JUDITH LUMLEY CENTRE

FOR WOMEN, CHILDREN AND FAMILY HEALTH RESEARCH

ANNUAL REPORT 2019



BREASTFEEDING

WORK AND FAMILY

CHILD, FAMILY AND COMMUNITY HEALTH

REPRODUCTIVE HEALTH AND PLANNED PARENTHOOD

ABORIGINAL AND TORRES STRAIT
ISLANDER FAMILY HEALTH

MOTHER AND INFANT HEALTH AND MATERNITY SERVICES

PREVENTING AND REDUCING VIOLENCE AGAINST WOMEN AND CHILDREN

TRANSITION TO CONTEMPORARY.
PARENTHOOD - PREPARATION AND SUPPORT



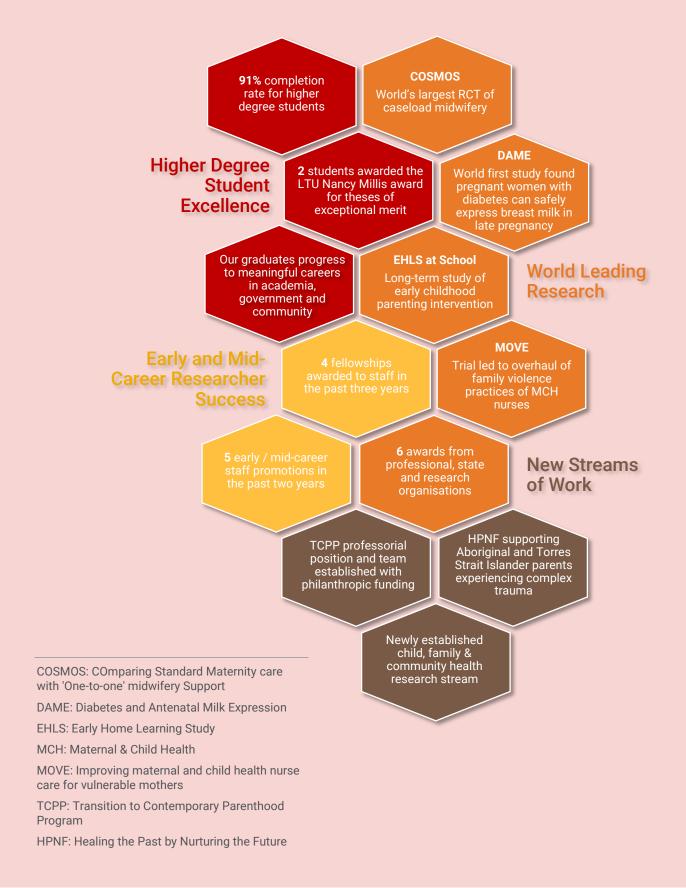
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Achievements



Director's report



It is hard writing this from the middle of 2020 when the COVID-19 pandemic has changed everything about how we work and interact with others. It makes 2019 seem very far removed from life today. Prior to becoming Centre Director, I regarded producing the

Annual Report as a tool for showing our stakeholders what we do and a task necessary for internal accountability. Over the last three years I have come to recognise the value of the Annual Report for reminding us – JLC staff and students – what we have achieved. It is an opportunity to take stock and appreciate the considerable contributions that everyone has and is making, not just to the Centre, School and University, but to society more broadly.

The significant contributions of Centre staff and students have been spotlighted in 2019 through a series of prestigious awards. Two of these are for lifetime contributions – Angela Taft as one of 25 Victorian women recognised for their contributions to women's health and Susan McDonald for her contributions to the midwifery profession. Catherine Chamberlain and Amanda Cooklin were acknowledged for their emerging leadership roles, and two of our large collaborative projects received awards for their impact on midwifery services. In 2019, we also saw six of our staff receive promotions. In all cases, I was impressed by the calibre, intelligence and sheer hard work that underpins these successful trajectories. I continue to feel privileged to work with such smart and dedicated people.

With each passing year, we get to enjoy watching the development of our higher degree research students. Our students are an important part of the Centre, actively

participating in and contributing to all aspects of our research and interpersonal culture. Many of our students come to their studies following successful clinical careers and they are often combining study with work and raising a family. Navigating the complexities of these roles to complete a higher degree is a great accomplishment. In 2019, we celebrated PhD completions by Drs Rhian Cramer, Beatriz Ayala Quintanilla and Heather Wallace. We were also delighted that Heather Wallace won La Trobe's Nancy Millis Award for her outstanding research on reproductive health decision-making in Timor-Leste.

During 2019 we undertook a Centre-wide strategic planning process resulting in the Centre's first formal Strategic Plan for 2020–2024. Staff and students participated in two planning days, and an iterative process of refining the draft plan. The result is a unifying vision, values and set of goals that identify us and will guide us in the future. During this process, child, family and community health research was recognised as an emerging area of strength. From 2020, under the leadership of Dr Leesa Hooker, this will become our eighth formal program of research.

Over the last few years, our staffing profile has remained relatively constant. Inevitably some staff leave as projects end, while we welcome others to newly funded projects. Across this time, the Centre has maintained and grown its income and outputs in terms of publications. The lists of projects and papers in this Annual Report demonstrates the breadth of research we undertake. Much of it is with colleagues across Australia and internationally, and many of our studies are embedded in service settings with active contributions and leadership by clinicians, policy makers and communities. These partnerships are vital to all that we do, and I take this opportunity to thank all those who work alongside us to help us improve the health and wellbeing of women, children and families.

Professor Jan Nicholson Centre Director

Research program

Aboriginal and Torres Strait Islander family health

Program Leads: Associate Professor Catherine Chamberlain

Professor Helen McLachlan



Healing the past by nurturing the future

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

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

We have completed the first three of four action research cycles, which includes comprehensive evidence reviews, discussion groups with senior Aboriginal leaders (*Deadly Nannas*) and Aboriginal parents, key stakeholder consultation and three key stakeholder workshops as well as development of a preliminary list of possible items for inclusion in an Aboriginal Complex Trauma Questionnaire. In 2020–21 we will be conducting psychometric evaluation of the preliminary items with parents, and evaluate the parental acceptability and service provider feasibility of proposed strategies.

Funding: NHMRC Project Grant and Lowitja Institute grant

Status: in progress



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

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

The Baggarrook Yurrongi (Woiwurrung language of the Wurundjeri people) meaning 'Woman's Journey' and the Nuraagh Manma Buliana (Yorta Yorta language meaning 'All of us working together in pregnancy') is a five-year NHMRC funded Partnership Project with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), the Royal Women's Hospital, the Mercy Hospital for Women, Sunshine Hospital (Joan Kirner Women's and Children's) and Goulburn Valley Health.

The primary aim of the project is to explore the capacity of maternity services to implement a new, culturally safe model of care for Aboriginal and/or Torres Strait Islander women (or women having an Aboriginal and/or Torres Strait Islander baby). Women are proactively offered 'caseload' midwifery: they receive continuity of care from a primary midwife through pregnancy, labour, birth and postpartum. The study is also exploring the effect of the model on perinatal outcomes for Aboriginal women and their infants, women's experiences of care as well as midwives' views and experiences.

The model was introduced at the Royal Women's Hospital in March 2017, Sunshine Hospital in October 2017, and the Mercy Hospital in April 2018. It has resulted in a major increase in the number of Aboriginal women having access to caseload midwifery.

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

Funding: NHMRC Partnership Grant and funding from five partner organisations

Status: in progress; publication in *Midwifery* (2019; 69:110-2)

COLLABORATIVE WORK

More Than A Landlord: responding to Aboriginal and Torres Strait Islander family aspirations to foster selfdetermination and social and emotional wellbeing

Jan Nicholson; in collaboration with Margaret Kelaher, Rebecca Ritte, Kelsey Hegarty, Gregory Armstrong, Lea Waters, University of Melbourne; Yin Paradies, Deakin University; Graham Gee, Stephanie Brown, Murdoch Children's Research Institute; and Aboriginal Housing Victoria

Deficit based approaches to service provision have consistently failed to address the current social, emotional and cultural wellbeing (SEWB) and health challenges experienced by Indigenous infants, children, adolescents and their parents. This project aims to

evaluate the effect on SEWB of a regionally tailored, life-coaching service ("More Than A Landlord") provided by Aboriginal Housing Victoria for Indigenous young parents and their children in Mornington Peninsula, Healesville and Northern Metropolitan Melbourne.

The life-coaching service is a strengths-based, low intensity coaching program that supports Indigenous families to articulate and achieve their short, medium and long-term aspirations. It prioritises future aspirations as an enabler for parents and their children to change and improve their lives.

This Indigenous-led and designed project holistically addresses complex issues of SEWB to create sustainable generational change, using a framework that supports self-determination with and for Indigenous young parents and their families.

Funding: NHMRC Project Grant GNT1154619

Status: commenced



Mental and Spiritual Health belongs to all of us

Source: Making Two Worlds Work project

www.whealth.com.au

Breastfeeding

Program Lead: Professor Lisa Amir



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

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

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

Status: first round in progress

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

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

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

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

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

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

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

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

Status: primary outcomes published in *BMJ Open* in 2013; ninth paper published in 2019; one paper accepted; two papers under review



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

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

The RUBY study aimed to determine whether proactive telephone-based peer support during the postnatal period increases the proportion of infants being breastfed at six months of age. RUBY was a multicentre, randomised

controlled trial conducted in three hospitals in Victoria, between February 2013 and December 2015.

Over 1,150 first-time mothers intending to breastfeed were recruited at one of the three hospitals (Royal Women's, Monash Health, Western Health Sunshine) after birth and prior to hospital discharge. They were randomly assigned to usual care or usual care plus proactive telephone-based breastfeeding support from a trained peer volunteer for up to six months postpartum.

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

Funding: The Felton Bequest, Australia and La Trobe University

Status: protocol paper published in *BMC Pregnancy and Childbirth*; main outcomes paper published in *EClinicalMedicine* (2019; 8:20-8); other papers in preparation

SILC: supporting breastfeeding in local communities

Helen McLachlan, Della Forster, Lisa Amir, Rhonda Small, Méabh Cullinane, Touran Shafiei, Lyn Watson, Rhian Cramer, Lael Ridgeway

Breastfeeding provides infants with the optimal start to life. However, exclusive breastfeeding for six months is uncommon in Australia. Increased breastfeeding support early in the postpartum period may improve breastfeeding maintenance.

With funding from the Victorian Department of Education and Early Childhood Development, we conducted a three-arm cluster trial evaluating two community-based interventions aimed at increasing breastfeeding rates in ten Victorian Local Government Areas.

The trial arms were: 1) standard care, 2) early postnatal home-based breastfeeding support visits to women at risk of breastfeeding cessation, or 3) home-based breastfeeding support visits plus access to community-based breastfeeding drop-in centres.

We found no difference in breastfeeding maintenance at three, four or six months in either the home visit or home visit plus drop-in compared with the comparison arm. Early home-based and community-based support proved difficult to implement. Interventions to increase breastfeeding in complex community settings require sufficient time and partnership building for successful implementation.

Funding: Victorian Department of Education and Early Childhood Development

Status: final report submitted; protocol, primary outcomes and three other papers published – in 2019 in *Australian Journal of Child and Family Health Nursing* (2019; 16:4-14); other papers in preparation

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

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

This project explores design features and community attitudes that invite or deter breastfeeding in public. We conducted interviews and focus groups with breastfeeding mothers in three local government areas in 2016 (Rural City of Swan Hill, City of Greater Bendigo and City of Melbourne) and at the Royal Women's Hospital in 2018. We received input from over 80 mothers speaking five languages, as well as health professionals and council planning staff. Using these data, we have developed design guidelines that outline how a range of everyday shared spaces could become breastfeeding-friendly as well as the optimal design characteristics for dedicated breastfeeding spaces. In 2019, we presented the findings at conferences, to participants, and local councils

Funding: Building Healthy Communities Research Focus Area

Status: papers in preparation



Child, family and community health

Program Lead: Dr Leesa Hooker



This new research stream aims to:

- promote child, family, community and MCH nursing research within the Centre
- enhance knowledge translation and communication between researchers working in the field
- build the MCH evidence base
- expand research capacity within the MCH workforce

Mother and infant health and maternity services

Program Leads: Professor Della Forster

Professor Helen McLachlan



The ABLE Study (Asking women aBout disabiLitiEs)

Charlie Smithson, Helen McLachlan, Della Forster, Michelle Newton

It is estimated that more than one billion people worldwide are living with a disability. However, limited information exists on the disability status and needs of women during pregnancy. In Australia, disability status is not included in the Perinatal National Minimum Data Set. While there is a limited amount of qualitative research focusing on the experiences of pregnancy and childbirth of women with a disability, there is an absence of quantifiable data. We aim to address this gap by exploring the prevalence and identification of women with disabilities who utilise maternity services at the Women's Hospital. Two separate recruitment periods took place in 2019 using two different disability identification questions to attempt to determine optimal disability identification.

We will also 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 using a follow up questionnaire.

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

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

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

This world first study has found that women with diabetes in a low-risk pregnancy can safely express breast milk in late pregnancy, with the study dispelling concerns that the practice could cause harm to babies. The DAME study explored the safety and effectiveness of advising women with diabetes in pregnancy to commence expressing breast milk from 36 weeks of pregnancy.

We recruited a total of 635 women and randomised them to the study – about half of them were advised to express. We recruited the women at six sites that provide pregnancy and birth care: the Royal Women's Hospital,

Mercy Hospital for Women, Monash Health, Barwon Health, the Women's at Sandringham (part of the Royal Women's Hospital) and Frankston Hospital, from June 2011 until October 2015. We collected data at recruitment in late pregnancy as well as from birth records, and then by telephone interview at two weeks and 12 weeks after birth.

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

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

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

A sub-study titled *Exploring mothers' perceptions of their* experience of antenatal milk expressing commenced in early 2017.

Funding: NHMRC Project Grant; La Trobe University **Status:** ongoing; paper published in *The Lancet* in 2017; more papers in preparation, presentations at national and international conferences

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

Michelle Newton, Kate Dawson, Della Forster, Helen McLachlan

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

and of low birthweight, and more likely to commence breastfeeding (McLachlan, Forster et al. 2012).

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

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

Status: Data collection complete; four papers published, one in preparation

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

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

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



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

Funding: The Royal Women's Hospital **Status:** data collection completed; final report submitted; protocol paper published in *BMC Psychology* (2019; 7:39); outcome papers in preparation

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

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

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

We conducted interviews with 70 pregnant women similar to those we would approach in a trial and found

that the vast majority of women agreed that they would like to be offered caseload if it was offered in the future and would be willing to participate in a randomised trial. Our study also demonstrated strong commitment from our clinical partners to implement caseload for socially vulnerable women in a randomised trial.

Funding: Building Healthy Communities RFA, La Trobe University

Status: data collection complete

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

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

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

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

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

Funding: The Royal Women's Hospital **Status:** analysis complete, dissemination of results underway, manuscript in preparation

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 Wyett, PANDA; Greg Wadley, University of Melbourne

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

This study aims to develop and test the feasibility, acceptability and functionality of a moderated online peer support App to be used on smart phones, tablets or computers, to reduce perinatal depression and anxiety in women at increased risk.

The project has been undertaken in collaboration with Australia's peak consumer perinatal mental health organisation PANDA – Perinatal Anxiety & Depression Australia.

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

Funding: Norman Beischer Medical Research Foundation; Building Healthy Communities RFA, La Trobe University **Status:** app developed; final report submitted to the funding body; data analysis of pilot RCT in progress; papers in preparation

Local cooling for relief of pain from perineal trauma sustained during childbirth

Christine East; in collaboration with Jia Jia Liu, Mercy Health; Rhiannon Wale and Emma Dorward, independent physiotherapists

This systematic review is an invited update of our previously published review (2007 and 2012) that aims to evaluate the effectiveness and safety of using cooling treatments to reduce women's self-reported perineal pain

following childbirth. This is important in an era that challenges the decades-long-held view of the benefits of cooling and potential harms this may cause. The review now includes nine randomised controlled trials that provide limited, low-quality evidence that cooling may provide some analgesia, with no reported adverse effects.

Status: in progress

Maternity and newborn emergencies (MANE) program evaluation

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

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

To inform the ongoing development of content, design and delivery of the program, a team from the Judith Lumley Centre is currently conducting an evaluation of MANE. This evaluation is being conducted over a three-year period from 2017 to 2020. All rural and regional maternity service providers currently receiving MANE have the opportunity to participate in the evaluation, with in-depth case studies conducted at five maternity service sites.

Funding: Department of Health and Human Services **Status:** data collection ongoing, protocol paper accepted, further manuscripts in preparation

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

In Australia, 17% of new mothers experience postnatal depression (PND), with potential serious health

consequences for the woman, her infant and family members. However, one in three Victorian new mothers experiencing PND do not seek help. The DAISY study is a multi-site, two-arm randomised controlled trial (RCT) matching peer volunteer mothers with a lived experience of postnatal depression and/or anxiety (from which they have recovered) with new mothers at increased risk of postnatal depression or anxiety.

Initially, the new mothers were recruited up to 11 weeks postpartum from Hume and Wyndham LGAs, and included women who scored ≥ 9 and ≤ 20 on the Edinburgh Postnatal Depression Scale (used as standard practice by Maternal Child Health Nurses in Victoria). Recruitment via these LGAs was discontinued at the end of 2019 and started up at the Royal Women's Hospital. New mothers, who are at slightly higher risk than average of developing depression and/or anxiety, are recruited from the postnatal units at the Women's. Mothers randomly allocated to peer support receive proactive telephone-based support from a peer volunteer up until six months postpartum, and both groups receive all the usual care and supports available as part of routine care. Peer volunteers provide empathetic and emotional support by telephone, thus targeting key risk factors for depression and anxiety, i.e. social isolation and a lack of support. Peer volunteers also encourage help-seeking by providing information about existing clinical and support services as appropriate.

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

Funding: NHMRC Project Grant

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



COLLABORATIVE WORK

Birthplace in Australia: a prospective cohort study

Helen McLachlan, Della Forster; in collaboration with Caroline Homer, Maralyn Foureur, David Sibbritt, University of Technology Sydney; David Ellwood, Griffith University; Jeremy Oats, University of Melbourne; Hannah Dahlen, Western Sydney University

Each year in Australia more than 7,500 babies are born outside conventional labour wards, either in birth centres or at home. However, there has been limited evidence on the safety of these alternative settings. Birthplace in Australia was a population-based retrospective study which compared the safety of planned birth at home, in birth centres and in stand-alone midwifery units with standard labour wards in Australia, for women at 'low risk' of complications at labour onset. Compared with planned hospital births, the odds of normal labour and birth were over twice as high in planned birth centre births and nearly six times as high in planned home births. There were no statistically significant differences in the proportion of intrapartum stillbirths, early or late neonatal deaths between the three planned places of birth.

This was the first Australia-wide study to examine outcomes by planned place of birth and provided important evidence regarding the safety of births planned in hospital, birth centre and at home.

Funding: NHMRC Project Grant

Status: publication in BMJ Open (2019; 9:e029192)

The cross-country ultrasound study (CROCUS)

Kristina Edvardsson, Rhonda Small, Maggie Flood, Christine East; in collaboration with Ingrid Mogren, Sophia Holmlund and Annika Åhman, Umeå University, Sweden; Hussein Lessio Kidanto and Mathilda Ngarina, Muhimbili National Hospital, Tanzania; Pham Thi Lan, Hanoi Medical University, Vietnam; Joseph Ntaganira and Jean Paul Semasaka Sengoma, University of Rwanda, Rwanda; Tove Fagerli and Elisabeth Darj, Norwegian University of Science and Technology, Norway

The CROss-Country Ultrasound Study (CROCUS) is an international research project exploring midwives' and obstetricians' experiences and views on the use of ultrasound in pregnancy management in low-, middle-,

and high-income countries (Rwanda, Tanzania, Vietnam, Australia, Norway and Sweden). The second quantitative phase of CROCUS was completed in 2016–2017 in Norway, Rwanda, Tanzania and Vietnam, and in 2018 in Australia and Sweden. The Australian surveys are currently being analysed in preparation for publication.

This work has led to the *Rwandan Ultrasound Health Centre Intervention Study* which has been formally approved and supported by the Minister of Health. This project evaluates the inclusion of ultrasound in standard maternity care at health centre level in terms of pregnancy and delivery outcomes, economics and the experiences of women and health care professionals.

Funding: Swedish Research Council for Health, Working Life and Welfare (FORTE); FORTE Marie Curie International Postdoc Fellowship (Ref. 2013-2699); Swedish Research Council (Ref. 2014-2672)

Status: sixteen publications – in 2019: *BMC Pregnancy* and *Childbirth* (2019; 19:33), *BMJ Open* (2019; 9:e031761); PhD awarded to Sophia Holmlund 2019



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

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

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

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

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

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

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

Funding: Swedish Research Council and Stockholms Läns Landsting

Status: ongoing; publications in *Midwifery* (2019; 74:107-15), *BMJ Open* (2019; 9:e030314)



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

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

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

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

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

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

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

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

Funding: NHMRC Project Grant APP1067363 **Status:** protocol published, recruitment completed, data analysis in progress; Letter to the Editor in *Women and Birth* (2019; 32(1):1-2)

Prevention of adverse child behavioural development following maternal depression in pregnancy

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

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

Funding: NHMRC Project Grant APP1143448, 2018–2022 **Status:** recruitment via Social Media

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

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

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

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

Funding: none

Status: five papers published, in 2019: *Nutrients* (2019; 11(10):2300), *BMC Pregnancy and Childbirth* (2019; 19:5)



Stillbirth Centre for Research Excellence

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

The Stillbirth CRE has four priority areas: Implementing best practice to address known risk factors for stillbirth; developing novel methods of identifying the at-risk fetus; reducing the impact of stillbirth on mothers and families; and implementing a national perinatal mortality audit to prevent stillbirths.

In collaboration with Safer Care Victoria, Mercy Health has implemented the *Safer Baby Bundle* to improve detection of fetal growth restriction, help women be more aware of their baby's movements, sleep on their side

during labour, cease smoking and share in decisionmaking around timing of birth.

Funding: NHMRC APP1116640, 2017-2021

Status: in progress

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 Susan Jacobs and Laura Bignell, the Royal Women's Hospital; Silvana Favorito, Consumer

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

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

A cross-sectional survey was undertaken. Families who had a baby or babies admitted to NISC were assessed for eligibility (admitted ≥ 4 hours and discharged from NISC by 6 months of age). Eligible families were sent a survey in the mail followed by three reminders. Families who had experienced the death of their baby during their admission were also included in the study and were sent a more tailored invitation to participate, followed by a modified survey if they indicated they would like to participate. A total of 1,014 surveys (or invitations to participate) were sent (990 to non-bereaved families and 24 to bereaved families). Of these, 316 surveys were

returned – 31% (312/990) of non-bereaved families, and 57% (4/7) of bereaved families who indicated they wanted to participate.

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

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



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

Christine East; in collaboration with Brooke Owen, Mercy Health; Jenny Davis, La Trobe University School of Nursing and Midwifery

Induction of labour rates have risen dramatically in recent years. This project aims to explore the relationship between the characteristics of women whose labours are induced or not induced against clinical outcomes, including caesarean section, PPH, admission to the NICU, babies born with growth restriction / large for gestational age and breastfeeding at time of hospital discharge at Mercy Health over a 10-year period.

Status: retrospective audit of induction of labour and macrosomia, Masters (Owen B, Davis J) 2018

Reproductive health and planned parenthood

Program Lead: Professor Angela Taft



Analysis of factors associated with abortion over time in the Australian Longitudinal Study on Women's Health

Angela Taft, Rhonda Powell, Lyn Watson; in collaboration with Jayne Lucke, La Trobe University; Danielle Mazza and Kathleen McNamee, Monash University

This study aimed to examine what factors affecting women over time and over and under 30 years of age could be identified to help reduce unwanted pregnancies among young Australian women.

Status: completed, results paper published in *Australian & New Zealand Journal of Public Health* (2019; 43(2):137-42)

COLLABORATIVE WORK

SPHERE: the Centre of Research Excellence in Sexual and Reproductive Health for Women: achieving better outcomes through primary care

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

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

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

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

SPHERE aims to create a paradigm shift to recognise the interconnectedness of contraception, abortion and pregnancy planning for individual women and the need to use an integrated life course approach to help women achieve their own reproductive goals.

Funding: NHMRC Centre for Research Excellence **Status:** ongoing

The Australian contraceptive choice project (ACCORD)

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

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

Funding: NHMRC

Status: completed, outcomes paper published in *American Journal of Obstetrics and Gynecology* (Epub 2019 Dec 11)

Reproductive outcomes and migration (ROAM): an international collaboration

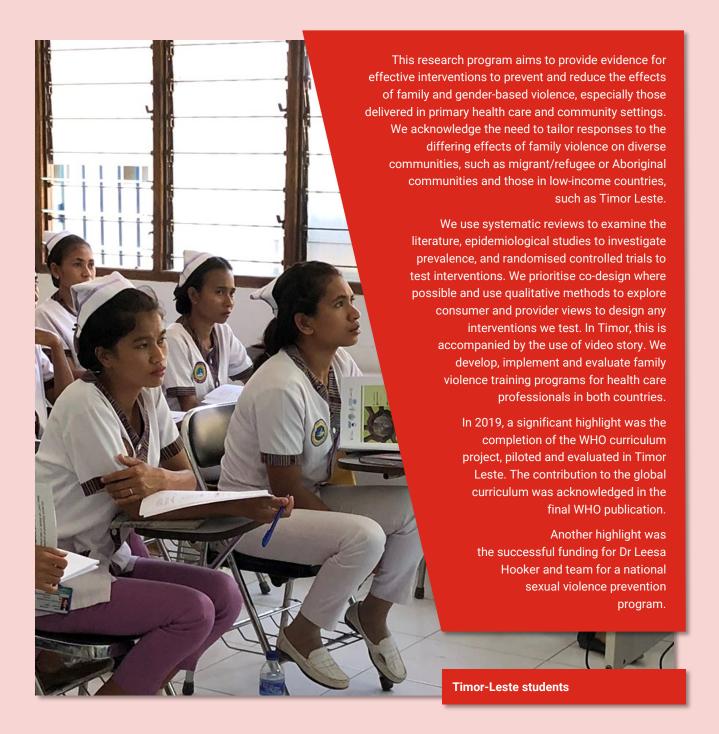
Rhonda Small, Touran Shafiei, participating members; ROAM Steering Group: Birgitta Essen, Uppsala University, Sweden; Rhonda Small, La Trobe University, Australia (until 2019); Mika Gissler, Institute of Health, Finland; Lisa Merry, McGill University, Canada; Jennifer Zeitlin, INSERM, France and EURO-PERISTAT; Marcelo Urquia, University of Winnipeg, Canada; Sarah Villedsen, University of Copenhagen, Denmark

The collaboration aims to undertake comparative work on migrant, refugee and asylum-seeking women's reproductive health outcomes and their views of maternity care in Europe, North America and Australia. The collaboration began with an initial grant awarded from the Canadian Institutes of Health Research (CIHR) International Opportunity Development Grant Scheme to establish research links between Canada and Australia for comparing reproductive health outcomes of immigrant and refugee women. Since 2004 collaborators from over 20 countries have joined the collaborative network and annual meetings continue to be held to plan projects. In 2019 a project investigating the impact of integration policies on infant birthweight in migrant women was completed and published.

Status: ongoing; publication in *Social Science & Medicine – Population Health* (2019; 9:100503)

Preventing and reducing violence against women and children

Program Lead: Professor Angela Taft



Does men's drinking intersect with gendered attitudes to increase the risk of perpetration of IPV?

Secondary data analysis of the United Nations Multi-Country Study of Men and Violence

Angela Taft and Ingrid Wilson; in collaboration with Anne-Marie Laslett and Sandra Kuntsche, Centre for Alcohol Policy Research (CAPR)

This study aims to assess the unique and combined contributions of poorer gender equitable attitudes and heavy episodic drinking to the perpetration of physical or sexual intimate partner violence by men in seven countries.

Data were from 9,148 married or ever-partnered male respondents who participated in the United Nations Multi-Country Study on Men and Violence (UNMCS) from 20 sites in Bangladesh, Cambodia, China, Indonesia, Papua New Guinea (PNG), Sri Lanka and Timor Leste.

Funding: ARC DECRA for Dr Laslett

Status: first paper drafted

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

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

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

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

Funding: Respect Victoria Status: project commenced

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

Angela Taft, Leesa Hooker, Jan Nicholson, Lael Ridgway

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

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

Results were used to develop a *Training Needs Analysis Report* and a four-year *Professional Development Plan* for future implementation for the Victorian MCH workforce, including focus areas, objectives, learning outcomes, timing and modes of delivery for the training. A complementary four-year evaluation strategy was also outlined.

Funding: Victorian Department of Education and Training **Status:** project completed; two reports submitted; two manuscripts under review

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

Angela Taft, Felicity Young, Molly Allen, Bijaya Pokharel; in collaboration with Alan Shiell, La Trobe University; Gene Feder, Bristol University, UK; Kelsey Hegarty and Douglas Boyle, University of Melbourne; Danielle Mazza, Monash University; Jane Yelland and Cattram Nguyen, Murdoch Children's Research Institute; 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 year-long 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 randomisation, training of the first 14 recruited clinics commenced in December 2019, co-facilitated by a GP educator and a bilingual *inTouch* advocate educator/ support worker.

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

Funding: NHMRC Partnerships Grant with the Commonwealth Department of Social Services and the Victorian Department of Premier and Cabinet, Multicultural Affairs and Social Cohesion

Status: ongoing



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

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

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

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

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

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

Status: project commenced

Responding to violence against women and children in Timor-Leste

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

We collaborated with the two main nursing and midwifery training Universities in Timor-Leste to adapt and pilot the World Health Organization's new pre-service curriculum on responding to violence against women and children in low resource health systems. The outcomes from this work have provided a foundation for national systems-

level approaches in Timor-Leste and have fed back into WHO's global curriculum.

The successive pilots showed a significant improvement to nursing and midwifery students' knowledge, attitude and confidence in responding to violence against women and children, after training and at 6-month follow-up.

The development of this course received significant media exposure and support across Timor-Leste. The training course is now being taken up by all 6 universities in Timor-Leste that offer nursing, midwifery and public health degrees. We will continue to train, mentor and support lecturers as they begin to teach the subject. The Timor-Leste pilot and our input were acknowledged in the WHO global curriculum released in December 2019. www.latrobe.edu.au/news/articles/2019/release/support ing-health-workers-in-timor-leste

This was followed with the launch of the Timor-Leste version, available along with supporting resources at www.latrobe.edu.au/reducing-violence

Funding: WHO Geneva, Rotary Foundation

Status: ongoing



Tackling alcohol-related domestic violence

Angela Taft and Ingrid Wilson; in collaboration with Anne-Marie Laslett and Sandra Kuntsche, La Trobe University; Kate Graham, University of Western Ontario

This program brings together the scholarly fields of domestic violence and alcohol to:

- analyse the complex relationship between alcohol misuse and domestic violence across the life cycle and among diverse family models
- assess the effectiveness of current policies, programs and front-line responses to respond to alcohol-related domestic violence

 propose strategies at individual, relationship, family, community and societal levels to prevent and reduce alcohol-related domestic violence.

Funding: VicHealth

Status: completed; commentary published in *Australian* and *New Zealand Journal of Public Health* (2019; 43(6):516-8)

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

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

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

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

From this research, XYX lab team members organised a workshop that brought together women from diverse backgrounds, stakeholders and designers to discuss, imagine and create a vision for a safer public transport journey. In 2020, the findings from the research will be used to pilot an intervention on public transport.

Funding: Victorian Department of Transport **Status:** first and second reports completed and delivered; second phase implementation

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

Kayli Wild, Angela Taft; in collaboration with Linda Kelly, La Trobe University; Lidia Gomes, Joao Martins, Angelina Fernandes and Guilhermina de Araujo, National University of Timor-Leste

This study is part of a larger program of research on health responses to violence against women and children in low-resource settings. It documents the stories of women who have experienced domestic and sexual violence in Timor-Leste to better understand the relationship between fertility and violence, how women enhance their own safety and sources of vulnerability and resilience. In-depth audio interviews with women are used to construct audio-visual learning resources to be included in health provider training and to inform the development of models of care which are based on the lived experience and expressed needs of women in Timor-Leste.

Because of this research and policy briefs written, the research team were were invited to be on the steering committee for the US\$15 million UN Spotlight Initiative to address gender-based violence in Timor, which will be led by our Timorese researcher Guilhermina de Araujo. Our research will continue to feed into that program.

Funding: ARC DECRA Fellowship (KW)

Status: data collection complete; three films developed and embedded in nursing/midwifery curriculum at two Timorese Universities; further analysis and publication underway



COLLABORATIVE WORK

Centre for Research Excellence to Promote Safer Families

Angela Taft; in collaboration with Kelsey Hegarty, Stephanie Brown, Cathy Humphreys, Kerry Arabena, Lena Sanci, the 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

The Centre of Research Excellence 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) to research and collaborate to transform the health sector response to domestic violence and abuse.

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

I-DECIDE: an internet-based safety decision aid for women experiencing intimate partner violence: a randomised controlled trial

Angela Taft; in collaboration with Kelsey Hegarty, Cathy Humphreys, Laura Tarzia and Jodie Valpied, University of Melbourne; Nancy Glass, Johns Hopkins University, USA; Elizabeth Murray, University College, London, UK

Evidence for online interventions to help women experiencing intimate partner violence (IPV) is limited. We assessed whether an online interactive healthy relationship tool and safety decision aid (I-DECIDE) would increase women's self-efficacy and improve depressive symptoms compared to an IPV information website.

The findings of this trial highlighted the need for further research, development, and refinement of online interventions for women experiencing intimate partner violence. Although no meaningful differences between groups were detected, the qualitative results indicated that some women find an online tool a helpful source of motivation and support.

Funding: ARC Discovery grant

Status: outcomes paper published in *The Lancet Public Health* (2019; 4(6):e301-e10)

The Safe Pregnancy Study: promoting safety behaviours in antenatal care among Norwegian, Pakistani and Somali pregnant women

Angela Taft; in collaboration with Lena Henriksen, Mirjam Lukasse, Eva Marie Flaaten, Jeanette Angelshaug, Lisa Garnweidner-Holme and Milada Cvancarova Småstuen, Oslo Metropolitan University; Josef Noll, University of Oslo; Berit Schei, Norwegian University of Science and Technology

The Safe Pregnancy Study is a randomised controlled trial to test the effectiveness of a tablet-based intervention to promote safety behaviours among pregnant women.

Midwives recruit women who attend routine antenatal care. The intervention consists of a screening questionnaire for violence and information about violence and safety behaviours through a short film/movie shown on a tablet. The materials are available in different languages to ensure participation of Norwegian, Urdu, Somali and English-speaking women.

Funding: Norwegian Research Council Grant **Status**: protocol published in *BMC Public Health* (2019; 19:724)



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

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

Child-Parent Psychotherapy (CPP) is an intervention for children aged 0-5 years who have experienced traumatic

events such as violence, and are experiencing mental health, attachment, and behavioural problems.

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

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

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

Status: data collection continues; ANROWS State of Knowledge Report completed; study protocol published in *BMJ Open* (2019; 9:e023653)

Training healthcare providers to respond to intimate partner violence against women

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

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

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

Status: Cochrane protocol published, data synthesis complete, one manuscript under review

Transition to contemporary parenthood – preparation and support

Program Lead: Professor Jan Nicholson





Cross-national validation of child language developmental trajectories

Shannon Bennetts; in collaboration with Naomi Hackworth and Jan Matthews, Parenting Research Centre; Jay Buzhardt, Charles Greenwood, Dale Walker and Fan Jai, Juniper Gardens Children's Research Project, University of Kansas

In Australia, one quarter of children entering primary school have not achieved the necessary developmental milestones to succeed within the school environment. Identifying which children are at risk of poor developmental outcomes and intervening early is crucial to ensuring that all children have the best opportunity for optimal development and long-term academic achievement.

This study involves the validation of the Early Communication Indicator (ECI) for use in Australia. The ECI is an assessment tool widely used in the US for monitoring the developmental progress of pre-school age children. It harnesses interactive technology to support data-driven child and family assessment in the field. The study compares developmental trajectories of Australian and US infants and toddlers using data from the Early Home Learning Study and the Early Head Start cohorts and will inform future implementation of the ECI in Australia.

Funding: Transforming Human Societies Research Focus Area Visiting Fellowship Grants Scheme

Status: paper published in *Early Childhood Research Quarterly* (2019; 48:284-94)

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

Jan Nicholson, Shannon Bennetts, Jasmine Love, Simon Mason; 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 designed to support parents to create an enriched home learning environment for their young children. The study involved over 2,000 families with half participating in parent groups (for parents of infants) and half in playgroups (for parents of toddlers). The evaluation was conducted by the Parenting Research Centre, in partnership with and funded by the Victorian Department of Early Education and Childhood Development from 2010–2013.

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

Funding: National Health and Medical Research Council (NHMRC), together with the Victorian Government Department of Health and Human Services (DHHS)

Status: primary analyses completed; EHLS at School protocol paper published

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

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

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

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

coverage to parents' ratings of concern about their child's independent mobility.

Funding: La Trobe University Social Research Assistance Platform

Status: data collection and analysis completed; one paper in preparation; two papers and a report from the original survey published

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

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

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

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

Funding: Transforming Human Societies Research Focus

Status: qualitative data collection and analysis underway

Parenting, parent wellbeing and child development in Australia

Jan Nicholson, Amanda Cooklin; in collaboration with Stephanie Brown, Rebecca Giallo and Fiona Mensah, Murdoch Children's Research Institute, Royal Children's Hospital and the University of Melbourne; Donna Berthelsen, Kate Williams, Queensland University of Technology; Elizabeth Westrupp and Emma Sciberras, 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 Research Consortium and Chair since 2019; Amanda Cooklin is a member of the Consortium.

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: completed; one paper published in 2019 in *European Child and Adolescent Psychiatry* (28(7):923–32); Jan and Amanda published over 50 papers using LSAC data

Recruiting, retaining and tracing research participants via social media: feasibility and ethics

Sharinne Crawford, Stacey Hokke, Jan Nicholson, Shannon Bennetts; in collaboration with Jayne Lucke, Australian Research Centre in Sex, Health and Society; Patrick Keyzer, La Trobe Law School; Lawrie Zion, Department of Communications and Media, La Trobe University; Naomi Hackworth, Parenting Research Centre

The ability to effectively recruit, retain and trace families from diverse backgrounds is one of the greatest challenges to parenting and intervention research, and successful project completion. Traditional approaches to engaging families in research are increasingly ineffective in light of contemporary communication patterns and mobile populations. While social media is a potentially useful recruitment and retention tool, current ethical guidelines in Australia provide little guidance around its use.

Interviews and surveys of researchers and human research ethics committee (HREC) members in Australia found that using the internet to engage research participants is increasingly common and useful, but it does present ethical challenges and concerns, and a number of ethical 'grey areas' were identified. The ethical issues around online research require researchers and HREC members to be familiar with the myriad technologies available and aware of their risks and limitations. Although researchers and HREC members are hungry for direction regarding the ethical use of online technology in research, most were unaware of available resources and guidelines.

Funding: Transforming Human Societies Research Focus Area

Status: study completed; three papers published in *PLoS One* (2019; 13(9):e0204572), *Internet Research* (2019; 29(1):123-43) and *Journal of Empirical Research on Human Research Ethics* (Epub 2019 Jun 14); research summary complete; one conference presentation; three invited presentations to LTU ethics committees; one to the Victorian Ethics Network Training Day

COLLABORATIVE WORK

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

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

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

Funding: NHMRC Project Grants 1082232 **Status**: ongoing; protocol paper published in *BMC Psychiatry* (2019; 19(1):359)



Centre of Research Excellence in Child Language

Jan Nicholson; in collaboration with Sheena Reilly, Griffith University; Melissa Wake, Angela Morgan, Sharon Goldfeld and Fiona Mensah, Murdoch Children's Research Institute; Elizabeth Westrupp and Lisa Gold, Deakin University; James Law, Newcastle University, UK

The Centre of Research Excellence in Child Language (CRE-CL) linked a number of Australian and international studies with the aim of advancing the science of how language develops, what goes wrong and when and how to intervene. It brought together a multi-disciplinary team of senior and emerging researchers to build research capacity and generate new knowledge. The CRE-CL researchers have led international debates in the classification of childhood language difficulties, undertaken new modelling of language trajectories and the impact of language on other domains of functioning. The CRE has a book contract with Cambridge University Press for a handbook to be published in 2020.

Funding: NHMRC Centre of Research Excellence in Childhood Language grant 2011–2016

Status: completed; one paper published in *Child Development* (Epub 2019 Jan 29); five previous publications

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

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

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

Funding: NHMRC Project Grants 1065895, 2014-2018; 1008522, 2011–2015

Status: data collection completed; five papers published in 2019; 13 previous publications

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

Jan Nicholson; 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 GNT1162980

Status: commenced

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

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

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

Funding: none

Status: ongoing; one paper published in *International Journal of Qualitative Studies on Health & Well-Being* (2019; 14:1690091)

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

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

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

Funding: Royal Children's Hospital Foundation **Status**: completed; one paper published in 2019 in *Journal of Clinical Psychology* (75(10):1930-42); six previous publications

Ten-year follow-up of the Maternal Health Study

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

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

Funding: NHMRC Project Grant GNT1048829

Status: data collection completed; one paper published in 2019 in *Journal of Affective Disorders* (Epub 2019 Nov 5)

Work and family

Program Lead: Dr Amanda Cooklin



Families at work: an online survey of employed Australian parents

Amanda Cooklin, Stacey Hokke, Shannon Bennetts, Jan Nicholson, Sharinne Crawford, Simon Mason, Jasmine Love; in collaboration with Liana Leach and Lyndall Strazdins, Australian National University; Naomi Hackworth, Parenting Research Centre; Cattram Nguyen, Murdoch Children's Research Institute

This is a brief prospective study of employed Australian parents, recruited via social media platforms. We address the following research questions: What formal and informal flexible work arrangements are parents using to manage work-family demands; are there differences for mothers and fathers, or by children's age(s)? Which supports and strategies are associated with low work-family conflict, high work-family enrichment, reduced perceived discrimination and overall mental health (i.e. low distress, fatigue, anxiety and burnout)?

Our most recent paper showed that while flexible work was protective for parents – linked with lower burnout and stress –, parents were still using a range of 'informal' daily strategies to address their work and family demands – and these were linked to higher stress for mothers and fathers. This paper was accompanied by a successful media campaign (Dr Stacey Hokke).

Funding: Transforming Human Societies Research Focus Area 2016–2018

Status: ongoing; three publications to date: in *Community,* Work & Family (accepted 2019 Nov 15), Child: Care, Health & Development (2019; 45(6):871-6) and Journal of Medical Internet Research (2019; 21(3):e11206); six presentations at national / international conferences

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

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

Gender inequities in work and care persist. While mothers continue to often be relegated to lower- paid / lower-skilled positions and part-time employment, and potentially out of paid work, fathers usually shoulder the income burden as 'breadwinner', even while contemporary norms and expectations for new fathers encourage active care-giving. Australian fathers access

'family-friendly' work arrangements at very low rates, despite recent policy advances. This conundrum reproduces gender inequities in work and care, yet there is sparse evidence about the barriers preventing fathers from engaging in more family-friendly work and care for children.

This project will explore Australian fathers' work-family experiences to investigate how workplaces have (or have not) supported fathers to combine work and care. We also aim to understand fathers' own narratives of workfamily (im)balance and how this relates to their wellbeing.

The proposed study uses a qualitative phenomenological study design. Data will be collected using in-depth semi-structured interviews with fathers of child(ren) aged 0–18 years who are currently employed in an organisation.

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

Funding: Transforming Human Societies Research Focus Area Grant Ready Scheme

Status: data collection started in November 2019



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

Amanda Cooklin; in collaboration with Nina Junker, Goethe University, Frankfurt; Wendy Nilsen, Oslo Metropolitan University; Eunae Cho, Nanyang Technological University, Singapore

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 support may serve as a penalty for mothers but not for men and fathers in supervisory roles. It is a collaboration between researchers in Germany, Singapore, Norway and Australia, with data collected in each setting to yield cross-national comparisons.

Status: data collection initiated in November 2019 to continue to mid-2020

Work family balance, parenting and family health and wellbeing

Amanda Cooklin, Jan Nicholson, Simon Mason; in collaboration with Liana Leach, Lyndall Strazdins and Huong Dinh, Australian National University

This study uses national, longitudinal (2004–present) cohort data from over 5,000 employed parents and their children (Longitudinal Study of Australian Children) to identify the adverse effects of poor-quality jobs and workfamily conflict on parents and children. Recent analyses have focussed on the effects of parents' work-family conflict on child mental health and development. Our current analyses are investigating whether 'mumpreneurs' (self-employed mothers) have more (or less) control and choice over their work and family time, and if this has benefits to their wellbeing. We are also

investigating whether job stresses and work-family conflict are associated with more alcohol consumption in mothers and fathers with young children, with colleagues from the Centre for Alcohol Policy Research at La Trobe.

Based on her research expertise and long-term involvement with LSAC, in 2019, Amanda Cooklin was appointed, via competitive process, to the Consortium Advisory Group for the study (funded by Department of Social Services, managed by Australian Institute of Family Studies).

Funding: Australian Communities Foundation through the Transition to Contemporary Parenthood Program **Status:** ongoing, two papers in submission, one in preparation



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

Jan Nicholson

BSc(Hons), MSc, PhD

Professors

Lisa Amir

MBBS, MMed(WomH), PhD, IBCLC, FABM, FILCA

Christine East

RN, RM, DApplSc(ClinNurs), BApplSc(Nurs), MMSc, PhD

Della Forster

RN, RM, DipAppSc, BHSc, MMid, PhD

Susan McDonald

RN, BAppSc, MMedSc, PhD

Helen McLachlan

RN, GradDipAdvNurs(Mid), MNursStud, PhD

Angela Taft

BA, DipEd, MPH, PhD Director 2013–2016

Adjunct Professors

Rhonda Small

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

Ingrid Mogren

PhD

Umeå University

Founding Director

Judith Lumley, AO[†]

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

Professor Emerita
Director 1991–2008

Associate Professors

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PhD, MScPHP, MPH, GCIRL, GCHSM, BaSc(RM)

Michelle Newton

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

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BA(Hons), MPH(WomH), PhD Tracy Banivanua Mar Fellow

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

Touran Shafiei

BMid, PhD

Kayli Wild

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Sharinne Crawford

BAppSci(Hons), PhD

Méabh Cullinane

BSc, PhD

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Pamela McCalman

BMid

Naomi Ralph

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BMid

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BPsych(Hons)

Administration

Zoe Marchant

AdvDiplAdmin

Simone Pakin

MagPhil, GradDip InfoMgmt

Leanne Slade *HPNF project* BAPsych(Hons), GradDipEd(EC)

Emma Sayers *HARMONY project* BA, LLB

Felicity Young *HARMONY project* BA, MIR

Higher degree research



Higher degree candidates at the Judith Lumley Centre come from a variety of backgrounds – including midwifery, nursing, medicine, pharmacy, social science and public health – and work on projects that cover a wide range of topics.

Our students are an important part of the research at the Centre. Their supervisors contribute their time and expertise and ensure that the Centre provides a supportive and collegiate environment.

Staff and students have monthly Postgraduate Meetings. In addition, the monthly Journal Club provides an opportunity to engage in dynamic discussions about chosen research publications. The monthly Methods Club discusses papers of methodological interest.

Nancy Millis Award

Dr Heather Wallace received the Nancy Millis Award, given to the authors of outstanding doctoral theses at La Trobe University. Examiners nominate a thesis to be in the top five per cent of theses examined. The nominated theses then go through a selection process and are approved by the Board of Graduate Research. The award is named after Professor Nancy Millis, who served as Chancellor of La Trobe University from 1992–2006.



PhD graduates

Heather Wallace

Sexual and reproductive health decision making in Timor-Leste: hearing the voices of Timorese women and men - an ethnographic study

Supervised by Angela Taft, Susan McDonald and Suzanne Belton (Charles Darwin University)

Dr Wallace conducted an ethnographic study exploring how sexual and reproductive health decisions are made by women and men in Timor-Leste. She found that this decision-making is influenced by multiple domains, including historical, social, familial and individual. These findings contribute contextual understandings to the endeavour of decreasing maternal deaths in Timor-Leste.

Rhian Cramer

Exploring the implementation of two breastfeeding interventions in six LGAs in Victoria in the Supporting Breastfeeding in Local Communities (SILC) Cluster Randomised Controlled Trial

Supervised by Helen McLachlan, Della Forster and Touran Shafiei

Dr Cramer explored the implementation of two interventions aimed at increasing breastfeeding rates in six Victorian local government areas. All stakeholders (women, nurses, nurse co-ordinators) reported positive experiences. Despite this, some interventions were unable to be delivered as planned and overall breastfeeding rates did not change. Dr Cramer's thesis findings have important implications for further research aimed at improving breastfeeding rates in complex community-based health settings.

Beatriz Paulina Ayala Quintanilla

The impact of violence against women on severe acute maternal morbidity

Supervised by Angela Taft, Susan McDonald and Wendy Pollock (Maternal Critical Care)

Dr Ayala Quintanilla studied women who survived pregnancy complications that required admission to an intensive care unit. She demonstrated that life-threatening pregnancy complications were associated with partner abuse. This suggests a more severe impact of partner abuse on the pregnant woman than has been previously found and warrants further research.



Postgraduate students

Anita Moorhead

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

Supervised by Della Forster, Lisa Amir and Sharinne Crawford

Bijaya Pokharel

Exploring culturally competent primary care family violence responses

Supervised by Angela Taft, Leesa Hooker and Jane Yelland

Carol Reid

Understanding trauma-informed care in Victorian primary health care settings for Aboriginal parents impacted by complex trauma: what, where and how?

Supervised by Catherine Chamberlain, Jan Nicholson and Shannon Bennetts

Catina Adams

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

Supervised by Angela Taft and Leesa Hooker

Charlie Smithson

ABLE: Asking women aBout disabiLitiEs

Supervised by Helen McLachlan, Della Forster and Michelle Newton

Christine Murray

Observational study of satisfaction with professional consultations in gynaecology: Associations with health literacy

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

David Curtin

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

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

Emma Toone

Improving mental health responses for very young children after family violence

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

Fiona Burgemeister

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

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

Fiona Faulks

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

Supervised by Helen McLachlan and Touran Shafiei

Fiona McLardie-Hore

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

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Georgina Igoe

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

Supervised by Catherine Chamberlain and Naomi Ralph

Heather Grimes

Pass it on: Implementing a breastfeeding peer support program

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Jessica Bee

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

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Kate Dawson

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

Supervised by Della Forster, Michelle Newton and Helen McLachlan

Kerryn O'Rourke

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

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

Lael Ridgway

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

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

Lester Jones

Clinical reasoning: Adopting and adapting a simple tool for capturing the complexities of pain

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

Mercy Otsin

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

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

Nawal Abdulghani

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

Supervised by Lisa Amir, Kristina Edvardsson and Amanda Cooklin

Noushin Arefadib

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

Supervised by Touran Shafiei, Amanda Cooklin and Jan Nicholson

Pamela McCalman

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

Supervised by Helen McLachlan, Della Forster and Michelle Newton

Ranmali Rodrigo

Optimal method to express, store and transport breast milk from home to hospital in two settings: A developed and a developing country

Supervised by Lisa Amir and Della Forster

Rebecca Hyde

Your views matter – Exploring families experience of care in the Newborn Intensive Care

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

Renee Kam

Is a maternal perception of insufficient milk supply indicative of an actual insufficient milk supply in breastfeeding mothers of term infants?

Supervised by Lisa Amir and Méabh Cullinane

Robyn Matthews

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

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

Ruth Lungu Ngoma

The impact of traumatic birth experience on fathers while supporting their partners during labour and birth up to one year postnatal

Supervised by Jan Nicholson and Laura Biggs (Murdoch Children's Research Institute)

Sara Couch

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

Supervised by Helen McLachlan, Della Forster and Touran Shafiei

Sarah Hay

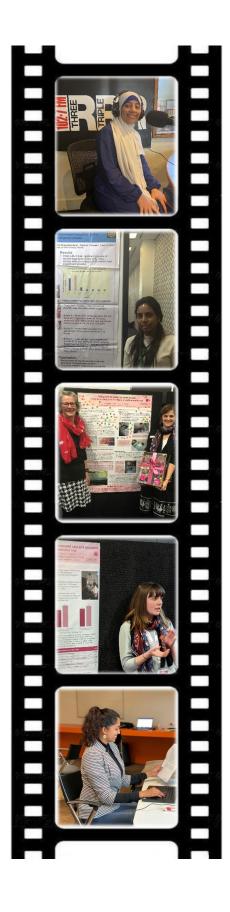
Evaluating a new Parenting Kit designed by the Royal Women's Hospital: A mixed methods study

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

Stefanie Zugna

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

Supervised by Helen McLachlan, Della Forster and Méabh Cullinane



Significant lectures and presentations

JLC keynote presentations

Lisa Amir Taking a lactation history: from pregnancy to postpartum and beyond. GOLD Lactation Online Conference, April–June 2019

Lisa Amir Poverty and breastfeeding: a public health perspective. Invited speaker. Gender Institute, ANU, Breastfeeding, Work and Women's Health Event. Australian National University, September 2019

Lisa Amir Identifying design solutions to increase women's comfort with breastfeeding in public. Danish Committee for Health Education Nordic Breastfeeding Conference. UN City, Copenhagen, Denmark, October 2019

Amanda Cooklin Australian parents work, care and health: Implications for workplaces.
Launch of Advancing Parental Leave Equality Network (APLEN).
Sydney, Deloitte and Parents at Work, February 2019

Amanda Cooklin Balancing work and family in Australia: Implications for breastfeeding and maternal wellbeing. Royal Women's Hospital, World Breastfeeding Week Twilight Seminar. August 2019 Christine E East "Hands on and eyes on": protecting the perineum during childbirth. RANZCOG Annual Scientific Meeting, Melbourne, October 2019

Stacey Hokke "It's not black and white". The ethics of recruiting, retaining and tracing research participants online. Invited panel member and presentation at the Victorian Ethics Network Training Day. Melbourne, August 2019

Helen McLachlan 'Baggarrook
Yurrongi' (Woman's Journey). Can
we make a difference for
Aboriginal and Torres Strait
Islander mothers and babies
through partnerships, collaboration
and midwifery continuity of care?
Australian Society for Psychosocial
Obstetrics and Gynaecology.
Melbourne, July 2019

Kayli Wild Improving quality of care for survivors of gender-based violence: from research to policy in Timor-Leste. 2nd International Interdisciplinary Conference on Sustainable Development Goals, Bima Mandiri University. Gorontalo, Sulawesi, Indonesia, December 2019

Other significant presentations

Lisa Amir Identifying design solutions to increase women's comfort with breastfeeding in public. Public Health Association of Australia Public Health Prevention Conference. Melbourne Convention Centre, June 2019

Touran Shafiei Perinatal mental health needs of immigrant and refugee women: care provider's perspective. 8th World Congress on Women's Mental Health. Paris, France, March 2019

Touran Shafiei Developing a moderated online peer support intervention to prevent perinatal depression and anxiety. 8th World Congress on Women's Mental Health. Paris, France, March 2019

Kayli Wild Women's stories of trauma and resilience: The use of video narratives in promoting empathy for health providers responding to violence against women. Timor-Leste Studies Association Conference, Dili, June 2019



The Judith Lumley Centre was well represented at the National Australian College of Midwives Conference in Canberra, September 2019

JLC ANNUAL REPORT 2019 4

JLC Lunchtime Seminars

6 FEBRUARY

Prof Diane L Spatz

University of Pennsylvania, USA From Nurse to Research Academic

6 MARCH

Prof Mirjam Lukasse

Oslo Metropolitan University, Norway

Reproductive health services and care for women experiencing violence in Norway

3 APRIL

Dr Mishel McMahon

La Trobe University, Bendigo Australian First Nations perspectives for childrearing

1 MAY

Dr Mulu Woldegiorgis

Swinburne University of Technology

Measurement of reproductive health indicators in Sub-Saharan Africa

5 JUNE

A/Prof Lisa Amir, Stephanie Amir, Dr Amanda Cooklin and Nawal Abdulghani

Judith Lumley Centre Current topics in breastfeeding research

11 JUNE

Dr Kayli Wild and Guilhermina de Araujo

Judith Lumley Centre
Supporting nurses and midwives to respond to violence against women: Piloting the WHO curriculum in Timor-Leste and embedding survivor's stories in training

3 JULY

A/Prof Rebecca Giallo

Murdoch Children's Research Institute

Family foundations and interparental conflict

7 AUGUST

Prof Belinda Hewitt

The University of Melbourne Stability and change in household composition and the health of Australian Indigenous children and mothers: Evidence from the Longitudinal Study of Indigenous Children (LSIC)

4 SEPTEMBER

Dr Paulina Billett and Dr Anne-Maree Sawyer

Sociology, La Trobe University Infertility and intimacy in an online community

2 OCTOBER

Prof Jan Nicholson and Dr Shannon Bennetts / Dr Naomi Hackworth

Judith Lumley Centre / Parenting Research Centre

The EHLS at School Study: Evaluating the long-term impact of "smalltalk", an early childhood parenting intervention

23 OCTOBER

Prof Angela Dawson

University of Technology, Sydney Delivering quality maternal and reproductive health services to vulnerable populations

6 NOVEMBER

Prof Jessica Vanderlelie and Dr Janelle McAlpine

La Trobe University, Griffith University

Mums, multiple micronutrient supplements and birth outcomes: the story in South-East Queensland

4 DECEMBER

Dr Meghan Bohren

The University of Melbourne Integrating women's experiences into global maternal health



Dr Mishel McMahon presenting at a JLC Lunchtime Seminar

Awards



Collaborative partnership project Woman's Journey: Baggarrook Yurrongi, Nurragh Manma Buliana, led by Professors Helen McLachlan and Della Forster

Victorian Public Healthcare Award in the category Improving Aboriginal Health

Every year, the Victorian
Department of Health and Human
Services (DHHS) celebrates
excellence, dedication and
innovation in public health, health
services and health care.

COSMOS study research team

La Trobe Excellence in Health Research and Translation Award

The award acknowledges the great amount of skill, effort and collaboration that is required for new knowledge to have a beneficial impact on the health and wellbeing of people in the real world.

Catherine Chamberlain

Lowitja Research Leadership Award

The award is for leadership in an academic field and outstanding contribution to the health and wellbeing of Aboriginal and Torres Strait Islander people.

Amanda Cooklin

La Trobe Tracey Banivanua Mar Research Fellowship

The Fellowship supports future research leaders who have major care giving responsibilities.

La Trobe established the Tracey Banivanua Mar Fellowships, named in honour of an esteemed member of the Department of Archaeology and History, who passed away in 2017.

Susan McDonald

Lifetime Membership of The Australian College of Midwives

This award gives special recognition to a midwife who has devoted themselves to the midwifery profession and the work of the College over a sustained length of time.

Angela Taft

'Champion for Women' Award

Women's Health Victoria gave this award to recognise 25 women who have been at the forefront of women's health, gender equality and sexual and reproductive rights on the occasion of their 25-year anniversary.

JLC ANNUAL REPORT 2019 4

Publications



REFEREED ARTICLES



COMMENTARIES, LETTERS, EDITORIALS



BOOK SECTIONS



REPORTS

OTHER PUBLICATIONS

ARTICLES IN REFEREED JOURNALS

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Gubhaju L, Banks E, Ward J, D'Este C, Ivers R, Roseby R, Azzopardi P, Williamson A, Chamberlain C, Liu B, Hotu C, Boyle J, McNamara B, Eades SJ. 'Next Generation Youth Well-being Study': understanding the health and social well-being trajectories of Australian Aboriginal adolescents aged 10-24 years: study protocol. BMJ Open 2019; 9:e028734

Heris C, Eades S, Lyons L, Chamberlain C, Thomas D. Changes in the age young **Aboriginal and Torres Strait** Islander people start smoking, 2002-2015. Public Health Res Pract 2019 (in press). Epub 2019 May 2

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among women with or without damaged nipples: A quantitative systematic review. *J Adv Nurs* 2019; 75(6):1162-72

Forster DA, McLardie-Hore FE, McLachlan HL, Davey M-A, Grimes HA, Dennis C-L, Mortensen K, Moorhead AM, Tawia S, Gold L, Shafiei T, Small R, East CE, Amir LH. Proactive peer (mother-to-mother) breastfeeding support by telephone (Ringing Up about Breastfeeding EarlY [RUBY]): A multicentre, unblinded, randomised controlled trial. *EClinical Medicine* 2019; 8:20-8



Mother and infant health and maternity services

Mother and infant health

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East CE, Biro MA, Fredericks S, Lau R. Support during pregnancy for women at increased risk of low birthweight babies. Cochrane Database Syst Rev 2019; Issue 4. Art. No.: CD000198

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Other

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COMMENTARIES, LETTERS, EDITORIALS IN REFEREED JOURNALS

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BOOK SECTIONS

Harris J, Newton M, Dawson K, Sandall J. Implementation science in maternity care. In: Downe S, Byrom S, editors. Squaring the Circle: Normal birth research, theory and practice in a technological age. London: Pinter & Martin Ltd; 2019

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REPORTS

Cooklin A, Leach L. National
Survey of Working Parents
[Commissioned by Parents at Work
and the Australian Parental Leave
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University; 2019

Wild K, Taft A. Adapting and evaluating WHO's curriculum for health providers responding to violence against women: Final report on pre-service training pilots in Timor-Leste. Melbourne: La Trobe University; 2019

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Cramer R, McLachlan H, Shafiei T, Amir L, Cullinane M, Small R, Forster D. Maternal and child health nurses' experiences of implementing two community-based breastfeeding interventions in Victoria, Australia: A mixed methods process evaluation. Aust J Child Family Health Nursing 2019; 16:4-14

Wild K, De Araujo G. Change from within: Supporting local leadership and including women's voices in responses to gender-based violence in Timor-Leste.

Development Bulletin 2019; 81:42-4



Funds

| | | 2019 (AUD) |
|--|------------|--------------|
| Funds received from the sources listed here totalled: | | 4,205,655.96 |
| The contributors from all granting bodies are gratefully acknowledged. | | |
| Australian Research Council (ARC) | | 127,049.78 |
| Discovery Early Career Researcher Award (DECRA): Leading change on violence against women through the health sector | 127,049.78 | , |
| National Health and Medical Research Council (NHMRC) | | 1,518,920.76 |
| EHLS at School: Reducing the impact of early life disadvantage via the home learning environment | 162,626.97 | |
| Baggarook Yarrongi: Improving the Health of Aboriginal mothers and babies through continuity of midwife care | 344,633.85 | |
| Career Development Fellowship Award (CDF): Evidence-based life-course approaches to improve health equity of Aboriginal families during the perinatal period | 110,897.89 | |
| DAISY: Preventing postnatal depression in new mothers using telephone peer support | 242,918.10 | |
| HARMONY: Trial of a whole of general practice intervention to prevent and reduce domestic violence among migrant and refugee communities | 184,741.73 | |
| Healing the Past by Nurturing the Future: Learning how to identify and support Indigenous parents who have experienced childhood trauma | 381,896.50 | |
| Maximising health potential through enhancement of movement behaviours from early life | 9,766.40 | |
| Safer Families Centre of Research Excellence | 43,570.32 | |
| SPHERE Centre for Research Excellence in sexual and reproductive health for women | 37,869.00 | |
| Lowitja Institute | | 79,887.00 |
| Healing the Past by Nurturing the Future: Engaging with communities and 'hard-to-reach' parents who have experienced complex childhood trauma | 79,887.00 | |
| Royal Women's Hospital | | 169,818.00 |
| Developing midwifery and maternity services research and practice | 119,818.00 | |
| Maternity and Newborn Emergencies (MANE) Evaluation | 50,000.00 | |
| Australia's National Research Organisation for Women's Safety (ANROWS) | | 56,640.00 |
| RECOVER-Reconnecting mothers and children after violence: The child-parent psychotherapy pilot study | 56,640.00 | |
| Birth for Humankind | | 45,111.20 |
| PhD Industry Scholarship: Birthing women's and professional stakeholders' experiences of volunteer doula support | 45,111.20 | |
| Parents at Work | | 10,732.00 |
| The National Working Families Survey | 10,732.00 | 12,702.00 |

| Victorian Department of Premier and Cabinet | | 227,272.73 |
|--|------------|--------------|
| Improving the Safety of Women and Girls on Public Transport | 227,272.73 | |
| World Health Organization | | 16,916.04 |
| Adaptation and piloting of the draft WHO curriculum for health service providers to identify and support women who have experienced intimate partner or sexual violence in Timor-Leste | 16,916.04 | |
| Block Grants | | 683,348.00 |
| Research Training Program | 303,977.75 | |
| Research Support Program | 379,370.24 | |
| La Trobe Contribution | | 1,205,463.38 |
| Salary Support (DVCR) | 300,940.87 | |
| Salary Support (School) | 496,637.63 | |
| Research Focus Area | 25,631.79 | |
| Research Centre Support | 90,000.00 | |
| LTU Internal contributions | 177,320.87 | |
| Operating budget including supervision of students | 114,932.22 | |
| Miscellaneous income | | 64,497.08 |
| Workshop fees | 11,097.55 | |
| Interest | 48,231.02 | |
| Other income | 5,168.51 | |
| | | |

JLC ANNUAL REPORT 2019 5

Glossary

| ABLE | Asking women about disabilities study | МСН | Maternal and child health | |
|--|---|--|--|--|
| ACCORD | The Australian contraceptive choice project | MOSAIC | Mothers' advocates in the community – non- | |
| ADHD | Attention deficit hyperactivity disorder | | professional mentor support to reduce intimate | |
| CASTLE | The role of micro-organisms (<i>S. Aureus</i> & <i>C. Albicans</i>) in the pathogenesis of breast pain and | | partner violence and depression in mothers, a cluster randomised trial in primary care | |
| | infection in lactating women study | MOVE | Improving maternal and child health care for | |
| CBD | Cognitive behavioural therapy | | vulnerable mothers – a cluster randomized controlled trial | |
| COSMOS Comparing standard maternity care with 'one-to- one' midwifery support randomised controlled | NHMRC | National Health and Medical Research Council | | |
| | | NICU | Neonatal intensive care unit | |
| | trial | PANDA | Perinatal Anxiety and Depression Australia | |
| CPP | Child-parent psychotherapy | | , , | |
| CRE | Centres of Research Excellence | PND | Postnatal depression | |
| CROCUS | Cross-country ultrasound study | PPH | Postpartum hemorrhage | |
| DAISY | Depression and anxiety peer support study | PRISM | Program of resources, information and support for mothers – a community randomised trial in | |
| DAME | Diabetes and antenatal milk expressing randomised controlled trial | | Victoria, Australia aimed at improving maternal health and wellbeing | |
| DFV | Domestic and family violence | RCT | Randomized controlled trial | |
| ECO | Study exploring the introduction, expansion and sustainability of caseload midwifery in Australia | RECOVER | Reconnecting mothers and children after violence: the Australian child-parent | |
| EHLS | Early home learning study | | psychotherapy feasibility study | |
| EMMA | Enhancing maternity care for migrants: research to action | ROAM | Reproductive outcomes and migration international collaboration | |
| EXPert | Study exploring nurses' and midwives' perceptions of 'expertise' and what it is like to work at a tertiary hospital | RUBY | Ringing up about breastfeeding early: proactive peer (mother-to-mother) breastfeeding support by telephone study | |
| FV | Family violence | SPHERE | Centre of Research Excellence in Sexual and Reproductive Health for Women | |
| HPNF | Healing the Past by Nurturing the Future | | | |
| HREC | Human research ethics committee | SILC | Supporting breastfeeding in local communities – | |
| I-DECIDE | Internet-based safety decision aid for women | T000 | a cluster randomised controlled trial | |
| | experiencing intimate partner violence, a Trandomised controlled trial | TCPP | Transition to contemporary parenthood program – preparation and support | |
| IPV | Intimate partner violence | VAW | Violence against women | |
| IVY | Study investigating an online community of support for emotional health in pregnancy | WEACT | Preventing sexual assault on campus: women's empowerment and safety through education and | |
| LGA | Local government area |) A / E A) / E | action project | |
| LSAC | Longitudinal study of australian children | WEAVE | Screening and counselling in the primary care setting for women who have experienced | |
| MANE | Maternity and newborn emergencies program | | intimate partner violence – a cluster randomised controlled trial | |



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

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

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

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

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