reality of women being afraid, to make these journeys safer.

We completed in-depth interviews with service providers and victim-survivors who use public transport and analysed how data collection could be improved in Victoria. Following this, we held a one-day workshop with designers, researchers, stakeholders and most importantly women, to discuss how public transport could be made safer. This all culminated in a final report and four toolkits: Data, Placemaking, Training and Communications. It was exciting to bring together this team of researchers to address women's safety.

Jess Ison



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.



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Emma Toone

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MCPP
Berry Street Innovations Partnership

Higher degree research

PhD and Professional Doctorate graduates 2020

Dr Christine Murray

The association between health literacy and patient satisfaction with consultation: An observational study

Poor health literacy is a common barrier to effective communication in health care. People with low health literacy have poorer health outcomes than those with higher health literacy.

The methodology was a cross-sectional observational study of women attending an obstetric or gynaecology outpatient hospital setting (Mercy Hospital for Women & Werribee Mercy Hospital).

This study concluded that there was no association between health literacy and patient satisfaction with consultation..

Supervised by Susan McDonald and Richard Gray (School of Nursing and Midwifery).



Dr Nawal Abdulghani

Exploring hospital practices immediately after birth in Saudi Arabia: A mixed method study

Dr Abdulghani conducted a mixed method study to explore the practices of skin-to-skin contact immediately after vaginal birth in Saudi Arabia. The findings of her study contribute to broad recommendations for policy makers and health care providers to enhance the implementation of this evidence-based practice and achieve optimal health outcomes for mothers and infants.

Supervised by Lisa Amir, Kristina Edvardsson and Amanda Cooklin.

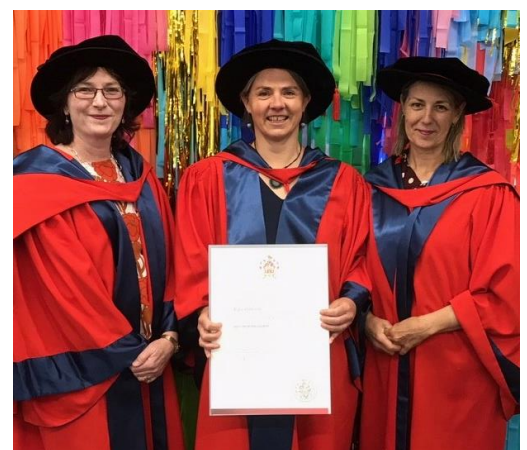


Dr Kate Dawson

Exploring the introduction, expansion and sustainability of caseload midwifery: A national cross-sectional study

Dr Dawson undertook a national study of caseload midwifery in Australia. Caseload (care from a known midwife throughout the childbearing journey) is associated with better health outcomes for mothers and babies. She found that caseload is increasing in availability across Australia and health services are willing and ready to increase access for women.

Supervised by Della Forster, Michelle Newton and Helen McLachlan.



Higher degree research

PhD graduates 2021

Dr Lester Jones

The Pain and Movement Reasoning Model: Exploring utility and suitability

Dr Jones explored the use of a reasoning model for physiotherapists. He found that the Pain and Movement Reasoning Model aligned with physiotherapists' practice and proved to be adaptable for different clinical contexts and disciplines. His findings contribute to improved methods for pain management

Supervised by Lisa Amir and Stephen Kent (School of Psychology and Public Health)



Dr Mercy Otsin

Mixed methods study of post abortion women and service providers in Ghana

Dr Otsin explored unsafe abortion from the perspectives of women, formal (hospital based providers) and informal abortion providers (pharmacies and herbsellers) in Ghana. The findings revealed that most Ghanaian women used illegal medication abortion from pharmacies and emphasised the need for training, regulation, and monitoring of the sector. Dr Otsin also proposed the three delays model for induced abortion care.

Supervised by Angela Taft, Leesa Hooker and Kirsten Black (Sydney University)



Postgraduate Students

Anita Moorhead

Diabetes and Antenatal Milk Expressing (DAME): A randomised controlled trial

Supervised by Della Forster, Lisa Amir and Sharinne Crawford

Anne O'Neill

Clinical supervision in the Victorian Maternal and Child Health Nurses: a mixed method study

Supervised by Kristina Edvardsson and Leesa Hooker

Bijaya Pokharel

Exploring culturally competent primary care family violence responses

Supervised by Angela Taft, Leesa Hooker and Jane Yelland

Brooke Owen

Perceived barriers to physiological birth among midwives and obstetricians: An investigation into shared decision making, medical intervention in birth, and clinical practices

Supervised by Christine East and Jenny Davis

Carol Reid

Preparing for implementation of trauma-informed care for Aboriginal and Torres Strait Islander parents in rural primary health settings

Supervised by Lisa Amir, Catherine Chamberlain, Jan Nicholson and Shannon Bennetts

Catina Adams

How does the Enhanced Maternal and Child Health Service in Victoria support vulnerable families, in particular those experiencing family violence?

Supervised by Angela Taft and Leesa Hooker

Charlie Benzie

ABLE: Asking women aBout disabiLitiEs

Supervised by Helen McLachlan, Della Forster and Michelle Newton

David Curtin

Understanding nurses' experiences of burnout and turnover in a tertiary hospital

Supervised by Amanda Cooklin, Michell Newton and Fleur Llewellyn (Royal Women's Hospital)

Deborah Pidd

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

Supervised by Christine East and Michelle Newton

Desiree 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, Angela Taft

Emma Toone

Improving mental health responses for very young children after family violence

Supervised by Leesa Hooker, Angela Taft and Kjerstin Almqvist (Karlstad University, Sweden)

Fiona Burgemeister

Evaluation of area-based initiatives to improve outcomes in children from disadvantaged families

Supervised by Jan Nicholson, Lisa Amir, Sharinne Crawford, Stacey Hokke and Naomi Hackworth (Parenting Research Centre)

Fiona Faulks

The impact of caseload midwifery (continuity of care) on the perinatal outcomes of vulnerable women in a regional centre

Supervised by Helen McLachlan and Touran Shafiei

Fiona McLardie-Hore

RUBY – Ringing up about breastfeeding early: A randomised controlled trial

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Georgina Igoe

Many Safe Hands: How to provide trauma-informed, culturally appropriate care for Aboriginal and Torres Strait Islander parents with complex trauma in the perinatal space

Supervised by Catherine Chamberlain and Naomi Ralph

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

Heather Grimes

Pass it on: Implementing a breastfeeding peer support program

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Jessica Bee

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

Kerryn O'Rourke

Volunteer doula support for women experiencing socioeconomic disadvantage in Melbourne: A realist evaluation

Supervised by Touran Shafiei, Michelle Newton and Jane Yelland (Murdoch Children's Research Institute)

Kim Howland

An exploration of tele practice in the Victorian Maternal and Child Health Services

Supervised by Jan Nicholson and Leesa Hooker

Lael Ridgway

Victorian Maternal and Child Health Service provision: What, when and how?

Supervised by Jan Nicholson, Stacey Hokke, Lisa McKenna (School of Nursing and Midwifery) and Naomi Hackworth (Parenting Research Centre)

Noushin Arefadib

Examining the postnatal depression and anxiety screening and management practices of MCH nurses in Victoria: A mixed methods study

Supervised by Touran Shafiei, Amanda Cooklin and Jan Nicholson

Pamela 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

Ranmali Rodrigo

Storage and transport of expressed breast milk for infants in two Neonatal Intensive Care Units: Exploratory studies in Australia and Sri Lanka

Supervised by Lisa Amir and Della Forster

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)

Renee Kam

Reliability of markers for breast hypoplasia in the early postpartum period

Supervised by Lisa Amir and Méabh Cullinane

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)

Ruth Lungu Ngoma

Fathers' experiences of traumatic labour and birth

Supervised by Kristina Edvardsson, Christine East and Laura Biggs (Murdoch Children's Research Institute)

Sara Couch

Developing and testing an online moderated peer support intervention to prevent postnatal depression

Supervised by Helen McLachlan, Della Forster and Touran Shafiei

Sarah Hay

Evaluating a new Parenting Kit designed by the Royal Women's Hospital: A mixed methods study

Supervised by Helen McLachlan, Michelle Newton, Della Forster and Touran Shafiei

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

Update from honoraries and former PhD students on their experience of 2020

Beatriz Ayala



Firstly, I would like to say that my family is fine and healthy. I am a Peruvian Obstetrician and Gynaecologist graduated with a PhD in Public Health from La Trobe University (with the support of Professor Angela Taft, Professor Sue McDonald, Dr. Wendy Pollock and JLC family). Currently I am working as a Medical Officer at the National Institute of Health, in Lima-Peru, and I am also an Honorary Research Fellow in the School of Nursing and Midwifery at La Trobe University.

Since the COVID-19 pandemic I have been working and teaching from home in my country. In addition, I undertook research on SAR-COV-2 virus so that I went to the hospitals and took blood samples of confirmed cases of COVID-19 in March 2020 (just after quarantine started in my country) and collected data from medical reports of those patients for another research project from August to October 2020.

Even though my government has implemented protective measures due to COVID-19 pandemic since 16 March 2020 (including quarantine, social distancing among others), hospitals are full due to the high number of infected patients and health care workers are risking their lives fighting against COVID-19 pandemic. This is because our health care system is very weak plus health and socioeconomic inequalities throughout Peru, which make it very difficult to follow those protective measures.

Since June 2020, commercial activities in malls, restaurants, post offices, banks, etc have been working regularly while cinemas and theatres remain closed. Besides, private or public social events, are still not allowed, and there was a curfew from 9 pm to 4 am in Lima during 2020. Universities and schools are still giving courses virtually.

Unfortunately, this pandemic will continue in Peru and may become endemic, which means the risk of infection will persist even with the implementation of vaccines, which has started from February 2021, and I was also vaccinated. Hygiene and all preventive measures will be one of the main tools to prevent and avoid COVID-19 infection.

The only good part of this pandemic is working from home and being with my family and pets.

Dr Beatriz Paulina Ayala Quintanilla is an obstetrician and gynaecologist in Peru. She did a PhD in Public Health at the Centre. She also has a PhD in Medicine from Japan, and a Master of Public Health from Denmark. She has been working at the Peruvian National Institute of Health where she is part of the department in charge of promoting and developing health research in Peru.

Marcos Signorelli



I am based at the Federal University of Parana in Curitiba, Brazil, and proudly a research collaborator over the last eleven years with JLC. Unfortunately, the news is quite sad from this part of the world regarding the pandemic. As many of you know, Brazil is one of the worst affected countries in the world by COVID. It is absolutely tragic and outrageous, more than half a million of lives were lost. And this number is certainly underestimated, as many cases were not diagnosed, many people died in rural/remote areas and did not have access to proper care. The impacts for families and communities are immeasurable. Just to give an example, at some point, my university's instagram account (@ufpr_official) looked like an obituary, with weekly black & white pictures of dead staff/students and the subtitle "luto", the Portuguese word for mourning.

Our current federal government is considered as committing a genocide by many public health experts, including myself. An editorial published in *The Lancet* by one of the most prominent Brazilian epidemiologists (Hallal, 2021) explains that the current Brazilian president declared that the pandemic was like a "little flu". He did not encourage social distancing or use of masks (on the contrary, he stimulated crowds) and the worst: he systematically denied scientific knowledge. He shared many fake stories, especially regarding ineffective treatments not recognised by the scientific community, such as chloroquine and ivermectin and discredit vaccination. His idol was the previous US president, but fortunately US population chose democracy and science instead of anti-science and fake news. We hope that in the next year's elections, Brazilians do the same here. Fingers crossed and hope is the last to die.

Dr Marcos Claudio Signorelli is Associate Professor of Public Health at the Federal University of Parana (UFPR), Brazil and a valued collaborator at the Centre. Marcos spent a semester at JLC in 2010 while working on his PhD thesis. He then returned to the Centre as a post-doctoral researcher in 2017.

Ingrid Wilson



Life goes on here in Singapore. COVID-19 remains an ongoing presence as Singapore experienced spikes in community cases like most parts of the world. Sadly, we have not been able to visit family and friends in Melbourne but we remain optimistic. I have been grateful to continue the remote collaboration on publications on intimate partner violence and alcohol with Angela and colleagues from Centre for Alcohol Policy Research. survivor voices during COVID with Leesa, and migrant domestic workers with Sonia Reisenhofer. Looking forward to the day I can visit JLC in person!

Dr Ingrid Wilson was the inaugural Judith Lumley PhD scholarship holder, and researcher at the Centre. She established LAVAWN to connect violence against women researchers across La Trobe. She is now an Assistant Professor at the Singapore Institute of Technology, Health and Social Sciences Cluster

Significant lectures and presentations

Catherine Chamberlain, with Judy Atkinson and Carly Atkinson. Invited webinar (>2000 live participants). *Aboriginal children and the effects of intergenerational trauma*. Emerging Minds and Mental Health Professionals' Network, May 2020

Shannon Bennetts *Re-engaging families in the long-term follow-up of an early childhood parenting program: Evidence from the EHLS at School Study*. Parents' engagement in parenting programs: Lessons and challenges. Presented with Gonzalez, C. & Ohan, J. 20th Biennial Helping Families Change Conference, Brisbane, February 2020

Fiona Burgemeister *Implementation of evidence-based programs in an area-based initiative for children – A qualitative study*. 20th Biennial Helping Families Change Conference, Brisbane, February 2020

Amanda Cooklin *Exploring the causes and consequences of work-family conflict: Gendered risks and opportunities*. Gender and Sexuality at Work Conference, University of Melbourne, February 2020

Touran Shafiei *Perinatal mental health needs of immigrant and refugee women: Care provider's perspective*. Migrant Women's Sexual and Reproductive Health Conference, Melbourne, February 2020

Stacey Hokke *Does flexible work 'work' in Australia? A survey of employed mothers and fathers' work arrangements and health outcomes*. Oral presentation, 20th Biennial Helping Families Change Conference, Brisbane, February 2020

Catina Adams *Breastfeeding – why has it become such a problem?* Invited speaker, Australian Doula Conference, March 2020

Kerryn O'Rourke *Evaluation of the Birth for Humankind doula support program*. Invited speaker, Australian Doula Conference, March 2020 (60 min presentation by Zoom webinar)

Fiona Burgemeister *Implementing evidence-based programs in an Australian place-based initiative for children*. Society for Prevention Research Conference, Washington, USA; July 2020 (poster presentation, online)

Helen McLachlan and Della Forster: *Improving outcomes through midwifery research: A snapshot of innovative research from Victoria, Australia*. Midwifery Thinks! Symposium, Thomas Jefferson University, Philadelphia, USA; August 2020

Sharinne Crawford *The new 'neighbourhood'? How social media is shaping contemporary parenting*. Slovenian Australian Academic Association Annual Conference, Wellington, NZ (and online); November 2020

Dr Lester Jones: *The Pain and Movement Reasoning Model for Labour: a tool to assist assessment of the pain experience in labour*. Inaugural virtual conference, September 2021

Laura Whitburn: *Impressions from the development of a multidimensional, woman-centred tool to capture women's experiences of labour pain; Caring for Women in Labour. "Choosing my BIRTHDAY?."* Inaugural virtual conference, September 2021

Rebecca Hyde, Robyn Matthews, Anita Moorhead, Fiona McLardie-Hore and Prof Della Forster: *Maternity pandemic care, what do women need in the future? Views and experiences of women birthing in Melbourne in 2020*. Australian College of Midwives (ACM) Virtual National Conference – Pecha Kucha presentation, October 2021e,

World Breastfeeding Week seminar, Protect Breastfeeding: A shared responsibility. Royal Women's Hospital, August 2021 (webinar).

Lisa Amir: *Nipples in lactation: A slideshow*

Renee Kam: *Breast hypoplasia*

Anita Moorhead: *COVID and breastfeeding telehealth*

JLC Lunchtime Seminars

2020

5 FEBRUARY

Dr Marcos Signorelli, Universidade Federal do Paraná, Brazil

Brazilian research endeavours in gender, violence and health: multisectoral approaches

4 MARCH

Dr Mridula Shankar, Johns Hopkins Bloomberg School of Public Health

Novel approaches to measuring induced abortion incidence and the quality of informal abortion care: findings from Nigeria, Cote d'Ivoire and Rajasthan, India

1 APRIL

Dr Stacey Hokke and Fiona Burgemeister, La Trobe University

Updates on two research projects at the Judith Lumley Centre

6 MAY

Dr Anni Hine Moana, La Trobe University

There's a word for that: Reporting on the role that shame can play in the development of alcohol problems amongst Australian Aboriginal women

3 JUNE

Professor Christine East, La Trobe University & Mercy Health

Induction of labour: a date of birth and beyond...

1 JULY

Professor Helen McLachlan, Pamela McCalman and Tanisha Springall, La Trobe University

Updates on the Baggarook project: Improving the health of Aboriginal mothers and babies through continuity of midwife care: a multi methods translational study

5 AUGUST

Associate Professor Meredith Nash, University of Tasmania

Caring during COVID-19: A gendered analysis of Australian university responses to managing remote working and caring responsibilities

2 SEPTEMBER

Dr Josephine Barbaro, OTARC, La Trobe University

Monitoring of social attention, interaction and communication (MoSAIC) in infants and toddlers

7 OCTOBER

Associate Professor Melissa Graham, La Trobe University

Women's reproductive choices, decision-making and consequences

4 NOVEMBER

Dr Kirsty Forsdike and Dr Elspeth Frew, La Trobe University

Commemorative events and public rituals: redefining our leisure engagement with violent death as healing practice and/through social activism

2 DECEMBER

Associate Professor Emily Callander, Monash University

Efficiency and equity in maternal health care: the use of linked data to improve care for all

2021

FEBRUARY

Professor Brian Oldenburg, The University of Melbourne

Implementation science: A new research paradigm for improving clinical and population health

MARCH

Professor Mary Wlodek, The University of Melbourne

Impact of pregnancy complications on breast milk, breastfeeding and infant outcomes

MAY

Professor Naomi Priest, Australian National University

Understanding and addressing racism as a critical child health priority

JUNE

Dr Kayli Wild, Guilhermina (Amina) de Araujo and Dr Lidia Gomes, La Trobe University and Universidade Nacionale Timor Lorosa'e

Addressing violence against women in Timor-Leste: Collaboration and diverse research outputs to support meaningful change

JULY

Dr Laura Biggs, Murdoch Children's Research Institute

Pathways, contexts, and voices of shame: suicidality during pregnancy and the following year

AUGUST

Professor Sophie Havighurst and Ann Harley, The University of Melbourne:

Tuning in to toddlers

SEPTEMBER

Associate Professor Brigid Jordan, The University of Melbourne

Early years education research project

OCTOBER

Professor Angela Taft, Dr Leesa Hooker and Dr Kirsty Forsdike, La Trobe University

Tramlab: Improving the safety of women and girls on public transport in Melbourne

NOVEMBER

Professor Christine East & Dr Laura Whitburn, La Trobe University

Caring for women in labour: Updates from two researchers at the Judith Lumley Centre

DECEMBER

Associate Professor Kristelle Hudry, La Trobe University

Childhood autism phenotype: research program overview

Awards

ARC Future Fellowship

Associate Professor Amanda Cooklin was successful in being awarded an Australian Research Council Future Fellowship. The highly competitive Future Fellowship Scheme aims to support “excellent mid-career researchers” to undertake high quality research that will be of benefit, both nationally and internationally. Amanda’s work has been identified as an area of national priority.

Australian research shows that one in three Australian parents report conflicts between their work and family demands. These conflicts are linked to lower productivity, poorer parent mental health, and may be an under-recognised factor in children’s development. Policy and workplace solutions have not yet been widely effective. The Fellowship provides funding for four years and will fund a new program of research undertaken at JLC. Amanda’s work will identify how parents’ work-family stresses have flow on costs to children using data from the Longitudinal Study of Australian Children, and interviews with employed parents. Her research will also identify opportunities, co-developed with industry partners, for new evidence-based strategies for employers to better support working parents. She also has a Visiting Fellow position planned to the Work Research Institute, at Oslo Metropolitan University in 2023 to build collaboration and seek expertise from the multi-disciplinary organisational scholars at the Institute.

Through this four-year program, Amanda aims to develop options for solving urgent problems faced by Australian

working parents and their families, which have recently taken on a new shape in the post-COVID working environment for many families.

Three Minute Thesis Competition

Bijaya Pokharel was one of five finalists selected in the La Trobe SHE College heat and also the winner of the People’s Choice award. She competed at the University finals in September. Her topic: *Culturally competent domestic violence care: A wheel of hope.*

La Trobe Student Excellence Academy

Jessica Bee received a Certificate of Recognition of acceptance into the La Trobe Student Excellence Academy as the highest ranked student in her course (April 2020).

La Trobe Research Theme Scholarships

Desiree LaGrappe received a research theme scholarship for her project titled 'Maternal Child Health Nursing: A golden opportunity to integrate screening for reproductive coercion and increase effective contraception use?'

Molly Allen-Leap received a research theme scholarship for her research is titled 'What are the experiences of migrant and refugee women when seeking support for family violence from their GP?'

Publications

Aboriginal and Torres Strait Islander family health

Program leads: Associate Professor Catherine Chamberlain, Professor Helen McLachlan

Bovill M, Chamberlain C, Bennett J, Longbottom H, Bacon S, Field B, Hussein P, Berwick R, Gould G, O'Mara P. Building an Indigenous-led evidence base for smoking cessation care among Aboriginal and Torres Strait Islander women during pregnancy and beyond: Research protocol for the Which Way? Project. *Int J Environ Res Public Health* 2021; 18(3):1342

Brown A, Mensah F, Gee G, Paradies Y, French S, Waters L, Arabena K, Armstrong G, Nicholson J, Brown SJ, Hegarty K, Ritte R, Meiselbach K, Kelaher M. Evaluation of an Aboriginal and Torres Strait Islander strengths based coaching program: a study protocol. *BMC Public Health* 2021; 21:1451

Chamberlain C, Gee G, Gartland D, Mensah FK, Mares S, Clark Y, Ralph N, Atkinson C, Hirvonen T, McLachlan H, Edwards T, Herrman H, Brown SJ, Nicholson JM. Community perspectives of complex trauma assessment for Aboriginal parents: 'Its important, but how these discussions are held is critical'. *Front Psychol* 2020; 11:2014

Clark Y, Gee G, Ralph N, Atkinson C, Brown S, Glover K, McLachlan H, Gartland D, Hirvonen T, Andrews S, Chamberlain C, The Healing the Past by Nurturing the Future Investigators Group, The Healing the Past by Nurturing the Future Co-Design Group. The Healing the Past by Nurturing the Future: Cultural and emotional safety framework. *Journal of Indigenous Wellbeing / Te Mauri - Pimatisiwin* 2020; 5(1):38-57

Gee G, Lesniowska R, Santhanam-Martin R, Chamberlain C. Breaking the cycle of trauma – Koori parenting what works for us. *First Peoples Child and Family Review* 2020; 15(2):45-66

Geia L, Baird K, Bail K, Barclay L, Bennett J, Best O, Birks M, Blackley L, Blackman R, Bonner A, Bryant Ao R, Buzzacott C, Campbell S, Catling C, Chamberlain C, Cox L, Cross W, Cruickshank M, Cummins A, Dahlen H, Daly J, Darbyshire P, Davidson P, Denney-Wilson E, De Souza R, Doyle K, Drummond A, Duff J, Duffield C, Dunning T, East L, Elliott D, Elmir R, Fergie Oam D, Ferguson C, Fernandez R, Flower Am D, Foureur M, Fowler C, Fry M, Gorman E, Grant J, Gray J, Halcomb E, Hart B, Hartz D, Hazelton M, Heaton L, Hickman L, Homer Ao CSE, Hungerford C, Hutton A, Jackson Ao D, Johnson A, Kelly MA, Kitson A, Knight S, Levett-Jones T, Lindsay D, Lovett R, Luck L, Molloy L, Manias E, Mannix J, Marriott AMR, Martin M, Massey D, McCloughen A, McGough S, McGrath L, Mills J, Mitchell BG, Mohamed J, Montayre J, Moroney T, Moyle W, Moxham L, Northam Oam H, Nowlan S, O'Brien AP, Ogunisiji O, Paterson C, Pennington K, Peters K, Phillips J, Power T, Procter N, Ramjan L, Ramsay N, Rasmussen B, Rihari-Thomas J, Rind B, Robinson M, Roche M, Sainsbury K, Salamonsen Y, Sherwood J, Shields L, Sim J, Skinner I, Smallwood G, Smallwood R, Stewart L, Taylor S, Usher Am K, Virdun C, Wannell J, Ward R, West C, West R, Wilkes L, Williams R, Wilson R, Wynaden D, Wynne R. A unified call to action from Australian nursing and midwifery leaders: ensuring that Black lives matter. *Contemporary Nurse* 2020; 56(4):297-308

Heris C, Eades S, Lyons L, Chamberlain C, Thomas D. Changes in the age young Aboriginal and Torres Strait Islander people start smoking, 2002–2015. *Public Health Res Pract* 2020; 30(2):29121906

Heris C, Guerin N, Thomas D, Chamberlain C, Eades S, White VM. Smoking behaviours and other substance use among Indigenous and non-Indigenous Australian secondary students, 2017. *Drug Alcohol Rev* 2021; 40(1):58-67

Heris C, Thurber KA, Wright D, Thomas D, Chamberlain C, Gubhaju L, Sherriff S, McNamara B, Banks E, Smith N, Eades S. Staying smoke-free: Factors associated with nonsmoking among urban Aboriginal adolescents in the Study of Environment on Aboriginal Resilience and Child Health (SEARCH). *Health Promot J Austral* 2021; 32 185-96

Heris CL, Guerin N, Thomas DP, Eades SJ, Chamberlain C, White VM. The decline of smoking initiation among Aboriginal and Torres Strait Islander secondary students: implications for future policy. *Aust N Z J Public Health* 2020; 44(5):397-403

Reid C, Brennan S, McKenzie J, Bennetts SK, Clark Y, Mensah FK, Hokke S, Ralph N, Brown SJ, Gee G, Nicholson JM, Chamberlain C. Perinatal interventions to support parents who experienced maltreatment in their own childhood (Protocol). *Cochrane Database Syst Rev* 2021; 7:CD014874

Reid C, Gee G, Bennetts SK, Clark Y, Atkinson C, Dyall D, Nicholson JM, Chamberlain C. Using participatory action research to co-design perinatal support strategies for Aboriginal and Torres Strait Islander parents experiencing complex trauma. *Women Birth* 2021; Online ahead of print

REPORTS

Pokharel B, Bovill M, Belfrage M, O'Mara P, Jennings K, Wood M, Atkinson D, Chamberlain C, COVID-19 Primary Healthcare Guidance Group. Managing mild covid-19 in the home: Considerations and recommendations for Aboriginal and Torres Strait Islander communities - A rapid evidence summary. Melbourne: National Aboriginal Community Controlled Health Organisation (NACCHO); 2020.

Breastfeeding

Program lead: Professor Lisa Amir

Amir LH, Baeza C, Charlamb JR, Jones W. Identifying the cause of breast and nipple pain during lactation. *BMJ* 2021; 374:n1628

Amir LH, Grzeskowiak LE, Kam RL. Ethical issues in use of medications during lactation. *J Human Lact* 2020; 36(1):34-9

Bish MR, Faulks F, Amir LH, Huxley RR, McIntyre HD, James R, Mnatzaganian G. Relationship between obesity and lower rates of breast feeding initiation in regional Victoria, Australia: an 8-year retrospective panel study. *BMJ Open* 2021; 11(2):e044884

Buck M, Amir LH, McDonald K. 'Not at all what I had imagined or been prepared for.' Women's experiences of becoming a breastfeeding mother. *Breastfeed Rev* 2020; 28(2):15-25

Camargo BTS, Coca KP, Amir LH, Corrêa L, Aranha ACC, Marcacine KO, Abuchaim ÉdSV, Abrão ACFdV. The effect of a single irradiation of low-level laser on nipple pain in breastfeeding women: a randomized controlled trial. *Lasers Med Sci* 2020; 35(1):63-9

Cramer RL, McLachlan HL, Shafiei T, Amir LH, Cullinane M, Small R, Forster DA. Women's experiences of infant feeding support: Findings from a cross-sectional survey in Victoria, Australia. *Women Birth* 2021; 34(5):e505-e13

Grimes HA, Forster DA, Shafiei T, Amir LH, McLardie-Hore F, McLachlan HL.

Breastfeeding peer support by telephone in the RUBY randomised controlled trial: A qualitative exploration of volunteers' experiences. *PLoS ONE* 2020; 15(8):e0237190

Grimes HA, McLachlan HL, Forster DA, McLardie-Hore F, Mortensen K, Shafiei T. Implementing a successful proactive telephone breastfeeding peer support intervention: volunteer recruitment, training, and intervention delivery in the RUBY randomised controlled trial. *Int Breastfeed J* 2021; 16:90

Grimes HA, Shafiei T, McLachlan HL, Forster DA. Volunteers' experiences of providing telephone-based breastfeeding peer support in the RUBY randomised controlled trial. *Public Health Nutr* 2020; 23(16):3005-15

Kam RL, Amir LH, Cullinane M. Is there an association between breast hypoplasia and breastfeeding outcomes? A systematic review. *Breastfeed Med* 2021; 16(8):594-602

Kam RL, Bernhardt SM, Ingman WV, Amir LH. Modern, exogenous exposures associated with altered mammary gland development: A systematic review. *Early Hum Dev* 2021; 156:105342

Kam RL, Cullinane M, Amir LH. Breast hypoplasia and polycystic ovary syndrome – is there a link? *Clinical Lactation* 2021; 12(4):159-67

Kam RL, Cullinane M, Amir LH. Research challenges and considerations in investigating rare exposures using breast hypoplasia as an example. *J Human Lact* 2021; 37(4):633-8

Kam RL, Cullinane M, Vicendese D, Amir LH. Reliability of markers for breast hypoplasia in the early postpartum period. *J Human Lact* 2021; 37(2):242-50

McBride GM, Stevenson R, Zizzo G, Rumbold AR, Amir LH, Keir AK, Grzeskowiak LE. Use and experiences of galactagogues while breastfeeding among Australian women. *PLoS ONE* 2021; 16(7):e0254049

McLardie-Hore FE, McLachlan HL, Shafiei T, Forster DA. Proactive telephone-based peer support for

breastfeeding: a cross-sectional survey of women's experiences of receiving support in the RUBY randomised controlled trial. *BMJ Open* 2020; 10:e040412

Perez MR, de Castro LS, Chang YS, Sanudo A, Marcacine KO, Amir LH, Ross MG, Coca KP. Breastfeeding practices and problems among obese women compared with nonobese women in a Brazilian hospital. *Womens Health Rep* 2021; 2(1):219-26

Rodrigo R, Amir LH, Forster DA, McEgan K, Opie G. Human milk expression, storage, and transport by women whose infants are inpatients at a tertiary neonatal unit in Melbourne, Australia: An exploratory study. *Adv Neonatal Care* 2021; 21:E199-E208

Rodrigo R, Badanasinghe N, Abayabandara-Herath T, Forster DA, Amir LH. Bacterial growth in expressed mother's milk stored and transported under different simulated conditions in a tropical country. *Breastfeed Med* 2021; 16(4):300-8

Zizzo G, Amir LH, Moore V, Grzeskowiak LE, Rumbold AR. The risk-risk trade-offs: Understanding factors that influence women's decision to use substances to boost breast milk supply. *PLoS ONE* 2021; 16(5):e0249599

OTHER PUBLICATIONS

Amir L, Smith JP. We don't know if breastfeeding is rising or falling in Australia. That's bad for everyone. *The Conversation* 2020

COMMENTARIES, LETTERS, EDITORIALS IN REFEREED JOURNALS

Abdulghani N, Amir LH, Edvardsson K, Cooklin A. It's time for global action to reinforce mother-infant skin-to-skin contact policy [Letter]. *Acta Paediatr* 2020; 109(8):1689

Child, family and community health

Program lead: Associate Professor Leesa Hooker

Adams C, Hooker L, Taft A. Managing maternal and child health nurses undertaking family violence work in Australia: A qualitative study. *J Nurs Manag* 2021; Online ahead of print

Adams C, Hooker L, Taft A. Threads of practice: Enhanced Maternal and Child Health Nurses working with women experiencing family violence. *Glob Qual Nurs Res* 2021; 8:23333936211051703

Adams C, Ridgway L, Hooker L. Maternal, child and family nursing in the time of COVID-19: The Victorian Maternal and Child Health service experience. *Australian Journal of Child and Family Health Nursing* 2020; 17(1):12-5

Arefadib N, Cooklin A, Nicholson J, Shafiei T. Postnatal depression and anxiety screening and management by maternal and child health nurses in community settings: A scoping review. *Midwifery* 2021; 100:103039

Hooker L, Nicholson J, Hegarty K, Ridgway L, Taft A. Maternal and Child Health nurse's preparedness to respond to women and children experiencing intimate partner violence: A cross sectional study. *Nurse Educ Today* 2021; 96:104625

Hooker L, Nicholson J, Hegarty K, Ridgway L, Taft A. Victorian maternal and child health nurses' family violence practices and training needs: a cross-sectional analysis of routine data. *Aust J Primary Health* 2021; 27(1):43-9

Ridgway L, Hackworth N, Nicholson JM, McKenna L. Working with families: A systematic scoping review of family-centred care in universal, community-based maternal, child, and family health services. *J Child Health Care* 2021; 25(2):268-89

Withiel TD, Allen B, Evans K, Rudkin N, Willis K, Hooker L, Fisher C. Assisting clients experiencing family violence: Clinician and client survey responses in a child and family health service. *J Clin Nurs* 2020; 29(21-22):4076-89

Mother and infant health and maternity services

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

Aasheim V, Nilsen RM, Vik ES, Small R, Schytt E. Epidural analgesia for labour pain in nulliparous women in Norway in relation to maternal country of birth and migration related factors. *Sex Reprod Healthc* 2020; 26:100553

Abdulghani N, Amir LH, Edvardsson K. Observational study found that skin-to-skin contact was not common after vaginal birth in Saudi Arabia. *Acta Paediatr* 2020; 109(8):1681-2

Abdulghani N, Edvardsson K, Amir LH. Health care providers' perception of facilitators and barriers for the practice of skin-to-skin contact in Saudi Arabia: A qualitative study. *Midwifery* 2020; 81:102577

Andersson E, Nazanin S, Estefania O, Small R. Swedish and Australian midwives' experiences of providing antenatal care for Somali-born women: A qualitative study. *Sex Reprod Healthc* 2021; 28:100607

Byrskog U, Small R, Schytt E. Community-based bilingual doulas for migrant women in labour and birth – findings from a Swedish register-based cohort study. *BMC Pregnancy Childbirth* 2020; 20:721

Claire R, Chamberlain C, Davey MA, Cooper SE, Berlin I, Leonardi-Bee J, Coleman T. Pharmacological interventions for promoting smoking cessation during pregnancy. *Cochrane Database Syst Rev* 2020; 3:CD010078

Cullinane M, McLachlan HL, Newton MS, Zugna SA, Forster DA. Using the Kirkpatrick Model to evaluate the Maternity and Neonatal Emergencies (MANE) programme: Background and study protocol. *BMJ Open* 2020; 10:e032873

Blazek EV, East CE, Jauncey-Cooke J, Bogossian F, Grant CA, Hough J. Lung recruitment manoeuvres for reducing mortality and respiratory morbidity in mechanically ventilated neonates. *Cochrane Database Syst Rev* 2021; 3:CD009969

Davey M-A, Flood M, Pollock W, Cullinane F, McDonald S. Risk factors for severe postpartum haemorrhage: A population-based retrospective cohort study. *Aust N Z J Obstet Gynaecol* 2020; 60(4):522-32

East CE, Davey MA, Kamlin COF, Davis PG, Sheehan PM, Kane SC, Brennecke SP, Flamingo Study Group. The addition of fetal scalp blood lactate measurement as an adjunct to cardiotocography to reduce caesarean sections during labour: The Flamingo randomised controlled trial. *Aust N Z J Obstet Gynaecol* 2021; 61(5):684-92

East CE, Dorward EDF, Whale RE, Liu J. Local cooling for relieving pain from perineal trauma sustained during childbirth. *Cochrane Database Syst Rev* 2020; 10:CD006304

Frawley N, East C, Brennecke S. Women's experiences of preeclampsia: a prospective survey of preeclamptic women at a single tertiary centre. *J Obstet Gynaecol* 2020; 40(1):65-9

Flenady V, Gardener G, Ellwood D, Coory M, Weller M, Warrilow KA, Middleton PF, Wojcieszek AM, Groom KM, Boyle FM, East C, Lawford H, Callander E, Said JM, Walker SP, Mahomed K, Andrews C, Gordon A, Norman JE, Crowther C. My Baby's Movements: a stepped-wedge cluster-randomised controlled trial of a fetal movement awareness intervention to reduce stillbirths. *BJOG* 2021; Online ahead of print

- Holmlund S, Lan PT, Edvardsson K, Ntaganira J, Graner S, Small R, Mogren I. Sub-optimal use of ultrasound examinations may result in underperformance of Vietnamese maternity care – A qualitative study of midwives' experiences and views. *Sex Reprod Healthc* 2020; 24:100508
- Johnson J, Carr C, McDonald SJ, Flood MM. Talking testing: Impact of a training intervention on midwives' antenatal HIV, hepatitis B and hepatitis C screening practice. *Women Birth* 2021; 34(5):e520-e5
- Kurji J, Hackett K, Wild K, Lassi Z. The effect of maternity waiting homes on perinatal mortality is inconclusive: a critical appraisal of existing evidence from Sub-Saharan Africa. *BMC Res Notes* 2021; 14:86
- Mesbah M, Khelif MS, Layeghy S, East CE, Dong S, Brodtmann A, Colditz PB, Boashash B. Automatic fetal movement recognition from multi-channel accelerometry data. *Comput Methods Programs Biomed* 2021; 210:106377
- Mogren I, Ntaganira J, Sengoma JPS, Holmlund S, Small R, Pham Thi L, Kidanto HL, Ngarina M, Bergstrom C, Edvardsson K. Maternal health care professionals' experiences and views on the use of obstetric ultrasound in Rwanda: A cross-sectional study. *BMC Health Serv Res* 2021; 21:789
- Newton M, Dawson K, Forster D, McLachlan H. Midwives' views of caseload midwifery - comparing the caseload and non-caseload midwives' opinions. A cross-sectional survey of Australian midwives. *Women Birth* 2021; 34(1):e47-e56
- O'Rourke KM, Yelland J, Newton M, Shafiei T. An Australian doula program for socially disadvantaged women: Developing realist evaluation theories. *Women Birth* 2020; 33(5):e438-e46
- O'Rourke K, Abdulghani N, Yelland J, Newton M, Shafiei T. Cross-cultural realist interviews: An integration of the realist interview and cross-cultural qualitative research methods. *Evaluation Journal of Australasia* 2021; Online ahead of print
- Riggs E, Yelland J, Mensah FK, Gold L, Szwarc J, Kaplan I, Small R, Middleton P, Krastev A, McDonald E, East C, Homer C, Nesvadba N, Biggs L, Braithwaite J, Brown SJ. Group Pregnancy Care for refugee background women: a codesigned, multimethod evaluation protocol applying a community engagement framework and an interrupted time series design. *BMJ Open* 2021; 11(7):e048271
- Schytt E, Wahlberg A, Eltayb A, Small R, Tsekhmestruk N, Lindgren H. Community-based doula support for migrant women during labour and birth: study protocol for a randomised controlled trial in Stockholm, Sweden (NCT03461640). *BMJ Open* 2020; 10:e031290
- Schytt E, Wahlberg A, Small R, Eltayb A, Lindgren H. The community-based bilingual doula - A new actor filling gaps in labour care for migrant women. Findings from a qualitative study of midwives' and obstetricians' experiences. *Sex Reprod Healthc* 2021; 28:100614
- Smithson CA, McLachlan HL, Newton MS, Smith C, Forster DA. Perinatal outcomes of women with a disability who received pregnancy care through a specialised disability clinic in Melbourne, Australia. *Aust N Z J Obstet Gynaecol* 2021; 61(4):548-53
- Snow G, Melvin GA, Boyle JA, Gibson-Helm M, East CE, McBride J, Gray KM. Perinatal psychosocial assessment of women of refugee background. *Women Birth* 2021; 34(3):e302-e8
- Taylor L, Claire R, Campbell K, Coleman-Haynes T, Leonardi-Bee J, Chamberlain C, Berlin I, Davey M-A, Cooper S, Coleman T. Fetal safety of nicotine replacement therapy in pregnancy: systematic review and meta-analysis. *Addiction* 2021; 116(2):239-77
- Vik ES, Aasheim V, Nilsen RM, Small R, Moster D, Schytt E. Paternal country of origin and adverse neonatal outcomes in births to foreign-born women in Norway: A population-based cohort study. *PLoS Med* 2020; 17(11):e1003395
- Vik ES, Nilsen RM, Aasheim V, Small R, Moster D, Schytt E. Country of first birth and neonatal outcomes in migrant and Norwegian-born parous women in Norway: a population-based study. *BMC Health Serv Res* 2020; 20:540
- Wild K, Kurji J. Maternity waiting homes in times of crisis: Can current models meet women's needs? *Women Birth* 2021; 34(4):306-8
- Willey SM, Gibson-Helm ME, Finch TL, East CE, Khan NN, Boyd LM, Boyle JA. Implementing innovative evidence-based perinatal mental health screening for women of refugee background. *Women Birth* 2020; 33(3):e245-e55
- Zugna SA, Cullinane M, McLachlan HL, Forster DA. How a crisis at one maternity service became a catalyst for change across the Victorian public hospital system: a discussion paper *Collegian* 2021; Online ahead of print

BOOK SECTIONS

Chamberlain C, Coleman T. Tobacco smoking in pregnancy. In: Lapinsky SE, Plante LA, editors. *Respiratory Disease in Pregnancy*. Cambridge: Cambridge University Press; 2020. p. 177-83

REPORTS

Cullinane M, Forster D, Zugna S, McLachlan H, Newton M. *Maternity and newborn emergencies evaluation final report*. Melbourne: La Trobe University, Judith Lumley Centre; 2020.

Reproductive health and planned parenthood

Professor Angela Taft and Associate Professor Kristina Edvardsson

Black KI, McGeechan K, Watson CJ, Lucke J, Taft A, McNamee K, Haas M, Peipert JF, Mazza D. Women's satisfaction with and ongoing use of hormonal long-acting methods compared to the oral contraceptive pill: Findings from an Australian general practice cluster randomised trial (ACCORD). *Aust N Z J Obstet Gynaecol* 2021; 61(3):448-53

Edvardsson K, Davey MA, Powell R, Axmon A. Sex ratios at birth in Australia according to mother's country of birth: A national study of all 5 614 847 reported live births 1997-2016. *PLoS ONE* 2021; 16(6):e0251588

Mazza D, Amos N, Watson CJ, McGeechan K, Haas M, Peipert JF, Lucke J, Taft A, McNamee K, Black KI. Increasing the uptake of long-acting reversible contraception in general practice: the Australian Contraceptive ChOice pRoject (ACCORD) cluster randomised controlled trial longitudinal follow-up protocol. *BMJ Open* 2020; 10(9):e035895

Mazza D, Watson CJ, Taft A, Lucke J, McGeechan K, Haas M, McNamee K, Peipert JF, Black KI. Increasing long acting reversible contraceptives: The Australian Contraceptive ChOice pRoject (ACCORD) cluster randomized trial. *Am J Obstet Gynecol* 2020; 222(S921):e1-13

Otsin MNA, Taft AJ, Hooker L, Black K. Three Delays Model applied to prevention of unsafe abortion in Ghana: a qualitative study. *BMJ Sex Reprod Health* 2021; Online ahead of print

Subasinghe AK, Watson CJ, Black KI, Taft A, Lucke J, McGeechan K, Haas M, McNamee K, Peipert JF, Mazza D. Current contraceptive use in women with a history of unintended pregnancies: Insights from the Australian Contraceptive ChOice pRoject (ACCORD) trial. *Aust J Gen Pract* 2021; 50(6):422-5

Wallace HJ, McDonald S, Belton S, Isolina Miranda A, da Costa E, da Conceicao Matos L, Henderson H, Taft A. Who decides to have sex? Exploring the perceptions of Timorese women and men through a reproductive justice lens. *Culture, Health & Sexuality* 2020; 22(1):112-27

Wallace HJ, McDonald S, Belton S, Taft A. Body mapping to explore perceptions of sexual and reproductive anatomy and physiology across languages and cultures: an example from Timor-Leste. *SAGE Research Methods Cases* 2020

Watson CJ, McGeechan K, McNamee K, Black KI, Lucke J, Taft A, Haas M, Peipert JF, Mazza D. Influences on condom use: A secondary analysis of women's perceptions from the Australian Contraceptive ChOice pRoject (ACCORD) trial. *Aust J Gen Pract* 2021; 50(8):581-7

REPORTS

Wild K, de Araujo G, Martins N, Gomes L, Kelly L, Young F, A T. Making family planning accessible for vulnerable women: Findings from research to inform family planning policy in Timor-Leste [policy brief to Ministry of Health, Timor-Leste]. Melbourne: La Trobe University; 2020.

Preventing and reducing violence against women and children

Program leads: Professor Angela Taft, Associate Professor Leesa Hooker

Ayala Quintanilla BP, Pollock WE, McDonald SJ, Taft AJ. Intimate partner violence and severe acute maternal morbidity in the intensive care unit: A case-control study in Peru. *Birth* 2020; 47(1):29-38

Brown SJ, Mensah F, Giallo R, Woolhouse H, Hegarty K, Nicholson JM, Gartland D. Intimate partner violence and maternal mental health ten years after a first birth: An Australian prospective cohort study of first-time mothers. *J Affect Disord* 2020; 262:247-57

Fiolet R, Cameron J, Tarzia L, Gallant D, Hameed M, Hooker L, Koziol-McLain J, Glover K, Spangaro J, Hegarty K. Indigenous people's experiences and expectations of health care professionals when accessing care for family violence: a qualitative evidence synthesis. *Trauma Violence Abuse* 2020; Online ahead of print

Fogarty A, Savopoulos P, Seymour M, Cox A, Williams K, Petrie S, Herman S, Toone E, Schroeder K, Giallo R. Providing therapeutic services to women and children who have experienced intimate partner violence during the COVID-19 pandemic: Challenges and learnings. *Child Abuse Negl* 2021; Online ahead of print:105365

Fogarty A, Treyvaud K, Savopoulos P, Jones A, Cox A, Toone E, Giallo R. Facilitators to engagement in a mother-child therapeutic intervention following intimate partner violence. *J Interpers Violence* 2021; Online ahead of print

- Graham K, Bernards S, Laslett A-M, Gmel G, Kuntsche S, Wilsnack S, Bloomfield K, Grittner U, Taft A, Wilson I, Wells S. Children, parental alcohol consumption and intimate partner violence: A multi-country analysis by perpetration versus victimization and sex. *J Interpers Violence* 2021; 36(11-12):5608-34
- Gartland D, Conway LJ, Giallo R, Mensah FK, Cook F, Hegarty K, Herrman H, Nicholson J, Reilly S, Hiscock H, Sciberras E, Brown SJ. Intimate partner violence and child outcomes at age 10: a pregnancy cohort. *Arch Dis Child* 2021; 106(11):1066-74
- Hameed M, O'Doherty L, Gilchrist G, Tirado Muñoz J, Taft A, Chondros P, Feder G, Hegarty K. Psychological therapies for women who experience intimate partner violence. *Cochrane Database Syst Rev* 2020; 6:CD013017
- Hegarty K, McKibbin G, Hameed M, Koziol-McLain J, Feder G, Tarzia L, Hooker L. Health practitioners' readiness to address domestic violence and abuse: A qualitative meta-synthesis. *PLoS ONE* 2020; 15:e0234067
- Hegarty K, Valpied J, Taft A, Brown SJ, Gold L, Gunn J, O'Doherty L. Two-year follow up of a cluster randomised controlled trial for women experiencing intimate partner violence: effect of screening and family doctor-delivered counselling on quality of life, mental and physical health and abuse exposure. *BMJ Open* 2020; 10:e034295
- Hooker L, Taft A. Who is being screened for intimate partner violence in primary care settings? Secondary data analysis of a cluster randomised trial. *Matern Child Health J* 2021; 25(10):1554-61
- Hooker L, Versteegh L, Lindgren H, Taft A. Differences in help-seeking behaviours and perceived helpfulness of services between abused and non-abused women: A cross-sectional survey of Australian postpartum women. *Health Soc Care Community* 2020; 28(3):958-68
- Giallo R, Fogarty A, Savopoulos P, Cox A, Toone E, Williams K, Jones A, Treyvaud K. Capturing the experiences of clinicians implementing a new brief intervention for parents and children who have experienced family violence in Australia. *Health Soc Care Community* 2021; Online ahead of print
- Ison J, Hooker L, Allen M, Newton M, Taft A. Family violence best practice: Engaging nurses and other healthcare professional students. *Australian Nursing and Midwifery Journal* 2020; 27(1):48
- Kalra N, Hooker L, Reisenhofer S, Di Tanna GL, Garcia-Moreno C. Training healthcare providers to respond to intimate partner violence against women. *Cochrane Database Syst Rev* 2021; 5:CD012423
- Laslett AM, Graham K, Wilson IM, Kuntsche S, Fulu E, Jewkes R, Taft A. Does drinking modify the relationship between men's gender-inequitable attitudes and their perpetration of intimate partner violence? A meta-analysis of surveys of men from seven countries in the Asia Pacific region. *Addiction* 2021; 116(12):3320-32
- Pokharel B, Yelland J, Hooker L, Taft A. A systematic review of culturally competent family violence responses to women in primary care. *Trauma Violence Abuse* 2021; Online ahead of print
- Pokharel B, Yelland J, Wilson A, Pantha S, Taft A. Culturally competent primary care response for women of immigrant and refugee backgrounds experiencing family violence: A systematic review protocol. *Collegian* 2021; 28(3):333-40
- Signorelli M, Taft A, Gartland D, Hooker L, McKee C, MacMillan H, Brown S, Hegarty K. How valid is the question of fear of a partner in identifying intimate partner abuse? A cross-sectional analysis of four studies. *J Interpers Violence* 2020; Online ahead of print
- Signorelli M, Taft A, Pereira PPG. Authors' Commentary: Domestic violence against women, public policies and community health workers in Brazilian primary health care. *Int Q Community Health Educ* 2020; 40(3):237-9
- Taft A, Young F, Hegarty K, Yelland J, Mazza D, Boyle D, Norman R, Garcia-Moreno C, Nguyen CD, Li X, Pokharel B, Allen M, Feder G. HARMONY: a pragmatic cluster randomised controlled trial of a culturally competent systems intervention to prevent and reduce domestic violence among migrant and refugee families in general practice: study protocol. *BMJ Open* 2021; 11(7):e046431
- Tarzia L, Bohren MA, Cameron J, Garcia-Moreno C, O'Doherty L, Fiolet R, Hooker L, Wellington M, Parker R, Koziol-McLain J, Feder G, Hegarty K. Women's experiences and expectations after disclosure of intimate partner abuse to a healthcare provider: A qualitative meta-synthesis. *BMJ Open* 2020; 10:e041339
- Wild K, Gomes L, Fernandes A, de Araujo G, McDonald S, Taft A. Security from above and below: A critical ethnography of the health response to violence against women in Timor-Leste. *Soc Sci Med* 2020; 260:113191
- Wild K, Kelly L, Roche C. "It's a coffee with a purpose": perspectives on thinking and working politically in the Pacific. *Development in Practice* 2021; Online ahead of print

REPORTS

Forsdike K, Dyson S, Seal E, Hooker L, O'Sullivan G, De Silva D, Donaldson A, Nicholson M, Alahakoon D. Our Watch Evaluation: Final Report: Federal Department of Social Services (DSS); 2021.

Forsdike K, Hooker L, Seal E, O'Sullivan G, Ison J. Respect Victoria Evidence Review. Melbourne: La Trobe University; 2020.

Hegarty K, Gleeson S, Brown S, Humphreys C, Wheeler J, Hooker L, Tarzia L. Early engagement with families in the health sector to address domestic abuse and family violence: Policy directions [policy brief]. Melbourne: Safer Families Centre; 2020.

Hegarty K, Spangaro J, Koziol-McLain J, Walsh J, Lee A, Kyei-Onanjiri M, Matthews R, Valpied J, Chapman J, Hooker L, McLindon E, Novy K, Spurway K. Sustainability of identification and response to domestic violence in antenatal care (The SUSTAIN study). Sydney, NSW: ANROWS; 2020 Report No.: Research report, 06/2020.

Hooker L, Ison J, Henry N, Fisher C, Forsdike K, Young F, Korsmeyer H, O'Sullivan G, Taft A. Primary Prevention of Sexual Violence against Women: Combining Evidence and Practice Knowledge: Final Report and Theory of Change: Federal Department of Social Services (DSS); 2021.

Taft A, Kalms N, Matthewson G, Korsmeyer H, Hooker L, Forsdike K, Ison J, Henry N, Webb I. Improving the Safety of Women and Girls on Public Transport: Interim Report. Melbourne: Monash University; 2020.

Wild K, Ingham X, Amir L, Thompson S, Fernandes E, Wohlman A. Harmonia - Communities ending gender-based violence. Gender Equality and Social Inclusion (GESI) Analysis. Washington: Health Alliance International; 2020.

Transition to contemporary parenthood – preparation and support

Program leads: Professor Jan Nicholson, Associate Professor Amanda Cooklin

Bavin EL, Sarant J, Hackworth NJ, Bennetts SK, Buzhardt J, Jia F, Button E, Busby P, Leigh G, Peterson C. Modelling the early expressive communicative trajectories of infants/toddlers with early cochlear implants. *J Child Lang* 2020; 47(4):796-816

Bennett C, Cullinane M, Bennetts SK, Love J, Hackworth NJ, Mensah FK, Reilly S, Nicholson JM, Westrupp EM. Tablet-based adaptation and administration of the Castles and Coltheart Reading Test 2 for a large longitudinal study. *PLoS ONE* 2020; 15(9):e0239420

Bennetts SK, Love J, Hackworth NJ, Mensah FK, Westrupp EM, Berthelsen D, Levickis P, Bennett C, Nicholson JM. Selective attrition in longitudinal studies: effective processes for Facebook tracing. *International Journal of Social Research Methodology* 2021; 24(2):135-47

Bennetts SK, Love J, Westrupp EM, Hackworth NJ, Mensah FK, Nicholson JM, Levickis P. Protocol for the adaptation of a direct observational measure of parent-child interaction for use with 7–8-year-old children. *Front Psychol* 2021; 11:619336

Brown SJ, Gartland D, Woolhouse H, Giallo R, McDonald E, Seymour M, Conway L, FitzPatrick KM, Cook F, Papadopoulos S, MacArthur C, Hegarty K, Herrman H, Nicholson JM, Hiscock H, Mensah F. The maternal health study: Study design update for a prospective cohort of first-time mothers and their firstborn children from birth to age ten. *Paediatr Perinat Epidemiol* 2021; 35(5):612-25

Burgemeister FC, Crawford SB, Hackworth NJ, Hokke S, Nicholson JM. Place-based approaches to improve health and development outcomes in young children: A scoping review. *PLoS ONE* 2021; 16(12):e0261643

Cooklin AR, Giallo R, Bennetts SK, Crawford S, D'Esposito F, Zubrick SR, Hackworth NJ, Matthews J, Green J, Nicholson JM. Parental fear about children's safety when independently mobile: development and validation of two measures. *Journal of Child and Family Studies* 2020; 29(8):2246-56

Daniels LA, Mallan KM, Jansen E, Nicholson JM, Magarey AM, Thorpe K. Comparison of early feeding practices in mother–father dyads and possible generalization of an efficacious maternal intervention to fathers' feeding practices: a secondary analysis. *Int J Environ Res Public Health* 2020; 17(17):6075

Giallo R, Seymour M, Fogarty A, Feinberg M, Christensen D, Gartland D, Wood C, Brown SJ, Cooklin A. Trajectories of interparental conflict and children's emotional-behavioural functioning at 10–11 years: an Australian population-based study. *Eur Child Adolesc Psychiatry* 2021; Online ahead of print

Hokke S, Hackworth NJ, Bennetts SK, Nicholson JM, Keyzer P, Lucke J, Zion L, Crawford SB. Ethical considerations in using social media to engage research participants: Perspectives of Australian researchers and Ethics Committee members. *J Empir Res Hum Res Ethics* 2020; 15(1-2):12–27

Love J, Bennetts SK, Berthelsen D, Hackworth NJ, Westrupp EM, Mensah FK, Nicholson JM. Measuring educational attainment in longitudinal research: challenges and recommendations. *International Journal of Social Research Methodology* 2020; Online ahead of print

McMillan LJ, McCarthy MC, Muscara F, Anderson VA, Walser RD, O'Neill J, Dimovski A, Rayner M, Nicholson JM, Hearps SJC, Read PA, Morrison E, McCabe K, Williams K. Feasibility and acceptability of an online acceptance and commitment therapy group for parents caring for a child with cerebral palsy. *Journal of Family Studies* 2020; Online ahead of print

Muscara F, McCarthy MC, Rayner M, Nicholson JM, Dimovski A, McMillan L, Hearps SJC, Yamada J, Burke K, Walser R, Anderson VA. Effect of a videoconference-based online group intervention for traumatic stress in parents of children with life-threatening illness: A randomized clinical trial. *JAMA Network Open* 2020; 3:e208507

Westrupp EM, Bennett C, Berkowitz T, Youssef GJ, Toumbourou JW, Tucker R, Andrews FJ, Evans S, Teague SJ, Karantzas GC, Melvin GM, Olsson C, Macdonald JA, Greenwood CJ, Mikocka-Walus A, Hutchinson D, Fuller-Tyszkiewicz M, Stokes MA, Olive L, Wood AG, McGillivray JA, Sciberras E. Child, parent, and family mental health and functioning in Australia during COVID-19: comparison to pre-pandemic data. *Eur Child Adolesc Psychiatry* 2021; Online ahead of print

Westrupp EM, Reilly S, McKean C, Law J, Mensah F, Nicholson JM. Vocabulary development and trajectories of behavioral and emotional difficulties via academic ability and peer problems. *Child Development* 2020; 91(2):e365-e82

BOOK SECTIONS

Walsh KA, Berthelsen D, Nicholson JM. Education for the prevention of sexual abuse in the early years. In: Garvis S, Pendergast D, editors. *Health and Wellbeing in Childhood*. 3rd ed. Melbourne, VIC: Cambridge University Press; 2020. p. 154-71.

Work and family

Associate Professor Amanda Cooklin

Dinh H, Martin A, Leach L, Strazdins L, Nicholson J, Allen T, Cooklin A. Is self-employment a good option? gender, parents and the work-family interface. *Sex Roles* 2021; 84(11-12):731-46

Hokke S, Bennetts SK, Crawford S, Leach L, Hackworth NJ, Strazdins L, Nguyen C, Nicholson JM, Cooklin AR. Does flexible work 'work' in Australia? A survey of employed mothers' and fathers' work, family and health. *Community, Work & Family* 2021; 24(4):488-506

Leach LS, Dinh H, Cooklin A, Nicholson JM, Strazdins L. Australian parents' work-family conflict: accumulated effects on children's family environment and mental health. *Soc Psychiatry Psychiatr Epidemiol* 2021; 56(4):571-81

Zhao Y, Cooklin A, Butterworth P, Strazdins L, Leach LS. How does working nonstandard hours impact psychological resources important for parental functioning? Evidence from an Australian longitudinal cohort study. *SSM Popul Health* 2021; 16:100931

Zhao Y, Cooklin AR, Richardson A, Strazdins L, Butterworth P, Leach LS. Parents' shift work in connection with work-family conflict and mental health: examining the pathways for mothers and fathers. *Journal of Family Issues* 2021; 42(2):445-73

Other

Jones LE, Heng H, Heywood S, Kent S, Amir LH. The suitability and utility of the pain and movement reasoning model for physiotherapy: A qualitative study. *Physiother Theory Pract* 2021; Online ahead of print

Stokes JR, Muscara F, Zannino D, McCarthy MC, Anderson VA, Nicholson JM, d'Udekem Y. Surgical and psychosocial predictors of mental health in parents of children with cardiac admissions. *Annals Thorac Surg* 2020; 110(5):1677-82

Vijayakumar N, Youssef G, Allen NB, Anderson V, Efron D, Hazell P, Mundy L, Nicholson JM, Patton G, Seal ML, Simmons JG, Whittle S, Silk T. A longitudinal analysis of puberty-related cortical development. *NeuroImage* 2021; 228:117684

ADHD

Chiu H, Genc S, Malpas CB, Sciberras E, Nicholson JM, Efron D, Silk T. Prefrontal and frontostriatal structures mediate academic outcomes associated with ADHD symptoms. *Brain Disorders* 2021; 4:100023

Efron D, Nicholson JM, Anderson V, Silk T, Ukoumunne OC, Gulenc A, Hazell P, Jongeling B, Sciberras E. ADHD at age 7 and functional impairments at age 10. *Pediatrics* 2020:e20201061

Stephens K, O'Loughlin R, Green JL, Anderson V, Rinehart N, Nicholson JM, Hazell P, Silk TJ, Efron D, Sciberras E. The association between autism symptoms and child functioning in a sample with ADHD recruited from the community. *J Atten Disord* 2021; 25(8):1129-34

Zendarski N, Haebich K, Bhide S, Quek J, Nicholson JM, Jacobs KE, Efron D, Sciberras E. Student-teacher relationship quality in children with and without ADHD: A cross-sectional community based study. *Early Childhood Research Quarterly* 2020; 51:275-84

Funds

FUNDS 2020

Funds received from the sources listed here totalled:	\$4,529,721.73
<i>The contributors from all granting bodies are gratefully acknowledged.</i>	
National Health and Medical Research Council (NHMRC)	\$1,116,367.27
Baggarook Yarrongi: Improving the Health of Aboriginal mothers and babies through continuity of midwife care	\$179,654.43
DAISY: Preventing postnatal depression in new mothers using telephone peer support	\$246,318.95
EHLS at School: Reducing the impact of early life disadvantage via the home learning environment	\$60,295.76
Evidence-based life-course approaches to improve health equity of Aboriginal families during the perinatal period	\$112,450.46
HARMONY: Trial of a whole of general practice intervention to prevent and reduce domestic violence among migrant and refugee communities	\$138,643.12
Healing the Past by Nurturing the Future: Learning how to identify and support Indigenous parents who have experienced childhood trauma	\$316,390.30
Let's Grow: Maximising health potential through enhancement of movement behaviours from early life	\$9,070.92
Safer Families Centre of Research Excellence	\$6,224.32
SPHERE Centre for Research Excellence in Sexual and Reproductive Health for Women	\$47,319.01
Australian Government Department of Social Services	\$435,448.81
Sexual Violence Research Report and Theory of Change	\$435,448.81
Australia's National Research Organisation for Women's Safety (ANROWS)	\$28,980.00
RECOVER: Reconnecting mothers and children after violence: child parent psychotherapy	\$28,320.00
"What works" research consultancy	\$660.00
Birth for Humankind	\$40,000.00
PhD Industry Scholarship: Birthing women's and professional stakeholders' experiences of volunteer doula support	\$40,000.00
Royal Women's Hospital	\$90,867.00
Developing midwifery and maternity services research and practice	\$90,867.00

Therapeutic Guidelines Ltd /RACGP Foundation	\$9,000.00
Understanding antibiotic prescribing for mastitis in breastfeeding women: a mixed method study	\$9,000.00
The University of Melbourne: APPRISE CRE	\$338,000.00
Trauma-informed public health responses for First Nations peoples	\$338,000.00
Victorian Department of Health and Human Services	\$58,500.00
HARMONY: Trial of a whole of general practice intervention to prevent and reduce domestic violence among migrant and refugee communities	\$58,500.00
Victorian Department of Jobs, Precincts and Regions	\$17,000.00
Capacity building primary care responses to domestic violence in regional Brazil	\$17,000.00
Victorian Department of Premier and Cabinet	\$398,181.82
Improving the Safety of Women and Girls on Public Transport	\$284,768.43
Block Grants	\$882,877.53
Research Training Program	\$406,671.53
Research Training Program	\$476,206.00
La Trobe Contribution	\$1,029,958.10
Salary Support (DVCR)	\$282,375.28
Salary Support (School)	\$501,695.82
Research Focus Area	\$92,494.04
Research Centre Support	\$90,000.00
Publication Awards	\$6,408.50
DVCR Support	\$56,984.46
Miscellaneous income	\$84,541.20
Other income	\$84,541.20

Funds

FUNDS 2021

Funds received from the sources listed here totalled:	\$4,677,584.48
<i>The contributors from all granting bodies are gratefully acknowledged.</i>	
Australia Research Council (ARC)	\$349,034.00
The long arm of the job: improving parents jobs and child development	\$349,034.00
National Health and Medical Research Council (NHMRC)	\$2,184,882.29
DAISY: Preventing postnatal depression in new mothers using telephone peer support	\$204,749.96
Evidence-based life-course approaches to improve health equity of Aboriginal families during the perinatal period	\$66,514.35
FUSCHIA: Impact of caseload midwifery on preterm birth among vulnerable and disadvantaged women	\$1,598,496.00
HARMONY: Trial of a whole of general practice intervention to prevent and reduce domestic violence among migrant and refugee communities	\$64,957.65
Healing the Past by Nurturing the Future: Learning how to identify and support Indigenous parents who have experienced childhood trauma	\$193,317.81
Let's Grow: Maximising health potential through enhancement of movement behaviours from early life	\$9,070.92
SPHERE Centre for Research Excellence in Sexual and Reproductive Health for Women	\$47,775.60
Australian Government Department of Social Services	\$134,544.10
Sexual Violence Research Report and Theory of Change	\$134,544.10
Australia's National Research Organisation for Women's Safety (ANROWS)	\$83,382.00
RECOVER: Reconnecting mothers and children after violence: child parent psychotherapy	\$75,520.00
"What works" research consultancy	\$7,862.00
Australian Infant, Child, Adolescent and Family Mental Health Association	\$53,757.00
E-learning resources for complex trauma	\$53,757.00
Castlemaine Health	\$28,130.00
Evaluation of the Operational Maternity Model of Care	\$28,130.00

Lowitja Institute		\$61,744.00
Multi-methods study exploring the experiences of Aboriginal and Torres Strait Islander midwives	\$40,000.00	
Supporting an Aboriginal community controlled research agenda	\$21,744.00	
Royal Women's Hospital		\$168,539.94
Developing midwifery and maternity services research and practice	\$161,060.42	
Evaluation of the Centre for Teamwork Excellence in Maternity Emergencies	\$7,479.52	
Therapeutic Guidelines Ltd /RACGP Foundation		\$27,000.00
Understanding antibiotic prescribing for mastitis in breastfeeding women: a mixed method study	\$27,000.00	
Block Grants		\$1,015,383.00
Research Training Program	\$437,932.00	
Research Training Program	\$577,451.00	
La Trobe Contribution		\$480,961.62
Salary Support (DVCR)	\$220,917.28	
Salary Support (School)	\$189,879.34	
Research Focus Area	\$9,165.00	
Publication Awards (No awards in 2021)		
DVCR Support - Transition	\$36,000.00	
Centre Renewal Support	\$25,000.00	
Miscellaneous income		\$21,769.52
Other income	\$21,769.52	



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.

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