

JUDITH LUMLEY CENTRE



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

**Annual Report
2024**



Founding Director

Judith Lumley, AO

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

Professor Emerita
Director 1991–2008

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Director's report

It is my pleasure to bring you our Annual Report for the Judith Lumley Centre, 2024.

Each year, we continue our reputation for impactful, excellent research focussed on women, children and family health, bringing together researchers from a range of disciplines across multiple programs of research. The Centre continues to provide a rich, inclusive research culture for Centre members, with our regular lunchtime seminars, methods and journal clubs, postgraduate presentations. One notable special event in 2024 was a seminar presented by Judith's son, Professor Thomas Lumley, Chair of Biostatistics at Auckland University in May at the City Campus. Thomas presented to an in-person and online audience on 'Platform Clinical Trials' a mode of research about which we were all keen to learn. It was wonderful to have Thomas visit, to benefit from his expertise, and to maintain our connection to Judith and her family.

One of the highlights each year is to celebrate our higher-degree and early career researchers' achievements. This year, we celebrated a wonderful six higher-degree graduations: Dr Bijaya Pokharel; Dr Fiona McLardie Hore; Dr Carol Reid; Dr Charlie Benzie; Dr Anne O'Neill and Dr Renee Kam who was awarded a Nancy Millis medal for a doctoral thesis of exceptional merit. Details of their projects are in this Report. These graduations represent outstanding success from our early-career colleagues and the teams and supervisors around them. Desiree LaGrappe (NHMRC PhD Scholar), was also successfully awarded a Fulbright Public Policy Fellowship to study prevention of sexual and reproductive coercion in Vietnam. Further, PhD Scholars Robyn Matthews and Rebecca Hyde each received awards for their work at the Perinatal Society of Australia and New Zealand Conference; and Jess Appleyard was awarded an Australian Nurses Memorial Scholarship.

We continue our robust publication record; in 2024 we had 84 journal publications; 3 book chapters and one report.

Our success and sustainability are under-pinned by research funding, and the lively partnerships and collaborations which make this possible. I am delighted to report that in 2024, significant funding



was awarded to the **Tulip Study** (MRFF grant) to investigate the safety of telehealth in antenatal care; the **Fuchsia Study** (Australian Nursing and Midwifery Federation) to explore factors supporting the sustainability of

midwifery workforce nationally; and **Baggarrook Yurrongi** (philanthropic support) to build capacity of regional hospitals in Victoria to deliver Aboriginal-led caseload midwifery to women having a First Nations baby. Centre members have also been successful collaborators on externally-led projects including an **NHMRC CRE in Human milk for nutrition preterm infants** (Lisa Amir); an **NHMRC CRE in Women's Sexual and Reproductive Health in Primary Care** (Kristina Edvardsson); a **Medical Research Future Fund - Mental Health** (Amanda Cooklin, Leesa Hooker, Jan Nicholson) exploring mental health and wellbeing for rural and regional families; an **Australian Research Council Linkage Project** (Amanda Cooklin) exploring child and young person's wellbeing in the context of family substance abuse; and a **Discovery Project** (Amanda Cooklin) exploring sustainable working conditions. We look forward to growing these collaborations and supporting our next generation of researchers through this work across 2025 and beyond.

Advocacy and dissemination is core to what we do. Our knowledge translation and expertise was recognised in 2024, with Helen McLachlan invited to speak at the Australian Parliamentary Group for Maternal Health on improving outcomes for First Nations mothers and babies; Kristina Edvardsson was invited to speak at Victorian Department of Health on access to long-acting reversible contraception and abortion access; and Robyn Matthews was appointed to the Midwifery Advisory Committee, Safer Care Victoria. Our representation at key national and international conferences remains strong, with multiple JLC researchers presenting at Australian College of Midwives Conference (Melbourne); Maternal, Child and Family Health Nurses Australia Conference (Brisbane); Nursing Network Against Violence Against Women International Conference (Thailand); Australian Institute of Family Studies Conference (Melbourne);

Australian Society of Psychosocial Obstetrics and Gynaecology (Melbourne); Perinatal Society of Australia and New Zealand (Christchurch); World Federation of Pediatric and Intensive Care (Cancun); and the International Work and Family Researchers' Network Conference (Montreal).

In 2024, we said farewell to one of our fantastic Senior Research Fellows, Dr Sharinne Crawford, a member of JLC since 2014. Sharinne remains an Honorary Staff member at JLC so we are able to continue our productive collaboration together. We also sadly farewelled Adele Marulli, our administrative officer for the Centre, and thank both of these staff for their support and contributions.

And last, but not at all least, we bade a fond farewell to Professor Jan Nicholson who retired from La Trobe at end of 2023. Jan was our highly-regarded Centre Director for eight years; and oversaw an exciting period of growth and achievements through a significant philanthropic gift (The Roberta Holmes Program). Jan's warmth and personal support for all Centre members was much appreciated, particularly during the pandemic lockdowns when we were all working together, but apart. Jan has provided excellent leadership, research rigour and mentorship, and is enjoying retirement thus far!

On a personal note, I am very privileged to have been appointed as Centre Director in mid-2024. It is lovely to have had excellent mentoring and leadership from Rhonda Small, Angela Taft, and Jan Nicholson following Judith Lumley's legacy. I am supported by a strong Centre Management Committee, and by Lisa Amir who is Deputy Centre Director. I am very excited for 2025, to continue our good work.

Professor Amanda Cooklin
Judith Lumley Centre Director

Research Programs

Breastfeeding



Program Lead: Professor Lisa Amir

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

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.

Mastitis continues to be a particular focus for the Centre and work continued on several projects on this topic. We published two papers based on the mixed method study looking at antibiotic prescribing for mastitis in breastfeeding women funded by Therapeutic Guidelines Ltd/RACGP Research Foundation. Analysis continues on breastmilk samples collected in Melbourne for the NHMRC-funded study led by A/Prof Wendy Ingman, one of our Adelaide collaborators. I worked with a Swedish midwife, Dr Margareta Johansson, on women's experiences of a breast abscess during lactation, and with an international team to conduct audits of mastitis and breast abscesses in five countries.

Highlights in 2024 included commencement of the NHMRC Centre of Research Excellence, *Optimising human milk nutrition to improve the long-term health of preterm infants*, led by Alice Rumbold (University of Adelaide). I am an Associate Investigator, and we have a number of CRE scholars associated with JLC: Kristiana Neal, Dr Renee Kam and Dr Ranmali Rogrigo. The NHMRC-funded multi-centred trial of domperidone for mothers of preterm infants with low milk production (SUMMIT) led by A/Prof Luke Grzeskowiak (Flinders University) continued recruiting at the Royal Women's Hospital, and planning is underway for the NHMRC Partnership grant, *Pasteurised donor human milk supplementation for term babies*, led by A/Prof Jennifer Koplin (University of Queensland).

Pasteurised donor human milk supplementation for term babies

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

This novel multi-centre randomised controlled trial will compare pasteurised donor human milk as supplemental nutrition for term infants of women with diabetes in pregnancy in the first four days of life, compared with standard care. The PRESENT (PasteuRisEd donor human milk SupplEmentatioN for Term babies) trial will

commence at the Royal Women's Hospital as the first site. A qualitative sub-study will explore the maternal mental health impact of access to pasteurised donor human milk.

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

Status: protocol development, ethics submission

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

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

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

Funding: Building Healthy Communities Research Focus Area

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



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

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

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

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

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

Status: analysis in progress

Breast hypoplasia and insufficient milk production: An exploration

Renee Kam (PhD candidature), Lisa Amir, Meabh Cullinane

This project explored the role of breast hypoplasia in low milk production. Three systematic reviews reviewed the prevalence of breast hypoplasia, the association between breast hypoplasia and breastfeeding outcomes, and risk factors for altered mammary gland development. A reliability study tested the reliability of assessing clinical features suggestive of breast hypoplasia. A retrospective online survey collected data from 487 women self-reporting low milk supply. We used template analysis to analyse 384 free text responses from the final item in this survey.

This project demonstrated anatomical markers suggestive of breast hypoplasia are common among women self-reporting low milk supply and high body mass index around the time of puberty is connected with atypical breast shape and lack of pregnancy breast growth. Personal stories of women with low milk supply reveal a gap between their feeding expectations and reality. Some women experience a prolonged sense of loss or failure when they cannot breastfeed as they hoped.

Funding: HDR student support grant

Status: 6 papers published; thesis passed

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

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

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

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

Improving management of mastitis in breastfeeding women: audit

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

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

Funding: N/A
Status: data collection complete in 2024 and publication under review

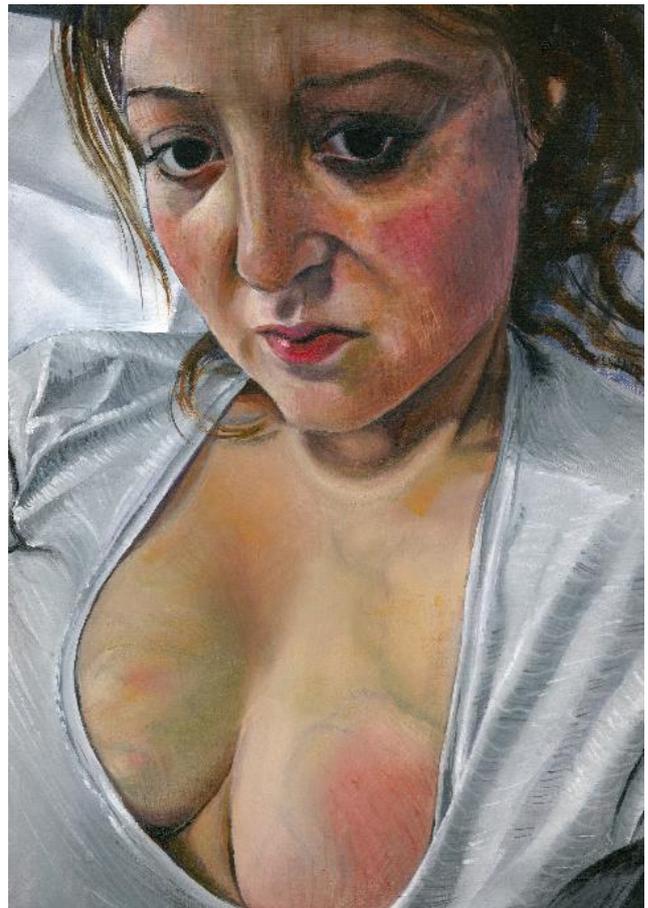
A paradigm shift in lactational mastitis

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

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

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

Funding: NHMRC Ideas Grant 2022-25
Status: data collection complete; samples sent to Adelaide; analysis ongoing



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

Child, family and community health



Program Lead: Professor Leesa Hooker

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

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

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

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

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

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

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

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

Status: project completed; The Victorian MCH Nurse Professional Standards for Practice 2024 were published by VAMCHN

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

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

This project extends extensive research conducted as part of the 2017-2023 NHMRC-funded Safer Families Centre of Research Excellence
<https://www.saferfamilies.org.au/>.

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

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

Funder: NHMRC Safer Families CRE via University of Melbourne

Status: project ongoing. Manuscripts in draft

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

Catina Adams, Kayli Wild, Guilhermina de Araujo, Leesa Hooker

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

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

This research examines:

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

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

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

Catina Adams, Leesa Hooker, Josie Barbaro, Susan Jack

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

Many neurodivergent individuals face challenges in navigating the complexities of the healthcare system. Two senate inquiries have reviewed support services for people with autism or ADHD. Both have highlighted the need to address healthcare practitioners' skills and knowledge to improve support for neurodivergent people. Little is known about the caregiving experiences of neurodivergent parents and their parenting support needs.

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

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

Status: systematic review in draft, ethics approval application submitted, consumer panel recruiting underway

CORNELIA: A housing intervention for pregnant women experiencing homelessness

Leesa Hooker, Jacqui Theobald; in collaboration with Juliet Watson and Sue Ellen Murray, RMIT University

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

Funder: Royal Women's Hospital

Status: project ongoing. Data collection complete. Final report completed

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

Kristina Edvardsson, Catina Adams, Bijaya Pokharel, Anne O'Neill, Leesa Hooker, Lael Ridgway, Christine East, Richard Gray

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

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

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

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

Status: data collection and analyses complete for interview study, manuscripts in preparation

MERTIL for Parents: A feasibility study of an online program for parents to promote infant social and emotional well-being.

Leesa Hooker in collaboration with Jessica Opie and Jennifer McIntosh from the La Trobe University Bouverie Centre

Early relational health is a key determinant of childhood development. Meta-analytic evidence shows early childhood relational security is open to revision, for better or worse, and relational trauma in the parent-child dyad can instigate a cascading pattern of risk. Importantly, relational trauma is modifiable through enhanced parental sensitivity and infant's experience of caregiver trust.

MERTIL program evaluation findings showed enhanced competence and confidence in nurses to identify relational trauma. However, capacity to respond was inhibited by inadequate referral options, particularly in rural and remote settings.

In response, the MERTIL team began to develop MERTIL for Parents (My Early Relational Trust-Informed Learning), co-designed with parents and nurses, and informed by the feedback of over 1300 MCHNs. MERTIL for Parents will be piloted in 2022, as a 40-minute online, self-paced parenting program that focuses on parent knowledge of relational trust and its significance for infant development. The program is an evidence-based, low-cost, accessible prevention resource, promoting equitable healthcare access, targeting emerging relational concerns before they reach clinical levels, with the aim of reducing need for service system engagement. The format aims to overcome logistical and financial barriers in accessing face-to-face services, intensified by COVID-19 and the critical shortage of trained professionals.

More broadly, the potential for universal online programs that target the development of early relational trust remains under-explored.

Funding: ABC grant

Status: completed; 2 papers published in *PLOS One* and *Clin Child Fam Psychol Rev* in 2023.

Now MERTIL for Parents is a short course run by the Bouverie Centre

<https://shortcourses.latrobe.edu.au/mertil-for-parents>

EVE: Usability, impact and acceptance of an mHealth app to engage and support pregnant and childbearing women

Fiona Faulks, Leesa Hooker, Kristina Edvardsson, in collaboration with Nicole Carlon, Northern Health and Medicity

EVE is a unique mHealth app designed to improve pregnancy outcomes and provide new and expectant mothers with access to healthcare providers, peers and resources to enrich their pregnancy, birthing and parenting experience. This project aims to evaluate end-user acceptance and feasibility of the EVE platform utilising the RE-AIM (Reach, Effectiveness, Adoption, Implementation and Maintenance) framework. We will explore participants' views of the app (interviews and survey) and analyse deidentified EVE data on pregnant women's educational resource use and help-seeking behaviours.

Funding: La Trobe University ABC grant

Status: in progress

Family Centred Care research in paediatrics – a systematic quantitative review

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

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

Funding: N/A

Status: completed; manuscripts submitted and under review

Mother and infant health and maternity services

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



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

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

A 2024 highlight was receipt of a large Medical Research Future Fund (MRFF) grant, led by Della Forster, to undertake a randomised trial of telehealth in pregnancy (called the 'TULIP' study).

The ABLE Study (Asking women About disabiliTiEs)

Charlie Benzie, 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 and also explore disability identification practices within public maternity services in Australia. Two separate recruitment periods took place in 2019 at the Women's using two different disability identification questions to attempt to determine optimal disability identification. It was found that disability prevalence data is highly dependent on the wording of the disability identification question. Women reported that they

were comfortable in being asked about their disability status. 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. Overall women were satisfied with the care they received during pregnancy, labour and birth and the postnatal periods, however, suggestions for improvement centred around communication, continuity of care provider and the need for increased recognition of women's disability/additional support needs.

A cross-sectional online survey was sent to all maternity managers of public maternity hospitals in Australia to explore disability identification practices. Seventy maternity hospitals completed the questionnaire, which represented all states and territories. Overall, disability identification practices within public maternity services are highly varied and documentation processes are not standardised. 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 Women's and compared this with hospital-wide perinatal outcome data.

The study found that women with disabilities who received care from the WIN clinic were more likely to have a caesarean section and their infants were more likely to be born preterm and be admitted to the Neonatal Intensive Care or Special Care Unit when compared to all other women who gave birth at the Women's.

In response to the ABLE study, a Disability Identifier was introduced in the Parkville precinct (the Women's, Peter MacCallum Cancer Centre, the Royal Melbourne Hospital and the Royal Children's Hospital) to allow women and patients to self-identify with a disability.

We are now further exploring the views, experiences and clinical outcomes of all pregnant women self-identifying with a disability who have received care at the Women's as well as the views of clinicians working with women with disabilities (the mABLE study).

Funding: The Royal Women's Hospital and Victorian Nurses and Midwives Trust (VNMT)

Status: initial project completed. Recruitment and data collection for mABLE ongoing

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

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

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

Funding: NHMRC Project Grant APP1143448

Status: in progress

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, 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 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.

Funding: NHMRC Project Grant; La Trobe University

Status: primary outcomes published in *The Lancet* in 2017; 3 month outcomes published in *Birth* (2024); onset of lactogenesis paper published in *Australian and New Zealand Journal of Obstetrics and Gynaecology* (2024), presentations at national and international conferences

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 had three components – an information book for parents that covered the journey from conception to one year of age, an App that was specifically designed for the project, and a children's book that parents were 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); sources of information paper published in *Midwifery* (2022), primary outcome paper and paper reporting the outcomes of partners in preparation. Presentation of primary outcomes at National conference

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

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

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

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

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

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

Funding: NHMRC Medical Research Future Fund (MRFF) 2019 Preventive and Public Health Research Grant

Status: recruitment and data collection ongoing

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

Della Forster, Helen McLachlan, Touran Shafiei, Robyn Matthews, Rebecca Hyde; in collaboration with Stefan Kane, Sue Jacobs, Tram Nguyen, Jenny Ryan and Trish Ryan, Royal Women's Hospital; Nicole Carlon, Northern Health; Emily Callander, University of Technology Sydney; Fleur D'Altera, consumer

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

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

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

Status: recruitment and data collection ongoing

The '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, 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, two papers published in 2022, one paper under review and a manuscript in final stages of preparation

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) education 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 services who received MANE in 2018 and 2019 participated in the evaluation, with in-depth case studies conducted at five maternity service providers.

Funding: The Royal Women's Hospital

Status: Evaluation complete. Final report submitted to Royal Women's Hospital. Three papers published including a protocol paper. A final paper was accepted for publication late 2024

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

Della Forster, Robyn Matthews, Rebecca Hyde, Touran Shafiei, Michelle Newton, Helen McLachlan, Amanda Cooklin, Méabh Cullinane; in collaboration with Fleur Llewelyn, Royal Women's Hospital and Anna O'Connell, Deakin University

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

causal link between workforce challenges, health outcomes and intention to leave the profession.

We are conducting a longitudinal cohort study using a group of midwifery students and midwives (n=474) who agreed to participate from the FUCHISA study in 2021. We have conducted annual surveys of this group in 2022, 2023, 2024 and are planning a final survey in 2025.

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

Funding: Australian Nursing and Midwifery Federation – Victorian branch

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

Women's and clinicians' experiences of using a shared decision-making bundle to enhance woman-centred care during labour and birth

Therese Hungerford-Morgan, Michelle White, Lisa Nikoletseas, Deborah Pidd, Shannon Bennetts, Christine East

A Shared Decision-Making (SDM) bundle was introduced to the Mercy Hospital for Women's (MHW) Birthing Suites in June 2024. The bundle consists of a purpose-designed board within the birthing room and regular "huddles", where the woman/birthing person and her clinicians review the woman's preferences and progress, developing a plan of care for the next few hours. The deliberations of each huddle are transcribed onto the SDM board, to sit alongside comments/preferences written by the woman and/or her support person/s. The use of huddles has now been embedded in the "Labour and Birth Guidelines" for Mercy Health.

This project seeks to obtain and consider feedback from women and clinicians using the SDM bundle at the Mercy Hospital for Women. The feedback will inform ongoing improvements to the SDM bundle.

Funding: Mercy Health Foundation

Status: pilot study, conference presentation, ethics pending for ongoing evaluation

Induction of labour: a shared decision

Melissa Buultjens, Christine East, Jen Fielding, Amy Dawes, Jasmine Love, Shannon Bennetts, Michelle White, Therese Hungerford-Morgan, Georgette Costa, Andy Ackerly

Rates of induction of labour (IOL) have increased substantially in Australia over the past two decades from 24% in 1997 to 40% in 2020, with a similar increase in Victoria from 21% in 1997 to 38.6% by 2020. Thus, four out of every ten women having a baby in Australia have their labour induced.

We are compelled to ask questions about what women/childbearing people want from their experience of pregnancy, labour and birth. What level of involvement do women want to have or do they receive in decisions around the timing of birth? These and other questions are important in terms of minimising traumatising effects of labour and birth and promoting a positive birth experience.

The overall program of research aims to develop a shared decision-making tool for induction of labour for women and clinicians. Phase One involves surveying women prior to and following their induction of labour (IOL). Survey findings will inform the conduct of Phase Two, to develop the shared decision making tool.

Funding: Mercy Health Academic Research; Mercy La Trobe ARCH

Status: surveys in progress; conference presentation

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

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

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

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

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

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

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

Funding: The Royal Women's Hospital Foundation

Status: data collection complete, analyses and manuscript preparation underway

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

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

This national survey study aimed to explore midwives' experiences of supporting women to manage pain during childbirth. It focused on the midwives' attitudes towards labour pain, and the strategies (verbal and non-verbal) that midwives use to support birthing women. A total of 557 midwives across Australia participated in the survey, and 17 completed an interview. Findings relating to midwives' ways of working and associated workplace barriers and facilitators were presented at the 2023 Australian College of Midwives conference. Findings relating to the effects of communication used by caregivers on women's birth experiences were presented at the 2024 Australian College of Midwives conference and the Perinatal Society of Australia and New Zealand congress.

Funding: N/A

Status: manuscript preparation, dissemination

Safer Care Victoria: Review of 10 years of recommendations from the Consultative Council on Obstetric and Paediatric Morbidity and Mortality (CCOPMM)

Christine East, Kritika Poudel, Jia Jia (Jessie) Liu, Noushin Arefadib, Kalpana Raghunathan

This review considered the recommendations made regarding postpartum haemorrhage, fetal surveillance and neonatal resuscitation in the *Victoria's Mothers, Babies and Children* reports produced by CCOPMM from 2010 to 2020. The final report proposed a way forward for promoting the inclusion of CCOPMM recommendations in clinical guidelines, service policies and ultimately, clinical practice. We conducted and published a rapid review of the barriers and enablers for implementing clinical practice guidelines in maternity and newborn settings. The next phase of this program includes evaluation of risk factors for postpartum haemorrhage, based on Victoria-wide data 2018-2022.

Funding: Safer Care Victoria Fellowship 2022-2024

Status: report to CCOPMM, publications, conference presentation, data acquisition



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

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

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

We conducted a two-site, pilot randomised controlled study with 137 pregnant women, comparing all face-to-face pregnancy care with combined telehealth and face-to-face care. Overall, 53% of women from both trial arms reported that they would like some form of telehealth as part of their care for future pregnancies. This study found that women and clinicians were generally positive about telehealth, but some concerns highlighted by women and clinicians, notably related to safety and the standard of care. The findings found some benefits of face-to-face care over combined care, however an adequately powered RCT is needed to determine if these differences significantly impact women's and infants' outcomes. Funding has now been obtained for a larger RCT to test the use of telehealth for routine pregnancy care and assess the safety, efficacy, cost implications, and importantly, explore women's experiences.

Funding: Norman Beischer Medical Research Foundation Innovation Grant, 2021

Status: data analysis and manuscript preparation underway

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

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

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

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

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

Funding: Nil

Status: baseline surveys of NPSNs and Midwives

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

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

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

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

Analysis of clinical outcomes are finalised and manuscript preparation underway. A further highlight of the project was the team being a finalist in the Universities Australia 'Shaping Australia awards' which recognises an individual or team's work, research or otherwise that has changed or has the potential to change the lives of Australians for the better.

Funding: NHMRC Partnership Grant and funding from five partner organisations

Status: in progress; main findings published, 7 papers published, others in draft



Image La Trobe University

Perinatal mental health

Program Lead: Associate Professor Touran Shafiei



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

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

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

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

Della Forster, Helen McLachlan, Touran Shafiei, Jan Nicholson, Jessica 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, Royal Women's Hospital; Catram Nguyen, Murdoch Children's Research Institute; Jane Fisher, Monash University; in collaboration with Hume and Wyndham Local Government Areas (LGAs), Royal Women's Hospital and PANDA (Perinatal Anxiety and Depression Australia)

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

groups receive all the usual care and supports available as part of routine care.

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

Funding: NHMRC Project Grant GNT1141284

Status: volunteer recruitment and training completed; participant recruitment completed; data collection underway



Laura Garcia, Pexels

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

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

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

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

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

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

Identifying the perinatal mental health needs of immigrant and refugee women

Touran Shafiei, Margaret Flood, Jessica 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. We conducted a study of perinatal mental health needs of immigrant and refugee women living in the North Division of Victoria, to gain a better understanding of the local barriers and facilitators to immigrant women's access to health

services during the perinatal period. The study had three components:

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

Funding: Department of Health, Victoria

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

Reducing sexual and gender-based violence



Program Lead: Professor Leesa Hooker

Deputy-lead: Dr Jessica Ison



The World Health Organization (WHO) 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 sexual and gender-based violence, especially those that can be delivered in primary health care and community settings.

We also acknowledge the importance to tailor prevention and response intervention, such as work with victim-survivors from various communities to ensure our research addresses the needs of all victim-survivors of sexual and gender-based violence.

*The Reducing Sexual and Gender-based Violence stream relocated to the La Trobe Rural Health School in April 2024.

HARMONY: 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-Leap, 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-month suspension during the COVID-19 pandemic, we recruited 24 clinics but had 5 withdraw, largely from the impact of Covid19. The DFV training was completed between October 2020 and June 2021. The protocol paper was published 2021 in *BMJ Open* and a systematic review of culturally competent family violence response to women in primary care was published in 2022, and another of migrant/refugee women's experiences of primary care for domestic and family violence in *Trauma Violence and Abuse*. HARMONY training was the focus of presentations at conferences in 2022 and 2024, including NNVAWI (2022, 2024) and SVRI (2022). Data collection (GrHanite) through electronic medical records for participating GP clinics concluded in August 2022. Drafting and submission of outcome manuscripts was completed in 2024.

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

Status: project ongoing; baseline and training manuscripts submitted, outcomes and process evaluation papers drafted. Protocol published in *BMJ Open* (2021) and a comment in *Lancet* (2024)

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

Leesa Hooker, Jessica Ison, Angela Taft, Felicity Young, Molly Allen-Leap; in collaboration with Kirsty Forsdike, La Trobe Business School; Elli Darwinkel, Monash University; Fiona Marshall, Monash University; 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), and 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 female students; improve student knowledge and self-efficacy of sexual assault; and reduce the incidence of sexual assault/rape experienced by students. Interviews were conducted with 31 Safer Community staff across Australia.

In 2023, La Trobe University, Monash University and the Australian Nation University Safer Communities' teams delivered the EAAA program to students, with the evaluation team collecting pre and post surveys to assess the programs suitability for the Australian University context.

The project was presented at the 2024 NNVAWI conference and a publication on the evaluation has been drafted for submission.

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

Funding: Transforming Human Societies RFA; Evaluation funded by La Trobe University and Monash University.

Status: project ongoing; manuscripts in progress

RESPOND: Community action to address alcohol and other drug-facilitated sexual violence in the Bendigo region

Leesa Hooker, Jessica Ison; in collaboration with Kirsty Forsdike, Jacqui Theobald, Anne-Marie Laslett, Alex Donaldson, Elena Wilson, La Trobe University; Ingrid Wilson, Singapore Institute of Technology; in partnership with the Centre Against Sexual Assault Central Victoria

This project is building community capacity to prevent and respond to alcohol and other drug-facilitated sexual violence in the Greater Bendigo region. Through multi-stakeholder participatory action and co-design, the project is developing and evaluating a community-based program that can support the diverse Bendigo community to prevent and appropriately respond to alcohol and other drug-facilitated sexual violence.

In 2022, the team conducted a concept mapping exercise with stakeholders. This was followed by a World Café forum in the Bendigo region. The team also undertook a scoping review on alcohol and other drug-facilitated sexual violence. Data collection is complete and analysis and resource development to be finalised.

Funding: Crime Prevention Innovation Fund, Victorian Government

Status: ongoing. Review in *Trauma, Violence & Abuse* (2024), and report complete and available on OPAL (2024)



Image La Trobe University

Alcohol and other drug-facilitated sexual violence across Victoria

Jessica Ison, Leesa Hooker; in collaboration with Kirsty Forsdike, Jacqui Theobald, Anne-Marie Laslett, Alex Donaldson, Elena Wilson, La Trobe University

Alcohol and other drug-facilitated sexual violence is a pervasive issue which can have lasting impacts on victim-survivors. However, it is under researched in Australia and internationally. Further, there is little knowledge on how victim-survivors experience the service system and where improvements could be made. This project aims to address this evidence gap in service provision. Through interviews with key stakeholders in the service system, the project will map out where improvements could be made to ensure victim-survivors are supported and cared for.

Funding: La Trobe University Postdoctoral Research Fellowship

Status: completed, paper in *Feminist Media Studies* (2024)

UNFPA partnership to develop a national curriculum and system supports for health providers responding to gender-based violence in Timor-Leste

Kayli Wild, Guilhermina de Araujo, Angela Taft, Felicity Young, Leesa Hooker; in collaboration with Linda Kelly, and Eileen Christou, Institute for Human Security and Social Change; Lidia Gomes, National University of Timor-Leste Timor-Leste

JLC, in collaboration with La Trobe's Institute for Human Security and Social Change, were successful in a competitive tender for a multi-year partnership with the United Nations Population Fund (UNFPA). The partnership will strengthen the ability of health systems to respond to women and children experiencing violence in the Asia-Pacific, with an initial focus in Timor-Leste and Papua New Guinea. In 2021 we began work in Timor-Leste, together with UNFPA, the Ministry for Health, National Institute for Health and non-government organisations. In 2022 we worked together with Timorese partners and developed a National in-service curriculum, co-designed models of system support and evaluation, and mentored a group of National trainers as they began roll out capacity building in district health services. The La Trobe-UNFPA collaboration demonstrates the significant potential of university and industry partnerships for scaling up approaches to addressing global human development problems; approaches that are based on the synthesis of international evidence, carefully tailored to contextual realities in different settings, and are locally owned and led.

Funding: UNFPA

Status: ongoing

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

Catina Adams, Kayli Wild, Guilhermina de Araujo, Leesa Hooker

Violence against women and children is extremely high in Timor-Leste, with 59% of women experiencing physical and/or sexual violence in their lifetime and 72% of both women and men experiencing violence as a child. While the impact of violence on children has been well documented, most of this research has been conducted in high-income countries. Very little is known about the impact of abuse on children in Timor-Leste and in low- and middle-income countries generally. This research examines women's perspectives on how violence impacts their children's health and development, the power dynamics that influence access to support and how family violence affects women's ability to effectively parent their children.

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

Status: manuscript in draft



COLLABORATION

Centre for Research Excellence to Promote Safer Families

Angela Taft; in collaboration with Kelsey Hegarty, Stephanie Brown, Cathy Humphreys, Kerry Arabena, Lena Sanci, University of Melbourne; Harriet MacMillan, McMaster University, Canada; Gene Feder, University of Bristol, UK; Karen Glover, South Australian Health and Medical Research Institute; Peter Anderson, Murdoch Children's Research Institute

JLC CRE Scholars - Leesa Hooker, Ingrid Wilson, Sonia Reisenhofer

The Centre of Research Excellence (CRE) to promote Safer Families (Safer Families Centre) is the first dedicated Centre to lead research into the health effects of domestic violence and abuse and the health sector policy and practice responses needed to improve the safety, health and well-being of women, children and young people. The Centre has been funded for five years (2017 – 2022 with a recent six-month extension) to research and collaborate to transform the health sector response to domestic violence and abuse.

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

Recent research from the Safer Families CRE includes the TRANSFORM project (see Child, Family & Community stream), policy briefs and a range of meta-syntheses work that builds on previous reviews and provides ongoing guidance for healthcare providers when responding to and caring for people experiencing domestic violence.

Funding: NHMRC CRE

Status: CRE finished 2023; manuscripts in progress

Supporting the Readiness of Regional Sports to prevent and respond to Family Violence and Violence Against Women (RRPV)

Jessica Ison, Leesa Hooker; in collaboration with Kirsty Forsdike (Project Lead), La Trobe University

Violence against women in sport is an area of concern. This project will develop guideline implementation initiatives that ensure regional sports settings understand how to undertake primary prevention of, and where required respond to, family, sexual and domestic violence and violence against women both in sport and through sport in a gender-sensitive manner. The project brings together research, content and context expertise in organisational prevention of and responses to family, sexual and domestic violence and violence against women, the primary prevention of and response to family, sexual and domestic violence and violence against women specialist sector (including those working with men), and Regional Sports Assemblies with their networks of community sports clubs, leagues and associations, local recreation facilities, and local stakeholders.

This project aims to build the capacity of regional community sport and recreation to prevent and respond to Family Safety Victoria and violence against women both in sport and through sport in collaboration with their regional communities. The project also partners with Safe and Equal, Centre Against Sexual Assault Central Victoria, and No to Violence.

Funding: Preventing violence through sport grant program, Victorian Government

Status: project completed. Resources launched in 2024 by Sports Focus.

<https://sportsfocus.com.au/issue-gender-disrespect-violence/gendered-violence-in-sport-campaign-resources/>

Generalised Health Curriculum for Sexual and Gender-based Violence Papua New Guinea

Felicity Young, Leesa Hooker, Kayli Wild; in collaboration with Linda Kelly, Lisa Denney and Allan Illingworth, Institute for Human Security and Social Change, La Trobe University; Pamela Kamy, PNG-SGBV Consultant

In 2021, La Trobe University was selected as a partner by UNFPA Asia Pacific to provide research and technical support on the health sector response to sexual and gender-based violence (SGBV). In 2022, UNFPA funded the team to undertake a scoping study to understand how SGBV is currently addressed in both pre- and in-service health curricula, and to map critical partnerships that will support leadership on this issue in Papua New Guinea. The scoping study also included review of international SGBV curricula to distil the core components of best practice and lessons learned from other countries in the Asia Pacific region. The project aims to work in partnership with organisations in Papua New Guinea to co-develop curricula across sectors and strengthen sustainable systems to support the health system response to SGBV.

A curriculum for pre-service healthcare students and in-service healthcare workers was developed. This included an in-person workshop in Port Moresby in 2023 with healthcare educators attending a University of Technology Sydney program to re-develop the pre-service curriculum for nursing and community health workers.

Manuals for facilitators and participants for both pre and in-service education were completed and submitted to UNFPA in 2024.

Funding: UNFPA

Status: project completed

Sexual and reproductive health

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



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

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

In 2024 the team had several highlights:

- A/Prof Kristina Edvardsson, Emeritus Prof Angela Taft and three of the centre's PhD students (D LaGrappe, G Edwards and B Pike) engaged in a range of activities in the start up of the NHMRC Centre of Research Excellence (CRE) in Women's Sexual and Reproductive Health in Primary Care led by Prof Danielle Mazza, Monash University (grant period 2024-2028).
- The team published a paper in the *Medical Journal of Australia* on *The prevalence of and factors associated with prior induced abortion among women who gave birth in Victoria, 2010-2019*. Lead author K Edvardsson was interviewed by *The Age's* Aisha Dow and the research presented under 'Editor's pic' in *The Age* on 6 February.
- PhD student Desireé LaGrappe undertook a Fulbright Public Policy Fellowship in Vietnam January to September within the UN's HRP Alliance Research Capacity Strengthening in Sexual and Reproductive Health based at Hanoi Medical University. Please see Spotlights 2024 for more.
- K Edvardsson was invited to present on '*Demand and Supply of LARC and ToP - Trends over time in Victoria*' in the Department of Health's 'Access to LARC and termination of pregnancy' workshop on 22 August.
- Three members of the team attended and presented at the Children by Choice Abortion and Reproductive Rights Conference in Brisbane, August 8-9 (K Edvardsson, G Edwards, B Pike).
- K Edvardsson was part of the Advisory Group of the Women's Health Victoria report '*Realising access: Abortion and contraception inequities and enablers in Victoria*', and an invited panelist for the release of the report on 28 November. The webinar was attended by >200 participants.
- Three members attended and presented at the Nursing Network on Violence Against Women International (NNVAWI) conference in Phuket, Thailand, 13-15 November (Desireé LaGrappe, Leesa Hooker, Angela Taft).
- Honours student Katherine Grosvenor completed an Honors thesis on '*Australian Women's Attitudes Toward and Uptake of Long-Acting Reversible Contraception*' (supervised by Kristina Edvardsson and Mofi Islam, Department of Public Health, La Trobe University).

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

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

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

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

Funding: La Trobe University, ABC grant

Status: one paper accepted for publication in *International Journal of Epidemiology*, one manuscript in preparation

The prevalence and factors associated with prior induced abortion among women who gave birth in Victoria, 2010-2019

Kristina Edvardsson, Leesa Hooker, Xia Li, Angela Taft; in collaboration with Mridula Shankar, University of Melbourne; Kirsten Black, Deborah Bateson, University of Sydney; Wendy V Norman, University of British Columbia, Canada

Nearly half of all pregnancies worldwide are unintended, and many of these unintended pregnancies end in induced abortion. Robust data on abortions are needed for tailored public health responses that include equitable access to contraception and abortion care.

In this study, we aimed to fill an important data gap by examining the prevalence of a history of induced abortion among individuals giving birth in Victoria, and changes in prevalence by time and sociodemographic characteristics. We analysed population-based perinatal data obtained from the Victorian Perinatal Data Collection. The dataset included a total population sample of women experiencing a childbirth in Victoria, Australia years 2010 to 2019 (n=767 055).

Funding: N/A

Status: paper published in *Medical Journal of Australia* (2024). Findings presented in a Department of Health workshop and the study received media attention in *The Age*



Pexels, Ginny

Global variations in the underreporting of induced abortion: A systematic review

Kristina Edvardsson, Leesa Hooker, Felicity Young, Angela Taft; in collaboration with Mridula Shankar, University of Melbourne; Kirsten Black, Deborah Bateson, University of Sydney; Melissa Harris, University of Newcastle; Wendy V Norman, University of British Columbia, Canada

An important consideration when using abortion data to estimate prevalence and incidence is the extent of completeness of data. Data on induced abortions are susceptible to underreporting due to stigma and social disapproval of the procedure. In this systematic review, we will explore the worldwide variation in the underreporting of induced abortions by individuals. We will also investigate if and how underreporting of induced abortions changes over time and by age cohort, vary by survey methodology or design, country or regional context, or sociodemographic characteristics. A total of 6810 records across five databases have been identified for initial screening, and 167 full text papers assessed for eligibility.

Funding: N/A

Status: systematic review protocol registered (Prospero); write up ongoing

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

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

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

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

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

Funding: Postgraduate Scholarship (NHMRC Project GNT2013949)

Status: ongoing; findings presented in 2024 at the Abortion and Reproductive Justice Conference and the 25th NNVAWI Conference

COLLABORATIVE WORK

SPHERE -The Centre of Research Excellence in Women's Sexual and Reproductive Health in Primary Care.

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

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



Pexels, Gilberto Olympio



Transition to contemporary parenthood – preparation and support

Program Lead: Professor Amanda Cooklin

The Transition to Contemporary Parenthood Program – Preparation and Support (TCPP) was established in 2013 as the result of a major gift from Mrs Roberta Holmes. TCPP 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 affect children's healthy development. This information is then used to guide the design of new or improved programs and supports for parents.

Much of our work involves 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, University of Melbourne

The original *Early Home Learning Study* (EHLS) evaluated the "smalltalk" parenting program, which was 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 aimed to evaluate the longer-term outcomes of *smalltalk*, including impacts on children's school readiness, language and literacy development.

Funding: National Health and Medical Research Council (NHMRC Partnership GNT1076857), together with the Victorian Government Department of Department of Families, Fairness and Housing (DFFH)

Status: completed; seven papers published

Supporting children's resilience and mental health through risky play: Children's and parents' experiences of the Risky Kids program

Shannon Bennetts, Sharinne Crawford, Jasmine Love, Stacey Hokke, Clair Bennett, Jan Nicholson, Hulya Gilbert (School of Humanities and Social Sciences), Karli Treyvaud (School of Psychology and Public Health)

Established in 2018, *Risky Kids* is a community-based program that seeks to build resilience in children and adolescents by teaching 'risk intelligence' through parkour, ninja, and free-running skills, underpinned by psychological approaches. This study aimed to explore children's and parents' experiences of the *Risky Kids* program, with a particular focus on mental health and resilience. During 2023, the research team visited three *Risky Kids* clubs, conducting focus groups with 18 children and 15 caregivers.

Funding: La Trobe University ABC Funding Scheme 2023

Status: completed; one paper published; three conference presentations

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 with 24 parents and expectant parents were followed by a quantitative online survey of 621 parents and expectant parents.

Funding: La Trobe University Transforming Human Societies Research Focus Area

Status: completed; six conference presentations; two papers under review

Parenting, parent wellbeing and child development in Australia

Jan Nicholson, Amanda Cooklin, Stacey Hokke, Clair Bennett, Jasmine Love, Shannon Bennetts; in collaboration with Lyndall Strazdins and Liana Leach, Australian National University; Rebecca Giallo and 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 Committee and Chair since 2019; Amanda Cooklin is a current member of the Scientific Advisory Committee.

This ongoing program of analytic work uses LSAC data to build understanding of the contemporary issues affecting the health and wellbeing of mothers and fathers, 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; over 50 papers published 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; in collaboration with Tiffani Howell, Brian Ignacio, School of Psychology and Public Health, La Trobe University; Kylie Burke, Metro North Health Service – Mental Health, Queensland; Catherine Chamberlain, University of Melbourne

The global COVID-19 pandemic 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 more than 1,000 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: Roberta Holmes Donation

Status: completed; three papers published; one conference presentation; one book chapter in production; three radio interviews; one print media interview

COLLABORATIVE WORK

DonateLife: exploring young people's knowledge, attitudes and perceptions of organ donation

Stacey Hokke; in collaboration with Brooke Huuskes, Department of Microbiology, Anatomy, Physiology and Pharmacology, La Trobe University

Young people (aged 18-35 years) are one of the most under-represented groups on the Australian Organ Donor Register. Using a qualitative study design, this project aimed to explore the factors, informational needs and messaging preferences that may influence young people's motivations to register as an organ donor. Based on focus groups with 44 young people, findings provide insight into the key drivers and barriers of donor registration.

The Australian Government's Organ and Tissue Authority have developed a marketing strategy for DonateLife campaigns based on study recommendations, and commissioned Huuskes and Hokke to develop a suite of educational videos to support informed decision-making among young people. In June 2023, the team were invited to give evidence in a Victorian State Government public inquiry into increasing the number of organ and tissue donors.

Funding: Organ and Tissue Authority Community Awareness Grant 2022

Status: completed; two national conference presentations; submission and presentation to State Government inquiry; publication in preparation

DonateLife: Disseminating evidence-based resources to inform young people about organ donation

Stacey Hokke; in collaboration with Brooke Huuskes, Department of Microbiology, Anatomy, Physiology and Pharmacology, La Trobe University

Our prior qualitative research with young people identified several barriers to organ and tissue donation registration, including lack of awareness and knowledge of organ donation and inadequate promotion. To support young people to make an informed decision about organ donation, this co-designed community awareness project aimed to (i) create evidence-based digital educational resources that resonate with young people, and (ii) disseminate

educational content via La Trobe University's online media channels.

In collaboration with pixel42_ production company, nine education videos were produced featuring young people with lived experience. Promotional cuts from the educational content were disseminated across university campuses, and used in social media campaigns that reached over 250,000 young Australians and resulted in over 4,000 clicks to the DonateLife registration webpage.

Funding: Organ and Tissue Authority Community Awareness Grant 2023

Status: completed; one national conference presentation; publication in preparation

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: ongoing; two papers published

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

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

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

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

Status: data collection completed from n=222 participants; protocol paper published, final papers in preparation

'Take A Breath': Implementation of videoconferencing group intervention for parents of ill children

Jan Nicholson; Shannon Bennetts; Ashleigh Butler; Kate McCredie; in collaboration with Vicki Anderson, Frank Muscara, and Maria McCarthy, Murdoch Children's Research Institute and Royal Children's Hospital

Parents of a seriously ill or injured child 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 and a randomised controlled trial, the *Take A Breath* program which

seeks to support parenting and prevent parent traumatic symptoms is being rolled out across multiple hospital departments. This project evaluates the processes and experiences of implementation. Interviews were conducted with 16 stakeholders and focus groups were conducted with 12 clinicians.

Funding: Royal Children's Hospital; Ronald MacDonald House

Status: data collection completed in 2024; write-up being finalised

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

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

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

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

Status: papers in preparation

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

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

This project is a new research-practice partnership to look at new ways to build family resilience in the face of natural disasters and environmental threats

Rural communities are often affected by natural disasters such as floods, fires, drought and storms. Recovering and rebuilding after extreme weather events can take a long time. The process can take its toll on families, contributing greatly to stress, health and wellbeing difficulties.

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

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

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

Status: newly funded in 2024, project being established

Critical moments in response for children affected by family substance abuse

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

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

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

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

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

Funding: Australian Research Council Linkage Grant, 2024-2027

Status: newly funded in 2024, project being established

Work and family



Program Lead: Professor Amanda Cooklin

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

These issues have become particularly salient since the COVID-19 pandemic. The effects of this disruption on family relationships, health and wellbeing are only just being understood, and we contribute to this growing evidence, taking a gendered lens to understand this.

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

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

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

In 2023, we were awarded funding from the Australian Research Council to build on our collaborative Families at Work program of research (2016-2021).

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

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

Status: ongoing; two publications in 2024

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

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

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

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

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

Status: data collection completed; findings in preparation

Parents' work-family interface, health and wellbeing

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

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

In 2023, we published four papers, the first examining the role of flexible work for parents in managing their daily stressors, and how this effects their distress, fatigue and stress. A second paper investigated the novel construct of work-study conflict for Australian University students, with links to adolescent mental health. Our collaboration with Jodi Oakman and colleagues from the School of Psychology and Public Health continues, with recent publications exploring the role of psychosocial work hazards in physical health complaints, including for parents during the COVID-19 pandemic.

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

Status: ongoing; two papers published in 2024



Pexels, Ketut Subiyanto

COLLABORATION

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

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

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

Status: findings in preparation

CROSS-BOW: Crossing and managing boundaries between work and non-work & healthy tele-working

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

This project is an international collaboration and aims to investigate the effects on employees of 'Boundary-Crossing ICT-use' on employees / parents wellbeing and the work-family interface.

Funding: Research Council of Norway

Status: scoping review published in 2024

Sustainable working conditions: Requirements to enable long working lives?

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

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

Funding: Australian Research Council (Discovery Project DP250100393)

Status: newly awarded in 2024, project being established

Spotlights 2024

Some women's breasts can't make enough milk, and the effects can be devastating

Renee Kam and Lisa Amir

Many new mothers worry about their milk supply. For some, support from a [breastfeeding counsellor](#) or [lactation consultant](#) helps.

Others cannot make enough milk no matter how hard they try. These are women whose breasts are not physically capable of producing enough milk.

Our recently published [research](#) gives us clues about breast features that might make it difficult for some women to produce enough milk. Another of our studies shows the devastating [consequences](#) for women who dream of breastfeeding but find they cannot.

Some breasts just don't develop

Unlike other organs, breasts are not fully developed at birth. There are key [developmental stages](#) as an embryo, then again during puberty and pregnancy.

At birth, the breast consists of a simple network of ducts. Usually during puberty, the glandular (milk-making) tissue part of the breast begins to develop and the ductal network expands. Then typically, further growth of the ductal network and glandular tissue during pregnancy prepares the breast for lactation.

Make better decisions - find out what the experts think.

But our online [survey](#) of women who report low milk supply gives us clues to anomalies in how some women's breasts develop.

We're not talking about women with small breasts, but women whose glandular tissue is underdeveloped and have a condition called breast hypoplasia.

We don't know [how common](#) this is. But it has been [linked](#) with lower rates of exclusive breastfeeding.

We also don't know what causes it, with much of the research conducted [in animals](#) and not humans.

However, certain health conditions have been associated with it, including [polycystic ovary syndrome](#) and other endocrine (hormonal) conditions. A high body-mass index around the time of puberty may be another [indicator](#).

Could I have breast hypoplasia?

Our [survey](#) and other research give clues about who may have breast hypoplasia.

But it's important to note these characteristics are indicators and do not mean women exhibiting them will definitely be unable to exclusively breastfeed.

Indicators include:

- A [wider than usual gap](#) between the breasts
- [tubular-shaped](#) (rather than round) breasts
- [asymmetric](#) breasts (where the breasts are different sizes or shapes)
- lack of breast growth in pregnancy
- a [delay](#) in or absence of breast fullness in the days after giving birth

In our survey, 72% of women with low milk supply had breasts that did not change appearance during pregnancy, and about 70% reported at least one [irregular-shaped](#) breast.

The effects

Mothers with low milk supply – whether or not they have breast hypoplasia or some other condition that limits their ability to produce enough milk – report a range of emotions.

Research, [including our own](#), shows this ranges from frustration, confusion and surprise to intense or profound feelings of failure, guilt, grief and despair.

Some mothers describe "[breastfeeding grief](#)" – a prolonged sense of loss or failure, due to being unable to connect with and nourish their baby through breastfeeding in the way they had hoped.

These feelings of failure, guilt, grief and despair can trigger symptoms of [anxiety and depression](#) for some women. Feelings of failure, guilt, grief and despair were common.

One woman told us:

[I became] so angry and upset with my body for not being able to produce enough milk.



Unsplash, Engin Akyurt

Many women's emotions intensified when they discovered that despite all their hard work, they were still unable to breastfeed their babies as planned. A few women described reaching their "breaking point", and their experience felt "like death", "the worst day of [my] life" or "hell".

One participant told us:

I finally learned that 'all women make enough milk' was a lie. No amount of education or determination would make my breasts work. I felt deceived and let down by all my medical providers. How dare they have no answers for me when I desperately just wanted to feed my child naturally.

Others told us how they learned to accept their situation. Some women said they were relieved their infant was "finally satisfied" when they began supplementing with formula. One resolved to:

prioritise time with [my] baby over pumping for such little amounts.

Where to go for help

If you are struggling with low milk supply, it can help to see a [lactation consultant](#) for support and to determine the possible cause.

This will involve helping you try different strategies, such as optimising [positioning and attachment](#) during breastfeeding, or [breastfeeding/expressing more frequently](#). You may need to consider taking a medication, such as [domperidone](#), to see if your supply increases.

If these strategies do not help, there may be an underlying reason why you can't make enough milk, such as insufficient glandular tissue (a confirmed inability to make a full supply due to breast hypoplasia).

Even if you have breast hypoplasia, you can still breastfeed by giving your baby extra milk (donor milk or formula) via a bottle or using a [supplementer](#) (which involves delivering milk at the breast via a tube linked to a bottle).

More resources

The following websites offer further information and support:

- [Australian Breastfeeding Association](#)
- [Lactation Consultants of Australia and New Zealand](#)
- [Royal Women's Hospital](#), Melbourne
- [Supply Line Breastfeeders Support Group of Australia](#) Facebook support group
- [IGT And Low Milk Supply Support Group](#) Facebook support group
- [Breastfeeding Medicine Network Australia/New Zealand](#)
- [Supporting breastfeeding grief](#) (a collection of resources).

Shannon Bennetts, a research fellow at La Trobe University, contributed to this article.

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Kam RL, Amir LH, Cullinane M, Ingram J, Li X, Nommsen-Rivers LA. Breast hypoplasia markers among women who report insufficient milk production: a retrospective online survey. *PLOS ONE* 2024; 19(2):e0299642

Kam RL, Bennetts SK, Cullinane M, Amir LH. "I didn't want to let go of the dream": exploring women's personal stories of how their low milk supply was discovered. *Sexual & Reproductive Healthcare* 2024; 40:100953

PhD candidate Desireé LaGrappe explores gender-based violence solutions in Vietnam and Thailand as a Fulbright Scholar

Desireé LaGrappe

In 2024, PhD Candidate and NHMRC Postgraduate Scholar Desireé LaGrappe had the privilege of spending eight months in Vietnam as a Fulbright Public Policy Fellow. A dual national of the U.S. and Australia, Desireé was eligible for this grant funded by the U.S. Department of State Bureau of Education and Cultural Affairs. The fellowship is awarded to early and mid-career professionals and practitioners who aim to enhance their expertise as technical specialists in their respective fields by serving in a foreign government ministry placement. Desireé was placed in the Department of Population and Reproductive Health at Hanoi Medical University's School of Preventative Medicine and Public Health, which is the Western Pacific Regional Hub within the World Health Organization's (WHO) Human Reproduction Programme (HRP) Alliance for research capacity strengthening in Sexual and Reproductive Health and Rights. Her successful grant application and placement was made possible by the decade long collaboration between her La Trobe PhD supervisor Associate Professor Kristina Edvardsson and colleagues at Hanoi Medical University.



Health Seminar, Thanh Hoá Regional Campus, Vietnam

Advised by Professor Nguyễn Thị Thuý Hạnh, Department Head and Principal Investigator of the HRP Alliance Hub, Desireé's Fulbright Policy project focused on strengthening health care responses to gender-based violence (GBV), often targeting women and children. Together with a local team and supported by research assistance from the Burnet Institute, Desireé led a policy analysis to explore implementation of the Ministry of Health's guidelines relevant to gender-based and sexual violence in district and national level obstetrics and gynaecology settings. Findings were used to adapt and pilot the WHO's Service Readiness tool for responding to violence in health care.

Other research included exploring the acceptability and feasibility of adapting the broader WHO curriculum for gender-based violence in health care and the topic of her PhD research, controlling and abusive behaviours over reproductive health decisions (i.e., reproductive coercion and abuse), in the context of Vietnam. Emeritus Professor Angela Taft and Professor Leesa Hooker of the Judith Lumley Centre provided ongoing mentorship and supervisory support throughout the year, building on their expertise conducting similar work in Timor Leste, Papua New Guinea, and China.



Together with nurses and social workers, one of Thailand's One Stop Crisis Centers

Through Fulbright’s East Asia Pacific Regional Travel Program, Desireé also benefited from other travel opportunities to disseminate her work and foster collaborations across the Region. This included presenting her work at the 2024 Abortion and Reproductive Justice Conference in Bangkok, Thailand and the 14th International Conference on Public Health among Greater Mekong Sub-Regional Countries in Luang Prabang, Laos. In Thailand, Desireé was able to connect with other experts in maternal and child health and gender-based violence. Hosted by Prince of Songkhla University Faculty of Nursing in Hat Yai and Boromarajonani College of Nursing, Khon Kaen, she visited colleagues established through the Nursing Network on Violence Against Women International (NNVAWI), where she serves as a student representative to the Board.

These visits aimed to learn about their contexts, focusing on responses to gender-based violence in maternal and child health settings and promote the NNVAWI International Conference held later that year in Phuket, Thailand. A highlight of the trip was learning from frontline staff about Thailand’s One Stop Crisis Center, a nationwide health policy implemented across all hospitals and the world’s longest continuous example. This experience led to collaborative grants for future research.



Midwifery Research Day, Prince of Songkhla University, Thailand

In return, Desireé, with interpreter support, participated in Prince of Songkhla’s Midwifery Research Day and delivered workshops to their cohort of Master’s and PhD students and their supervisors, and delivered a guest lecture to over 60 Boromarajonani College trainees for their high-risk and crisis reproductive health course.

Summarising the experience, Desireé looks forward to applying learnings from this very productive, enriching overseas cultural exchange to her current and future research, as well as considering implications for the U.S. and Australian contexts. She hopes relationships established during her exchange can foster ongoing collaboration to promote sexual and reproductive health and rights and prevent gender-based violence in all forms. Amid shifting global politics and a restriction of hard-won gains in these areas, it was a personal and career highlight to collaborate on this work, critical now more than ever, with international colleagues.



Desireé LaGrappe with friend Giang Le, Violence Against Women National Prevalence Study field data collector and Australia Awards Scholar

Staff

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

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

Professor and Director

Amanda Cooklin

BSc(Hons), MPH(WomH), PhD

Professors

Lisa Amir

MBBS, MMed(WomH), PhD, IBCLC

Christine East

RN, RM, DAppSc(ClinNurs), BAppSc(Nurs), MMSc, PhD

Della Forster

RN, RM, DipAppSc, BHSc, MMid, PhD

Leesa Hooker

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

Helen McLachlan

RN, GradDipAdvNurs(Mid), MNursStud, PhD

Touran Shafiei

BMid, PhD

Associate Professors

Kristina Edvardsson

RN, MHSc, PhD

Michelle Newton

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

Senior Research Fellow

Laura Whitburn

BPhysio, PhD

Research Fellows

Clair Bennett

BA(Hons), DPpsych, PhD

Shannon Bennetts

BA(Hons), PhD

Sharinne Crawford

BAppSci(Hons), PhD

Méabh Cullinane

BSc, PhD

Margaret Flood

RN, RM, PhD

Jessica Ison

BA(Hons), MA, PhD

Research Officers

Molly Allen-Leap

Jessica Bee

Ross Borland

Shari Boyanton

Ashleigh Daisley

Helen Findley

Jess Halloran

Renee Kam

Desireé LaGrappe

Jasmine Love

Chani Lucardi

Robyn Matthews

Res McCalman

Fiona McLardie-Hore

Kate McCredie

Lucinda Mollenkopf

Jessica Moulton

Kristiana Neal

Catherine O'Donnell

Isobel Pietrowski

Saman Roshanaei

Karen Rowland

Shona Ruane

Kolsoom Safari

Susan Saunders

Eilidh Tannett

Joanne Terry

Shannon Thatcher

Amy Volich

Felicity Young

Administration

Adele Marulli

Higher degree research

PhD graduates 2024

Bijaya Pokharel

Developing and evaluating a sustainable and culturally competent family violence response in general practice

Dr. Pokharel investigated how to best support women of migrant and refugee backgrounds experiencing family violence in general practice, and ways to sustain that support. She developed the first-ever culturally competent family violence response model, a manual for general practice. Demonstrating pathways to sustainable implementation, her research facilitates uptake of the evidence-based model.

Supervised by Angela Taft, Jane Yelland and Leesa Hooker

Charlie Benzie

Exploring the identification, outcomes and experiences of women with a disability accessing public maternity services in Australia

Dr. Benzie explored disability identification, perinatal outcomes and maternity care experiences of women with disabilities. Disability identification practices varied nationally, with some evidence of poor perinatal outcomes. The study highlighted the need for better identification, data linkage and understanding of women's views to inform best practice care provision for women with disabilities.

Supervised by Helen McLachlan, Della Forster and Michelle Newton

Fiona McLardie-Hore

Exploring the outcomes and experiences of women participating in the RUBY randomised controlled trial of early proactive telephone-based peer support for breastfeeding

Dr. McLardie-Hore's thesis explored the impact of early proactive telephone peer-support on breastfeeding. Breastfeeding rates increased, and the support was low cost, accessible and valued by women. Her research provides important evidence regarding this effective intervention that improves health outcomes for mothers and babies.

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Carol Reid

Rural workforce perspectives on trauma-informed primary health care: Service approaches inclusive of Aboriginal and Torres Strait Islander parents

Dr. Reid explored trauma-informed care for parents experiencing complex trauma. She examined workforce perspectives on trauma-informed service delivery in rural primary health care. The findings provide insights into systemic barriers and equity and access challenges in rural areas. The research highlights the importance of prioritising and integrating community knowledge in rural models of trauma-informed care.

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

Anne O'Neill

Clinical supervision in the Victorian maternal and child health context: A mixed methods study

Dr. O'Neill explored clinical supervision of Victorian Maternal and Child Health nurses. The study showed group supervision formats were most common, with benefits achieved through skilled facilitation and mutually agreed aims. This research has implications for nurse education, professional development and policy guidance to ensure effective supervision for specialist nurses.

Supervised by Kristina Edvardsson and Leesa Hooker

Renee Kam

An exploration of breast hypoplasia and insufficient milk production

Dr. Kam explored breast hypoplasia (underdeveloped breasts) as a reason for low milk production. She determined that women with low supply often lacked pregnancy breast growth, may have irregularly shaped breasts and experience emotions from frustration to despair. Women unable to produce a full milk supply require sensitive individualised support.

Supervised by Lisa Amir and Méabh Cullinane

Postgraduate Students

Molly Allen-Leap

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

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

Jess Appleyard

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

Supervised by Ashleigh Butler, Bev Copnell and Cheryle Moss

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

Rachel Byrne

Challenges and triumphs: The experiences of LGBTQIA+ families accessing maternal and child health parenting support and staff perspectives

Supervised by Amanda Cooklin, Catina Adams and Leesa Hooker

Genevieve Edwards

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

Supervised by Kristina Edvardsson and Leesa Hooker

Fiona Faulks

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

Supervised by Touran Shafiei, Kristina Edvardsson and Méabh Cullinane

Helen Findley

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

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

Elenora Greenwood

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

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

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

Mercy Henry

Family violence support systems for south east Asian community

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

Brooke Henshall

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, Heather Grimes and Jenny Davis

Ann (Kathryn) Hindell

Maternal and child health service data-critical analysis

Supervised by Leesa Hooker and Catina Adams

Kim Howland

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

Supervised by Leesa Hooker and Kristina Edvardsson

Rebecca Hyde

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

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

Desireé LaGrappe

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

Supervised by Kristina Edvardsson, Leesa Hooker and Angela Taft

Helen Lees

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

Supervised by Leesa Hooker and Kristina Edvardsson

Robyn Matthews

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

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

Res McCalman

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

Supervised by Helen McLachlan, Della Forster and Michelle Newton

Kate McCredie

The long arm of the job: Exploring parents' jobs and children's development

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

Anita Moorhead

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

Supervised by Della Forster, Lisa Amir and Sharinne Crawford

Sharon Mumford

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

Supervised by Michelle Newton and Helen McLachlan

Meriem Perona

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

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

Deborah Pidd

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

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

Brianna Pike

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

Supervised by Kristina Edvardsson and Leesa Hooker

Amanda Rehayem

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

Supervised by Helen McLachlan, Della Forster and Emily Callander (University of Technology, Sydney)

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)

Tanisha Springall

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

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

Stefanie Zugna

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

Supervised by Helen McLachlan, Della Forster and Méabh Cullinane

Significant and invited presentations, and advocacy



Helen McLachlan invited to speak at Australian Parliamentary Friends for Maternal Health, *Improving outcomes for First Nations mothers and babies in Australia through culturally safe continuity of midwifery care*, Parliament House, Canberra, 15 August 2024



Kristina Edvardsson invited to speak at Victorian Department of Health, *Access to Long-acting*

Reversible Contraception & Abortion, Melbourne, 22 August 2024.

Robyn Matthews appointed to *Midwifery Advisory Committee*, Safer Care Victoria

Charlie Benzie presented as part of a panel discussion, Grand Round, Royal Women's Hospital on International Day for Disability, 22 November 2024

Lisa Amir *Management of mastitis: Let's look at the evidence*. IGNITE Global Study Day, ILCA 2024 (recorded for 23-24 July). Live Q & A, 25 July 2024



Brooke Henshall presented at Grand Round, Mercy Hospital for Women, *What is physiological birth?* 22 August 2024

Della Forster and Robyn Matthews Midwifery Futures Project, Collaboration with NMBA, Burnet & ANZCCNMO, Sydney

Amanda Cooklin *Parent, child and family wellbeing: what is the role of parents' jobs?* Invited speaker: "Time as a resource for family health seminar day" WZB (Soc Sci Institute) Berlin, Special Series (Online), 6 May 2024

Unsplash images: Joao Cruz, Jeff Sundstrom, Sincerely Media

Lunchtime Seminars

2024

7 FEBRUARY

Deb Pidd

La Trobe University

Enhancing woman-centred care in a subsequent pregnancy after a traumatic birth: A modified Delphi study

6 MARCH

Dr Hazel Keedle

Western Sydney University

The strengths and limitations of models of care: The BEST study

3 APRIL

Professor Lisa Amir

Judith Lumley Centre, La Trobe University

Personal experiences of breast abscess treatment: What can we learn from interviews with Swedish women?

Dr Laura Whitburn

Judith Lumley Centre, La Trobe University

Caring for women in labour – why words matter

1 MAY

Dr Elizabeth Newnham

The University of Newcastle

Care ethics for midwifery: Centring relationality to counter obstetric violence

5 JUNE

Dr Susannah Brady

School of Nursing and Midwifery & Social Work, The University of Queensland

Developing an evidence-based definition of woman-centred care

3 JULY

Dr Shannon Bennetts

Judith Lumley Centre, La Trobe University

Richard Williams

Director of Programming and Founder of Risky Kids

Enhancing resilience and mental health through facilitated adventurous play

7 AUGUST

A/Prof Gemma Sharp

Monash University

Innovations in body image and eating disorder research and treatment

4 SEPTEMBER

A/Prof Michelle Peate

The University of Melbourne / Royal Women's Hospital

Empowered choices: Navigating age-related infertility, elective egg freezing, and egg disposition decisions

2 OCTOBER

Dr Jess Kaufman

Murdoch Children's Research Institute

Navigating the changing vaccine landscape: Pregnant women's views

6 NOVEMBER

A/Prof Santosh Tadakamadla

La Trobe University, Bendigo

Role of family and parenting factors in oral hygiene behaviours of children

4 DECEMBER

Dr Hannah Slootjes

La Trobe University, Bendigo

Writing a textbook: Translating research for practical application



La Trobe University library

Awards

Australian Nurses Memorial Centre Scholarship

Jess Appleyard was awarded an Australian Nurses Memorial Centre scholarship for her PhD work titled "Siblings in PICU: An Exploration of Sibling Inclusion and Support when a Child is Critically Ill". The Prince Henry's Affiliates Scholarship is a nationally-competitive scholarship to the value of \$5,000, from the Australian Nurses Memorial Centre which aims to support nurses to undertake postgraduate study or research related to patient-centred, acute care nursing, and is awarded to one recipient each year.

School of Nursing & Midwifery 3MT Competition

Jess Appleyard was a finalist for her presentation entitled "Siblings in PICU: An exploration of sibling inclusion and support when a child is critically ill."

Nancy Millis Medal

Renee Kam was awarded a 2024 Nancy Millis award for thesis of exceptional merit for her thesis "An exploration of breast hypoplasia and insufficient milk production". The prestigious Nancy Millis Medal is awarded to authors of outstanding doctoral theses, via examiner-nomination, for theses they consider to be in the top 5% of all they have examined in their field. Nominated theses are considered for award via the School of Nursing and Midwifery, Board of Graduate Research at La Trobe prior to endorsement.

Fulbright Public Policy Fellowship Award

Desiree LaGrappe won a Fulbright award to serve in a public health professional placement in Vietnam for the 2023-2024 academic year.

Perinatal Society of Australia and New Zealand Awards

Rebecca Hyde won the New Investigator Poster Award (Neonatal Nursing) and Robyn Matthews won the Best Oral Presentation Award (Midwifery).

Research Leaders Accelerator Program

Amanda Cooklin and Kristina Edvardsson were accepted into the inaugural La Trobe University Deputy Vice-Chancellor, Research and Industry Engagement, Research Leaders Accelerator Program. The Research Leaders Accelerator Program is a key pillar of the refreshed Research & Innovation 2030 Strategy and aims to support our research leaders to play a significant role in delivering La Trobe's Research & Innovation goals. The two-year

program started with a two-day workshop in 2024; with ongoing mentoring and workshops to follow in 2025.

Maggie Flood Bursary Winner

The Maggie Flood Bursary was established in 2021 by JLC alumna Dr Maggie Flood for HDR students at JLC to assist with costs associated with their research. The Maggie Flood Bursary is awarded each year for five years.

Dr Mercy Henry was awarded the Maggie Flood Bursary for 2024. Mercy is a part-time Professional Doctorate student at the Judith Lumley Centre and a registered nurse and midwife with 20 years of clinical/teaching experience in India, Ireland, and Australia. Mercy's research is exploring enablers and barriers to help-seeking for South Asian pregnant and postpartum migrant women and to investigate gaps in current family violence support systems in Australia. These funds will support her in-depth interview data collection, translation, and dissemination at conferences.

Shaping Australia Awards

Helen McLachlan, Della Forster, Michelle Newton, Fiona McLardie Hore and Res McCalman were finalists in the Problem Solver category for "Transforming midwifery care for First Nations women".



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Publications

Breastfeeding

Program lead: Professor Lisa Amir

Amir LH, Crawford SB, Cullinane M, Grzeskowiak LE. General practitioners' management of mastitis in breastfeeding women: a mixed method study in Australia. *BMC Prim Care* 2024; 25:161

Grzeskowiak LE, Crawford SB, Cullinane M, Amir LH. Trends in clinical management of lactational mastitis among women attending Australian general practice: a national longitudinal study using MedicinesInsight, 2011-2022. *BMJ Open* 2024; 14:e080128

Grzeskowiak LE, Rumbold AR, Williams L, Kam RL, Ingman WV, Keir A, Martinello KA, Amir LH. Effect of brewer's yeast or beta-glucan on breast milk supply following preterm birth: the BLOOM study - protocol for a multicentre randomised controlled trial. *Int Breastfeed J* 2024; 19:43

Johansson M, Amir LH. 'I don't want to be a guinea pig' - Swedish women's experiences of breast abscess treatment. *BMC Womens Health* 2024; 24:106

Kam RL, Amir LH, Cullinane M, Ingram J, Li X, Nommsen-Rivers LA. Breast hypoplasia markers among women who report insufficient milk production: A retrospective online survey. *PLoS One* 2024; 19(2):e0299642

Rodrigo R, Amir LH, Forster DA. Parents' views on prolonged maternal hospital stay with sick newborn infants in a tertiary neonatal unit in Sri Lanka. *Adv Neonatal Care* 2024; 24(2):162-71

OTHER PUBLICATIONS

Kam RL, Amir LA. Some women's breasts can't make enough milk, and the effects can be devastating. *The Conversation* 2024

Child, family and community health

Program lead: Professor Leesa Hooker

Bhandari D, Bi P, Craig JM, Robinson E, Pollock W, Lokmic-Tomkins Z. Mobilising and evaluating existing heat adaptation measures to protect maternal and child health. *Lancet Planet Health* 2024; 8(7):e424-e5

Howland K, Edvardsson K, Lees H, Hooker L. Telehealth use in the well-child health setting. A systematic review of acceptability and effectiveness for families and practitioners. *International Journal of Nursing Studies Advances* 2024; Online ahead of print

Opie JE, Esler TB, Clancy EM, Wright B, Painter F, Vuong A, Booth AT, Newman L, Johns-Hayden A, Hameed M, Hooker L, Olsson C, McIntosh JE. Universal digital programs for promoting mental and relational health for parents of young children: A systematic review and meta-analysis. *Clin Child Fam Psychol Rev* 2024; 27(1):23-52

OTHER PUBLICATIONS

Adams C. Screening for family violence and abuse. In: Forbes H, Watt E, editors. *Jarvis's Health Assessment and Physical Examination ANZ 4th ed* 2024. p. 114-36

Adams C. Screening for substance misuse. In: Forbes H, Watt E, editors. *Jarvis's Health Assessment and Physical Examination ANZ 4th ed* 2024. p. 143-6

Adams C, Hooker L. Maternal, child and family health. In: Guzys D, Brown R, Halcomb E, Whitehead D, editors. *An Introduction to Community and Primary Health Care 4th ed*: Cambridge University Press; 2024

Watson J, Theobald J, Haylett F, Hooker L, Murray S. *You're in the Right Spot. Responding to Pregnancy and Homelessness: Evaluation of the Cornelia Program*. Melbourne: Social Equity Research Centre, RMIT University; 2024

Mother and infant health and maternity services

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

Benzie CA, Newton MS, McLachlan HL, Forster DA. Identifying women with a disability in Australian maternity services: Time for a change. *Aust N Z J Obstet Gynaecol* 2024; 64(3):293-6

Bergstrom C, Ngarina M, Abeid M, Kidanto H, Edvardsson K, Holmlund S, Small R, Sengoma JPS, Ntaganira J, Lan PT, Mogren I. Health professionals' experiences and views on obstetric ultrasound in Tanzania: A cross-sectional study. *Womens Health (Lond)* 2024; 20:17455057241273675

Callander EJ, Jackson H, McLachlan HL, Davey M-A, Forster DA. Continuity of care by a primary midwife (caseload midwifery): a cost analysis using results from the COSMOS randomised controlled trial. *Gynecology and Obstetrics Clinical Medicine* 2024; 4:e000008

Faulks F, Edvardsson K, Shafiei T. Barriers and enablers to accessing perinatal health services for rural Australian women: A qualitative exploration of rural health care providers perspectives. *Aust J Rural Health* 2024; 32(4):774-88

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Program lead: Associate Professor Touran Shafiei

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Program lead: Professor Leesa Hooker

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Program lead: Professor Amanda Cooklin

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

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

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

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



JUDITH LUMLEY CENTRE

FOR WOMEN,
CHILDREN AND
FAMILY HEALTH
RESEARCH

CONTACT US:

T: +61 3 9479 8800

E: jlc@latrobe.edu.au

W: latrobe.edu.au/jlc

